: 05/15/19 3:50 AM

;;;;BCC 190516 B

>>> PLEASE CHECK IN SOME SIGN UP FOR PUBLIC TESTIMONY IF YOU WOULD LIKE TO OFFER IT. THIS IS A BUDGET REVIEW THAT WILL ENCOMPASS PART OF OUR 34 HEARINGS THAT WE'RE HAVING OVER ROUGHLY SIX WEEKS. WE STRONGLY ENCOURAGE RESIDENTS TO GIVE TESTIMONY FOR THE RECORD. YOU CAN GIVE THE TESTIMONY IN PUBLIC OR YOU CAN SUBMIT IT VIA E-MAIL. WE ALSO HAVE A DEDICATED PUBLIC TESTIMONY ONLY HEARING ON TUESDAY, JUNE 4th, FROM 2:00 P.M. TO 6:00 P.M. WE WILL BE HERE, AT LEAST FOR THAT PERIOD OF TIME. IF PUBLIC TESTIMONY EXTENDS BEYOND 6:00 WE WILL CONTINUE IT. YOU CAN SEND OUR TESTIMONY BY MAIL TO THE COMMITTEE ON WAYS AND MEANS CITY COUNCIL, FIFTH FLOOR, BOSTON CITY HALL, BOSTON MASS, 02201 OR MAPLE US AT CCC.WM AT BOSTON.GOV. TODAY'S HEARING IS -- THE FOCUS IS RECOVERY SERVICES, AND IT'S REGARDING DOCKETS 0622 TO 0625, ORDERS FOR THE FY OPERATING BUDGET, INCLUDING ANNUAL APPROPRIATIONS FOR DEPARTMENTAL OPERATIONS, ANNUAL APPROPRIATIONS FOR THE DEPARTMENT, APPROPRIATIONS FOR OTHER BENEFITS AND THE APPROPRIATION FOR CERTAIN TRANSPORTATION AND PUBLIC REALM IMPROVEMENTS. THIS IS ALSO COVERING DOCKETS 0626 THROUGH 0628, CAPITAL APPROPRIATION, INCLUDING LOAN ORDERS AND LEASE PURCHASE AGREEMENTS. THIS AFTERNOON WE ARE JOINED BY THE DIRECTOR OF RECOVERY

SERVICES, JENNIFER TRACY AND THE

BUREAU DIRECTOR FOR RECOVERY SERVICES DEVIN MARKEN.
I'M ALSO JOINED THIS AFTERNOON BY COUNCILOR ED FLYNN, I'M GOING TO TURN IT OVER TO THE TWO OF YOU FOR A PRESENTATION.
WELCOME.

>> GOOD AFTERNOON, COUNCILOR ESSAIBI-GEORGE, COUNCILOR FLYNN, I'M GRATEFUL TO BE HERE WITH YOU ALL TODAY SINCE I WAS BEFORE YOU LAST YEAR, THE MAYOR'S OFFICE OF RECOVERY SERVICES HAS CONTINUED TO EXPAND THE SCOPE OF OUR EFFORTS AND HAS WORKED TO MEET THE NEEDS OF OUR CONSTITUENTS. WE'VE CONTINUED TO ADDRESS GAPS IN CARE AND ASSIST PEOPLE. FROM STREET OUTREACH TO EARLY ENGAGEMENT TO ACCESSING TREATMENT BEDS TO SUPPORTING INDIVIDUALS IN EARLY RECOVERY WE'VE FOCUSED ON EACH STEP OF THE CONTINUUM. THANKS TO MAYOR WALSH'S

THANKS TO MAYOR WALSH'S LEADERSHIP AND OUR CITY COUNCIL'S SUPPORT OUR BUDGETS HAVE STEADILY INCREASED SINCE OUR CREATION IN 2015. THIS HAS HOW'D US TO CREATE AND

ENHANCE A WIDE ARRAY OF -- THIS YEAR I AM JOINED BY MY COLLEAGUE DEVIN MARKEN DIRECTOR OF THE BUREAU OF RECOVERY SERVICES. WITH MAYOR WALSH'S COMMITMENT -- AND SUPPORT WE ARE STRATEGICALLY COMBINING AND ELEVATING OUR

COLLECTIVE EFFORTS TO MAXIMIZE

IMPACTS AND EFFICIENCY.

WHILE WE HAVE WORKED CLOSELY SINCE THE CREATION OF ORS IN 2015, WE ARE NOW FORMALLY COMBINING OUR EFFORTS TO BETTER

MEET BOSTON'S EXPANDING RECOVERY SERVICES NEEDS.

THIS YEAR WE CONTINUE TO EXPAND OUR PARTNERSHIPS WITH OTHER CITY DEPARTMENTS AND COMMUNITY PARTNERS FROM FIRST RESPONDERS TO LIBRARIES TO ARTS.

WE ARE WORKING TO MAKE SURE THAT RECOVERY SERVICES ARE EQUALLY PRESENT ACROSS ALL CITY DEPARTMENTS.

WHILE WE HAVE MADE A LOT OF HEADWAY AND BASED ON THE STATE DEPARTMENT OF PUBLIC HEALTH'S DATA RELEASED YESTERDAY SHOWING DECREASES IN BOSTON FOR FATAL OVERDOSES WE ARE OPTIMISTIC, BUT THERE IS STILL A LOT OF WORK TO DO.

WE REMAIN IN THE MIDST OF A NATIONAL SUBSTANCE USE EPIDEMIC THAT LAST YEAR TOOK MORE LIVES THAN THE WORST YEAR OF THE AIDS EPIDEMIC, GUN VIOLENCE, DEATHS OR CAR FATALITIES, THE DEVASTATING TOLL OF THIS EPIDEMIC IS SEEN NOT ONLY IN DRUG-RELATED DEATHS AND THEIR RIPPLE EFFECTS, BUT ALSO IN QUALITY OF LIFE ISSUES IN OUR NEIGHBORHOODS. HOMELESSNESS RELATED TO ADDICTION AND NEEDLE DEBRIS HAVE INCREASED ALL OVER THE COUNTRY. CITIES ACROSS THE U.S. ARE GRAPPLING WITH THESE QUALITY OF LIFE CHALLENGES MORE THAN EVER BECAUSE THEY HAVE NEVER BEEN AS PREVALENT OR COMPLICATED AS THEY ARE RIGHT NOW.

WE HIGHLIGHT THIS NATIONAL CONTEXT NOT TO MINIMIZE THE ISSUES IN OUR NEIGHBORHOODS IN BOSTON, BUT -- THE UNPRECEDENTED SCOPE OF OUR CURRENT NATIONAL EPIDEMIC.

IN SHORT, DRUG USE IN THE U.S. HAS NEVER BEEN AS WIDESPREAD, VISIBLE OR DEADLY.

IN BOSTON WE HAVE A COORDINATED MULTIDEPARTMENT RESPONSE TO QUALITY OF LIFE ISSUES.

THIS INCLUDES STREET OUTREACH STAFF AND MOBILE HARM REDUCTION OUTREACH STAFF.

ALL NEW INVESTMENTS SINCE 2015. WE'VE ALSO TRAINED MULTIPLE CITY DEPARTMENTS AND COMMUNITY PARTNERS.

MORE THAN EVER OUR SOLUTIONS TO ADDRESSING THE EPIDEMIC HAVE TO BE COMPREHENSIVE AND VERSATILE TO MEET BOSTON'S EVER-CHANGING NEEDS.

OUR GOALS FOR THE NEXT YEAR

REFLECT THE NEED TO MAKE RECOVERY SERVICES MORE SUSTAINABLE AND EQUITABLE. TO INCREASE SUSTAINABILITY WE AREVISING IN BETTER DATA COLLECTION WHICH WILL HELP US BETTER EVALUATE OUR SERVICES, KEEP TRACK OF OUR PROGRESS AND MAXIMIZE INCREASED REVENUE ACROSS ALL BILLABLE SERVICES. ON THE EQUITY FRONT WE ARE WORKING TO INCREASE ACCESS TO COMPREHENSIVE RECOVERY SERVICES ESPECIALLY TO HISTORICALLY MARGINALIZED COMMUNITIES. LAST SUMMER WE RELEASED THE CITY'S FIRST-EVER YOUTH PREVENTION YOUTH STRATEGIC PLAN. IT OVERWHELMINGLY FOCUSES ON RACIAL EQUITY AIMED AT OFFERING OVERDUE HOLISTIC SUBSTANCE USE SUPPORT TO YOUTH OF COLOR. WHILE OVERDOSE DEATHS IN MASSACHUSETTS HAVE SLIGHTLY DECLINED IN THE LAST COUPLE OF YEARS, OV&RDOSES AMONG BLACKS AND LATINOS HAVE INCREASED. TO ADDRESS THIS WE APPLIED AND RECEIVED A FEDERAL OFFICE OF MINORITY HEALTH GRANT WHICH HAS ALLOWED US TO EXPAND OUTREACH EFFORTS IN PREVIOUSLY UNDERSERVED COMMUNITIES. WE REALIZE THAT WE CANNOT ADEQUATELY ADDRESS THESE ISSUES WITHOUT FIRST NAMING THE **INEOUITIES IN OUR COMMUNITIES** AND RECOGNIZING REMNANTS OF THE FAILED WAR ON DRUGS. OUR RECENT OPERATION EXIT RENEW INITIATIVE OFFERED MEN OF COLOR FORMERLY INCARCERATED FOR DRUG-RELATED CRIMES LIVING WAGE EMPLOYMENT AT A LOCAL RECOVERY PROVIDER PARADE WITH ADDITIONAL SUPPORT SERVICES. AND FINALLY, WE CONTINUE TO WORK TO REALIZE MAYOR WALSH'S VISION FOR A RECOVERY CAMPUS ON LONG ISLAND. THE NEED FOR A LONG-TERM COMPREHENSIVE RECOVERY CAMPUS IS GREATER THAN EVER. WE ARE IN THE EARLY STAINS OF A

MASTER PLAN PROCESS FOR LONG ISLAND AND WE CONTINUE TO TAKE FEEDBACK FROM THE COMMUNITY. LUCKILY, WE HAVE HAD A GREAT AMOUNT OF LOCAL SUPPORT FOR THE CAMPUS INCLUDING FROM MEMBERS OF THIS COUNCIL AND WE ARE HOPEFUL ABOUT THE FUTURE OF THAT PROJECT.

THANK YOU, AGAIN FOR YOUR CONTINUED SUPPORT AND ADVOCACY OF OUR EFFORTS.

WE CANNOT SOLVE THESE COMPLEX ISSUES ALONE.

WE ARE CONFIDENT THAT THE YEAR AHEAD WILL BE FILLED WITH NEW OPPORTUNITIES, NEW TEACHABLE CHALLENGES AND PROGRESS IN THE AREAS OUTLINED IN MY TESTIMONY TODAY.

THANK YOU.

WE'RE GOING TO THROUGH THE POWERPOINT NOW WITH SOME DATA AND OUTLINING SOME OF THE INVESTMENTS.

THIS IS WHAT WE'RE GOING TO COVER TODAY, THE FY19

ACCOMPLISHMENTS, SOME INITIATIVES AROUND NEEDLE

RESPONSE AND OUR FY20 GOALS.

AS I STATED IN MY TESTIMONY THE

OPEN IDENTITY EPIDEMIC IS A

NATIONAL CRISIS, A NATIONAL

PUBLIC HEALTH CRISIS AND IN

2017, WE LOST OVER 72,000 PEOPLE

IN THIS COUNTRY DUE TO OVERDOSE DEATHS.

CLOSE TO 1,262 OR MORE IN

MASSACHUSETTS.

THANKS TO MAYOR WALSH'S

INVESTMENTS AND THE SUPPORT FROM

THIS COUNCIL, RECOVERY SERVICES

BUDGETS HAVE INCREASED OVER THE

LAST FIVE YEARS CONSECUTIVELY.

SOME OF OUR ACCOMPLISHMENTS FOR

FY19 INCLUDE EXPANDING OUR

ACCESS TO CARE AND HARM

REDUCTION EFFORTS.

WE WERE ABLE TO PLACE OVER 7,000

PEOPLE IN TREATMENT AND THAT'S ALL MODALITIES OF TREATMENT THIS

YEAR.

WE WERE ABLE TO PROVIDE -- TO EXPAND OUR HARM REDUCTION

SERVICES TO MEET THE NEEDS OF OVER 8,000 INDIVIDUALS THIS YEAR

AND WE WERE ABLE TO TRAIN 6,000
PEOPLE IN OVERDOSE PREVENTION,
WHICH INCLUDES ACCESS -- THE
OUTREACH TEAM DOUBLED THIS YEAR.
WE BELIEVE ABLE TO EXPAND FROM
FOUR TO EIGHT FTE JUST IN THE

AREA.
WE WERE ABLE TO EXPAND OUR
FOOTPRINT WHERE WE ARE ABLE TO
REACH CONSTITUENTS IN THE CITY.
WE RECEIVED THE FEDERAL GRANT
AND AN INCREASED CARE ZONE
PROJECTS SO WE WERE ABLE TO
PROVIDE MORE HOURS THROUGHOUT
THE AREA AND WE'RE HOPING TO
EXPAND THAT MORE TO MATTAPAN AND
WE'RE ABLE TO INCREASE

COLLABORATION AND COORDINATION WITH PICKUP STRATEGIES BY ADDING CAPACITY AND THE OUTREACH TEAM TO PROVIDE MORE SWEEPS IN THE NEIGHBORHOODS.

HERE ARE THE PAST WALK-IN NUMBERS.

YOU MAY REMEMBER WE EXPANDED THE HOURS TO BE OPEN UNTIL 7:00 P.M. EVERY NIGHT AND TO EXPAND TO WEEKENDS AND YOU CAN SEE WHAT THAT'S DONE FOR OUR ABILITY TO HAVE MORE PEOPLE PLACED SUCCESSFULLY IN TREATMENT. WE KNOW THAT WHEN WE CLOSED THAT THREE AND ASKED PEOPLE TO WAIT UNTIL THE NEXT MORNING TO COME

BACK WE LOST A LOT OF PEOPLE BY
DOING THAT SO BY BEING OPEN
UNTIL 7:00 WE'RE ABLE TO GET
PEOPLE INTO TREATMENT THE SAME

DAY OR MAKE THE WAIT A LOT SHORTER.

A NUMBER OF CLIENTS THAT WE'RE REACHING THROUGH OUR DRUG USER HELP PROGRAM HAS INCREASED DUE TO THE FACT THAT WE'VE BEEN ABLE TO INCREASE OUR OUTREACH FOOTPRINT AND REACH MORE PEOPLE IN MORE COMMUNITIES.
THIS IS A SIDE OF OUR

DISTRIBUTION NUMBERS.

BY INCREASING OUR FOOT

BY INCREASING OUR FOOTPRINT ACROSS THE CITY WE'VE BEEN ABLE TO ALSO ENROLL MORE PEOPLE IN THE NA -- PROGRAM AND THIS SHOWS THE INCREASE IN THE NUMBER OF OVERDOSE REVERSALS THAT WE HAVE BEING REPORTED BACK TO US SO WHEN SOMEBODY IS ENROLLED IN THE PROGRAM. THEY CAN COME BACK TO US AFTER THEY'VE REVERSED AN OVERDOSE AND REENROLL TO GET ACCESS TO MORE NALOXONE AND THESE NUMBERS HAVE GONE UP DRAMATICALLY OVER THE YEARS. WE DID ANOTHER INVESTMENT IN THE ENGAGEMENT CENTER FOR FY19. WE WERE ABLE TO EXPAND OUR STAFFING TO INCLUDE MORE MANAGEMENT OF OUR STAFF. IT WAS CLEAR AFTER THE FIRST --WE WERE CONSISTENTLY AT CAPACITY IN THE SPACE AND WE DID A BIT MORE INFRASTRUCTURE SO WE WERE ABLE TO ROLL THAT OUT. WE WERE ABLE TO PURCHASE A VAN SO THAT WE WERE ABLE TO HELP PEOPLE WITH TRANSPORT WHEN THEY NEEDED TO GET BACK TO A DIFFERENT NEIGHBORHOOD OR FIND A SAFE PLACE TO BE FOR THE NIGHT WHETHER IT'S THE LOCAL SHELTER OR THE KNIGHT CENTER DOWNTOWN AND WE WERE ABLE TO GET MORE PEOPLE OFF THE STREET TO ADDRESS THE NEIGHBORHOOD CONCERNS AROUND CONGESTION. SO THE ENGAGEMENT CENTER IS HIGHLY UTILIZED. WE ACTUALLY STARTED OPENING UP AT 6:00 A.M. THIS PAST YEAR AT THE REQUEST OF THE NEIGHBORING BUSINESSES. WE WERE AT CAPACITY WHEN WE OPEN EVERY DAY. THERE'S A LINE FOR PEOPLE TO GET IN, AND IT'S BUSIEST IN THE MORNING WHEN THERE'S MOST DEMAND. FOR --[INAUDIBLE] WE WERE ABLE TO ADD TWO RECOVERY COACHES TO HELP CONNECT PEOPLE TO CARE. WE WERE ALSO ABLE TO ROLL OUT A CONSUMER ADVISORY BOARD TO HELP

INFORM NEW PROGRAMMING IN THE

SPACE AND ALSO TO HELP WITH SOME CLEANUP EFFORTS IN THE AREA. >> ANOTHER FY19 INVESTMENT THROUGH THE LEADERSHIP OF MAYOR WALSH AND THE COUNCIL SUPPORT, WE RELEASED A YOUTH SUBSTANCE USE PREVENTION STRATEGIC PLAN LAST SUMMER AND THE INVESTMENT ALLOWED US TO HIRE STAFF TO IMPLEMENT THE STRATEGIC PLAN AS WELL AS TO COORDINATE ACTIVITIES ACROSS THE CITY FOR THE FIRST TIME SO ONE OF THE FOCUSES WAS PROVIDING EVIDENCE-BASED TRAINING AND SUPPORT TO YOUTH SERVING AGENCIES. WE TRAINED OVER 300 BOSTON YOUTH THAT RECEIVED THIS CURRICULUM THROUGH COMMUNITY-BASED ORGANIZATIONS, WE'VE LAUNCHED TWO LEARNING COLLABORATIVES. ONE IS A CITY--WIDE LEARNING COLLABORATIVE FOR EVIDENCE-BASED PRACTICE FOR SUBSTANCE USE PREVENTION IN YOUNG PEOPLE WHERE WE COORDINATE AND MEET WITH DIFFERENT SECTORS ALL OVER THE CITY TO SHARE BEST PRACTICES IN OUR WORK IN SCHOOLS AND AFTER-SCHOOL PROGRAMS. THE OTHER LEARNING COLLABORATIVE IS A COLLABORATIVE OF COLLABORATIVES AND WE HAVE REACHED INTO THE HIGH-RISK YOUTH NETWORKS AND OTHER YOUTH-SERVING ORGANIZATIONS AND COALITIONS IN A DIFFERENT WAY. HISTORICALLY WHEN WE HAVE WORKED -- WE STILL DO, AND --YOUNG PEOPLE AND WE ARE STARTING DEVELOPING A YOUTH COMMUNICATIONS CAMPAIGN WHICH STARTED A FEW MONTHS AGO WITH A CONSULTANT AND IT CONTINUES NOW AND STARTING TO DO SOME TESTING AROUND YOUTH COMMUNICATION, DRIVEN AND LED BY YOUTH ACROSS THE CITY. HOPEFULLY, EVERYONE KNOWS THAT MAYOR WALSH FILED A LAWSUIT AGAINST OPIOID MANUFACTURERS AND DISTRIBUTORS IN DECEMBER OF THIS YEAR. AND THAT CONTINUES IN

LITIGATION.

A CORE COMPONENT OF THE OFFICE OF RECOVERY SERVICES IS TO WORK ACROSS CITY DEPARTMENTS AND BUILD CAPACITY AROUND RECOVERY STRATEGIES IN ALL DIFFERENT SETUPS.

HERE'S A LIST OF SOME, NOT ALL WHERE WE CURRENTLY HAVE INITIATIVES WITH OR WORK CLOSELY IN ONE WAY OR ANOTHER. SOMETIMES, IT'S EDUCATION AND RESOURCES.

OTHER TIMES IT'S TRAINING AROUND HOW TO PICK UP SHARPS OR OVERDOSE PREVENTION OR ENGAGING -- FOR EXAMPLE. WE HAVE WORKED WITH THEIR -- TO HOLD CONFERENCES AND PROBLEMS ASSOCIATED WITH GRANDPARENTS RAISING CHILDREN AND OVERALL AWARENESS.

THEY DEDICATED THEIR APRIL ISSUE OF THE MAGAZINE AROUND ADULTS IN THE BOSTON NEIGHBORHOODS WHO ARE IN RECOVERY.

SO WE WILL CONTINUE TO FOCUS ON EXPANDING THESE PARTNERSHIPS AND ENGAGING THE COMMUNITY THROUGH OUR OTHER DEPARTMENTS.

AND WE HAVE, OF COURSE, ONE OF THE FIRST PARTNERSHIPS, PUBLIC SAFETY PARTNERSHIPS AND WE HAVE A LOT OF WORK THAT WE CONTINUOUSLY DO WITH OUR PUBLIC SAFETY PARTNERS, EMS, BOSTON POLICE, BOSTON FIRE DEPARTMENT, SOME OF OUR SIGNIFICANT PARTNERSHIPS ARE THE POST OVERDOSE RESPONSE TEAM, WHICH

ALLOWS THE PUBLIC HEALTH
PROFESSIONAL HARM REDUCTION
SPECIALISTS TO TEAM UP WITH A
RECOVERY COACH FROM THE EAP TEAM

AT BOSTON FIRE AND RESPOND TO OVERDOSES THAT OCCUR IN HOMES THROUGHOUT THE CITY AND OFFER

CARE, EDUCATION AND SUPPORT.

EMS I KNOW YOU'LL HEAR IN A COUPLE OF WEEKS TO PROVIDE MORE

ASSISTANCE AND SUPPORT AROUND HOMELESS AND ADDICTION ISSUES

AND THE BOSTON POLICE DEPARTMENT AND THE SUPERINTENDENT TAKING A

FOCUS ACROSS THE CITY AND

HELPING TO SUPPORT THE ISSUES OF HOMELESSNESS RECOVERY AND RECOVERY SERVICES AND MENTAL HEALTH ISSUES HAS BEEN PRIMARY TO US REALLY WORKING TOGETHER TO DEAL WITH THE PUBLIC HEALTH AND PUBLIC SAFETY ISSUES THAT WE FACE AND SO WE CONTINUE TO SUPPORT THEIR INITIATIVES. SO WE WANTED TO REALLY JUST BRING FORTH ONE OF THE MOST CONCERNING ISSUES AND RESULTS OF THE OPIOID EPIDEMIC WHICH IS QUALITY OF LIFE ISSUES AND NEEDLE DEBRIS. PRIOR TO 2015, WE WANT TO MAKE SURE PEOPLE UNDERSTAND THERE WAS NO CITY OF BOSTON POLICY FOR NEEDLE PICKUP. SINCE THAT TIME, WE HAVE CONSECUTIVELY ADDED FOLKS TO RUN THE MOBILE SHARPS TEAM, AND I THINK THERE'S A LOT OF CONFUSION SOMETIMES AROUND OUR EFFORT AND OUR STRATEGIC ACROSS THE CITY ACROSS MOBILE SHARPS PICKUP. WE DO HAVE THE MOBILE SHARPS TEAM, WHICH IS NOW AT FOUR INDIVIDUALS THAT ARE EXCLUSIVELY **RESPONDING TO 311 REQUESTS** ACROSS THE CITY. THAT OBVIOUSLY IS NOT ENOUGH SUPPORT TO HELP US AND TO COLLECTIVELY HAVE AN IMPACT ON THE ISSUES. WE HAVE ADDED AS FOLKS KNOW LAST YEAR MAYOR WALSH INVESTED WITH THE SUPPORT OF THE CITY COUNCIL THE -- TWO YEARS AGO THE STREET OUTREACH TEAM IN BOSTON. THAT HAS NOW DOUBLED WITH AN INVESTMENT THROUGH THIS PAST YEAR AND THOSE FOLKS ARE ALL PART OF THEIR OUTREACH IS ALSO PICKING UP SHARPS IN THE NEIGHBORHOOD SO WE'VE ADDED TO THE TEAM FOUR PLUS EIGHT AS WELL AS COMMUNITY AND PRIVATE PROVIDERS WHO HAVE JOINED THE EFFORT SO THIS IS AN ITERATIVE BUILDING TO MAKE A STRONGER TEAM AND REALLY TO TACKLE THIS ALL HANDS ON DECK BECAUSE THAT'S THE

ONLY WAY THAT WE CAN HAVE AN

IMPACT AT ALL AND SO THROUGH PRIVATE FUNDING WE HAVE PROJECT STAFF THAT ARE WORKING IN THE AREA ALSO AS WELL AS THE ENTIRE STAFF THAT DOES OUTREACH AT THE RECOVERY SERVICES BUREAU SO THOSE FOLKS THAT ARE OUT IN ALL THOSE NEIGHBORHOODS.

OTHER CITY DEPARTMENTS ARE TRAINED AND CONTINUE TO BE TRAINED.

WE CONSISTENTLY ARE WORKING WITH FIRST AND FOREMOST PARKS AND REC DEPARTMENT, DPW, BUT OTHER DEPARTMENTS, AS WELL, CERTAINLY BPS, CUSTODIANS, BPS FACULTY THAT DO PLAYGROUND DUTY. WE'VE PROVIDED TRAININGS FOR, AS WELL.

OVER 400 CUSTODIANS HAVE BEEN TRAINED THROUGH THE ENVIRONMENTAL HEALTH BUREAU AND THE RECOVERY SERVICES BUREAU. IN ADDITION TO THAT. WE HAVE FOUND THERE WAS A NEED AND A REOUEST FROM THE COMMUNITY TO INSTALL MORE NEEDLE KIOSKS THROUGHOUT BOSTON NEIGHBORHOODS AND IN RESPONSE TO THAT WE HAD A MID-YEAR INVESTMENT AGAIN TO PURCHASE ADDITIONAL KIOSKS AND SO WHEN THE OFFICE OF RECOVERY SERVICES OPENS IN 2015 THE CITY MANAGED FOUR KIOSKS ACROSS THE CITY.

WE ARE ADDING TO THAT EVERY YEAR. WE'VE ADDED ONE AND WE'VE PURCHASED ADDITIONAL ONES. WE DON'T HAVE LOCATIONS IDENTIFIED FOR ALL THOSE. WE HAVE REQUESTS THAT HAVE COME IN FROM COMMUNITIES THAT WE WILL WORK WITH WITH THEM AND ABUTTERS AND NEIGHBORHOOD ASSOCIATIONS AND CITY DEPARTMENTS TO REALLY LOCATE THE APPROPRIATE PLACE TO INSTALL THEM AND SO IN THE CASE OF ORCHARD GARDENS WHICH THE KIOSK HAS COME UP A LOT WITH FOLKS, THE INITIAL ONE ABOUT A YEAR AGO THERE WAS STUDENT ADVOCACY THAT HAPPENED WITH THE STUDENTS AND TEACHERS AT ORCHARD GARDENS AND ONE OF THE REQUESTS

FROM THAT GROUP WAS A KIOSK. WE MET WITH THE LEADERSHIP AT THE SCHOOL AND UNDER THE GUIDANCE OF BPS AS WELL DID A WALK-AROUND IN THE AREA WITH LEADERSHIP FROM ORCHARD GARDENS. ISD, PARKS, SOMEONE FROM THE PARKS DEPARTMENT. I THINK COUNCILOR BAKER -- YOU WERE THERE, TOO, AND JUST KIND OF WALKED AROUND TO LOCATE AN APPROPRIATE SPACE BASED ON THE REQUEST AND WE DID THAT. I THINK FOLKS SHOULD KNOW THAT THAT HAS BEEN CONTROVERSIAL, AND I THINK WE'RE OPEN TO TALKING FURTHER ABOUT THAT, IF IT NEEDS TO BE MOVED, IT SHOULD BE MOVED RIGHT NOW. ARE PEOPLE USING IT AND IS IT EFFECTIVE? SO I THINK WE WILL CONTINUE TO MONITOR THAT AND TO WORK WITH BPS AND WITH THE SCHOOL COMMUNITY ON THAT AND WE'VE ALSO CONTRACTED WITH THE NEW 24 TRAUMA TO DO THE DISPOSAL IN HOPES THAT THAT WILL RELIEVE SOME OF THE MOBILE SHARPS STAFF THAT RESPONDS TO 311 CALLS WHO HISTORICALLY HAVE ALSO BEEN RESPONSIBLE FOR EMPTYING THOSE KIOSKS AND GOING AROUND TO THE DIFFERENT LOCATIONS AND SO AS WE ADD MORE WE WANT TO RELIEVE THEM OF THAT, HAVE THE 24 TRAUMA DO THAT PIECE OF THE WORK SO IT FREES THEM UP TO RESPOND TO 311. THESE ARE ALL PIECES OF REALLY THINKING OF A LARGER STRATEGY THAN JUST POSITIONS. I DON'T WANT TO FORGET THE LAST BULLET THERE, THE VERY RECENT NEEDLE TAKEBACK DAY. WE PARTICIPATED IN THAT AND IT WAS AN EXPERIMENT, BUT I THINK WE LOOK FORWARD TO CONTINUING TO WORK WITH ALL THE COUNCILORS ON CREATIVE IDEAS TO COLLECTIVELY ADDRESS THIS ISSUE. SO SOME OF THE FY20 NEW INVESTMENTS ARE TO CONTINUE THE WORK ON IMPROVING OUR COLLECTIVE RESPONSE TO MOBILE SHARPS MOST

OF WHICH I THINK I JUST

ADDRESSED.

AND ENHANCING DATA AND REVENUE

SYSTEMS.

SO NEARLY -- ADDRESSING DATA AND

COORDINATED DATA ACROSS RECOVERY SERVICES.

RIGHT NOW, WE HAVE SEPARATE

PROGRAMS COLLECTING SEPARATE

DATA OFTEN ON PAPER AND WE NEED

TO BE THE MOST-EFFECTIVE -- TO

IMPROVE THAT SYSTEM FOR DATA SO

THAT WE CAN BETTER REPORT ON

WHAT WE'RE DOING AND REPORT TO

ALL OF YOU.

SUBSTANTIALLY INCREASE REVENUE.

THERE'S A LOT OF MISSED

OPPORTUNITIES RIGHT NOW WITH OUR

SYSTEM AROUND NOT CAPTURING FULL

REVENUE REIMBURSABLE COMPONENTS

AND THE -- AND THEY'RE REQUIRED

BY LICENSING AND REGULATORY.

OTHER FY20 GOALS JUST INCREASE

EQUITY IN CARE, FOCUS ON

INCREASING EQUITABLE ACCESS TO

CARE WITH A ON COMMUNITIES OF

COLOR, VETERANS, LGBT COMMUNITY

AND SURVIVORS OF SEXUAL VIOLENCE

AND CONTINUE TO FOCUS ON

EXPANDING LONG-TERM RECOVERY

SUPPORT THAT KEEP PEOPLE

STABILIZED.

WORKFORCE DEVELOPMENT

OPPORTUNITY, STABLE HOUSING,

EMPLOYMENT OPPORTUNITIES AS WELL

AND THAT WOULD BE FY20

INVESTMENTS WE WILL EXPAND OUR

COMMUNITY ENGAGEMENT TEAM.

AND LONG ISLAND RECOVERY CAMPUS

IS A MAJOR FY20 AND BEYOND GOAL

SO WE'RE CURRENTLY INVOLVED IN

THAT PROCESS. AS WELL.

THANK YOU.

>> THANK YOU VERY MUCH.

DURING YOUR PRESENTATION WE WERE

JOINED BY A FEW ADDITIONAL

COLLEAGUES.

I WOULD LIKE TO RECOGNIZE IN THE

ORDER OF THEIR ARRIVAL AFTER

COUNCILOR FLYNN HAS ALREADY BEEN

HERE COUNCILOR CAMPBELL,

COUNCILOR FRANK BAKER, COUNCILOR

JANEY, COUNCILOR WU, COUNCILOR

EDWARDS.

SO I JUST THANK YOU FOR INCLUDING THE NEEDLE TAKEBACK DAY IN YOUR PRESENTATION.
I ALSO THANK THE DIRECTOR HERE TODAY FOR YOUR PARTNERSHIP THROUGH YOUR OFFICE ON THAT DAY. WE HAD 17 ADDITIONAL SITES ACROSS THE CITY TAKING BACK NEEDLES.

SOME WERE QUIET AND SOME GOT OVERLOADED AND WE HAD TO GIVE THEM MORE SUPPLIES TO CONTINUE COLLECTION SO I THINK IT WAS CERTAINLY A GOOD EXPERIMENT. A GOOD EFFORT.

AND ONE THAT WE'RE GOING TO HOPEFULLY DO A LITTLE BIT OF A REPORT BACK ON THE EFFECTIVENESS OF THAT DAY AND THAT SORT OF FOLLOWS ALONG SOME OF MY WORK AROUND ADVOCATING FOR THE MOBILE SHARPS TEAM, WHICH WE WERE ABLE TO DOUBLE THE CAPACITY TWO YEARS AGO.

CAN YOU TALK A LITTLE BIT ABOUT THE INVESTMENT IN MOBILE SHARPS AND WHAT IT GETS US? HOW MANY NEEDLES ARE THEY PICKING UP? WHAT'S THE RETURN THAT WE'RE COLLECTING IN THE KIOSKS AND HOW WE'RE LOOKING TO BUILD THE CAPACITY GOING FORWARD. THAT'S THE REAL NUMBER THAT WE

NEED.

>> WELL, I'M GOING TO ANSWER THAT BACKWARDS. BUT I THINK I JUST WENT OVER A FEW WAYS THAT WE'RE THINKING REALLY I THINK IN A LARGER WAY AROUND MOBILE SHARPS MATCH-UP AND THAT'S A COLLECTIVE EFFORT ACROSS THE CITY DEPARTMENTS INCREASING THE CAPACITY FOR CITY DEPARTMENTS TO ALSO PICK UP NEEDLES AND SUPPORT THAT STRATEGY AS WELL AS THE MOBILE SHARPS AS WELL AS WORKING NOT ONLY FIRST AND FOREMOST. WHICH WE HAVE WITH OUR OUTREACH STAFF OF WHICH THERE ARE OUTREACH STAFF THAT COVER MASS CAST, THERE'S OUTREACH STAFF THAT COVER NEIGHBORHOODS DOWNTOWN AND OTHER NEIGHBORHOODS AND INCREASING THE EFFORT THERE FOR FOLKS TO COLLECT SHARPS AND WE'VE HAD A NUMBER OF PRIVATE COMMUNITY PROVIDERS WHO WORK WITH US IN THOSE NEIGHBORHOODS AND HAVE OFFERED SUPPORT, AS WELL.

SO IN THE NEW MARKET AREA, THERE'S A PRIVATE BUSINESS THAT HAS JOINED THE EFFORT IN THE MASON SCHOOL IN ORCHARD GARDEN AND DOES A SWEEP ONCE A DAY TO ADD TO THAT EFFORT ON THOSE SCHOOL GROUNDS.

ADVOCATING FOR RESOURCES IN THE STATE BUDGET RIGHT NOW TO ADD A PHYSICIAN THAT BOSTON HEALTHCARE FOR THE HOMELESS WOULD COLLABORATE WITH US ON ADDING A PERSON SO AGAIN EXPANDING SORT OF THE WAY WE THINK ABOUT THE EFFORT AROUND RECEIVING SHARPS, BUT I THINK I'LL LET DEVIN ANSWER SOME OF THE SPECIFICS AROUND HOW WE'RE COLLECTING THE AMOUNT.

>> RIGHT NOW, THE FTES ARE THE 311 RESPONSE AND SO THEY'RE ON THE ROAD ACROSS THE CITY, RESPONDING TO THE CALLS AS THEY COME IN AND THEY DO COME IN FROM EVERY INCH OF THE CITY AND THEY DO TAKE A CUSTOMER SERVICE ONE TO ONE RESPONSE.

SOMETIMES, THERE'S CONSTITUENTS THERE THAT WANT TO POINT IT OUT, AND SO YOU REALLY NEED A STAFF PERSON TO DO THAT WORK SO -- TO EMPTY THE KIOSKS SO WE'VE BEEN ABLE TO VEND THAT OUT TO A VENDOR SO THAT THAT'S GOING TO ALLEVIATE A LOT OF TIME OFF THE MOBILE SHARPS TEAM TO BETTER RESPOND TO 311 AND DO SOME OF THE PROACTIVE SWEEPS THEY HAVE SCHEDULED RIGHT NOW IN ORCHARD GARDEN.

THE MOBILE SHARP TEAM ARE NOT THE ONLY PEOPLE THAT ARE RESPONDING TO SOME OF THOSE AREAS SO WE'VE BEEN ABLE TO THROUGH TRAINING AND COMMUNITY PARTNERSHIPS AND NEIGHBORHOOD ASSOCIATION PARTNERSHIPS ADD TO

THE MOBILE SHARPS FTE CAPACITY
BY SHARING SOME OF THOSE SWEEPS
AND TIMING THEM OUT DIFFERENT
POINTS IN THE DAY SO PARKS AND
REC, YOU KNOW, HAVE AGREED TO DO
SWEEPS AT CERTAIN PARTS OF THE
DAY, OUR OUTREACH TEAM WILL TAKE
PARTS OF THE DAY SO WE HAVE A
CONSISTENT PRESENCE ACROSS THE
DEPARTMENTS AND JUST TO GET MORE
BANG FOR OUR BUCK SO TO SPEAK
BASED ON STAFFING.
WE'VE ALSO BEEN ARLE TO TRAIN

WE'VE ALSO BEEN ABLE TO TRAIN ALL 400 CUSTODIANS AND THEY'RE THE FIRST TEAM ON SITE IN THE MORNING, OFTEN STARTING SWEEPS AS EARLY AS 5:00 A.M. AND SO JUST MAKING SURE WE'RE IN TOUCH WITH THEM REGULARLY, ESPECIALLY IN THE SCHOOLS THAT ARE THE MOST HARD HIT.

I THINK WE FEEL LIKE THAT'S WHERE WE WANT TO INVEST SO WE HAVE AS MANY BOOTS ON THE GROUND AS POSSIBLE THAT ARE TRAINED AND PREPARED TO RESPOND IF THEY SEE A SYRINGE.

>> AND WHAT ABOUT THE COLLECTION NUMBERS?

WHAT ARE WE BRINGING IN?
WHEN I STARTED THIS WORK 43
YEARS AGO, WE THOUGHT THE NUMBER
WAS 9,000 AND WE REALIZED IT WAS
20,000, AND I THINK IT'S
POTENTIALLY INTO THE HUNDREDS OF
THOUSANDS.

>> WE COLLECT SYRINGES FROM SEVERAL DIFFERENT SOURCES.

THE TEAM AT --

>> DO WE HAVE THOSE BROKEN DOWN? WE DO.

RIGHT NOW, WE'RE SEEING TO SCONE THOUSAND SYRINGES A WEEK THAT WE'RE COLLECTING THROUGH THOSE DIFFERENT SOURCES.

>> WITH BETWEEN THE THREE A WEEK.

>> AND WE'LL ADD TO THE EXCHANGE, TOO.
THE HIGHEST VOLUME IS WHAT ACTUALLY IS PHYSICALLY BROUGHT INTO THE BUILDING.

>> AND THAT INCLUDES I'M SORRY SO THAT'S MOBILE SHARPS --

[OVERLAPPING SPEAKERS]

>> MOBILE SHARPS, OUTREACH

WORKERS ON MASS CAST AND THE KIOSKS.

>> FOUR PLACES AND DO WE KNOW FROM THE 311 CALLS THE COMMUNITY INITIATED HOW MANY WE'RE PICKING LID?

>> IT'S ABOUT 2,000.

A WEEK.

OKAY.

YEAH.

AND THAT DOES INCLUDE 311

CALLS THAT WE MIGHT GET FROM A

POLICE DEPARTMENT OR A FIRE

DEPARTMENT WHO HAVE GONE OUT AND

COLLECTED SOME SYRINGES AND

GIVING US BULK IN ONE TIME.

>> THANK YOU FOR THAT.

APPRECIATE THAT.

COUNCILOR FLYNN.

>> THANK YOU, COUNCILOR

ESSAIBI-GEORGE AND THANK YOU FOR

YOUR GREAT WORK ON THIS

DIFFICULT SUBJECT.

FOR ACTIVE USERS, A HIGHER RISK

FOR THE SPREAD OF HIV,

TUBERCULOSIS, WHAT ARE YOU DOING

ON THAT TYPE OF OUTREACH?

MAYBE LIKELY TO CONTRACT A

DISEASE, SUCH AS HIV OR

TUBERCULOSIS?

>> SO OUR DRUG USER REDUCTION

PROGRAM IS TRAINED TO TEST FOR

STI'S AND HIV AND THEY CAN DO

THAT ON THEIR MOBILE OUTREACH

BOOTH.

WE'VE PARTNERED WITH HEALTHCARE

FOR THE HOMELESS TO ROLL OUT THE

CARE ZONE VAN SO WHEN SOME OF

OUR -- WE ALSO HAVE A DOCTOR

WITH US.

AND THEY CAN DO A MEDICAL VISIT

ON THE VAN.

WHAT WE'RE TRYING TO DO RIGHT

NOW IS REALLY PROACTIVELY PUSH

FOR TESTING LIKE ANYTHING WE CAN

DO TO TEST AS MANY PEOPLE AS

POSSIBLE SO THAT AT LEAST WE'RE

ABLE TO DETECT EARLIER, WE'RE

ALSO REALLY ENCOURAGING PEOPLE

THAT WE KNOW THAT HAVE REALLY HIGH RISK TO GET -- ANYBODY WHO

IS WILLING TO ENGAGE WILL GET

SAME DAY APPOINTMENTS AT OUR HEALTHCARE FOR THE HOMELESS OR BOSTON MEDICAL CENTER AND IF PEOPLE COME BACK POSITIVE, WE'LL LOOK TO ENGAGE IN TREATMENT. THERE ARE TIMES WHEN PEOPLE AREN'T READY TO ENGAGE, BUT WE STAY CLOSE AND THE MOMENT THEY'RE READY TO ACCESS CARE WE'LL KNOW TO THE APPOINTMENTS WITH THEM

WE'LL KNOW TO THE APPOINTMENTS WITH THEM. >> THANK YOU. AND MY FINAL QUESTION, YOU KNOW, WITH EVERY DEPARTMENT OR A LOT OF PEOPLE FOCUSED ON THIS ISSUE IT CAN BE STRESSFUL AT TIMES DOING THIS TYPE OF WORK FOR THE PEOPLE THAT ARE IN THE FIELD. WHAT ARE WE DOING FOR THOSE DEDICATED CITY EMPLOYEES WHO ARE WORKING ON THIS 12 HOURS A DAY, FIVE DAYS A WEEK? HOW ARE WE BEING RESPONSIVE TO THEM IN TERMS OF THEIR NEEDS OF THEIR COUNSELING OR THEIR TIME OFF OR THEIR LETTING THEM TAKE A BREAK, YOU KNOW, MAKING SURE THAT THEY'RE OKAY BECAUSE IT IS A DIFFICULT TASK THAT WE'RE ASKING THEM TO DO. >> SO YEAH, I DON'T THINK WE'VE EVER BEEN AT A TIME IN THIS FIELD WHERE THE WORKFORCE DEVELOPMENT SHORTAGE HAS BEEN QUITE WHAT IT IS NOW, AND I THINK THAT'S LARGELY ATTRIBUTED TO BURNOUT AND THE WORK HAS GOTTEN SO ACUTE THAT A LOT OF PEOPLE AREN'T ABLE TO STAY AS LONG AS THEY ONCE WERE SO WE'VE BEEN TROUBLE SHOOTING THAT WITH MANY OF OUR PARTNERS WHO ARE EXPERIENCING THE SAME THING. ONE OF THE THINGS THAT WE HAVE BEEN ABLE TO ROLL OUT THIS YEAR IS TO HAVE A TRAUMA RESPONDER ON STAFF.

A MENTAL HEALTH CLINICIAN WHO IS TRAINED IN TRAUMA RESPONSE SPECIFICALLY TO BE EMBEDDED IN OUR PROGRAMS FOUR HOURS A WEEK. COPPING GROUPS WITH THE STAFF AND ONE-ON-ONE APPOINTMENTS AND IF SOMEBODY NEEDS A BRIDGE TO A THERAPIST WE CAN DO THAT TOO,
BUT REALLY HELPING ANYONE WHO
EXPERIENCES TRAUMA TO STEP BACK,
HAVE A APPOINTMENT WITH HER,
BUILD SOME SKILLS AROUND
SELF-CARE AND THAT'S A NEW
INITIATIVE FOR US, IT'S
SOMETHING WE'VE BEEN ABLE TO
ROLL OUT THIS YEAR AND WE'RE
HOPEFUL THAT WILL HELP US WITH
THE STRESS AND THE BURNOUT WE'RE
SEEING.
THE BIGGEST RESOURCE IS OUR

THE BIGGEST RESOURCE IS OUR STAFF AND IF THEY'RE NOT OKAY THEY'RE NOT GOING TO BE ABLE TO TAKE CARE OF ANYBODY. ALWAYS OPEN TO SUGGESTIONS ON THAT FRONT, BUT IT'S SOMETHING THAT WE'RE TRYING TO PAY A LOT OF ATTENTION TO.

>> THANK YOU.

THAT'S ALL I HAVE.

THANK YOU FOR THE GREAT WORK THAT YOU'RE DOING.

>> THANK YOU.

, COUNCILOR

CAROLINA.

FLYNN.

>> COUNCILOR CAMPBELL.

THANK YOU FOR THE WORK THAT YOU GUYS DO, CLEARLY, NOT AN EASY JOB.

YOU'RE RESPONSIVE WHEN WE CALL. FRANKLY, SEEING YOU EVERYWHERE SO IT'S A DEEP -- JUST WANTED TO EXPRESS MY DEEP GRATITUDE FOR THE WORK YOU'RE DOING.
I WANTED TO THANK PEOPLE WHO ARE SITTING UP THERE AND THOSE WHO ARE OUT DOING THE WORK, AS WELL. WE COULDN'T BE HERE WITHOUT THE

WORK THAT THEY DO.

JUST FOLLOWING UP ON COUNCILOR FLYNN'S QUESTION, WHICH WAS

SIMILAR TO MINE, BUT I'M CURIOUS

WHAT ARE SORT OF THE MOBILE

SHARPS PEOPLE PAID?

>> SO IN ADDITION TO THE

SUPPORTS AND THE TRAUMA

SUPPORTS, THE MOBILE SHARPS TEAM

ARE PART OF OUR SCIU PROGRAM

UNIT AND THEY COME IN AS PUBLIC HEALTH ADVOCATES, TOO, AND SO

THE AVERAGE RATE THAT THEY'RE

PAID COMING IN WOULD BE ANYWHERE FROM 38,000 TO 40,000 A YEAR. >> AND THEN THE PERSON -- THE TITLE MIGHT BE A MENTAL HEALTH RESPONDER, THIS TRAUMA PERSON FOCUSING ON THE WELLBEING OF THE FOLKS DOING THIS WORK, THIS PERSON IS A FULL-TIME EMPLOYEE IN THE DEPARTMENT, IN YOUR DEPARTMENT? >> NO, WE'VE CONTRACTED OUT WITH A GROUP CALLED RIVERSIDE TRAUMA CENTER, WHICH IS SPECIALIZING IN THIS WORK. WORKING WITH A COUPLE OF OTHER FOLKS. LOOKING KIND OF TO DEVELOP THE MOST APPROPRIATE MODEL FOR RESPONSE ESPECIALLY FOR PEOPLE WHO ARE ON THE GROUND. AND SO SHE'S FOUR HOURS EVERY TWO WEEKS AND THEN ALSO AVAILABLE TO RESPOND IF WE HAVE A CRITICAL EVENT LIKE A DEATH ON SITE OR SHE'S ALSO ABLE TO RESPOND IN REAL TIME OR SEND SOMEBODY ELSE TO COME AND KIND OF DO THE IMMEDIATE FOLLOW-UP WITH STAFF. >> IS THERE ANY APPETITE BY YOUR DEPARTMENT TO TRY TO BRING SOMEONE INTERNAL ON A FULL-TIME BASIS TO RESPOND? OR DO YOU THINK THIS IS ADEQUATE? >> I THINK IT'S NEW, AND I THINK WE'LL SEE HOW IT GOES AND IF

ADEQUATE?
>> I THINK IT'S NEW, AND I THINK
WE'LL SEE HOW IT GOES AND IF
WE'RE SEEING A LOT OF BENEFIT
FROM IT I THINK WE'LL LOOK TO
FIGURE OUT WHAT WILL THIS PERSON
LOOK LIKE AND IT MAKES SENSE TO
HAVE THEM IN-HOUSE.
I THINK WE INITIALLY THOUGHT

BECAUSE HAVING SOMEBODY WHO IS WORKING FOR THE COMMISSION MIGHT BE A LITTLE BIT OF A CONFLICT OF INTEREST, THEY MIGHT WANT TO GO TO SOMEBODY THEY PERCEIVE AS THEIR SUPERVISOR AND TALK ABOUT CERTAIN THINGS.

THEY'RE ALWAYS WELCOME, BUT WE WANTED THIS PERSON TO BE A NEUTRAL KIND OF PERSON AND SO THIS IS HOW WE'RE TRYING IT NOW,

BUT WE ARE OPEN TO SEEING WHAT THE BEST WAY IS TO MOVE FORWARD. >> REMIND ME WHAT YOUR TOTAL BUDGET IS IN YOUR DEPARTMENT. >> IT'S JUST OVER 7 MILLION IN CITY FUNDING. >> 7 MILLION. WHAT WAS YOUR PROPOSED BUDGET? SO THE BUDGET THAT YOU GUYS SUBMITTED HOPING TO GET? WAS IT 7 MILLION, MORE, LESS? >> EVERY DEPARTMENT OBVIOUSLY PUTS FORTH A PROPOSED BUDGET. WE HAVE TO DO IT AS A COUNCIL TO THE ADMINISTRATION. >> IT WAS ABOUT TWICE WHAT --THE INVESTMENT THIS YEAR IS \$500,000, CITY OF BOSTON DOLLARS, WHICH IS A MAJOR INCREASE FOR THE RECOVERY SERVICES SINCE 2015 OF CITY OF BOSTON DOLLARS. EVERY YEAR WE HAVE GOTTEN MORE AND MORE STARTING OFF WITH THE BUDGET FOR THE OFFICE AND THE TWO STAFF THAT I THINK, THREE STAFF, 300,000, AND THEN CONSISTENTLY GOING UP. >> I ONLY ASK BECAUSE IT GIVES US A SENSE OF FROM WHERE YOU SIT THE WORK YOU'RE DOING EVERY SINGLE DAY, WHAT YOU THINK YOU MIGHT NEED IN ORDER TO DO WHAT YOU ENVISION THE DEPARTMENT WOULD LIKE TO DO IN THE NEXT FISCAL YEAR SO THAT'S WHY I WAS ASKING SORT OF THAT QUESTION. BUT ONE THING I DID WANT TO ALSO APPLAUD IS YOUR -- AND YOU REALLY TALKED ABOUT THIS, YOUR COMMITMENT TO EQUITY IN THIS WORK, FRANKLY, NAMING WHAT HAPPENED AS A RESULT OF THE WAR ON DRUGS AND HOW IT WAS NOT EFFECTIVE PARTICULARLY IN COMMUNITIES OF COLOR, APPRECIATED YOU NAMING THAT AND SHOWING UP IN THE WORK WITH THAT DEEP UNDERSTANDING AND LOOKING AT THE DRAMATIC INCREASES IN OVERDOSE RATES AMONG BLACK AND LATINO RESIDENTS IS ALWAYS UNSETTLING.

IT'S WORSE FOR PEOPLE OF COLOR, THAT'S ALWAYS UNSETTLING SO I APPRECIATE YOUR COUCHING IT IN CERTAIN TERMS OF REALLY USING THAT EQUITY LENS IN YOUR WORK. AND I'M SURE I'M -- JUST ONE QUESTION WITH RESPECT TO THAT. THE FEDERAL GRANT THAT YOU GUYS APPLIED FOR THAT YOU GOT, YOU'RE USING IT TO EXPAND YOUR OUTREACH INTO CERTAIN COMMUNITIES OF COLOR.

IMMEDIATELY WHEN I LOOKED AT THIS GEOGRAPHIC FOOTPRINT I ALWAYS EXPECT TO SEE WHEN YOU THINK OF COMMUNITIES OF COLOR, ROXBURY, DORCHESTER, MATTAPAN, DON'T SEE MATTAPAN WHICH IS IN MY DISTRICT, FRANKLIN FIELD, SO I'M CURIOUS WHAT THE STRATEGY IS TO EXPAND TO MORE COMMUNITIES OF COLOR TO HAVE A GREATER TOUCH AND OUTREACH TO THOSE COMMUNITIES.

>> SO THE MINORITY HEALTH GRANT WAS SPECIFIC TO EXPANDING IN THREE NEIGHBORHOODS, DORCHESTER, MATTAPAN AND ROXBURY AND WORKING SPECIFICALLY WITH SOME HEALTH CENTERS IN THOSE NEIGHBORHOODS TO INCREASE THEIR CAPACITY TO WORK WITH ACTIVE DRUG USERS AND SO IT'S PART OF EXPANDING HARM REDUCTION STRATEGIES ACROSS THE CITY, THAT WAS ONE OF THEM AND SO THAT'S ONE EFFORT. THE OTHER EFFORT WAS THE EXPANSION -- ARE LOOKING TO DO. MAYBE YOU CAN TALK A LITTLE BIT --

>> SO FOR STREET OUTREACH
SPECIFICALLY WE ARE FOCUSING ON
AREAS WHERE PEOPLE GATHER ON THE
STREET SO WE CAN SORT OF FIND
THEM IN THAT WAY AND THAT'S HOW
WE'RE ROLLING OUT FIRST.
THERE ARE, YOU KNOW -- THERE IS
A NEED THERE FOR ACTUAL STREET
OUTREACH AND WORKING WITH THE
BUSINESSES THERE BECAUSE PEOPLE
DO KIND OF HANG OUT IN THOSE
AREAS.
WE'RE FINDING THAT MATTAPAN

SQUARE, IT'S A LITTLE HARDER TO

BREAK INTO.

THERE'S NOT A LOT OF PEOPLE ON THE STREET WILLING TO ENGAGE AND WE KNOW IT'S GOING TO TAKE SOME TIME.

WE'RE EXPANDING THAT FOOTPRINT

AND ADDING OURS THERE.

ONE OF THE OTHER THINGS THAT

WE'RE DOING AS WELL IS HOME

VISITING POST-OVERDOSE.

IT'S ANOTHER WAY IN THE DOOR AND

OBVIOUSLY, NOT EVERYBODY IS

GOING TO BE ABLE TO ENGAGE IN

THAT WAY OR OPEN THE DOOR, BUT

WE'RE HOPING BY HOME VISITING

AND STREET OUTREACH IN THOSE

COMMUNITIES THAT WE'RE REACHING

MORE PEOPLE.

WE'RE ALSO CONNECTING WITH THE

LOCAL HEALTH CENTERS AROUND HOW

CAN THEY EXPAND ACCESS TO CARE

FOR THOSE FOLKS FROM FRONT DOOR

ON, TO BE ABLE TO PROVIDE

SERVICES ON SITE, BUT EVEN HOW

DO YOU BUILD A FRIENDLY

ENVIRONMENT AND A CULTURE THAT

WELCOMES PEOPLE IN WHEN THEY

HAVE A SUBSTANCE USE DISORDER

RIGHT FROM THE FRONT DESK PERSON

ON, YOU -- THEY'RE THE MOST

AHEAD OF THE GAME IN THAT AREA.

THEY'RE WONDERFUL PARTNER FOR US.

BUT WE WOULD LIKE TO SEE IN THAT ALL THE HEALTH CENTERS INVOLVING NEIGHBORHOODS.

>> THANK YOU.

I CAN WAIT FOR THE NEXT ROUND. >> I WOULD JUST ADD TO THAT SOME

OF OUR PARTNERSHIPS THAT ALSO

GET T SAME THING, THE POLICE

ASSISTED RECOVERY COACHES, THE

PERRY INITIATIVE, RECOVERY

COACHES ARE TEAMING UP WITH THE

POLICE DEPARTMENT, BUT AS

RECOVERY COACHES IN DIFFERENT

NEIGHBORHOODS.

THEY ARE IN OTHER NEIGHBORHOODS AS WELL AND WE COORDINATE AND

COLLABORATE WITH THEM.

THEY HAVE TEAMED UP WITH POLICE

TO DO RIDE ALONG TO BE ABLE TO

ADDRESS SOME OF THOSE NEEDS IN

THE COMMUNITY.

THERE'S WHAT THE STAFF AT THE BUREAU -- DO, BUT THERE'S ALSO WHAT OTHER CITY DEPARTMENTS ARE STARTING TO PICK UP IN THE SPACE OF ENGAGING COMMUNITIES AROUND THE RECOVERY SERVICES ACTIONABLE ITEMS THAT THEY CAN DO.

>> THANK YOU.

THANK YOU, COUNCILOR BAKER. >> GOOD MORNING LADIES, DEVIN AND JEN.

THANK YOU FOR WHAT YOU GUYS DO WITH YOUR SHOVELING AND YOU'RE SHOVELING A LOT.

IN 17 THERE WAS 1,262 DEATHS AND NALOXONE DISTRIBUTION AT 4,361. IS THAT JUST WHAT WE HANDED OUT? THAT'S NOT ACTUAL USAGE. IS THERE ANY PLACE WHERE WE CAN SEE WHAT'S ACTUALLY BEING USED OF NALOXONE?

BECAUSE IN 19 IT WAS 16,000 DISTRIBUTED.

DO WE HAVE ANY SENSE OF -->> WELL, WHAT WE KNOW IS WHAT WE GET FROM THE REPORT BACK IN REVERSAL.

SOME SOMEONE COMES BACK IN AND SAYS I WOULD LIKE ANOTHER DOSE OF NALOXONE. WE DO A BRIEF SCREEN. TELL US WHAT HAPPENED AND SO WE COLLECT SOME OF THAT INFORMATION ABOUT WHEN DID YOU USE IT, WHERE DID YOU USE IT, WE KNOW ZIP CODE AND WE KNOW THE BASIS OF WHAT HAPPENED. ONE OF THE IMPORTANT THINGS WE ASK IS DID YOU CALL 9-1-1 AND SO RIGHT NOW. WE KNOW THAT AT LEAST HALF OF THE PEOPLE THAT WE'RE SERVING ARE NOT CALLING 9-1-1 DURING AN OVERDOSE, WHICH IS A WHOLE OTHER ISSUE THAT WE'RE WORKING ON.

AND SO WE DON'T KNOW WHAT HAPPENS TO EVERY DOSE THAT GOES OUT THE DOOR.

WE KNOW EVERY PERSON THAT COMES BACK TO US REPORTS AN OVERDOSE. >> WE MIGHT HAVE A SENSE OF IT, BUT YOU'RE NEVER GOING TO BE ABLE TO GET A TRUE NUMBER, BUT THE 16,000 OVER TWO YEARS, THAT SHOWS WE'RE AT LEAST GETTING IT

OUT THERE AND HOPEFULLY, SAVING LIVES.

7,425 APLACEMENTS, MOST OF THOSE DETOX.

>> YES.

STILL ABOUT 50% ARE DETOX

PLACEMENTS, 20% ARE --

>> THAT'S THE STEP DOWN.

STEP-DOWN PROGRAMS.

AND RESIDENTIAL.

THE REST WOULD BE

RESIDENTIAL, AND THEN

APPOINTMENTS FOR MEDICATION

ASSISTED TREATMENT OR ANY OTHER

TYPE OF ASSISTANCE PEOPLE MIGHT NEED.

WE'RE WORKING VERY CLOSELY WITH THE TEAM DIVERTING PEOPLE INTO

THAT SYSTEM IF THAT'S WHERE THEY

NEED TO GO FIRST.

>> SO WE WERE HERE YESTERDAY

WITH THE STRENGTH AND HE SAID

AND IT WAS A -- IT WAS AN

ALARMING STAT THAT OUT OF EIGHT

PEOPLE COMING OUT OF DETOX WE

ONLY HAD ONE STEP-DOWN DEAD FOR THEM.

WAS THAT A CORRECT.

>> I WOULD SAY THAT'S IMPROVED A BIT.

IT USED TO BE -- IT WAS MORE

LIKE ONE IN FOUR.

I CAN GET YOU THE ACTUAL DATA ON

THE BED AVAILABILITY.

BUT THE STATE HAS ACTIVATE PUT

PUT -- ACTIVELY PUT MORE BEDS --

[OVERLAPPING SPEAKERS]

>> WHERE ARE THEY COMING FROM?

THEY'RE COMING ONLINE --

WHERE --

>> ACROSS THE STATE.

SO THEY'VE INCREASED BED COUNTS

IN DIFFERENT PROGRAMS.

>> WE'RE STILL SEEING FAR TOO

MANY PEOPLE THAT RETURN FROM

DETOX WITHOUT TREATMENT ON

DEMAND WHEN THEY'RE READY,

THERE'S NO BED AVAILABLE FOR

THEM MANY TIMES AND

UNFORTUNATELY, WE OFTEN SEE THEM

BACK TO OUR PROGRAM SO THAT THEY

MAY HAVE LEFT EARLY, BUT THEY'RE

STILL INTERESTED IN CARE SO

THAT'S PART OF THE PAST NUMBERS

OF THE 7,400.

>> AND THAT WAS MY NEXT

QUESTION.

THOSE 7,400, THOSE ARE JUST PAST

NUMBERS?

>> THOSE ARE PAST NUMBERS.

THOSE ARE NOT NUMBERS FROM THE

MATTAPAN CAMPUS, THE RESIDENTIAL

PROGRAM.

>> SO WHAT IS AN A. HOLD

CLIENT ---

>> IT COULD BE THAT SOMEBODY

WITH THE --

[INAUDIBLE]

DECIDED THEY WANTED TO ACCESS

CARE AND WAS ABLE TO DO SO.

>> OKAY.

GOOD JOB ON THE SHARPS.

CAN WE TALK A LITTLE BIT -- A

COUPLE OF YEARS AGO WE DIDN'T

HAVE ANY SHARPS TEAM AND WE

WOULD SEND OUT AMBULANCES OR

FIRE TRUCKS.

JUST GETTING THE SHARPS TEAM,

CAN WE TALK DETAILS -- I KNOW

YOU DID THE CONTRACT FOR 24-HOUR

TRAUMA.

SO LIKE MAJOR CLEANUPS THAT

WOULD BE BY TRAIN STATIONS.

DO THEY HAVE A SET SCHEDULE?

IS THERE A MAJOR CLEANUP DAY?

ANY PLACE THAT THEY GO TO EVERY

DAY FOR US?

>> NO, THERE ARE DIFFERENT

CONTRACTS IN BOSTON.

THEY WORK WITH BHA HOUSING

DEVELOPMENTS.

THEY'RE ALWAYS CLOSE BY.

WHEN WE HAVE NEED OF THEM THEY

ALWAYS HAVE PEOPLE IN THE

NEIGHBORHOOD THAT CAN HELP

ALMOST IMMEDIATELY.

AND SO WE'RE NOT QUITE SURE HOW

OFTEN WE'LL NEED THAT TYPE OF

HELP, BUT AT LEAST WE HAVE

SOMEBODY ON CONTRACT READY TO

GO, SHOULD WE FIND AN AREA THAT

NEEDS A CLEANUP THAT'S FAR

BEYOND WHAT SHARPS CAN DO.

WE WANT THAT RESPONSE TO BE AS

QUICK AS POSSIBLE AND SO HAVING THEM ON CONTRACT I THINK WILL

HELP THEM HAVE A BETTER RE

RESPONSE.

>> THANK YOU.

I'LL STAND DOWN.

>> THANK YOU.

COUNCILOR JANEY.

>> THANK YOU SO MUCH.

GOOD AFTERNOON, EVERYONE.

FIRST, I JUST WANT TO THANK YOU

FOR THE WORK THAT YOU DO EVERY

DAY.

WE KNOW THAT WE HAVE A CRISIS ON

OUR HANDS NOT JUST IN BOSTON, BUT ACROSS OUR COUNTRY,

LISTENING TO THE RADIO THIS

MORNING AND THERE WERE A COUPLE

OF STORIES TALKING ABOUT THIS

CRISIS AND WHAT PEOPLE IN

DIFFERENT CITIES ARE TRYING TO

DO ABOUT IT.

I WANTED TO JUST FOLLOW UP ON

SOME OF YOUR COMMENTS DURING THE

PRESENTATION, YOU TALKED ABOUT

THE PROACTIVE SWEEPS, HOW OFTEN

ARE YOU DOING THEM?

>> IT DEPENDS ON THE AREA.

SO IF YOU'RE REFERRING -- WE'RE

DOING OUR TEAM SPECIFICALLY ARE

DOING TWO SWOOPS A DAY IN THE

MORNING AT ORCHARD GARDENS AND

AT CLIFFORD PARK AND ORCHARD

PARK AND MASON SCHOOL AND TWO IN

THE AFTERNOON.

>> SO YOU DO TWO SWEEPS A DAY AT

ORCHARD GARDEN SCHOOLS.

>> WE DO FOUR AT EACH PLACE.

I WOULD ADD AS PART OF THE

PARTNERSHIPS THAT ARE HAPPENING,

THAT'S THE TEAM THERE.

AGAIN, THERE'S A PRIVATE PARTNER

IN THE COMMUNITY THAT'S DOING A

SWEEP AND THEY'LL TEXAS US HOW

MANY NEEDLES THEY FIND SO WE CAN

ADD THAT TO THE COUNT AND THE

CUSTODIANS AT THE SCHOOLS ARE

DOING SWEEPS.

>> YOU MENTIONED PARKS I THINK?

IN TERMS OF THE KIOSK THAT IS

THERE NOW TO PICK UP TO CAPTURE

NEEDLES, DISCARDED NEEDLES, HOW MANY NEEDLES HAVE BEEN

COLLECTED, HOW OFTEN IS THE PARK

CHECKED?

ARE THERE STILL NEEDLIN' EVEN

WITH THE BOX THERE?

DID WE SEE A DECREASE IN THE

NUMBER OF NEEDLES ON THE GROUND GIVEN THAT WE HAVE THE BOX

THERE?

DO YOU HAVE THAT DATA YET?

>> WE ARE WORKING WITH 24 TRAUMA REALLY TO MONITOR.

IT TAKES TIME FOR THEM TO BE

USED FULLY, ALTHOUGH DEBBIE CAN

SHARE A STORY WITH THIS WEEK, WE

HAD THE ORCHARD GARDEN ONE OUT,

**BUT RIGHT NOW 24 TRAUMA AND** 

STAFF ARE MAKING SURE THAT

THEY'RE NOT FILLING UP AND THEY

HAVEN'T.

I THINK THEY'VE EMPTIED A FULL ONE YET.

WE'RE MONITORING THAT.

THAT'S WHAT WE'RE DOING.

-- A DECREASE IN THE NUMBER OF

NEEDLES ON THE GROUND, BECAUSE

THE KIOSK THERE OR --

[OVERLAPPING SPEAKERS]

>> SURE, SINCE BPS INSTITUTED

SOME OF THE RESPONSES THAT THEY

PUT ONLINE WITH HAVING MONDAY

MORNING, THEIR CITYWIDE CLEANUP

GREW DOES MONDAY MORNING SWEEPS

THEMSELVES AS WELL AS SOME OF

THE FIVE DIFFERENT SWEEPS OR SIX

DIFFERENT SWEEPS A DAY.

ONCE THOSE FOLKS CAME TOGETHER

DOING A COLLECTIVE EFFORT WE DO

SEE A DECREASE IN NEEDLES IN THE

AREA.

ARE THERE STILL NEEDLES?

YES, ABSOLUTELY.

>> AND I KNOW THERE ARE STILL

**NEEDLES** --

[OVERLAPPING SPEAKERS]

>> WHAT I'M TRYING TO ASCERTAIN HERE IS WHETHER OR NOT THE BOX IS MAKING A DIFFERENCE IN TERMS

OF THE DECREASE IN NEEDLES ON

THE GROUND.

WHEN THESE PEOPLE COME IN TO DO

THEIR SWEEPS, ARE THEY PICKING

UP THE SAME NUMBER OF NEEDLES

THAT THEY WERE PICKING UP MONTHS

AGO BEFORE THE BOX THERE WAS OR

ARE THERE SEEING A DECREASE?

>> THEY'RE SEEING A DECREASE.

AND WE'VE BEEN REPORTING ON THAT

SO BPS HAS SEEN A SIGNIFICANT

DECREASE IN THE NUMBER OF SHARPS

THEY ARE PICKING UP ON SCHOOL GROUNDS.

>> AND IS THAT TRUE FOR YOUR TEAM AS WELL?

>> YEAH, I WOULD SAY.

I THINK THE COLLECTIVE EFFORT, **EVERYBODY IS SEEING LESS EVERY** TIMIN' THE OUT BECAUSE THERE'S

LESS EFFORT AND THERE'S MOR

PEOPLE USING THE BOX SO ALL

THOSE THINGS TOGETHER,

PARTICULARLY THE FIVE AL-QAEDA

SWEEP THAT THEY'RE DOING AT

ORCHARD GARDEN WHERE IT'S THE CITYWIDE GROUNDS CREW I THINK.

THAT I THINK HAS MADE A

TREMENDOUS DIFFERENCE BECAUSE

THEY'RE CUTTING BACK THE BRUSH.

>> THE FIVE A.M. SWEEP.

WHICH IS WHERE THINGS WERE

**GETTING LOSS --**

>> HOW MUCH OF THE DECREASE IS PEOPLE -- WHEN I WITNESS PEOPLE

USING NEEDLES AFTER THEY INJECT.

THEY'RE NOT REALLY IN A STATE TO

PUT THE NEEDLE IN THE BOX.

THEY'RE USUALLY IN A STATE WHERE

THE NEEDLE MAY FALL OUT OF THEIR

HAND OR WHAT HAVE YOU SO I GUESS

HOW MUCH OF IT IS DUE TO THE

FIVE A.M. SWEEP VERSUS THE KIOSK

IS THERE AND SO PEOPLE ARE BEING

MINDFUL AND NOT LITTERING THEIR

NEEDLES OR PUTTING THEM IN THE BOX?

OR IS IT A COMBINATION?

>> IT'S HARD TO SAY.

A COMBINATION OF THE TWO

THINGS AND TO BE HONEST WITH THE

KIOSKS WHAT WE SEE IN OUR PEERS

IS THAT ONE PERSON WILL TAKE

RESPONSIBILITY FOR CLEANING UP

AN AREA AND USE THE BOX AND SO

YEAH. SOME PEOPLE ARE VERY

IMPAIRED AND THAT'S WHAT THEY'RE

DOING AT THE MOMENT, BUT THEY'RE

USUALLY WITH A GROUP OR THERE'S

A GROUP NEARBY OR SOMEBODY

THAT'S TAKEN ON THE

RESPONSIBILITY FOR CLEANING UP

AND WILL USE THE BOX.

>> ONE FINAL QUESTION IF I MAY.

WE'LL DO IT IN THE NEXT

ROUND.

>> I'M NOT GOING TO BE HERE IN

THE NEXT ROUND.

>> I'M SORRY, WE'VE GOT LOTS OF COUNCILORS HERE.

COUNCILOR WU.

>> OKAY.

I'M SHARING SOME OF MY THOUGHTS, I DON'T HAVE THAT MANY

QUESTIONS.

2,000 NEEDLES THAT WE COLLECTED IN THE CITY COULD YOU SHARE BY ZIP CODE?

>> WE CAN GET YOU THAT DATA.

IT'S ALL PUBLICLY AVAILABLE.

>> AND SO FOLLOWING UP ON THAT,
WHAT IS THE BEST PLACE TO TRACK
THE DATA IN TERMS OF BOX BY BOX
OR KIOSK BY KIOSK HOW MANY
NEEDLES ARE BEING PICKED UP AND
HOW IT'S TRENDING OVER TIME.

>> THAT'S SOMETHING WE WERE

COLLECTING ON OUR OWN ON A WEEK WEEKBY WEEK BASE.

>> ARE THOSE PUBLICLY AVAILABLE SOMEWHERE OR WILL THERE BE A REPORT LOOKING BACK AFTER A CERTAIN PERIOD OF TIME?

>> WE REPORTED OUT TO VARIOUS CITY DEPARTMENTS, BUT WE COULD POST A REPORT ONLINE, TOO.

>> OKAY GREAT.

AGAIN, TRYING TO UNDERSTAND THE DYNAMICS OF ALL THE DIFFERENT EFFORTS AND WHAT'S WORKING AND WHERE AND HOW MUCH. AND THEN JUST FOR A MINUTE ON KIND OF RESOURCES WHEN IT COMES TO ADDRESSING TRAUMA, THAT THE COMMUNITY MIGHT BE ABSORBING. WE HEARD A LOT FROM ORCHARD GARDENS FAMILY AND THE COMMUNITY IN GENERAL THAT A LOT OF THE STUDENTS ARE KIND OF NOT KNOWING HOW TO DEAL WITH OR MIGHT BE FEELING SCARED OR ANXIOUS ABOUT WHAT THEY'RE SEEING ON THE WAY TO SCHOOL.

IS THERE A WAY TO PARTNER AND THIS IS FOR THE REST OF THE HEALTH COMMISSION TO SUPPORT ON ONGOING COMMUNICATIONS AND RESOURCES ON THAT FRONT FOR THAT COMMUNITY?

>> YEAH, ABSOLUTELY.

WE'VE BEEN HAPPY TO WORK WITH THEM. WE CAN DO IT IN COORDINATION WITH OTHER SERVICES THAT ARE AVAILABLE OR OUR OWN TEAM. WE HAVE A YOUTH PREVENTION TEAM NOW AND WE'VE DISCUSSED SOME OF THAT BECAUSE THIS IS -- BECAUSE OF THE EPIDEMIC AND WHAT PEOPLE ARE SEEING ON THE STREET IS VERY, YOU KNOW, DISCONCERTING TO MANY FOLKS WHO ARE SEEING IT PARTICULARLY IN CERTAIN NEIGHBORHOODS AND SO I THINK THAT IS SOMETHING THAT WE NEED TO EXPLORE MORE. >> GREAT. HAPPY TO TALK TO YOU MORE ABOUT THAT. >> AND THEN FINALLY SO I MAY HAVE MISSED IT WHEN YOU GAVE --WE'RE GOING IT THROUGH THE PRESENTATION EARLIER, BUT WHAT IS THE PLAN FOR THE SHARPS TEAM KIND OF GOING INTO THE NEXT COUPLE OF FISCAL YEARS AND WHAT IS YOUR IDEAL NUMBER OF STAFF? >> SO THE WAY THAT WE'RE LOOKING AT IT RIGHT NOW IS REALLY EXPANDING THE CAPACITY OF NOT JUST MOBILE SHARPS RESPONSE TO 3-1-1, REALLY HAVING THAT DIRECT CUSTOMER SERVICE RESPONSE, BUT ALSO EXPANDING THE COLLECTIVE EFFORT AND WORKING MORE WITH OUR PARTNERS, PRIVATE, PUBLIC, NEIGHBORHOOD ASSOCIATIONS. CITY EMPLOYEES. >> ASKING DIFFERENTLY AND FOLLOWING UP ON WHAT COUNCILOR ESSAIBI-GEORGE WAS TALKING ABOUT EARLIER IN TERMS OF A NUMBER. WHAT IS KIND OF THE -- WHAT ARE THE GOALS FOR HOW YOU WOULD MEASURE SUCCESS IN TERMS OF AT LEAST MEETING NEED IN TERMS OF HOW MANY NEEDLES, THE CAPACITY OF THE TEAM AND ALL THE COLLECTIVE EFFORTS TO BE ABLE TO PICK UP THOSE NEEDLES? HOW MUCH MORE OF AN INCREASE ARE YOU HOPING TO MEET IN THE NEXT

COUPLE OF YEARS?

>> I'M NOT SURE I UNDERSTAND THE

## QUESTION.

>> SO YOU SAID THERE'S FOUR

FTE'S, ARE WE MEETING HALF OF

THE DEMAND THAT'S OUT THERE?

DO YOU THINK THAT WE NEED TO

DOUBLE THAT CAPACITY THROUGH

MORE PARTNERSHIPS AND STAFF SORE

WHAT IS THE LEVEL OF GROWTH THAT

WE NEED TO SEE THAT?

>> I THINK WE'RE MONITORING THAT

CLOSELY.

I THINK THE FOUR FTE'S ARE ABLE

TO RESPOND TO 311.

THEIR RESPONSE TIME IS VERY

QUICK.

I THINK DETERMINING -- WE'RE

ROLLING OUT ALL THESE NEW

EFFORTS.

IF THE SWEEPS OF PARKS ARE NOT

WORKING, WHERE THE RIGHT PLACE

IS, IS IT THAT WE NEED MORE

PEOPLE IN PARKS?

WHERE DO WE NEED TO PUT THE

FTE'S ON THE RIGHT TEAM IS WHAT

WE FOCUSED ON RIGHT NOW AND, YOU

KNOW, IF WE FEEL LIKE THE VOLUME

GOES UP THIS YEAR AND WE'RE NOT

ABLE TO ADDRESS THE NEED THEM WE

WOULD WANT MORE SHARPS PEOPLE.

WE'RE PAYING ATTENTION TO WHAT'S

HAPPENING AT NIGHT TIME RIGHT

NOW.

THERE WASN'T A NEED AT NIGHT

TIME BEFORE.

THERE IS NOW AND SO THAT'S

SOMETHING WE'LL BE PAYING CLOSE

ATTENTION TO THIS YEAR.

>> GOT IT THANK YOU.

THANK YOU. MADAM CHAIR.

>> THANK YOU, COUNCILOR WU.

COUNCILOR FLAHERTY.

>> THANK YOU FOR THE GREAT WORK

THAT YOU GUYS DO.

IT'S NEVER ENDING AND YOU'VE

COME TO DIFFICULT CIRCUMSTANCES

AS WELL AS WORKING WITH US ON

THE COUNCIL.

YOU GUYS DO A GREAT JOB AND JUST

WANT TO MAKE NOTE OF THAT.

YOU ALSO KNOW I'VE BEEN A

LONG-TIME PROPONENT OF RECOVERY

AND TREATMENT ON DEMAND AND ALSO

ONE THAT WANTS TO PUT PRESSURE ON OUR SUBURBAN CANDIDATES TO

STEP UP AND DO THEIR FAIR SHARE

BY WAY OF RESERVE RESOURCES.

ALWAYS SEEMS TO FALL ON BOSTON

AND ONE OF THE BIG ISSUES WE

HAVE IS YOU NEED TO TAKE THE KID

KIND OF OUT OF HIS OR HER

ELEMENT AND PUT THEM SOMEWHERE

AND OFTENTIMES, YOU SEE A LOT OF -- WE HAVE A LOT OF GREAT

RECOVERY PLACES HERE IN THE

CITY, BUT WE'RE ALSO HOUSING,

YOU KNOW, CHILDREN AND MEN AND

WOMEN FROM OTHER PARTS OF THE

COMMONWEALTH.

WISH IT WAS RECIPROCAL IN A

BIGGER WAY.

THAT WILL BE MY FOOTNOTE.

SO REALLY INTERESTING TIMES.

YESTERDAY, WE HAD ATTENDED AND

COUNCILOR FLYNN HAD ATTENDED AN

EVENT AND THE PART WHERE WE GOT

TOGETHER WAS RIGHT AROUND THE

JEWEL AND AROUND TOBACCO SMOKING

AND YESTERDAY HERE ON THE

COUNCIL, COUNCILOR O'MALLEY AND

COUNCILOR ESSAIBI-GEORGE PUT

TOGETHER A HEARING TO DISCUSS

THAT.

SO WE'RE IN BOSTON.

YOU CAN'T GET A CIGAR ANYWHERE

THESE DAYS.

WE'RE CRACKING DOWN ON THE

JUULS, BUT POT SHOPS ARE GOING

TO BE CRACKING UP LEFT AND

RIGHT

WHAT EFFORT ARE BEING UNDERTAKEN

NOW TO PREPARE FOR THE THC

ONSLAUGHT THAT'S COMING?

THE POT BONANZA AND SHOPS START

OPENING UP LEFT AND RIGHT, KIDS

ARE GOING TO BE GETTING THE

GUMMY BEARS AND THE BROWNIES AND

THE CANDY FORM.

WHAT EFFORTS ARE WE MAKING WITH

REGARD TO RECOVERY SERVICES TO

PREPARE FOR THAT?

A LOT OF FOLKS RECOGNIZE THAT

THC IS HIGHLY ADDICTIVE AND OUR

RESIDENTS PARTICULARLY OUR YOUTH

ARE GOING TO GET THEIR HANDS ON

THIS THING SOONER THAN LATER AND

STRANGE WE'RE BANNING SMOKING

ITEMS AND WE DON'T WANT CIGAR

SMOKING BUT EVERYONE'S TAKING A

PASS ON THE POT SHOPS.

I WOULD LIKE TO GET YOUR
THOUGHTS IF YOU'RE PREPARING FOR
THIS AND WHAT EFFORTS CAN WE DO
TO ADDRESS THE HIGHLY ADDICTIVE
THC THAT WILL BE COMING TO
NEIGHBORHOODS THROUGHOUT OUR
CITIES SOON?

>> **SURE**.

YOU KNOW, I WOULD THINK MOST ALL OF OUR EFFORTS ARE FOCUSED ON YOUTH, FAMILIES, CARETAKERS AND YOUTH-SERVING AGENCIES AND WORKERS. PEOPLE WHO ARE WORKING WITH YOUTH REGARDLESS OF WHERE, WHETHER IT'S THE COMMUNITY CENTER, BCYF COMMUNITY CENTER, BOYS AND GIRLS CLUB OR SCHOOLS OR PARENTS THEMSELVES SO OUR EFFORTS ARE REALLY FOCUSED ON FROM THE INVESTMENTS FROM LAST YEAR TO INCREASE OUR COMMUNITY ENGAGEMENT WITH YOU. WE HAVE THE PREVENTION INVESTMENT LAST YEAR, HIRING THE STAFF -- ACTUALLY THE WHOLE STAFF YESTERDAY AT THAT EVENT, BUT THAT'S WHAT WE'RE FOCUSED ON.

WE'RE FOCUSED ON TRAINING, ADULTS THAT ARE WORKING WITH YOUNG PEOPLE ON HOW TO HAVE CONVERSATIONS AROUND DRUG USE THAT AREN'T PENALIZING YOUNG PEOPLE FOR THEIR USE, BUT HAVING REAL CONVERSATIONS ABOUT WHERE THEY'RE AT AND HOW TO MAKE HEALTHY CHOICES AND DECISIONS. AND WE'RE WORKING ACROSS DIFFERENT SECTORS SO EVEN AT THE BOSTON PUBLIC HEALTH COMMISSION WHERE THEY'RE DOING WORK IN NEIGHBORHOOD WITH YOUTH ON TRAUMA OR ON PEER LEADERSHIP. WE'RE WORKING WITH BOTH FOLKS WHO HISTORICALLY REALLY IN THE SUBSTANCE USE WORLD WE HAVEN'T COORDINATED IN THAT WAY SO WE'RE WORKING CLOSER TOGETHER WITH DIFFERENT YOUTH SERVING AGENCIES AND THEN YOUNG PEOPLE THEMSELVES, HAVING ACTIVITIES AND EVENTS WHERE PEOPLE CAN TALK ABOUT SOME OF THESE ISSUES AND DO PROACTIVE WORK TO BE MORE

INFORMED AND EDUCATED.

>> I WANT TO MAKE SURE IT'S NOT
GETTING LOST IN THE SHUFFLE.
WE'VE BEEN FOCUSED ON OPIOID, WE
FOCUS ON TOBACCO, ALCOHOL AND
MAKING SURE THAT WE'RE DOING
SORT OF AN AWARENESS CAMPAIGN
AROUND THC AS WELL AS MARIJUANA
USE.

I KNOW AGAIN THE PUBLIC HEALTH COMMISSION TO SOME DEGREE CONFLICTED BECAUSE THERE ARE SOME MEDICINAL USES AND BENEFITS ON A PORTION OF THAT, BUT THERE'S ALSO EXPECTED TO BE WIDESPREAD USE AND ABUSE AS WELL AND JUST WANT TO MAKE SURE YOU'RE ON YOUR GAME ON THAT FRONT.

>> I MEAN, WHAT WE'RE NOT CONFLICTED ON AND RECOVERY SERVICES IS GETTING FACTUAL INFORMATION AND SKILLS TO YOUNG PEOPLE AND HELP IN THE COMMUNITY.

>> THANK YOU, JEN, THANK YOU, DEVIN, THANK YOU, MADAM CHAIR.

>> THANK YOU.

COUNCILOR CAMPBELL.

>> THANK YOU, COUNCILOR

ESSAIBI-GEORGE.

SHE RUNS A GREAT HEARING.

SO I JUST HAVE A COUPLE OF

FOLLOW-UP QUESTIONS.

SO THIS SLIDE WHERE IT TALKS

ABOUT MASSACHUSETTS, IN 2017,

THE 72,000.

COULD WE GET BOSTON NUMBERS

SPECIFICALLY?

AND THEN, WHICH WE COULD JUST

E-MAIL.

AND THEN GOING BACK TO JUST TRYING TO GET A BETTER SENSE OF

WHERE THE ISSUE IS VISIBLY

SHOWING UP, RIGHT?

SO OBVIOUSLY, I GREW UP ON MASS

AVENUE SO I DEPRIVE DOWN THERE

AND I'M LIKE THIS LOOKS VERY

DIFFERENT.

SEEING PEOPLE WALK AROUND, USING

ON THE CORNER.

YOU MAY NOT NECESSARILY SEE THAT

IN CERTAIN POCKETS OF MY

DISTRICT.

IT'S STILL THERE, BUT MAYBE NOT THE SAME SCALE.

I COVER FOUR CORNERS, MATTAPAN, GROVE HALL.

OTHER NEIGHBORHOOD WHERE IT'S PREDOMINANTLY RESIDENTS OF COLOR.

IS THERE SOME DATA, MAYBE IT'S WHERE WE'RE PICKING UP THE NEEDLES OR GETTING THE MOST 311 REQUESTS TO GIVE US A SENSE WHERE WE'RE SEEING IT MORE ACUTE?

AND THEN THAT MAY THEN EXPLAIN WHY YOU HAVE MORE MOBILE SHARP TEAM MEMBERS OR PROACTIVE SWEEPS IN CERTAIN AREAS VERSUS OTHERS. AND THEN COULD ALSO DICTATE WHAT THE STRATEGY IS TO EXPAND TO THOSE OTHER AREAS. COULD WE GET SOMETHING SENT TO US THAT PULLS THAT APART A

LITTLE BIT?

>> WE CAN SHOW YOU A COUPLE OF EFFORTS AND HOW THEY'RE MAPPED WHETHER IT'S SYRINGE PICKUP, OVERDOSE AND OTHER THINGS.
>> OKAY BECAUSE THAT WOULD BE REALLY HELPFUL, AND I THINK IT MIGHT ALSO JUST WHEN WE'RE OUT IN THE NEIGHBORHOOD BECAUSE OBVIOUSLY, IF A RESIDENT SEES ONE NEEDLE THEN THE PROBLEM IS TOO MUCH, IT'S ACUTE, IT'S MASSIVE.

BUT WE OFTEN HAVE TO GO OUT AND SAY HEY, WE HAVE A LIMITED NUMBER OF RESOURCES, PEOPLE ARE OUT THERE DOING WHAT THEY CAN. WE CAN'T NECESSARILY HAVE PROACTIVE SWEEPS JUST YET IN THIS AREA BECAUSE WE'RE SEEING THE PROBLEM MORE ACUTELY HERE BASED ON THE DATA OR WHATSOEVER. THAT'S HELPFUL IN JUST HAVING SOME MORE THOUGHTFUL, INFORMATIVE CONVERSATIONS WITH OUR RESIDENTS. AND THEN I WOULD LOVE TO JUST SEE HOW WE EXPAND TO INCLUDE

SOME OUTREACH, BASED ON WHAT YOU'RE SEEING IN SOME OF THESE OTHER COMMUNITIES AND MAYBE IT'S

NOT ALL ON US, BUT IT IS THE

HEALTH CENTERS THAT ARE STEPPING UP LIKE MATTAPAN TO HELP SUPPLEMENT OR AUGMENT WHAT YOU'RE DOING, WHICH IS GREAT, I WOULD LOVE TO KNOW A LITTLE BIT MORE OF WHAT THAT LOOKS LIKE. >> AND THAT'S ALL I HAVE FOR NOW.

THANK YOU, GUYS AGAIN FOR THE WORK YOU'RE DOING.

REALLY APPRECIATE YOU AND YOUR

TEAMS, APPRECIATE IT.

>> THANK YOU.

THANK YOU, COUNCILOR

ESSAIBI-GEORGE.

>> COUNCILOR BAKER.

THANK YOU.

SO I JUST DID THE MATH, NOT TO

KEEP BEATING UP THESE SHARPS

RIGHT NOW, BUT WE GET CALLED

CONSTANTLY ON THEM.

CLIFFORD PARK GET SWEPT SIX

TIMES A DAY.

I GET CALLS, WHAT ARE YOU DOING ABOUT IT.

WE REMOVED AREAS THAT WERE PUBLIC TOILETS.

WE HAVE TEAMS REACHING OUT TO

PEOPLE TO GET THEM INTO

SERVICES.

SO I'M THANKING YOU GUYS.

DOING THE MATH ON IT.

14,000, SO 14,000 TIMES 52 IS

728,000 SHARPS A YEAR.

THAT'S ASTRONOMICAL.

SO COULD JOB ON THAT, NO ONE

SAYS YOU PICKED UP 750,000

SHARPS THIS YEAR, WHAT ABOUT

THAT ONE RIGHT THERE?

SO I THANK YOU FOR THE 750,000

YOU PICKED UP, AND NOT THAT ONE

THAT WAS LEFT OVER THERE.

OKAY GOOD.

ENHANCED DATA AND REVENUE

SYSTEMS.

SO IS THAT FIGURING OUT WHO'S

PAYING FOR WHAT?

BECAUSE A LOT OF TIMES WHEN

YOU'RE TRYING TO GET PEOPLE INTO

SERVICES IT'S JUST YOU'VE GOT

THEM THERE SO WAS THAT KIND OF

JUST TRYING TO FIGURE OUT WHO'S PAYING FOR WHAT AND TRACKING

PATIENTS OR CLIENTS?

CAN YOU EXPLAIN THAT A LITTLE
BIT HOW WE'RE -- IT SAYS WE'RE
SUBSTANTIALLY INCREASING
REVENUE, AM I RIGHT IN MY
THINKING THERE?
>> RIGHT NOW, WE PROVIDE
ADDITIONAL SERVICES, BUT THEY
ARE BILLABLE SERVICES AND TO
BUILD THE INFRASTRUCTURE TO BE
ABLE TO TRACK THAT DATA, A
MEDICAL RECORD AND A CASE
MANAGEMENT DATABASE, WE WOUL

MANAGEMENT DATABASE, WE WOULD BE

ABLE TO DO THAT AND BRING IN

SOME REVENUE TO INCREASE THE

EFFORT THAT WE'RE ABLE TO

PROVIDE THERE OR TO OFFSET THE

CITY DOLLARS.

I THINK WE ROLL THINGS OUT AT

THE -- IT'S GOING TO PASS PRETTY

QUICKLY IN RESPONSE TO A CRISIS, AND NOW, WE WANT TO MAKE SURE

THAT ALL THE PEOPLE WHO CAN PAY

FOR IT ARE PAYING FOR IT.

>> FIGURING OUT WHO PEOPLE ARE

AND WHO'S PAYING WHAT SHARE.

OKAY YOU HAD TALKED ABOUT FOUR

PROJECT STAFF.

IT'S FINANCED THROUGH A COMPANY DOWN THERE.

WHERE ARE THEY AND WHEN ARE THEY

OUT DO YOU KNOW?

>> IT'S FUNDED BY B.U., IT'S A

COLLABORATION.

>> OKAY SO UP BY -- WHERE DO

THEY COVER?

>> THEY COVER THE MASS AND ALBANY INTERSECTION UP TO THE SOUTHAMPTON SHELTER AND AROUND THAT AREA, BUT, YOU KNOW, IT'S FLUID.

I THINK FOR SUMMER WE'LL BE HAVING SOME ADDITIONAL SEASONAL CAPACITY PUT ON BY D.P.W. AND PARKS AND SO WE MAY SHIFT THE

AREA --

[OVERLAPPING SPEAKERS]

KIND OF WITH POLICE AND OTHER

DEPARTMENTS AND KIND OF GO OVER

THE MAPS AND WHO'S COVERING WHAT

AND WHEN NEW RESOURCES ARE

BROUGHT ON WE MIGHT SHIFT SOMETHING, BUT THEY'VE BEEN A

GREAT RESOURCE AND IT'S BEEN A

GREAT PARTNERSHIP BECAUSE IT

DOESN'T MAKE A -- IT DOES MAKE A DIFFERENCE TO HAVE THEM OUT EVERY DAY.

>> AND THEY'RE PICKING UP

SHARPS, ALSO.

>> SHARPS AND TRASH.

AND YOU MAY HAVE MENTIONED

THIS A LITTLE BIT.

WE TALKED ABOUT THE ENGAGEMENT

CENTER.

HOW MANY LIKE -- HOW MANY PEOPLE

ARE COMING TO THE ENGAGEMENT

CENTER A DAY?

YOU SAID RIGHT AT 6:00 IT'S

CAPACITY.

IS CAPACITY LIKE 275?

>> IT'S 125.

OKAY.

AND SO WE'RE -- AND WE ARE AT

125 ALL DAY LONG?

>> WE'LL SEE A BIG RUSH IN THE

MORNING AND SO WE'RE AT 100

MIDMORNING, IT'S KIND OF THE

FIRST STOP PEOPLE MIGHT MAKE FOR

COFFEE OR TO BRUSH THEIR TEETH

OR JUST TO SOCIALIZE IN THE

MORNING AND DO WHAT THEY WANT TO

DO.

>> DO THEY HAVE ACCESS TO A

SHOWER IN THERE?

>> WE DO HAVE SHOWERS THAT WE'VE

JUST GOTTEN ONLINE TO START

ALLOWING SOME SHOWERING HOURS.

TOO. ESPECIALLY FOR THE FOLKS

WHO ARE SLEEPING OUTSIDE OR WE

DO HAVE A FAIR SHARE OF PEOPLE

WHO WORK THE OVERNIGHT, AND THEN

THE SHOWER HOURS FOR THE SHELTER

THEY HAVE TO WAIT A LITTLE WHILE SO WE GIVE THEM A WAY TO SHOWER

IN THE MORNING.

WE'RE EXCITED TO GET THAT

ONLINE.

>> OKAY.

SO MAYBE ONE OF THE HOLES WE

HAVE IN THE SYSTEM ARE THOSE

STEP-DOWN BEDS.

WHAT ARE WE GOING TO DO WITH

STEP-DOWN BEDS, THE CITY OF

**BOSTON?** 

ARE WE INCREASING OUR CAPACITY

AND IF SO WHERE IS THAT

HAPPENING?

>> WE'RE BUILDING A BRIDGE TO

LONG ISLAND.

>> I KNOW THAT WE'RE GOING TO

TALK ABOUT THAT NEXT.

WE'RE GOING TO TALK ABOUT THAT NEXT.

ARE WE DOING ANYTHING LIKE IS THERE ANYTHING ELSE GOING ON

NOW?

>> I MEAN, THERE IS CAPACITY

WITHIN THE CITY CURRENTLY, BUT

SITING ANY NEW FACILITIES THAT

WOULD ADD TO THAT CAPACITY IS --

WE HAVEN'T FOUND A LOCATION

THAT'S WILLING TO REALLY

ENTERTAIN THAT OR THE SPACE TO

DO SO, SO WE'RE PUTTING PEOPLE

INTO THOSE STEP-DOWN SERVICES

ALL ACROSS THE STATE.

>> CAN WE TALK ABOUT LONG ISLAND

FOR A LITTLE WHILE?

FOR A MINUTE OR SO?

OKAY.

SO ARE WE LOOKING TO DO MOSTLY

STEP-UP BEDS?

CAN YOU JUST EXPLAIN FROM A

30,000-FOOT VISION OF WHAT WE

WOULD LIKE TO SEE THERE?

IF WE CAN?

I KNOW -- AND I'M SORRY I DIDN'T

MAKE -- I SEE CHIEF MARTINEZ UP

THERE, GREAT JOB THE OTHER NIGHT

AT THE MEETING.

AND THEY PROBABLY DID IT THERE.

CAN WE HAVE A 30,000 -- IF

YOU'RE ABLE TO, WHAT -- BEDS

GOING INTO ONE OR TWO YEAR

HOUSING, GED PROGRAMS?

CAN WE GET AN OVERVIEW?

>> **SURE**.

WE'RE IN THE PROCESS, AS YOU

KNOW, WORKING WITH A CONSULTANT,

COLLECTING THAT INFORMATION FROM

STAKEHOLDERS AND REALLY DOING

THE RESEARCH AND THE DATA.

WE'RE PULLING THAT ALL TOGETHER.

WE'VE DONE A TREMENDOUS AMOUNT

OF FOCUS GROUPS ACROSS THE

REGION ON THE NORTHEAST.

SOUTHEAST, OUTSIDE OF BOSTON,

INDIVIDUAL INTERVIEWS AND REALLY

ASSESSING THE GAPS IN REALTIME

BUT ALSO LOOKING AHEAD TO THREE

YEARS DOWN THE ROAD.

WHERE DO WE EXPECT THE GAPS TO

BE AS WE WATCH WHAT ELSE IS HAPPENING, BUT ALSO JUST THE MAJOR GAPS AROUND WORKFORCE DEVELOPMENT AND WELLNESS AND HEALTH AND THE THINGS THAT GIVE PEOPLE HOPE AND STABILITY TO MOVE FORWARD. SO ALL OF THAT IS BEING CONSIDERED IN A COMPREHENSIVE RECOVERY CAMPUS, WHICH IS -- WE CAN THINK ABOUT THE DETAILS AND THAT'S WHAT WE'RE DOING, BUT REALLY WE'RE TALKING ABOUT A COMPREHENSIVE RECOVERY CAMPUS ON LONG ISLAND THAT UTILIZES THAT SPACE IN A HOLISTIC HEALING WAY AND HAS THE ABILITY WITH THE CURRENT STRUCTURES THAT ARE THERE TO PROVIDE SUPPORT TO FOLKS IN EARLY RECOVERY TO LONG-TERM RECOVERY. >> SO THAT SPACE WOULD BE WHERE YOU WOULD GO FOR YOUR STEP-UP AND HOPEFULLY STAY THERE AND GET GED TRAINING, WHATEVER IT IS FOR THE CLIENT TO BECOME HEALTHY WILL BE OFFERED OVER THERE IS IDEALLY, WHAT WE'RE LOOKING TO DO? >> IDEALLY. SO A COUPLE OF -- WE HAVE A LITTLE WHILE BEFORE ALL THAT INFORMATION COMES OUT. WHERE DO YOU THINK IS GOING TO HAPPEN? IS IT STILL GOING TO BE HEROIN? I HEAR A LOT ABOUT METH COMING IN. SO THAT'S A DIFFERENT DRUG. WHAT DO WE SEE HAPPENING IN THREE YEARS? IS IT GOING TO BE ALL, YOU KNOW, LESS CENTERED ON OPIOID AND MORE METH? DO WE HAVE A SENSE OF WHAT THAT'S GOING TO BE IN THE NEXT COUPLE OF YEARS? THREE YEARS? >> ARE I DON'T THINK WE'RE SEEING A REDUCTION IN FENTANYL RIGHT NOW. IN FACT, WE'RE SEEING IT BEING INTEGRATED INTO OTHER --[OVERLAPPING SPEAKERS] >> SO POLY-SUBSTANCE USE --

IN THREE YEARS WE'RE GOING TO

BE EXACTLY WHERE WE ARE OR WORSE?
I'LL SAY THAT, YOU DON'T NEED TO SAY THAT, IN THREE YEARS ->> THE SYNTHETIC DRUG PRODUCTION IS SOMETHING WE'VE BEEN FACING FOR THE PAST FOUR OR FIVE YEARS THAT IS DAUNTING I THINK.
SO JUST SO YOU KNOW IN REGARD TO THE MEETING THE OTHER NIGHT

THAT SPOKE.
HE GREW UP IN MY NEIGHBORHOOD,
I'VE ALREADY REACHED OUT TO HIM
AND MADE MYSELF AVAILABLE TO
HIM, ANYTHING THAT HE NEEDS,
WHATEVER YOU WANT TO TALK ABOUT,
THE OFFER WAS TO THE CITY
COUNCIL ALSO, SO WE MAY HAVE TO
COME BACK AND GET A TEAM DOWN

THERE WAS A COUNCILOR WHO WOULD BE CONSIDERED MY COUNTERPART

I'M TRYING TO WORK WITH THAT TO MAKE MYSELF AVAILABLE IF WE CAN ANSWER ANY QUESTIONS THAT THEY NEED.

THERE.

>> I APPRECIATE YOUR SUPPORT IN THAT AND WE WOULD BE HAPPY TO JOIN YOU AT ANY TIME.

AS A COUNCILOR, AS A DISTRICT CITY COUNCILOR, A LOT OF THE TALK WAS ABOUT SPENDING \$92 MILLION ON A BRIDGE.

THE LAST THING THAT I WOULD WANT TO DO IS SPEND \$92 MILLION THAT WE DIDN'T HAVE TO SPEND. WE HAVE TO SPEND THIS \$92 MILLION.

WE'RE GETTING A LIBRARY IN ADAMS CORNER, \$18 MILLION.
I WOULD RATHER BE FIVE LIBRARIES BUILT, BUT WE CAN'T DO THAT.
WE NEED TO BUILD THIS BRIDGE.
SO LET'S KEEP MOVING IT FORWARD TOWARDS BUILDING THE BRIDGE.
THANK YOU.

>> COUNCILOR BREAKER.
I JUST HAVE A COUPLE OF
WRAP-UPS QUESTIONS FROM THE
PRESENTATION.
THE WARIOUS BLACEMENTS AND

THE VARIOUS PLACEMENTS AND CONTACTS THAT YOU'VE HAD, HAVE YOU BEEN ABLE TO EXTRACT THE UNIQUE NUMBERS?

I NOTICED ON ONE OF THE SLIDES
IT DID SAY UNIQUE, BUT I'M
WONDERING WHEN WE THINK ABOUT
7,400 PLACEMENTS AND TREATMENTS
ARE THOSE UNIQUE OR ARE WE ABLE
TO FIGURE THAT OUT?
ARE THEY REPEAT INDIVIDUALS?
>> SO WITH THE INVESTMENT -WE'LL BE ABLE TO TELL YOU MORE
ABOUT THE PEOPLE THAT WE'RE
PLACING.

THAT COULD BE DUPLICATED INDIVIDUALS.

>> GREAT, AND THEN IN YOUR PRESENTATION, YOU MENTIONED THE INCREASE IN THE NUMBER OF FOLKS WALKING IN AND --

>> I THINK ADDING 33 HOURS A
WEEK IS PROBABLY THE BIGGEST
THING THAT CHANGED.
WE ARE ALSO WORKING REALLY
CLOSELY WITH PUBLIC SAFETY
PARTNERS WHO ARE DIRECTING
PEOPLE.

I THINK THERE'S A LOT OF BOOTS ON THE GROUND THAT ARE DIRECTING PEOPLE TOWARDS TREATMENT AND USING PATH AS A RESOURCE LOCALLY.

>> AND THEN THE NALOXONE DISTRIBUTION HAS ALSO GONE UP. IS THAT COMING OUT OF OUR OPERATING BUDGET OR IS THAT GRANT FUNDED?

>> THAT'S TOTALLY GRANT FUNDED.

STATE OR FEDERAL?

AND THEN DO WE EXPECT THAT GRANT TO CONTINUE FOR THE NEXT AMOUNT OF YEARS?

>> AS WELL AS THAT GRANT THERE'S BEEN OTHER --

[INAUDIBLE]

TO WORK ON THE POST-OVERDOSE
RESPONSE WITH US AND A BIG PIECE
OF THAT GRANT WILL BE NARCAN
DISTRIBUTION AS WELL SO WE'RE
COORDINATING WITH THEM ON THAT.
THERE'S A STATE GRANT THAT
RECOVERY SERVICES GETS, BUT
THERE'S OTHER PARTNERS THAT ARE
RECEIVING OTHER GRANTS AND
COORDINATING WITH US ON REACHING
EVEN MORE PEOPLE.

>> GREAT, AND THEN WITH THE

ENGAGEMENT CENTER ARE WE ABLE TO MEASURE THE INCREASE IN -- OTHER PROGRAMS, OTHER TREATMENTS? TO SEE THAT THAT'S HELPING AT ALL?

BECAUSE ONE OF THE THINGS I'VE HEARD FROM CONSTITUENTS IN THE AREA IS SOMETIMES, IT ATTRACTS INDIVIDUALS WHO ARE EITHER DEALING OR USING.

THERE MIGHT BE A VERY NEGATIVE REACTION TO WHATEVER IT IS BECAUSE WE DON'T ALWAYS KNOW

WHAT PEOPLE ARE ON.

THEY DON'T ALWAYS KNOW WHAT SUBSTANCE THEY'RE USING.

TALK ABOUT THE SUCCESS STORIES AT THE ENGAGEMENT CENTER.

>> SURE I THINK WHAT THE

ENGAGEMENT CENTER HAS DONE BEST

IS TO IMPROVE THE QUALITY OF

LIFE, OF PEOPLE WHO ARE DOWN

THERE AND ON THE STREET.

I THINK PEOPLE HAVE A PLACE TO

WASH THEIR HANDS AND TO SEE A

NURSE AND TO GET FOOD AND TO BE

IN THE AC WHEN IT'S REALLY HOT AND THEY'RE AVOIDING INJURIES IN

THAT WAY, AND I THINK IT'S JUST

A SOCIAL CONNECTION.

I THINK FOR SOME PEOPLE AS THEY BECOME MORE -- ABOUT MAKING

CHANGE THE MORE -- OVER TIME

OVER TIME THREE WEEKS, THREE

MONTHS.

IT HELPS TO MOVE PEOPLE ALONG THE CONTINUUM OF READINESS FOR CHANGE OR TO ASK FOR HELP. I'M READY TO GET BACK ON THE HOUSING LIST I'M READY TO TRY

AGAIN.

THAT'S WHAT WE'RE SEEING THE MOST GOOD AND AGAIN WITH INVESTMENTS IN MORE DATA SYSTEMS, WE'RE HOPEFUL THAT WE CAN DEMONSTRATE THAT WITH MORE

DATA.

WE'RE VERY CAUTIOUS WHEN WE OPENED THE ENGAGEMENT CENTER TO HAVE IT BE AS LOW THRESHOLD AND LOW BARRIER AS POSSIBLE BECAUSE WE WANTED PEOPLE TO COME IN. I THINK WE'VE ESTABLISHED THAT NOW WITHIN THE COMMUNITY SO I

THINK WE CAN START, YOU KNOW, LIGHTLY TRIAGES PEOPLE A LITTLE BIT DIFFERENTLY TO FIND PEOPLE WHERE THEY'RE COMING FROM AND THEIR NEEDS.

>> AND CAN YOU SHARE -- ONE OF THE THINGS THAT I'VE HEARD A LOT ABOUT IN OUR WORK, AND I THINK IT'S TALKED ABOUT IS THE LACK OF RECOVERY BEDS OR STEP-DOWN BEDS POST-DETOX.

WHAT IS THE NUMBER THAT WE NEED WHEN WE THINK ABOUT THE CRISIS THAT'S HIT IN BOSTON?

>> I THINK IT'S HARD TO PINPOINT A NUMBER, BUT CERTAINLY, WE'RE NOT ANYWHERE NEAR THAT NUMBER, WE STILL HAVE FOUR OR FIVE, SIX MONTHS WAITING LIST FOR RESIDENTIAL CARE.

AND I THINK THAT'S PART OF THE THINKING THAT WE'RE PUTTING INTO LONG ISLAND AS FAR AS THE MASTER PLANNING.

HOW CAN LONG ISLAND BE A RESOURCE NOT JUST TO BOSTON BUT THE RAOEG CRON.

WE SEE MANY FOLKS FROM OUTSIDE. IF WE HAVE THE ABILITY TO PUT, PROVIDES US WITH THE ABILITY TO PUT A SIGNIFICANT NUMBER OF TREATMENTS TO RESOLVE SOME OF THIS, YOU KNOW, SOME OF HOW PEOPLE GET SIPHONED THROUGH AND SOUEEZED.

WITH ADDICTION PEOPLE CAN'T WAIT.

WHEN THEY'RE READY WE NEED TO GET THEM THE CARE THAT THEY NEED.

- >> YOU THINK IT'S A FEW HUNDRED OR A FEW THOUSAND?
- >> I WOULD SAY IT'S BETWEEN.
- >> 500.
- >> NO I THINK IT'S 2000.

I ASK THAT QUESTION TREKLY TO PEOPLE IN THIS WORK.

MAYBE YOU'RE NOT IN THE POSITION TO SAY.

WE HEAR 2500 IS THE AMOUNT OF RECOVERY, TRANSITIONAL BEDS IN THE STATE.

HERE IN BOSTON WE KNOW WE --

>> MAYBE I'M NOT SURE THE

DESCRIPTION OF THE BED.

IT'S AFTER DETOX.

IT CAN'T BE AT HOME ON THE COUCH

OR THE CORNER.

THEN WE ARE DEALING WITH SOMEONE

CONTINUING TO SPIRAL AND WE'RE

NOT GIVING THEM THE SERVICES

THEY NEED.

WHEREVER THE NEXT STEP AND STOP

IS.

ANY UPDATE ON THE LAWSUIT?

THAT THE MAYOR HAS FILED AGAINST --

>> NO.

PENDING.

IT'S PENDING.

>> OKAY.

>> COUNSELOR BAKER.

>> YES.

IS THERE ANY PLACE IN, OUT SIDE

OF BOSTON WITH A PATH TYPE

PROGRAM.

HAS ANYWHERE REPLICATED OR

TRIED.

>> NO PATH IS A FAIRLY ONE OF A

KIND PROGRAM.

WE'RE AWARE THAT THE GOALS HAVE

TO CHANGE A BIT SO WE'RE IN THE

COMMUNITY.

MORE TA ON HOW DO YOU THE WORK.

>> TA?

>> TECHNICAL ASSISTANCE.

ANYONE CAN GET SOMEONE INTO

CARE.

HEALTH CENTERS AND HOSPITALS.

NO REASON IT CAN'T BE DONE A

LITTLE BETTER.

YOU KNOW PARTNER BE WITH THE

STATE KEEP TRACK OF WHERE WE

FEEL PEOPLE ARE NOT GETTING

REFERRED AS THEY SHOULD BE.

ALSO THINKING WHERE CAN WE DO

MORE TRAININGS AND REACH OUT TO

PROVIDE ASSISTANCE TO COPE

PEOPLE WHERE THEY'RE AT AND GET

THEM PLACED DIRECTLY.

WE HAVE HAD PEOPLE VISIT FROM

DIFFERENT PARTS OF THE STATE.

I THINK THAT'S POSITIVE.

SO THAT CERTAINLY IS A PRIORITY

OF OURS TO MAKE SURE MORE PEOPLE

PROVIDE THE SERVICES IN OTHER

PARTS OF THE STATE.

>> IN HOME CYSTS AFTER OVERDOSES

HOW DO WE CONNECT ON THOSE.

EMERGENCY ROOM DATA? HOW ARE WE CONNECTING TO THAT

PERSON.

WHO DOES THAT?

>> RECOVERY SERVICES STAFF ALONG

WITH THE BOSTON FIRE ACCIDENT

MEET REGULARLY AND RESPOND TO

THOSE ADDRESSES.

>> OKAY.

>> IF THERE IS A CALL WE KNOW

WHO THE PERSON IS AND WHERE

THEY'RE GOING AFTER THE

EMERGENCY ROOM OR WHEREVER THEY

GO.

THAT'S FOLLOW-UP.

>> FOLLOW-UP IS AT THE ADDRESS

WHERE THE EVENT TOOK PLACE.

ACCORDING TO THE DATA AVAILABLE.

WHEN WE DO THAT VISIT IT'S NOT

THE PERSON WITH THE OVERDOSE.

IT'S MOM OR DAD OR ROOMMATE WHO

ALSO NEEDS A TALK IN SERVICES

GENERALLY.

THEY HAVEN'T TALKED TO ANYONE

ABOUT WHAT HAPPENED.

WE DO HAVE, WE MEET WITH THE

INDIVIDUAL WHEN THEY'RE THERE

AND FOLLOW-UP WITH US LATER.

WE GET PEOPLE INTO TREATMENT

THAT WAY.

>> THAT SEEMS LIKE THAT MIGHT BE

DIFFICULT TO DO.

THE HOUSE CYSTS IF THEY DON'T

HAVE A PLACE.

WHAT IS THE SQUAT 80 EMS.

IS THAT THE QUICK RESPONSE TEAM.

CAN YOU TALK ABOUT IT BRIEFLY.

>> SQUAD 80 THROUGH EMS.

>> RIGHT.

THINK IT'S BEST ANSWERED BY

CHIEF NEXT WEEK.

IT'S A RAPID RESPONSE TEAM IN

HIGH VOLUME AREAS --

>> DO WE HAVE A SENSE ON THE

LONG TERM OF THE ENGAGEMENT

CENTER.

ANY THOUGHT BUILDING A REAL

**BUILDING THERE?** 

MAYBE DOING THAT LONG TERM?

ANY DISCUSSIONS ON THAT?

>> YES.

WE'RE HAVING THE DISCUSSIONS

RIGHT NOW.

>> FOR LIKE REPLACE IT WHERE IT

## IS BUILDING?

- >> YES.
- >> HOW LONG AGO WERE THE
- **DISCUSSIONS?**
- >> WE'RE WORKING WITH A
- CONSULTANT NOW FOR A STUDY.
- SO THE SITE STUDY COMES FIRST
- THEN DESIGN AND RESOURCES.
- >> MY LAST THING IS THE RUTH
- PREVENTION STRATEGY.
- THE GROUP LAST NIGHT, IS THAT
- ONE OF THE GROUPS THAT YOU GUYS
- HELPED TO FUND?
- >> SO, WE ACTUALLY DON'T FUND
- THAT GROUP.
- THIS IS THE, THIS IS THE
- EXPOSURE THAT THE COMMUNITY
- PREVENTION TEAM HAS THE IMPACT
- THEY HAVE BEEN ABLE TO HAVE IN
- BUILDING PARTNERSHIPS.
- THAT GROUP REACHED OUT TO US
- THEY ASKED FOR SUPPORT,
- PREVENTION WEEK.
- NOW THAT WE HAVE A TEAM AND
- FOLKS ABLE TO WORK WITH
- COMMUNITY PROVIDERS WE JUST SAT
- DOWN WITH THEM AND SAID WHAT
- DOES THIS LOOK LIKE IN THE
- COMMUNITY.
- THEY DID THE HEAVY LIFTING.
- WE SUPPORTED THE EFFORTS.
- >> THINK IT'S IMPORTANT.
- MY LAST, THROW IT OUT THERE, IF
- I COULD GET, PEOPLE ASK FOR IT
- EARLIER.
- THE ACTUAL NUMBER THAT IS GOING
- IN THE KIOSK AT THE PARK AND
- OUTSIDE THE MASON.
- JUST LANDED MAYBE A MONTH AGO OR
- SO, WHAT THE WEEKLY TOTALS ARE
- WHEN YOU GET A CHANCE.
- >> **SURE**.
- >> THANK YOU, LADIES.
- >> THANK YOU.
- WE DON'T HAVE MANY PUBLIC
- TESTIMONY.
- I APPRECIATE YOU BOTH BEING HERE
- AND SHARING THE INFORMATION WITH US.
- WE LOOK FORWARD TO THE FOLLOW-UP
- PIECES OF INFORMATION.
  THANK YOU FOR YOUR WORK THAT YOU
- DO EVERY DAY.
- ON BE HALF OF THE RESIDENTS OF

THE CITY, THOSE MOST VULNERABLE. THANK YOU. THIS MEETING IS ADJOURNED. >> THANK YOU.