Washtenaw County Opioid Settlement Advisory Committee

Monday, April 6, 2026 11:30am-1pm
Hybrid; in person at the Washtenaw County Health Department (555 Towner St. Room 2102B, Ypsilanti, MI 48198) and virtual public participation via Microsoft Teams

APPROVED MEETING MINUTES

Members Present: Robert Colley, Pam Smith, Gina Dahlem, Marv Gundy, Tom Harding, Chris Frank, Angela Burchard, Mandy Debono, Molly Welch Marahar
Members Absent: Katie Abraham, Sheyonna Watson, Katie Scott
Others Present: WCHD staff: Juan Marquez, Jimena Loveluck, Patty Krause, Jeff Belmont, Payge Barnard
Public Attendees: Hannah Meissner, one additional attendee (did not join via Teams and did provide public comment, name unknown)

I. Call to Order: 11:35am
II. Roll Call: 11:36am
III. Approval of Agenda (Action): 11:36am
    a. Motioned by Pam Smith, seconded by Robert Colley, no discussion, none opposed, agenda approved as written
IV. Public Participation: none
V. Committee Response to Public Participation: N/A
VI. Approval of 03/02/26 Meeting Minutes (Action): 11:38am
    a. Motioned by Robert Colley, seconded by Pam Smith, none opposed, minutes approved as written
VII. Discussion Item(s)
    a. Updates & timeline: 11:40am
        i. Patty Krause and Jimena Loveluck from WCHD provided an update on anticipated timeline for OAC meetings & activities alongside anticipated timeline & activities for Emergency Fund Subcommittee; shared that the Emergency Fund Process may not need to go through the full Board of Commissioners reading & approval process pending further conversations with County Administration, meaning the Emergency Fund Subcommittee has more time to develop and approve the process to still have emergency funding available by summer 2026
    b. Public sharing: 11:45am
        i. Presentation request for funded organizations
            1. Marv expressed that requesting funded organizations present at and/or attend future OAC meetings would be a good start but not

enough– some need to see the job they're doing with the money they're spending

2. Pam expressed a desire for the Committee to be mindful of time and what the OAC is asking of these agencies and programs – should be sensitive to the privacy of clients' and organizations, especially considering sensitive programs (i.e., someone receiving treatment); there is a fine line between overseeing programs and 'policing' programs – need to trust that the funded organizations are doing what they said they'd be doing when they were awarded this funding through the open RFP
3. Marv expressed that he would not use the word policing, and there are separate spaces often for clients and staff – desire to shadow amongst the staff space; respect other committee member's opinion but don't agree
4. Molly asked what the goal of a site visit would be; Marv said engaging with these agencies in a professional manner as he had throughout his career – professional visit to ask questions with the goal of meeting them where they're at – talking to clients, staff, CEO – seeing everything from the ground up; more effective to meet them there to find out what's going on (e.g., not just seeing a picture of the Home of New Vision van from the transportation program – actually going, seeing the van, talking to the staff who operate the van about what they're seeing and doing)
5. Marv shared that these site visits could be done by another Subcommittee – 1 or 2 OAC members that go to visit sites and then report back to the full Committee
6. Molly expressed that there needs to be sensitivity with the populations served by opioid settlement funding; there is a power dynamic to be mindful of in doing visits – coming in as a funder holds power, may move differently in that space because of the funding relationship
7. Molly summarized the Committee's discussion on site visits – form a Subcommittee of 1-2 people who go visit the funded programs; form the Subcommittee after requesting that funded programs present at/join OAC meeting – give the expectation that OAC want to visit if possible, ask funded programs to prepare for discussion around feasibility of visiting the site when sending presentation request message
8. Marv expressed the importance of hearing directly from funded programs to stay fresh on what the problem is, identifying threats and weaknesses
9. Jimena Loveluck discussed the feasibility of funded program presentations at OAC meetings – there are 9 funded organizations, so more than one program needs to present at each meeting if

the Committee wants to hear from all organizations in a timely manner; WCHD will coordinate with funded organizations

ii. Patty Krause walked through examples of public sharing related to opioid settlement funding from King County, WA and MDHHS to give ideas and spur discussion for the public sharing that Washtenaw will do for opioid settlement funding
    1. Chris said at a minimum, public sharing should include the amount of money coming in, money going out, where funding is going, and what is being funded
    2. Molly expressed that Washtenaw should organize public sharing differently from King County; do not want to organize by the Exhibit E categories since that's less important and relevant for the public's understanding; instead organize around the categories used to determine where Washtenaw's opioid settlement funding went (harm reduction, prevention, treatment, recovery, and systems functioning)
    3. Robert suggested collecting data on the number of staff positions created by this funding and the number of people contacted/served (or number of 'touches' if engaging people multiple times) / services delivered by each of the programs
    4. Molly expressed interest in measuring increase in recovery capital, but was not sure how to measure that – Committee could think about ways to try to measure recovery capital
    5. Robert suggested collecting zip code of people served; Molly expressed that the ideal would be having resident zip codes of people served through the funding, but if that isn't available could use zip code of where program activities took place
        a. Molly named that zip code data would be a proxy for equity; making sure funds go to areas of the County with the most need

c. Available resources for opioid-related data: 12:11pm
    i. Patty Krause walked through available opioid-related surveillance data and opioid settlement information available on WCHD's website and shared additional external resources
        1. Discussed availability of zip-code level data for opioid-related overdose deaths; Patty Krause shared that that data is included in what WCHD receives from the ME office and will be shared with OAC at future meetings
        2. Tom raised a question around timeliness of EMS data; Juan Marquez shared that it is real-time surveillance (updated as responses occur)
        3. Question raised around who is tracking the naloxone distributions from the community vending machines; Gina shared that the naloxone comes from the state portal and there is somebody

tracking Washtenaw's naloxone distributions through the state, with Washtenaw's data available on the state dashboard

d. Community needs assessment & additional metrics of interest
    i. Patty Krause shared the tentative plan for a community needs assessment to be conducted summer 2026; WCHD plans to compile and review all available surveillance data before conducting additional focus groups to get a better understanding of ongoing opioid-related needs in the County; populations of interest for focus groups are community members with lived and living experience, as well as populations identified in the previous assessment – family members or loved ones, EMS providers, and non-English speakers
        1. Molly requested that the 2024 community assessment be linked on the opioid reports page of WCHD's website
        2. Tom suggested that the community assessment would be a good topic to discuss with the 9 funded organizations – namely whether they would be able to help pull focus groups together
        3. Molly recommended FAN for focus group recruitment; also suggested treatment programs pull participants from treatment groups or support groups
        4. Molly raised a question around having neutral facilitators for focus groups and what would that mean
        5. Marv raised a question around survey distribution and how to reach folks; suggested giving a short survey after groups interact on how the facilitator did, opinions on services received
            a. Question raised around whether the OAC could do those surveys with people using funded services to get a better idea of how those clients feel
        6. Molly mentioned it would also be interested to understand the perspectives of providers; understanding areas where reimbursement is especially low, perspective of what's going on on a systems-level
        7. Interest in gathering lived experience of providers – outlets for people in the work, capture their opinions and needs as the frontline people (i.e., what training do they need? How are they doing?)
            a. Molly expressed if you don't take care of the workforce, the workforce can't take care of you/the community
        8. Marv expressed interest in providing more opioid-related education, brought up idea of Opioid Summit; shared that many people didn't know that opioid settlement funding was coming into the County
        9. Gina raised a question on how to reach people who aren't engaged with the funded programs; maybe working with additional providers to reach more people

10. Molly expressed interest in promoting awareness of the opioid settlement funds and gathering input on what else is needed
11. Marv expressed that buses are good for getting information out – communication campaign on buses
12. Molly summarized the community needs assessment discussion; plan to do focus groups, maybe interest in surveys/something more quantitative, leveraging funded organizations and other organizations to facilitate and recruit for focus groups; also interest in data collection from providers, boots on the ground perspective, as well as systems-level understanding by talking with leadership at funded organizations and PIHPs
13. Chris suggested focus groups connect with direct service providers and folks in treatment; interest in understanding whether people can access the treatment they want on a timeline that works for them
14. Marv expressed a desire to look into what's happening long-term with families and loved ones of those impacted by opioids who may be impacted by second-hand trauma; what does that look like in the long run? Need long-term investment in opioid epidemic response as children of those impacted by opioids grow up
    a. Interest in quantifying the monetary value / cost of opioid-related deaths – the average dollars leaving the community
    b. Molly and Marv discussed previous WCHD opioid reports created by former employee that quantified years of life lost; Marv shared that former employee is now at WCSO and may be able to help with better measuring for impact (e.g., quantifying monetary cost and/or years of life lost); OAC agreed that those analyses may not be feasible for this needs assessment, but are of interest long-term

VIII. Adjournment: 12:49pm
   a. Motioned by Robert Colley, seconded by Gina Dahlem, none opposed, meeting adjourned at 12:49pm