

# Greater Middletown Opioids Task Force

Wednesday, December 21, 2022, 12pm

Virtual Meeting

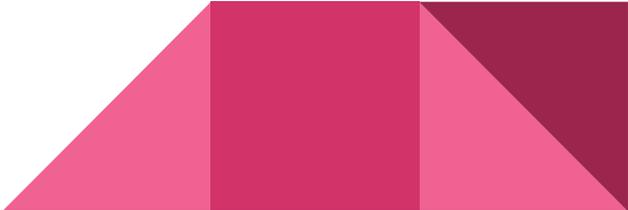
Co-Chairs:

Rev. Robyn Anderson, MS, LPC, LMFT, LADC  
Executive Director, Ministerial Health Fellowship

Kevin Elak, RS/REHS, CP-FS, Director of Health, City of  
Middletown Department of Health



# Agenda

- Welcome New Members
  - Data Updates
  - Workgroup Updates
  - Member Spotlights:
    - Catherine Rees, MPH, Director, Community Benefit, Middlesex Health
    - Maryellen Shuckerow, MHSA, Executive Director, St. Vincent de Paul Middletown
  - New Business
  - Standing Agenda Items
  - Updates
  - Member Announcements
- 

# Mission & Vision Statement

- Mission: To engage the Greater Middletown community in working together to promote opioid awareness, education, prevention, harm reduction and access to treatment thereby reducing opioid-related overdoses and deaths and building a healthy, safe and drug-free community.
- Vision: A community working together to prevent and to help people experiencing opioid use challenges.



# Opioid Overdoses Nonfatal and Fatal

November 14 – December 18, 2022

Cromwell, Durham, Middlefield, Middletown and Portland

# Opioid Overdoses Nonfatal and Fatal

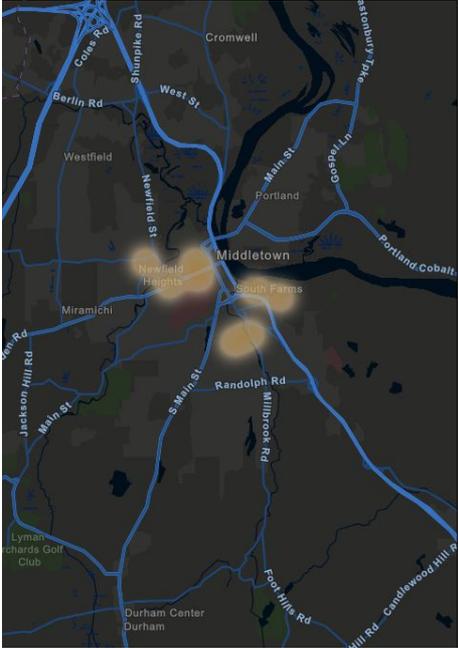


<b>Total Suspected Overdoses:</b>	<b>8</b>
<b>Suspected Fatal Overdoses:</b>	<b>0</b>
<b>Naloxone:</b>	<b>7</b>

November 14 – December 18, 2022  
Cromwell, Durham, Middlefield, Middletown and Portland



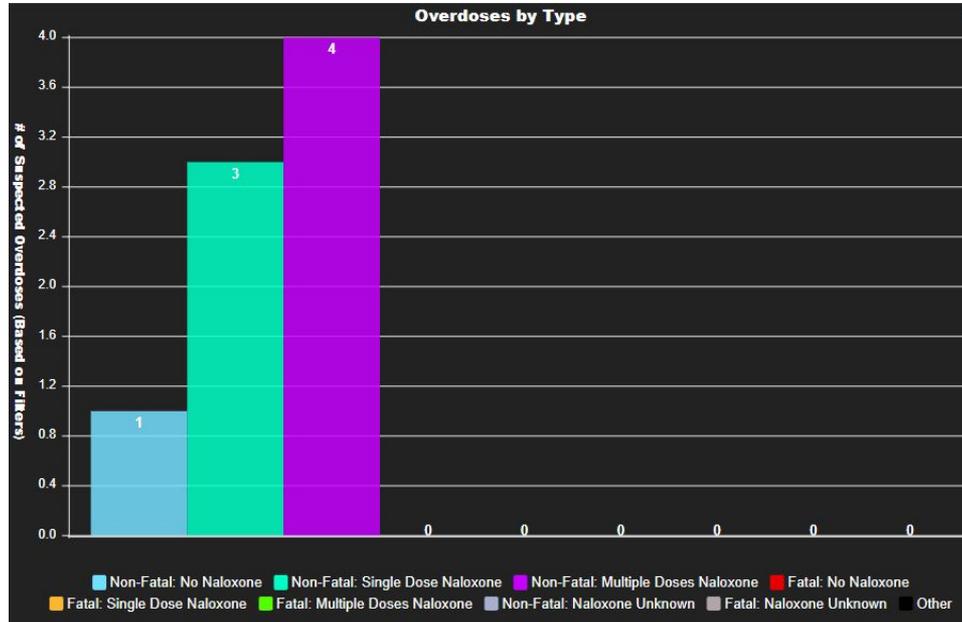
# Opioid Overdoses Heatmap (11.14.22 - 12.18.22)



<https://www.odmap.org:4443/>



# Overdoses by Type (11.14.22 - 12.18.22)

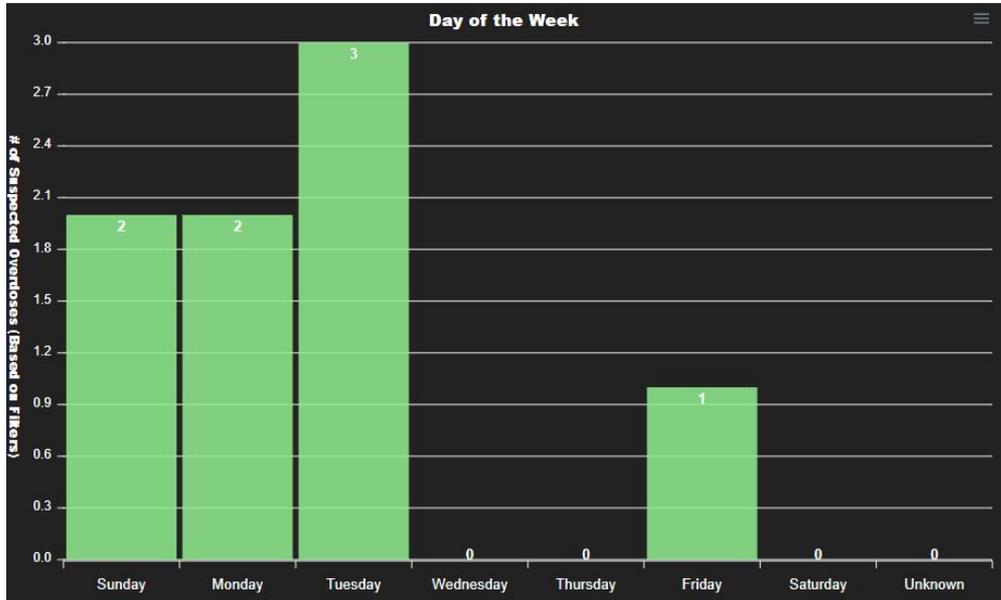


<https://www.odmap.org:4443/>



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# Overdoses by Days of the Week



<https://www.odmap.org:4443/>



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# 2022 Opioid Overdoses Nonfatal and Fatal



2022 data for 1) Total Suspected Overdoses; 2) Suspected Fatal Overdoses: and 3) Naloxone Administered for Cromwell, Durham, Middlefield, Middletown and Portland will be presented at a future task force meeting.





# Workgroup Updates

# Workgroup Updates

- **Access to Treatment**

- Purpose: To increase access to Substance Use Disorder services through improved communication and collaboration among stakeholders.
- Co-Chairs: Melissa Monroe, Rushford; Barry Richardson, CCAR
- Meets 3rd Friday of the month at 11am (Zoom)
- Report out



# Workgroup Updates

- **Education & Prevention**

- Purpose: To enhance community awareness and knowledge of the harmful impacts of opiate use in order promote prevention, reduce stigma and offer hope by centering those with lived experience and by providing education and training in collaboration with community partners.
- Chair: Alie Bates, Rushford
- Meets bi-weekly on Tuesday @ 9am (Zoom)
- Report out



# Workgroup Updates

- **Intervention (including Harm Reduction) - looking for a member to set up meetings, etc.**



# Workgroup Updates

- **Resource Awareness**

- Purpose: To facilitate awareness of prevention and treatment resources for substance use in the Greater Middletown community in order to increase access to services.
- Chair: Leanna Basque, intern (City of Middletown Department of Health)
- Meets 2nd Wednesday of the month @ 2pm (Zoom)
- Report out





# Member Spotlights

# Member Spotlight

**Catherine Rees, MPH**

Director, Community Benefit

Middlesex Health

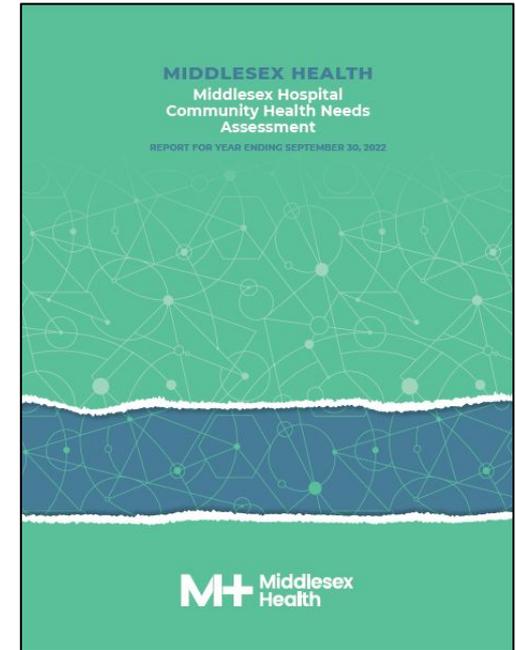
[catherine.rees@midhosp.org](mailto:catherine.rees@midhosp.org)



# Middlesex Hospital 2022 Community Health Needs Assessment (CHNA)

- Required to be completed by not-for-profit hospitals every 3 taxable years per IRS section 501(r)
- Includes:
  - Primary, secondary, quantitative and qualitative data sources
  - Key health and well-being indicators
  - Benchmarked data against the state of Connecticut whenever possible
  - Disaggregated data whenever possible (lack of available data disaggregated by race and ethnicity is a limitation)
- Primary Data:
  - DataHaven 2021 Community Wellbeing Survey (n = 264)
  - Middlesex Health CHNA Community Survey (n = 204)
- Secondary Data:
  - DataHaven Connecticut Hospital Association ChimeData study (21 health and health-related indicators)
  - Available data sources (e.g., 2-1-1 CT; CT Data Collaborative; County Health Rankings & Roadmaps; CT Data.Gov; U.S. Census Bureau, etc.)
- Prioritizes:
  - Social Determinants of Health
  - Health Equity
  - Telling the Middlesex Health System service area data story
- Next Steps: Community Conversation to inform CHNA Implementation Strategy

*Please let me know if you'd like a printed copy!*

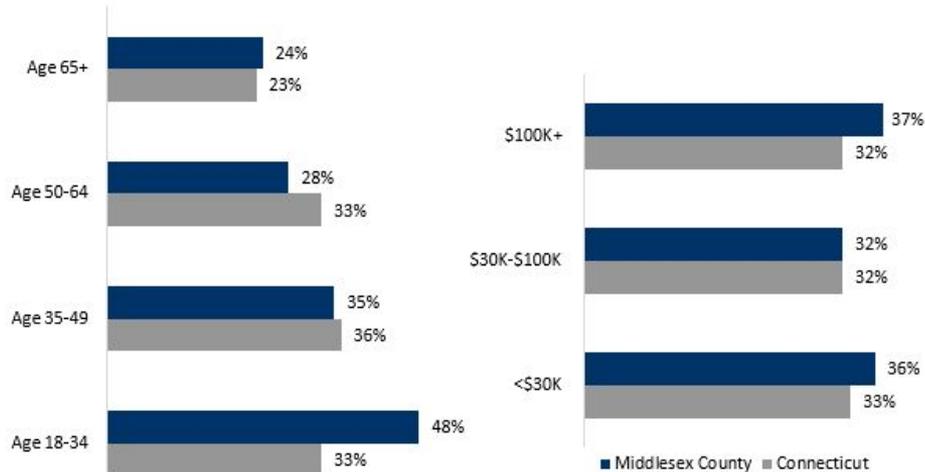


[Middlesex Health CHNA Link](#)

# DataHaven 2021 Community Wellbeing Survey - Opioid Use

- Respondents were asked questions about prescription painkillers and opiate use, specifically, *“do you personally know anyone who has struggled with misuse or addiction to heroin or other opiates such as prescription painkillers at any point during the last 3 years?”*
- Total “Yes” responses: 33% for Middlesex County and 31% for the state of Connecticut

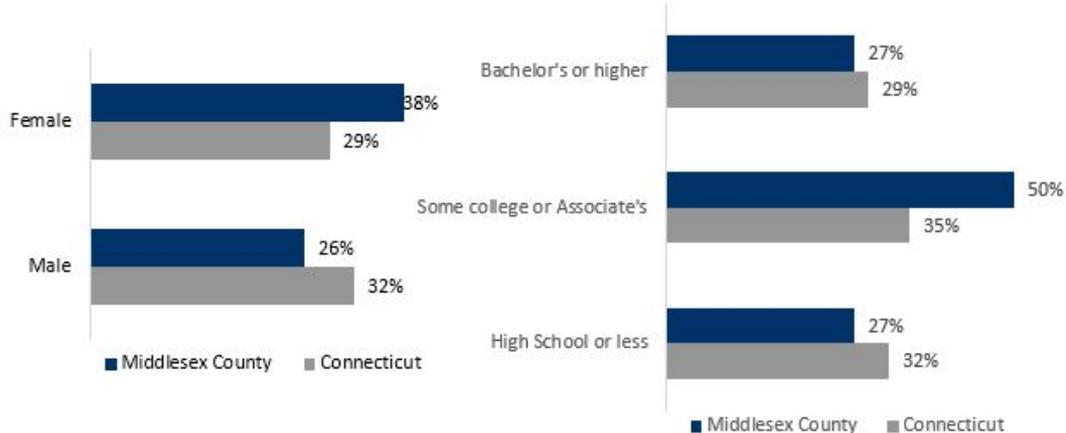
Figures 178a & b - “Yes” Responses for “Do You Know Anyone who has Struggled with Opiate Use?” by Age and Income Level, 2021



# DataHaven 2021 Community Wellbeing Survey - Opioid Use

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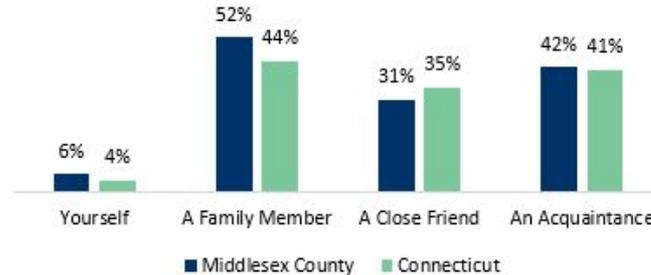
Figures 178c & d - “Yes” Responses for “Do You Know Anyone who has Struggled with Opiate Use?” by Gender and Income Level, 2021



# DataHaven 2021 Community Wellbeing Survey - Opioid Use

- Respondents who answered “Yes” to the question “do you personally know anyone who has struggled with misuse or addiction to heroin or other opiates such as prescription painkillers at any point during the last 3 years?” were asked the follow-up question “(If yes) who do you know that has struggled with this at any point during the past 3 years? Is it...”

Figure 179 - Middlesex County & Connecticut Responses for “Who do you Know that has Struggled with Opiate Use?”, 2021



DataHaven Community Wellbeing Survey, 2021

# Accidental Drug-Related Deaths

- Total accidental drug-related deaths for 2019, 2020 and 2021 for all the towns in Middlesex Health's service area
- Notes when deaths are due "any opioid" and describes if there was Fentanyl involvement for "any opioid" related deaths

Table 29 - Accidental Drug Related Deaths, 2019 - 2021

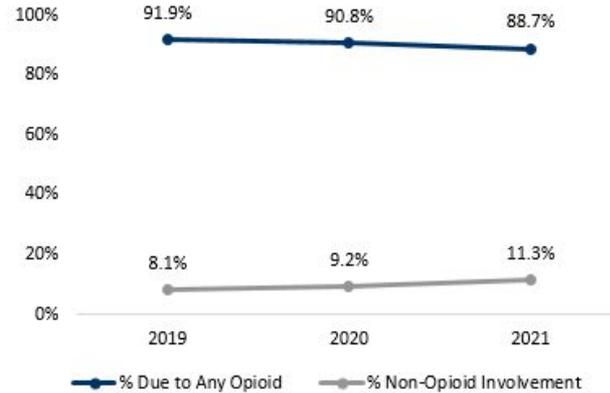
Location	2019 Any Opioid	2019 Fentanyl	2019 Total	2020 Any Opioid	2020 Fentanyl	2020 Total	2021 Any Opioid	2021 Fentanyl	2021 Total
Chester	0	0	0	2	2	2	0	0	0
Clinton	1	0	1	3	3	4	5	5	6
Colchester	3	3	4	5	5	6	4	4	4
Cromwell	1	1	1	2	2	2	1	1	3
Deep River	1	1	1	1	1	1	0	0	0
Durham	2	2	2	0	0	0	0	0	0
East Haddam	2	2	2	0	0	1	0	0	0
East Hampton	3	1	3	4	4	4	2	2	2
Essex	0	0	1	0	0	0	0	0	0
Haddam	0	0	0	1	1	2	0	0	0
Killingworth	1	0	1	0	0	0	1	1	1
Lyme	0	0	0	0	0	0	1	1	1
Marlborough	1	1	1	1	1	1	1	0	1
Middlefield	0	0	0	2	1	2	0	0	0
Middletown	13	10	13	25	20	25	30	28	33
Old Lyme	0	0	0	0	0	1	3	3	3
Old Saybrook	1	1	1	3	3	3	2	0	3
Portland	1	1	2	6	6	6	2	2	2
Westbrook	4	2	4	4	3	5	3	3	3
<b>Total</b>	<b>34</b>	<b>25</b>	<b>37</b>	<b>59</b>	<b>52</b>	<b>65</b>	<b>55</b>	<b>50</b>	<b>62</b>

Connecticut Data Collaborative, <https://data.ct.gov/Health-and-Human-Services/Accidental-Drug-Related-Deaths-2012-2021>

# Accidental Drug-Related Deaths

- Accidental drug-related deaths in Middlesex Health's service area due to "any opioid" accounts for the majority of accidental drug-related deaths

**Figure 181** - Percent of Accidental Drug-Related Death Due to "Any Opioid", All Towns in Service Area, 2019 - 2021

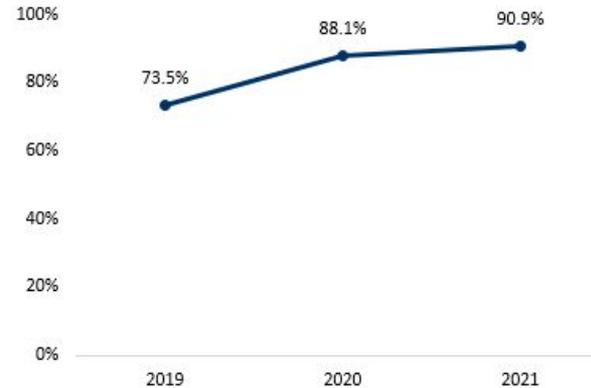


Connecticut Data Collaborative, <https://data.ct.gov/Health-and-Human-Services/Accidental-Drug-Related-Deaths-2012-2021>

# Accidental Drug-Related Deaths

- Figure 182: Accidental drug-related deaths in Middlesex Health's service area due to "any opioid" and had Fentanyl involvement
- There is a significant upward trend for Fentanyl involvement between the years of 2019 – 2021

**Figure 182** - Percent of Accidental Drug-Related Death Due to "Any Opioid" with Fentanyl Involvement, All Towns in Service Area, 2019 - 2021

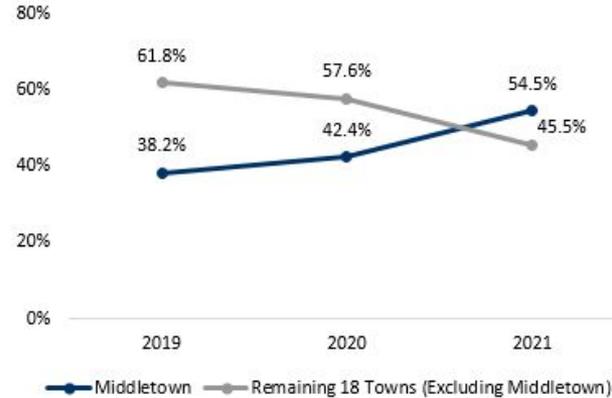


Connecticut Data Collaborative, <https://data.ct.gov/Health-and-Human-Services/Accidental-Drug-Related-Deaths-2012-2021>

# Accidental Drug-Related Deaths

- Here, Middletown is extracted from the remaining towns in Middlesex Health's service area and the total percentages of accidental drug-related deaths due to "any opioid" is compared between the two geographic areas
- There has been a steady upward trend for accidental drug-related deaths due to "any opioid" in Middletown with a significant increase in 2021

**Figure 183** - Percent of Accidental Drug-Related Death Due to "Any Opioid", Middletown Compared to Remaining Towns in Service Area, 2019 - 2021

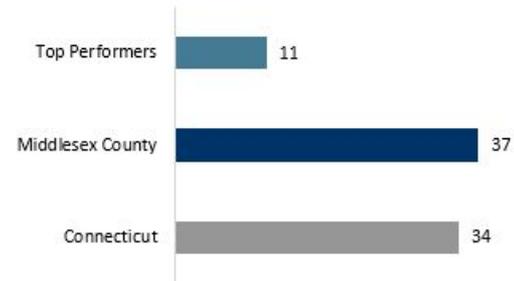


Connecticut Data Collaborative, <https://data.ct.gov/Health-and-Human-Services/Accidental-Drug-Related-Deaths-2012-2021>

# Accidental Drug-Related Deaths - Rate

- Figure 184: Rate of drug overdose deaths per 100,000 population, comparing Middlesex County to the state of Connecticut and the County Health Ranking and Roadmaps top U.S. performers, defined as those counties setting a benchmark by performing in the top 10th percentile for drug overdose deaths

**Figure 184** - Drug Overdose Deaths per 100,000 Population, 2018-2020



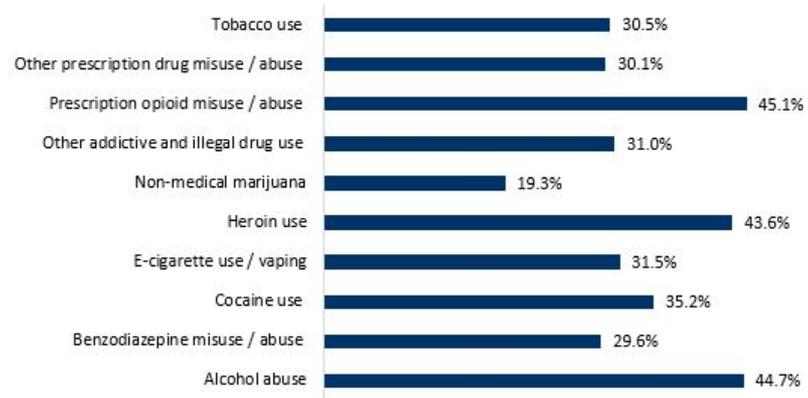
County Health Rankings & Roadmaps 2022, <https://www.countyhealthrankings.org/>; National Center for Health Statistics (NCHS), National Vital Statistics System (NVSS), CDC WONDER, 2018-2020

*For this metric, deaths are counted in the county of residence for the person who died rather than the county where the death occurred, and includes deaths from accidental, intentional, and undetermined drug poisoning over a three-year period (County Health Ranking and Roadmaps, 2022)*

# Middlesex Health Community Survey

- Respondents were given a list of substance usage and were asked them to rate the degree to which they believe each option influences the health and well-being status of the community using a Likert scale of 1 to 5
- Figure 95a describes the percentage of respondents who selected “significant impact on community health and well-being”

**Figure 95a - Substance Use / Abuse: Percent of Responses for “Significant Impact on Community Health and Well-being”, 2022**



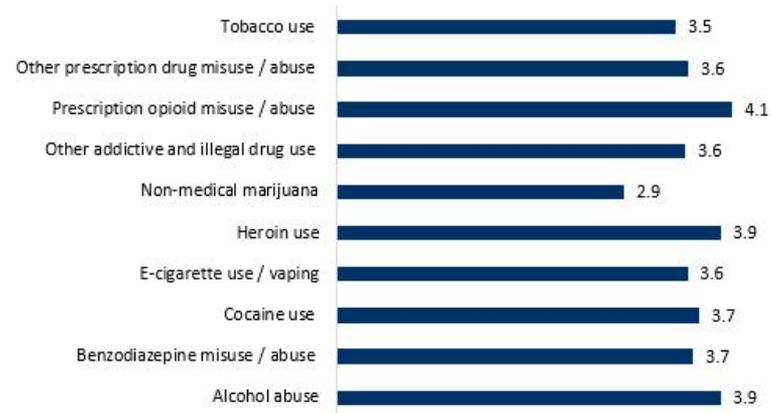
Likert scale:

- 1 = limited impact on community health and well-being
- 3 = moderate impact on community health and well-being
- 5 = significant impact on community health and well-being

# Middlesex Health Community Survey

- Respondents were given a list of substance usage and were asked them to rate the degree to which they believe each option influences the health and well-being status of the community using a Likert scale of 1 to 5
- Figure 95b gives the weighted average of the 1 to 5 response options

Figure 95b - Substance Use / Abuse: Weighted Average for "Impact on Community Health and Well-being", 2022



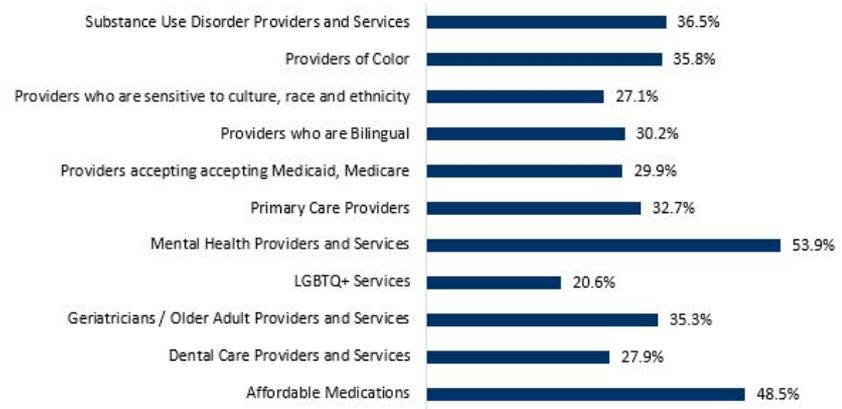
Likert scale:

- 1 = limited impact on community health and well-being
- 3 = moderate impact on community health and well-being
- 5 = significant impact on community health and well-being

# Middlesex Health Community Survey

- Respondents were asked about health care access and asked to consider the following when thinking about accessing health care services: number of providers, affordability, ease of getting an appointment, hours of operation, whether practices are accepting new patients, etc.
- Respondents were asked to rate the degree to which they agreed that there was **not** enough access to each statement using a Likert scale of 1 to 5
- Figure 97a describes the percentage of respondents who selected “strongly agree”

Figure 97a - Health Care Access: Percent of Responses for “Strongly Agree” there is Not Enough Access, 2022



Likert scale:

- 1 = strongly disagree
- 3 = moderately/somewhat agree
- 5 = strongly agree

# Middlesex Health Community Survey

- Respondents were asked about health care access and asked to consider the following when thinking about accessing health care services: number of providers, affordability, ease of getting an appointment, hours of operation, whether practices are accepting new patients, etc.
- Respondents were asked to rate the degree to which they agreed that there was **not** enough access to each statement using a Likert scale of 1 to 5
- Figure 97b gives the weighted average of the one to five response options.

Figure 97b - Health Care Access: Weighted Average for "Strongly Agree" there is Not Enough Access, 2022



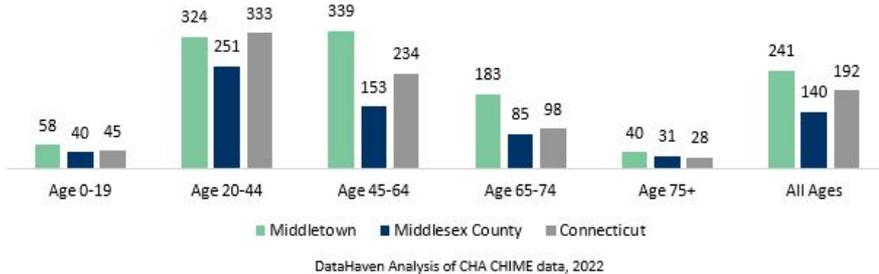
Likert scale:

- 1 = strongly disagree
- 3 = moderately/somewhat agree
- 5 = strongly agree

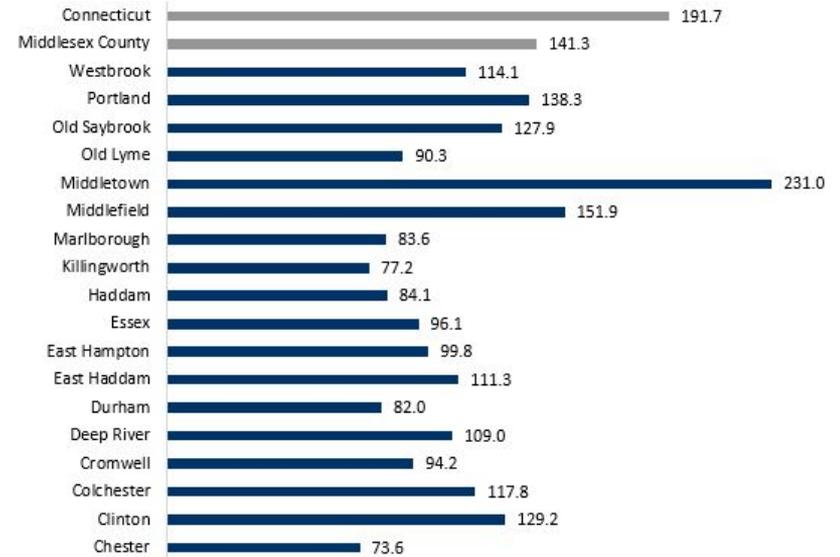
# DataHaven ChimeData Study - Substance Use Disorder Indicator

- ChimeData extraction includes de-identified hospital information for emergency department, inpatient and observation encounters - by primary and secondary diagnoses - incurred by any residents of any town in Connecticut regardless of where the individual received treatment.

**Figure 171 - Substance Use Disorder, Annualized Encounter Rates per 10,000 Residents by Age, 2018-2021**



**Figure 172 - Substance Use Disorder, Annualized Age-Adjusted Encounter Rates per 10,000 Residents by Town, 2018-2021**



DataHaven Analysis of CHA CHIME data, 2022

# Member Spotlight

**Maryellen Shuckerow, MHSA**  
Executive Director  
St. Vincent de Paul Middletown  
[maryellen@svidmiddletown.org](mailto:maryellen@svidmiddletown.org)



St. Vincent de Paul  
Middletown

MEETING NEEDS, OFFERING HOPE.



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# New Business

# Branding - Review in January 2023

- Develop a task force logo?
- Add list of partners?



# Greater Middletown Area Opioids Task Force - Review in January 2023

- Defining our geography



# Standing Agenda Items

# Standing Agenda Items

- Opioids Settlement Funds
  - "Wish List":
    - Funding for billboard and bus messaging
- Website Development

■ JUSTICE

## Connecticut to get \$127M from CVS, Walgreens in opioid settlement



by Mark Pazniokas

December 12, 2022 @ 4:46 pm



[https://ctmirror.org/2022/12/12/ct-opioid-settlement-funds-cvs-walgreens/?utm\\_source=Connecticut%20Mirror%20Mailing%20List&utm\\_campaign=016fc5b58c-CT%20Mirror%20Afternoon%20Briefing&utm\\_medium=email&utm\\_term=0\\_571d22f8e4-016fc5b58c-68244153&mc\\_cid=016fc5b58c&mc\\_eid=3aca14c522](https://ctmirror.org/2022/12/12/ct-opioid-settlement-funds-cvs-walgreens/?utm_source=Connecticut%20Mirror%20Mailing%20List&utm_campaign=016fc5b58c-CT%20Mirror%20Afternoon%20Briefing&utm_medium=email&utm_term=0_571d22f8e4-016fc5b58c-68244153&mc_cid=016fc5b58c&mc_eid=3aca14c522)



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Updates

# New Billboard on Newfield Street



# Updates

## An Act Concerning Emergency Intervention by a Police Officer

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OLR Bill Analysis  
sHB 5191

**AN ACT CONCERNING EMERGENCY INTERVENTION BY A POLICE OFFICER WHEN A PERSON IS INCAPACITATED BY DRUGS OR DUE TO A MEDICAL EMERGENCY.**

### SUMMARY

This bill expands a police officer's duty to take certain incapacitated individuals into protective custody. As under current law for those incapacitated by alcohol, the bill requires police officers, upon finding someone who appears to be incapacitated by drugs or due to a medical emergency, to take the person into protective custody and bring the person to a (1) treatment facility that provides medical triage or (2) hospital.

The bill similarly expands current requirements on treatment facilities, hospitals, and their medical officers regarding those brought to them who appear to be incapacitated by alcohol to also cover those who may be incapacitated by drugs or due to a medical emergency. This includes determining whether the person requires inpatient treatment.

The bill also makes technical changes.

EFFECTIVE DATE: October 1, 2022

### POLICE ACTIONS

Under existing law for someone incapacitated by alcohol and the bill, for someone incapacitated by drugs or due to a medical emergency, taking someone into protective custody is not an arrest and no record may be made to indicate that a person has been arrested or charged with a crime. Police must make every reasonable effort to protect the health and safety of someone they take into this custody and may take reasonable steps to protect themselves.

### MEDICAL ACTIONS

Researcher: GM

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4/5/22



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# Updates - In The Headlines



[https://www.washingtonpost.com/investigations/interactive/2022/dea-fentanyl-failure/?utm\\_campaign=wp\\_post\\_most&utm\\_medium=email&utm\\_source=newsletter&wpisrc=nl\\_most&carta-url=https%3A%2F%2Fs2.washingtonpost.com%2Fcar-in-tr%2F388e457%2F639763439d88976ba351003d%2F5ef7d1a7ade4e276b3bfd00%2F8%2F70%2F639763439d88976ba351003d&wp\\_cu=6b4426a51309ed9ddb2b39ba0a3f1433%7CA919A61876151A4EE0530100007F30DD](https://www.washingtonpost.com/investigations/interactive/2022/dea-fentanyl-failure/?utm_campaign=wp_post_most&utm_medium=email&utm_source=newsletter&wpisrc=nl_most&carta-url=https%3A%2F%2Fs2.washingtonpost.com%2Fcar-in-tr%2F388e457%2F639763439d88976ba351003d%2F5ef7d1a7ade4e276b3bfd00%2F8%2F70%2F639763439d88976ba351003d&wp_cu=6b4426a51309ed9ddb2b39ba0a3f1433%7CA919A61876151A4EE0530100007F30DD)



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# Updates - In The Headlines

U.S. Department of Health & Human Services



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## Newsroom

- 42 CFR part 8 – NPRM FAQs
- Coronavirus (COVID-19)
- Monkeypox (MPV)
- SAMHSA Blog
- Media Guidelines for Bullying Prevention
- Press Announcements
- Statements
- Logo Use Guidelines

### SAMHSA Proposes Update to Federal Rules to Expand Access to Opioid Use Disorder Treatment and Help Close Gap in Care

Tuesday, December 13, 2022

*Changes Would Make Permanent COVID-Timed Medication Flexibilities, and Update Decades-Old Definitions and Standards for Opioid Treatment Programs at a time when fewer than 1 out of 10 Americans can access treatment for substance use disorder*

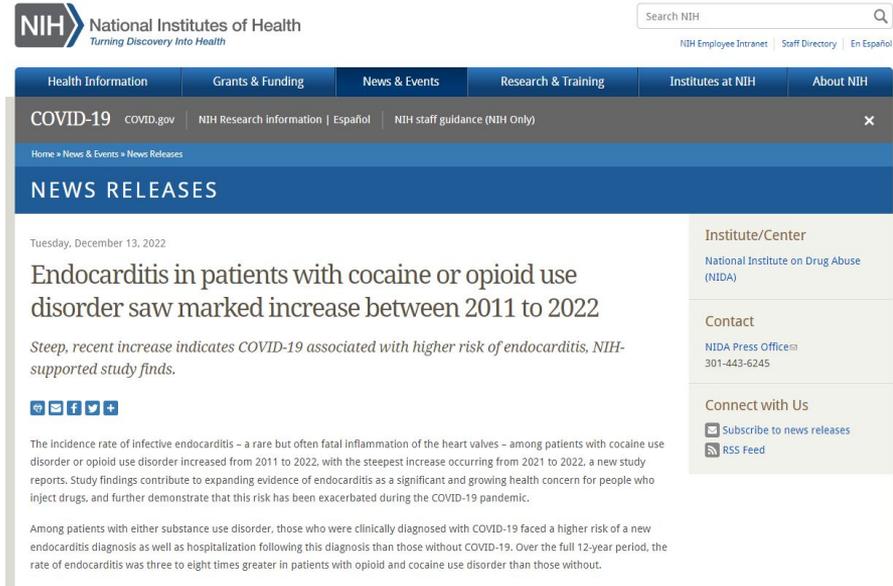
The U.S. Department of Health and Human Services (HHS), through its Substance Abuse and Mental Health Services Administration (SAMHSA), is proposing to expand access to treatment for opioid use disorder (OUD) at a time when more than 107,000 Americans lost their lives to an overdose last year. The proposal would update the federal regulations that oversee OUD treatment standards as part of HHS' Overdose Prevention Strategy that supports President Biden's *National Drug Control Strategy* – a whole-of-government approach to beat the overdose epidemic. Specifically, the proposed rule change would allow Americans to access the treatment by allowing take home doses of methadone and the use of telehealth in initiating buprenorphine at opioid treatment programs (OTPs).

In its Notice of Proposed Rulemaking (NPRM) to update 42 CFR Part 8, SAMHSA is proposing to improve Americans' access to and experiences with OUD treatment, in particular through OTPs. The proposed changes reflect the widespread desire by many stakeholders for SAMHSA to provide greater autonomy to OTP practitioners, positively support recovery, and continue flexibilities that were extended at the start of the nation's COVID-19 public health emergency.

[https://www.samhsa.gov/newsroom/press-announcements/20221213/update-federal-rules-expand-access-opioid-use-disorder-treatment?utm\\_source=SAMHSA&utm\\_campaign=b1e4fe15a4-EMAIL\\_CAMPAIGN\\_2022\\_12\\_13\\_02\\_04&utm\\_medium=email&utm\\_term=0\\_b1e4fe15a4-%5BLIST\\_EMAIL\\_ID%5D](https://www.samhsa.gov/newsroom/press-announcements/20221213/update-federal-rules-expand-access-opioid-use-disorder-treatment?utm_source=SAMHSA&utm_campaign=b1e4fe15a4-EMAIL_CAMPAIGN_2022_12_13_02_04&utm_medium=email&utm_term=0_b1e4fe15a4-%5BLIST_EMAIL_ID%5D)



# Updates - In The Headlines



The screenshot shows the NIH website's news release page. At the top is the NIH logo and navigation menu. A search bar is located in the upper right. Below the navigation is a COVID-19 banner with links to COVID.gov, NIH Research Information, Español, and NIH staff guidance. The main heading is "NEWS RELEASES". The featured article is dated Tuesday, December 13, 2022, and is titled "Endocarditis in patients with cocaine or opioid use disorder saw marked increase between 2011 to 2022". The sub-headline reads: "Steep, recent increase indicates COVID-19 associated with higher risk of endocarditis, NIH-supported study finds." Below the headline are social media sharing icons. The article text begins with: "The incidence rate of infective endocarditis – a rare but often fatal inflammation of the heart valves – among patients with cocaine use disorder or opioid use disorder increased from 2011 to 2022, with the steepest increase occurring from 2021 to 2022, a new study reports. Study findings contribute to expanding evidence of endocarditis as a significant and growing health concern for people who inject drugs, and further demonstrate that this risk has been exacerbated during the COVID-19 pandemic." The second paragraph states: "Among patients with either substance use disorder, those who were clinically diagnosed with COVID-19 faced a higher risk of a new endocarditis diagnosis as well as hospitalization following this diagnosis than those without COVID-19. Over the full 12-year period, the rate of endocarditis was three to eight times greater in patients with opioid and cocaine use disorder than those without." On the right side of the article, there is a sidebar with "Institute/Center" (National Institute on Drug Abuse (NIDA)), "Contact" (NIDA Press Office: 301-443-6245), and "Connect with Us" (Subscribe to news releases, RSS Feed).

<https://www.nih.gov/news-events/news-releases/endocarditis-patients-cocaine-or-opioid-use-disorder-saw-marked-increase-between-2011-2022>



# Updates - In The Headlines



TOPICS PROJECTS FEATURES ABOUT GET INVOLVED SEARCH

Stateline

## As Fentanyl Use Spikes, Feds Urge States to Ease Methadone Rules

STATELINE ARTICLE | December 19, 2022 | By: Christine Vestal | Read time: 5 min

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A man injects a Narcan nasal spray into the nose of a drug user who appears to have overdosed. The Biden administration is proposing to relax regulations on addiction medications to make it easier for more people to use them.

Joe C. Hong/The Associated Press

AUTHORS



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Staff Writer  
Stateline

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Stateline Daily

Daily update — original reporting on state policy, plus the day's five top reads from around the web.

[https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2022/12/19/as-fentanyl-use-s-pikes-feds-urge-states-to-ease-methadone-rules?utm\\_campaign=2022-12-19+SD&utm\\_medium=em ail&utm\\_source=Pew&subscriberkey=00Q7V00001oDNuRUAW](https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2022/12/19/as-fentanyl-use-s-pikes-feds-urge-states-to-ease-methadone-rules?utm_campaign=2022-12-19+SD&utm_medium=em ail&utm_source=Pew&subscriberkey=00Q7V00001oDNuRUAW)



Public Health  
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Middletown Health Department

# Updates

Any member updates since our last meeting? Please share!



# Announcements

# Any Additional Announcements?



# Next Meeting

- Wednesday, January 18, 12pm, Zoom

