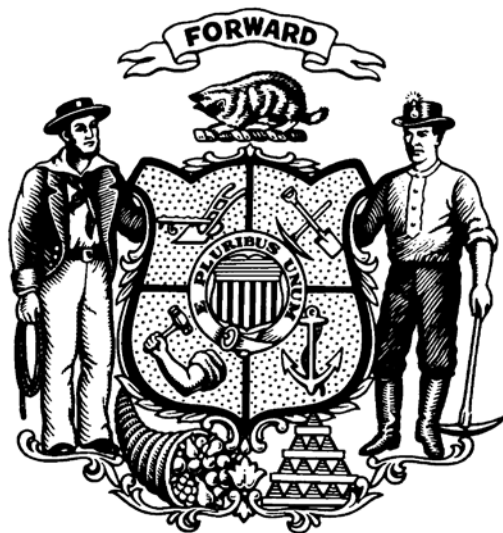


WISCONSIN STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE



**June 1, 2018
MEETING**

**Duncan ShROUT
Chairperson**

**SCOTT WALKER
Governor**

Tobacco-Free Environment

The Wisconsin Department of Agriculture, Trade and Consumer Protection (DATCP) is a tobacco-free environment. We prohibit the use of tobacco products everywhere, by anyone, at all times.

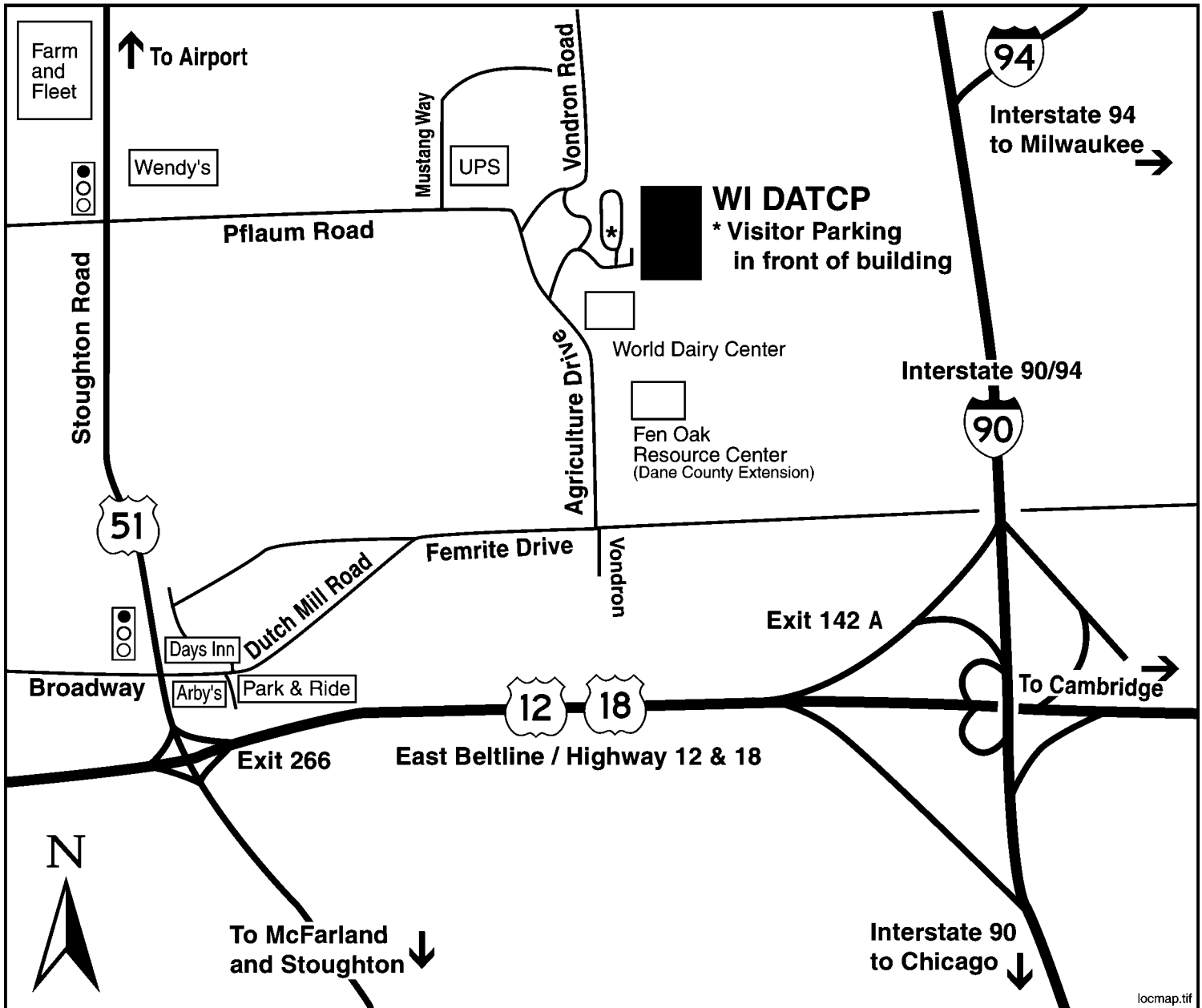
- Use of tobacco products is prohibited in all interior and exterior spaces, including inside your vehicle while on company property and in parking ramps and parking lots.
- We ask that you refrain from using tobacco products while using our facility.

Thank you for your cooperation. We welcome you and look forward to serving you!



Location Map

Wisconsin Department of Agriculture, Trade & Consumer Protection
2811 Agriculture Drive, Madison, WI 53718-6777



Directions: From Highway 12/18 (S. Beltline), exit at Highway 51 North (Stoughton Road) and immediately turn right on E. Broadway/Dutch Mill Road. Follow this as it curves and becomes Femrite Drive. You will turn left onto Agriculture Drive (formerly Vondron Road). Follow Agriculture Drive to the entrance to the Prairie Oak State Office Building on the right. Our building is at the top of the hill. Parking is in the visitor's lot near the front entrance to the building.

Directions: From I-90, take the Highway 12/18 (S. Beltline) exit. Stay in the right lane and exit at Highway 51 North (Stoughton Road) and immediately turn right on E. Broadway. Follow this as it curves and becomes Femrite Drive. You will turn left onto Agriculture Drive. Follow Agriculture Drive to the entrance to the Prairie Oak State Office Building on the right. Our building is at the top of the hill. Parking is in the visitor's lot near the front entrance to the building.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

June 1, 2018, 9:30 AM to 2:30 PM
WI Dept. of Agriculture, Trade and Consumer Protection
2811 Agriculture Drive, Madison, WI 53708
1st Floor Board Room

MEETING AGENDA

1. Welcome and introductions.....Duncan Shrout, SCAODA Chairperson
2. Approval of March 2, 2018 meeting minutes.....p. 6
3. Public input (maximum five minutes per person).....Duncan Shrout
4. Committee reports:
 - ✓ Update on 2018-22 Council Strategic Planning
 - ✓ Election of SCAODA Officers in September
 - Diversity Committee.....Thai Vue... p. 13
 - ✓ Update on CLAS Standards Training in DHS
 - Intervention & Treatment Committee...Norman Briggs & Roger Frings.....p. 18
 - ✓ Update on Act 262 impact on SAC certification
 - ✓ Children, Youth and Family Treatment Sub-Committee
 - Planning and Funding Committee.....Duncan Shrout..... p. 35
 - Prevention Committee.....Carolyn Miller..... p. 42
 - ✓ Workplace Prevention Ad Hoc Committee



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851

Madison, Wisconsin 53707-7851

**STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE
MEETING MINUTES**

March 2, 2018

9:30 a.m.

Wisconsin Department of Agriculture, Trade and Consumer Protection - Madison, WI

Members present: Subhadeep Barman, Sen. Janet Bewley, Chris Borgerding (Rep. John Nygren), Norman Briggs, Jennifer Fyock (Craig Harper), Jan Grebel (Dave Ross), Sandy Hardie, Brenda Jennings (Tony Evers), Mike Knetzger, Caroline Miller, Brian Radday (Sen. LeMahieu), Sue Shemanski, Ryan Shogren, Duncan ShROUT, Dawn Spencer (Autumn Lacy), Christine Ullstrup, Thai Vue

Members excused: Rep. Jill Billings, Jennifer Malcore, Kristi Sullivan (Thad Schumacher)

Ex-officio Members present: BJ Dernbach (Mike Allen), Lori Kirchgatter (Mike Ayers), Brittany Lewin (Laura Gutierrez), Mishelle O'Shasky, Matthew Sweeney, Mark Wegner, Dashal Young

Ex-officio Members excused: Gary Bennett (Ray Cross), Roger Frings, David Galbis-Reig, Katie Roberts, Ann Sievert (Beth Swedeon)

Staff: Joyce Allen, Holly Audley, Beth Collier, LeeAnn Mueller, Sarah Coyle, Jason Cram, Mike Derr, Lorie Goeser, Raina Haralampopoulos, Bernestine Jeffers, David Nelson, Christy Niemuth, Kristine Palmer, Dennis Radloff, Kate Rifken, Gary Roth, Joann Stephens, Scott Stokes, Mai Zong Vue, Allison Weber, Alex Wright-O'Neil

Guests: Sue Gudenkauf, Raeanna Johnson, Denise Johnson, Lindsay Just, Paul Krupski, Joe Muchka, Tera Carter Vorpahl, Mary Thompson, Megan Sulikowski, Jessica Geschke, Eugenia Sousa, Bill Lauer, Harold Gates, Mary Rasmussen, Chris Wardlow, Terri Alm, Andrew Whitacre (by phone)

Call to Order: Duncan ShROUT called the meeting to order at 9:36 a.m.

Introductions: Members introduced themselves.

Approval of December 8, 2017 Minutes: Thai Vue moved to approve the December 8, 2017 minutes, seconded by Christine Ullstrup. Norman Briggs offered several minor corrections, and the motion was approved unanimously after corrections were made.

Public input: Staff members from the Department of Health Services (DHS) announced the Opioid Forum, which will take place in Milwaukee on April 11 and 12. DHS is coordinating the event.

Committee Reports:

Executive Committee – The Executive Committee last met on February 5th. Duncan Shroud noted that Norman Briggs testified to the Wisconsin Legislature on how proposed DSPS rule changes and new legislation (AB 907) would impact substance abuse certification standards. The Executive Committee determined the process for the development of a 2018-2022 Strategic Plan. Shroud discussed the need to recruit Council officers going forward – Norman Briggs, Sandy Hardie, and Duncan Shroud do not plan on seeking re-election to their officer positions, and they are currently looking for new SCAODA leadership. Also, Duncan Shroud presented a certificate of appreciation to Mary Rasmussen for her 12 years of service to SCAODA and the Prevention Committee.

Diversity Committee – The Diversity Committee last met on February 2nd. Thai Vue reported that the committee has continued to work on providing training on implementing CLAS standards. The committee also held discussions on the changes in licensure rules at DSPS, the annual Mental Health and Substance Use Recovery Conference, and how to effectively carry out SCAODA’s mission under a lens of diversity. Senator Bewley asked if there is currently Native American representation on the committee. Sandy Hardie replied that they are currently seeking a representative.

Intervention and Treatment Committee – Norman Briggs presented the Comments on Proposed Changes to WI administrative rule chapters SPS 160-168, found on pages 25 and 26 of the March 2, 2018 SCAODA booklet. Senator Bewley asked if SCAODA’s name would be changed because of current attitudes towards the term “substance abuse” – Briggs replied that he agreed with the change, and that SCAODA’s name should change to reflect those values. Briggs also noted that DHS staff person Jason Cram is doing a good job with re-energizing the Children, Youth and Family Treatment Sub-committee, which has recently resumed meetings.

Planning and Funding Committee – The Planning and Funding Committee last met on January 18, 2018. Duncan Shroud reported that the Committee will have new chair, Christine Ullstrup, to replace him. Soon, the committee will be adding a member from Dane County Dept. of Human Services to replace Todd Campbell, who is resigning from the Committee.

Prevention Committee – The Prevention Committee last met on January 18, 2018. Chris Wardlow gave the update. He announced that Caroline Miller is presently serving as the new Committee chair. Wardlow also provided updates on the GLITC (Great Lakes Intertribal Council), the Dose of Reality campaign, drug lock boxes, naloxone training, and community

education events. Mishelle O'Shasky wondered whether there's any danger from exposing children to knowledge and dialogues from programs such as Dose of Reality.

Presentations from the Substance Abuse Block Grant and Other Grant-funded Programs:

ED2Recovery Coach Program/Wisconsin Voices for Recovery – Caroline Miller, Jessica Geschke, Mary Thompson, and Megan Sulikowski of Wisconsin Voices For Recovery presented on the ED2Recovery Coach Program. A copy of the slideshow is available on the SCAODA webpage. Thai Vue asked if there would be any outreach to minority communities in Wisconsin. Miller replied that underrepresented communities are an important part of the recovery community, and program staff are looking to better address issues in diverse communities. Subhadeep Barman asked what grant ED2Recovery is supported by, and Miller replied that they are funded with Substance Abuse Block Grant funds. The program is looking to engage with the private sector as well to diversify their funding. Denise Johnson asked if there were certified SUD coaches in the program; Geschke confirmed that there are. Mike Knetzger requested to make providers more aware of the recovery coaches available. Barman asked if recovery coaches are monitored to make sure they are still in recovery, and Geschke confirmed that they have regular check-ins.

Meta House – Christine Ullstrup gave a presentation on Meta House residential treatment and outreach programming. A copy of the slideshow is available on page 60 of the March 2, 2018 SCAODA booklet. Meta House uses promising strategies including motivational interviewing, EMDR, DBT, parenting coaching, nurturing classes, recreational therapy, occupational training, and other family services. Thai Vue asked about father involvement within Meta House; Ullstrup replied that there is a staff member who is dedicated to getting fathers involved in treatment.

United Community Center – Eugenia Sousa gave a presentation on the residential treatment and community programming of United Community Center in Milwaukee, which is dedicated to serving the city's Latino population, including pregnant women and persons who inject drugs. A copy of the slideshow is available on the SCAODA website.

Latest Recommendations from the Governor's Task Force on Opioid Abuse:

Paul Krupski, Director of Opioid Initiatives with the DHS Secretary's Office, gave an overview of the latest recommendations of the Governor's Task Force on Opioid Abuse. A press release with additional information is available in the packet on page 76, followed by the *Combating Opioid Abuse* report to the governor, and Executive orders #273 and #274. Andrew Whitacre from Pew Charitable Foundation added that there is an increased focus on access to treatment in Wisconsin. Provider workforce, treatment during pregnancy, data, and justice involvement were the primary four points touched upon. There are addicted pregnant women who cross the border to Minnesota to give birth because they are worried about having their children taken away if they reach out publicly for assistance, so the task force is taking steps to improve the treatment of this population. Pew and the Governor's Commission on Substance Abuse Treatment Delivery are also focusing on care coordination to avoid relapses. Thai Vue expressed concerns about addressing the needs of diverse populations, and asked if there is any preparation within the office to address minority populations. Krupski replied that he will take this feedback to DHS

Deputy Secretary Tom Engels, and that the recommendations are meant to reflect Wisconsin as a whole and that diversity is taken into consideration by default. There was also discussion of the upcoming faith-based summit. Mishelle O'Shasky commented that the mental health issues leading to addiction are underrepresented in the recommendations. Krupski responded that the target of the Opioid Task Force is, as the name implies, opioids. Norman Briggs asked about supervisory hours, and Andrew Whitacre replied that the restrictions aren't as prescriptive in other states. Subhadeep Barman explained that there are fundamental differences between how stimulant use disorders and opioid-based disorders should be treated. There was also lengthy discussion on the Hub and Spoke Model currently featured in Vermont.

SCAODA 2014-2018 Strategic Plan – Status:

Mike Derr presented the strategic plan, which can be found on page 98 of the March 2, 2018 SCAODA booklet. Thai Vue asked if there were any assessment/evaluations that have been completed yet on outcomes from the 2014-18 Strategic Plan. Mike responded that committee updates were given, but they haven't been compiled. They will be compiled and shared at the first planning meeting in May for developing the new 2018-22 Strategic Plan.

Agency Reports:

DHS – Joyce Allen announced that BPTR is continuing to determine the budget for federal fiscal year 2018.

DOR – Matthew Sweeney gave updates on excise taxes. Beer revenues and other tax revenue amounts have dropped slightly overall.

DPI – Brenda Jennings announced a June 21st summer institute that is open to grantees and school staff, with a focus on social-emotional learning, to be held at the Madison Marriott West. Information on the institute is available on the DPI website. The 2018 Building the Heart of Successful Schools Conference is from December 5-7, 2018 at Wisconsin Dells, with more information coming soon. Several trainings are available statewide through the WISH Center, focusing on topics including mental health first aid, SBIRT, and crisis preparedness.

DSPS – Brittany Lewin highlighted various changes in certification requirements for substance abuse counselors, and changes in terminology that were included in legislative bill AB 907. In addition, DSPS issued an ePDMP press release highlighting the 2017 report, which documented a 20 percent decline in the number of opioid prescriptions from 2015. The ePDMP reports are available on the DSPS website.

DVA – On behalf of Mike Ayers, Lori Kirchgatter gave updates on the Veterans Outreach Program. Funding for the program ceased on December 31, but AB 732 is proceeding through the state Senate after having been approved by the Assembly. The bill would provide additional state funding to continue the Veterans Outreach Program services into 2019.

Wisconsin Technical Colleges – No reports were provided today.

University of Wisconsin System – No reports were provided today.

WI Board for People with Developmental Disabilities – No reports were made today.

Bureau of Prevention Treatment and Recovery Update:

Joyce Allen introduced Dennis Radloff as the Bureau’s new MAT-PDOA Grant Coordinator.

HOPE 2.0 Grant Competition: Expansion of existing opiate treatment centers is targeted for rural high-need communities across the northern tier of Wisconsin. A change in the state statute was included in the funding so that centers can treat both opioid and methamphetamine abuse. Northlakes has partnered with the Lake Shore Community Health center. The Ladysmith office will be opening soon to offer opiate/methamphetamine treatment. Additional federal money through the STR Grant Program will be spent to expand opioid treatment centers. Norman Briggs asked about recent reports of a Hayward clinic closing because of community hostility; Allen was not entirely sure about the details of that report. She noted that the clinic is also not a HOPE grant recipient. The grant competition received a lot of proposals, and BPTR is currently reviewing them over the next month.

Pages 99-103 of the March 2, 2018 SCAODA booklet includes the upcoming training events and conferences regarding substance use disorder prevention and treatment and recovery.

BPTR sponsored a meeting on March 1st in Milwaukee on veteran-run Peer Run Respite.

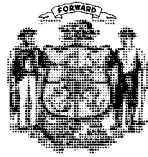
Wisconsin Council on Mental Health Report:

Mishelle O’Shasky announced the release of the Council’s annual report. The Council is still working on its next strategic plan. AB-938, the Hope Line bill, has been enacted. Last year, Hope Line participated in 37 active rescues. The program was on verge of losing funding, but received funding through AB-938.

Next Meeting Agenda Items:

No agenda items were presented at this meeting.

The meeting was adjourned at 2:18 p.m.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851

Madison, Wisconsin 53707-7851

**Executive Committee Meeting
February 5, 2018 Meeting Minutes**

Present: Duncan ShROUT, Sandy Hardie and Norman Briggs (all by phone)

Staff: Mike Derr

Duncan ShROUT called the meeting to order at 1:04 p.m.

The committee members reviewed the draft agenda for the upcoming March 2, 2018 and expressed their approval.

All members suggested that Mary Rasmussen be contacted and invited to attend an upcoming Council meeting (either March or June) so that she can receive a certificate and accolades for her service over the years to the Council and committees. Mike Derr will contact and invite her.

Norman Briggs will share his thoughts and concerns at an upcoming Wisconsin legislative hearing on the impact of AB 907 provisions on the substance abuse counselor certification process.

The committee members and Mike Derr discussed the status of the 2014-18 SCAODA Strategic Plan and whether a 2017-18 update was necessary. It was decided that the Council should instead start developing the 2018-22 Strategic Plan, along with the committee chairs. The group would initially meet to establish strategic priorities, for the full committees to then review and provide feedback. The Executive Committee members and committee chairs would then meet to finalize the new Plan, based on committee feedback. Mike Derr and other DHS staff can facilitate the discussions. Mike Derr will contact the various players to come up with an initial meeting date.

Duncan ShROUT left the discussion at 1:35 p.m.

The meeting adjourned at 1:45 p.m.



Duncan Shrout
Chairperson

Sandy Hardie
Vice Chairperson

Norman Briggs
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Executive Committee May

15, 2018

9:30 – 10:00 AM
Via conference call

MEETING AGENDA

- 1. Call to OrderDuncan Shrout
(Council Chair)
- 2. Review of February 5, 2018 Meeting Minutes.....Duncan Shrout
- 3. SCAODA Council June 1, 2018 Agenda.....Duncan Shrout/Mike Derr
- 4. Relationship between SCAODA, Governor’s Task Force on Opioid Abuse, and Commission on Substance Abuse Treatment Delivery.....Duncan Shrout
- 5. 2018-22 Strategic Planning Priorities.....Duncan Shrout/Mike Derr
- 6. Officer Elections.....Duncan Shrout/Mike Derr
- 7. Public Comment: Substance Use Disorder (SUD) Planning Topics.....Duncan Shrout
- 8. Other Topics.....Committee Members
- 9. Adjournment.....Duncan Shrout

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Executive Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA), and consists of the Council’s three officers. The Committee’s primary objective is to provide leadership and direction to the Council in the setting of Council meeting agendas and prioritizing of Council activities.

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Conference Call: 1-877-820-7831

Access Code: 554523#

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Diversity Committee			Attending: Sandy Hardie, Anthony Harris, Tish Minor; Mai Zong Vue, staff, Scott Stokes, staff By Phone: Harold Gates, Gail Kinney and Cathy Schier Excused: Thai Vue
Date: 2/2/2018	Time Started: 9:55 a.m.	Time Ended: 1:48 p.m.	
Location: 2439 N. Holton Street, Milwaukee, WI 53212			
Minutes			

WELCOME AND INTRODUCTIONS: Sandy called meeting to order and welcomed everyone. Self introductions were made.

PUBLIC COMMENT: None

APPROVAL OF MEETING MINUTES: Cathy made a motion to approve the August 25, October 23 and November 17 and seconded by Anthony.

DCTS UPDATES:

Scott shared that the State Target Response (STR) grant funding opportunity (GFO) just came out. Four awards of \$250,000 each will be awarded. The grant cycle is for May 1, 2018 to April 2019. In addition, DCTS received official approval notice for the second year of STR grant in the amount of \$7.6 million. Also, there are two trainings coming up. The registration is full now with a waiting list for the April 11 and 12 opioid forum in Milwaukee.

ANNUAL MENTAL HEALTH AND SUBSTANCE ABUSE CONFERENCE:

The conference is coming up October 17 & 18, 2018 at the Kalahari Resorts. Anthony will be submitting a workshop on LGBT issues. Sandy may be interested in submitting a workshop too.

EMERGING LEADERS TRAINING:

The training is being planned. More information will be coming. The communities to be included are Native American, Hmong, Latino, African American and LGBTQ.

IMPROVING CULTURAL COMPETENCE IN SUBSTANCE ABUSE: Harold Gates

Harold walked through the background of TIPS 59--SAMHSA produced it in July 2017 and there are online classes related to TIPS 59. He shared that the Improving Cultural Competence in Substance Abuse was developed using TIPS 59. There are nine different modules in this new cultural competent manual as follow:

- Module 1: Opioid abuse
- Module 2: Introduce cultural competency
- Module 3: Organizational structure
- Module 4: Staff competency (self-knowledge and world view)
- Module 5: Cultural competent treatment planning
- Module 6: Part 2 of evaluation and treatment planning
- Module 7: Clinical skills on how to diagnose
- Module 8: Staff case management
- Module 9: Case studies on how to treat different culture and race groups

The big question Harold poses to the Committee is: how does the Committee start to infuse these topics into the work of SCAODA? The strategic plan should include how this can be done. Another questions is: is Diversity's role to help providers feel comfortable in doing cultural competent work by giving them tools such as this?

HARM REDUCTION DISCUSSION:

Scott Stokes was invited to give a brief overview of harm reduction. Scott gave a brief presentation on what harm reduction is. Some keypoints are: he worked for 15 years in the field of AIDS prior to addressing the issue of harm reduction; drug users are just like everyone else; the goal is to keep individual users as healthy as possible until they get help; the age is lower now and more women are injecting drug in comparison to the beginning; and the definition of harm reduction is "a set of practice." Please refer to the harm reduction website for greater resources. Please see Scott's handout for more information.

DSPTS UPDATES:

Sandy briefly shared that public comments were due today. Gail clarified that public comments were due at 9 a.m. this morning. At the next meeting everyone should bring in any updates on this matter to share.

DIVERSITY WORKSHOP & RECEPTION:

At the May meeting, the Committee will discuss and decide on the direction of the workshop. Things to consider for the workshop include: pushing the importance of implementing CLAS Standards by giving tools for participants to take home, especially now that SAMHSA grants require the implementation of CLAS Standards.

A brief discussion was held on the purpose of the Diversity's reception. It was shared that in the past, a cultural exchange experience was made available by bringing Native American dancers to perform the night before the conference. It used to be an opportunity for participants to see clients not as clients, but as performers which increased client values, Tish added. In 2016, the Diversity Committee's request for having an event was approved and held its first reception. Last year, Dr. Moore spoke at this event and held a diversity dialogue, which was very emotional and powerful. Should the future of the event just for the Diversity Committee to host and facilitate a safe-space-dialogue without a speaker? Should the Committee rename the event and avoid calling it a "reception?" More can be discussed at the May meeting.

APPROVAL OF DIVERSITY CHAIRMAN:

Thai was nominated to fill the Chairperson for the Diversity Committee by (I did not have a name down and could not remember who nominated Thai...anyone remember who nominated Thai?), giving Sandy a break to focus on her new agency as well as being the Vice Chair for SCAODA. Cathy seconded the motion and motion was approved.

A meeting date was asked to be set in March for the Diversity Committee to review and discuss strategic planning. A doodle link will be sent to everyone to find the best time for this meeting.

Next Diversity Committee meeting will be May 4 in La Crosse.

NEXT AGENDA ITEM:

- Peer Specialist Training Update - Kenya
- Strategic Planning Update
- DSPTS Updates - all
- Diversity Workshop & Reception
- Celebration for Sandy's new role at SCAODA

There should be ice breakers activities to help members get to know each other more. The Stratetic Planning should be at least two hours of engaging, learning and planning together. The goal is to energize and deepen the working relationships

F-01922

among the members in order for Diversity Committee to meet the 2018 goals set forth for 2018. Can we get a facilitator to facilitate this planning meeting? Staff will look into getting a facilitator for this Strategic Planning session.

Adjourn – The meeting was adjourned at 12:15 p.m. Denise made the motion to adjourn and Thai seconded it.

Prepared by: Mai Zong Vue on 3/22/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 5/4/2018



Faithful Consulting LLC

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Diversity Committee Strategic Planning Agenda

March 23, 2018

10:00 – 12:00 PM

1. Introduction
2. Explore Purpose and SWOT of Committee
3. Strategic Plan Review and Goal Setting

"Crafting authentic, empowered, high-performing, high-quality leaders"

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Intervention and Treatment Committee			
Date: 2/13/2018	Time Started: 10:00 am	Time Ended: 2:30 pm	
Location: 3099 E. Washington Avenue, Madison, WI			Presiding Officer: Norman Briggs and Roger Frings
Minutes			

1. Call to Order and Roll Call. Roger Frings called the meeting to order. Roll call was taken.
2. Minutes from January reviewed. Two changes recommended. Joe mentioned his name was spelled incorrectly and Norman mentioned on page one....
A motion to accept the changes was made by Steven Dakai, seconded by Norman Briggs. Passed. Caroline Miller abstained.
3. DSPTS Rule Change: Joe Muchka attended the public hearing and noted only two people showed. Their concerns were noted.
4. Discussion of AB907: 907 may change the DSPTS proposed changes. Discussed lack of a cohesive voice from the Substance Use profession. Not sure how effective ITC can make an influence at this point as it looks like 907 is going to pass. Sheila Weix mentioned we need to be proactive and move with 907 and make as much influence on the changes to make sure master level therapists receive the proper education for substance use counseling. Joe Muchka mentioned we need to look at the raw numbers of people needed for Recovery Coaching and similar professions, rather than just opening the field to MSW's, etc. It was recommended by Caroline Miller to bring in someone from the Pew Foundation to our next ITC meeting. Sheila Weix has a contact, Mr. Andrew Whitacre, Senior Associate, Substance Use Prevention and Treatment Initiative, the Pew Foundation. Bill Lauer mentioned it appears Pew is an ABC typed of approach whereas Wis is a continuum of care approach. Pew Report does not address sober living, peer support.

Discussion continued involving both DSPTS rule change and 907. In the end, it was recommended a member of ITC be on DSPTS behavioral health committee.

5. David Macmaster brought forth the motion for Chapter 75 to remove language that prohibits the treatment of tobacco dependence and add language that establishes such treatment as the expected standard of care; and to establish a committee with BPTR to develop a strategic plan leading to the implementation of evidence-based tobacco use disorder treatment in all levels of Wis SUD intervention and treatment by 2020. A robust discussion ensued. It was determined to bring this to SCAODA when the time is right during the 75 revision. David Macmaster graciously withdrew his motion. Norman Briggs seconded. Passed.
6. Pew Report Discussion: Covered most of it during discussion of AB907.
7. ITC Workplan: Norman Briggs recommended ITC wait on a strategic plan until SCAODA completes theirs.
8. Update on Recovery Housing Initiatives: Bill Lauer mentioned AB287 is "dead in the water". Sober Living has of high interest across the state and discussed the different levels of recovery housing, and reimbursements.
9. Brief ITC reports: Sheila Weix mentioned they have noticed with the advent of more MAT physicians, some clients have a choice, and some are going to the physicians that prescribe higher levels of buprenorphine.
10. Paul Krupski update on the opioid initiatives. Paul gave an overview of the various approaches taken to curb the opioid epidemic. He covered the various grants going out, the Pew Report, the call for faith-based organizations to be included (Sheila Weix mentioned to remember the tribes in this matter), a statewide data base for availability and capacity of services, DMS involvement in changes to insure coverage of necessary services. Q and A followed. Jill Gamez mentioned Minnesota's data base fast-trackermn.org. This is funded with Minnesota state and STR funds.

-
11. Section Updates: Children, Youth and Family report from Sara Bremser. She states still having difficulties in assembling a committee, but had a good turnout yesterday. Sara is looking for more direction and mission statement and purpose for the group. Norman Briggs mentioned he sent Jason Cram that information a few months ago. Jill Gamez stated she sent some mission statement information to Jason Cram as well. Jill mentioned perhaps we also should get a needs assessment form providers.
Treatment for Women and Their Children report from Norman Briggs. URWG extended to June 30th.
 12. Public Comment: None
 13. Announcements and/or additional information: None
 14. Future Agenda Items: Invite Mr. Whitacre from the Pew Foundation; Continue with Regional reports; SCAODA update; make Executive Orders/Legislation a standing subject; invite Lou from Behavioral Health Organization to report on his organizations status.
 15. Adjourn: Meeting adjourned at 2:30 pm. Norman motioned. Joe seconded. Unanimous yeahs.

Prepared by: David Nelson on 2/13/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 4/10/2018

Scott Walker
Governor



Duncan Shrout
Chairperson

Sandy Hardie
Vice Chairperson

Norman Briggs
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851

OPEN MEETING NOTICE

INTERVENTION AND TREATMENT COMMITTEE (ITC)

April 10th, 2018

10:00 a.m. to 2:30 p.m.

Location of the Meeting:

Department of Corrections

3099 E. Washington Ave.

Room 1M-M

Madison, WI

AGENDA

1. Call to Order and Roll Call
2. Review and Approval of February minutes
3. DHS 75 Revision updates (David Nelson)
4. Guest Andrew Whitacre from the Pew Trust Foundation (call in 11 a.m.)
5. Guest Lou Appor from Wis Behavioral Health Association
6. Section updates
 - Children, Youth and Families (Jason Cram)
 - Treatment for Women and their Children (Norman Briggs)
Urban Rural Women's Grants
7. Public Comments
8. Announcements and/or additional information
9. Future Agenda Items
10. Adjourn

The purpose of this meeting is to conduct the governmental business outlined in the above agenda for the Intervention and Treatment Committee of the State Council on Alcohol and Other Drug Abuse. The mission of the State Council on Alcohol and Other Drug Abuse (SCAODA) is to enhance the quality of life for Wisconsin citizens by preventing alcohol and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities.

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Conference Call: 1-877-820-7831 Passcode: 793544

Next ITC Meeting: May 8th, 2018

Next SCAODA Meeting: June 1st, 2018

OPEN MEETING MINUTES

Instructions: _____

Name of Governmental Body: Intervention and Treatment Committee (ITC)			Attending: Norman Briggs, Roger Frings, David Macmaster, Joe Muchka, Sheila Weix, Tamara Feest, Kate Rifken, Al Frank, Meaghan Sulikowski (for Caroline Miller), David Nelson, Teri Alm (phone).
Date: 4/10/2018	Time Started: 10:00 am	Time Ended: 2:30 pm	
Location: 3099 E. Washington Avenue, Madison, WI			Presiding Officer: Norman Briggs and Roger Frings

Minutes

1. Call to order at 10:02 am by Norman Briggs
2. One change noted in Feb minutes. Norman Briggs mentioned in item 3, he did not attend the DSPS rule change. It was noted. Dave Macmaster motioned for approval, seconded by Sheila, approved.
3. DHS 75 revision was discussed by David Nelson. Advisory Committee has reached consensus on the Statement of Scope, and will be submitted onward to OLC and Secretary's Office. Once the Governor approves the Statement of Scope the formal revision will be begin. The ITC requested a listing of the Advisory Committee meeting members.
4. Guest Speaker, Andrew Whitacre from the Pew Foundation, called in and provided an overview of the Pew Report Phase I and Phase II. He mentioned the recommendations coming forth are focused on access and barriers to treatment. He mentioned Wisconsin is one of the few states that does not practice reciprocity with surrounding states for SUD counselors. The current standards for SUD counselors should be reviewed, and as of yesterday, Master Level Mental Health Counselors (LPC, LSCW, and LMFT) can begin to provide SUD counseling. He also mentioned a lack of a centralized referral system for med docs to find out where to send their patients with an SUD. A uniform data system would be helpful. He also mentioned focusing in on re-entry from corrections as a priority and making sure Medicaid is suspended while someone is in jail, so when released MAT can be provided more quickly. When questioned, Mr. Whitacre acknowledged using ITC's workforce report in their review of services in Wisconsin. The Hub and Spoke model was discussed and a robust discussion regarding Methadone treatment and FQHC's becoming involved occurred. Recovery Housing and creating a framework for the future, involving MAT, needs to be addressed. An improvement of data for medical examiners to share info in real time is needed. Discussed a formal assessment tool for all of Wis providers to use. It was mentioned, Minnesota uses one, so the assessment tracks and stays with the individual as they move through recovery. Evidence based practices regarding pain management outside of medications is needed. Dave Macmaster mentioned the Wintip data regarding tobacco use disorder.
5. Guest Speaker, Lou Oppor, from Wis Behavioral Health Association, came and provided an overview of the mission and focus of the WiBHA. They are looking at adding more members and open to feedback on how to reach out and attract new professionals to join.
6. Section Updates: Jason Cram provided an update on the Children, Youth and Families subcommittee. He handed out a draft of the mission, action plan, wish list of representatives, and membership expectations. The committee provided input and Jason to update and bring back a revision after he has had some time to revise it. Norman Briggs provided an update on Urban and Rural Women's Grant. Last year's grants were extended, and will GFO's will be issued in the fall of 2018.
7. Public Comments: None offered.
8. Announcements: Roger Frings and David Macmaster mentioned they will be absent at the next ITC. Will be on vacation. No motions made.
9. Future Agenda Items: Address Gambling Disorders, Recovery Coaching training status (perhaps invite Kenya Bright from DHS to discuss), Trainings for SAC-IT and SAC, invite Mr. Whitacre back again next month (for 30 minutes), address SUD and the elderly, update on AB 907 and its impact.
10. Meeting adjourned at 2:30 pm

F-01922

Prepared by: David Nelson on 5/10/2018.

:

Scott Walker
Governor



Duncan Shrout
Chairperson

Sandy Hardie
Vice Chairperson

Norman Briggs
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

INTERVENTION AND TREATMENT COMMITTEE (ITC)

May 8th, 2018

10:00 a.m. to 2:30 p.m.

Location of the Meeting:

Department of Corrections
3099 E. Washington Ave.
Room 1M-M
Madison, WI

AGENDA

1. Call to Order and Roll Call
2. Review and Approval of April minutes
3. Act 262 and its impact (Brittany Lewin)
4. Recovery Coach Training: Update (Kenya Bright)
5. Topical Discussions: Gambling Disorders, SUD and Seniors, SAC and SAC-IT trainings.
6. Section updates
 - Children, Youth and Families (Jason Cram)
 - Treatment for Women and their Children (Norman Briggs)
Urban Rural Women's Grants
7. Andrew Whitacre Update: Pew Foundation
8. Public Comments
9. Announcements and/or additional information
10. Future Agenda Items
11. Adjourn

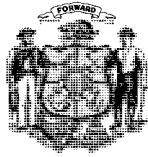
The purpose of this meeting is to conduct the governmental business outlined in the above agenda for the Intervention and Treatment Committee of the State Council on Alcohol and Other Drug Abuse. The mission of the State Council on Alcohol and Other Drug Abuse (SCAODA) is to enhance the quality of life for Wisconsin citizens by preventing alcohol and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities.

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Conference Call: 1-877-820-7831 Passcode: 793544

Next SCAODA Meeting: June 1st, 2018

Next ITC Meeting: July 10th, 2018



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Children, Youth, and Family Treatment Subcommittee (CYFT)

February 12, 2018

10:00 AM – 1:00 PM

Location of the Meeting:

Department of Corrections
3099 E. Washington Ave.; Madison, WI
Room 1M-K

AGENDA

1. Call to order and roll call
2. Review and approve 12/11/2017 meeting minutes
3. Report: 01/09/2018 Intervention and Treatment Committee
4. Report: "2017 Report to the Wisconsin Legislature"
5. Report: "Consumer Satisfaction with Wisconsin's Public Mental Health Services"
6. Membership and leadership description, expectations, and requirements
7. Prioritizing recommendations made to and approved by ITC on 05/09/2017
8. Update on status of youth treatment initiatives grant
9. Public comments
10. Announcements and/or additional information
11. Future agenda items
12. Adjourn

The purpose of this meeting is to conduct the governmental business outlined in the above agenda for the Children, Youth, and Family Treatment Subcommittee of the Intervention and Treatment Committee of the State Council on Alcohol and Other Drug Abuse (SCAODA). The mission of SCAODA is to enhance the quality of life for Wisconsin citizens by preventing alcohol and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities.

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2018 CYFT Meeting Dates (all meetings scheduled for 10:00 AM – 1:00 PM):

- April 9; June 11; August 13; October 8; December 10

www.scaoda.state.wi.us

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Children Youth and Family Treatment Subcommittee of the Intervention and Treatment Committee of SCAODA			Attending: Sara Hungerford, Sara Bremser, Paul Schmidt, Jason Cram, Jennifer Witkowski, Mari Kriescher, Cynthia Green
Date: 2/12/2018	Time Started: 10:00 AM	Time Ended: 12:00 PM	
Location: Department of Corrections; 3099 E Washington Ave; Madison, WI			Presiding Officer: Mari Kriescher

Minutes

1. Call to order and roll call
 - a. Mari Kriescher volunteered to chair the meeting
 - b. Committee members present in person: Sara Hungerford, WI Council on Problem Gambling; Sara Bremser, DOC; Paul Schmidt, Vernon County; Jason Cram, DHS
 - d. Committee members not present either in person or via teleconference: Kimeko Hagen, Options Treatment Program; Dan Cousins, Northwoods Behavioral Health; Christi Gaus-Bemis, DPI
2. Review and approve 12/11/2017 meeting minutes
 - a. Cynthia Green approved; Mari Kriescher seconded; unanimous approval; minutes approved
3. Report: 01/19/2018 Intervention and Treatment Committee (Mr. Cram reported on his attendance at this meeting as it relates to the CYFT)
 - a. ITC encouraged CYFT to continue to work on 3 recommendations identified in the March 2017 SWOT analysis and approved by the ITC in May 2017
 - b. Committee membership was discussed; ITC directed CYFT to develop committee member and chairperson “position descriptions and expectations”; upon completion, provide these to the ITC and they will disseminate to assist in recruiting additional committee members
 - c. Identifying a committee chairperson was discussed; it was agreed that completing the “position description and expectation for the committee chairperson before recruiting a chairperson would be prudent
 - d. Identifying a CYFT mission and vision was discussed; Norman Briggs will provide the CYFT with past relevant information and the CYFT was directed to look at past materials to locate the mission and vision
4. Report: “2017 Report to the Wisconsin Legislature”; the Wisconsin Office of Children’s Mental Health 2017 Report to the Wisconsin Legislature was presented to the committee for informational purposes as the contents is relevant to the CYFT; Mr. Cram pointed out the financial table in the appendix as this is relevant to one of the CYFT Priorities identified in the SWOT analysis; Mr. Cram also pointed out the various indicators and how these snapshots are valuable insights into the status of the youth of Wisconsin
5. Report: “Consumer Satisfaction with Wisconsin’s Public Mental Health Services – Results from the 2013 and 2014 Mental Health Statistical Improvement Project (MHSIP) Surveys”; this DHS publication was presented to the committee for informational purposes; although not specifically relevant to children, youth, and families, there are components that are generally relevant
6. Membership and leadership description, expectations, and requirements
 - a. A workgroup comprised of Sara Bremser, Mari Kriescher, and Jason Cram will develop committee member and chairperson “position descriptions and expectations”
 - b. Workgroup scheduled to initially meet on 03/20/2018 at 0900
 - c. Workgroup will use resources provided by ITC as well as past CYFT resources to develop committee member and chairperson position descriptions and expectations; workgroup will report back to CYFT with their products

-
7. Prioritizing recommendations made to and approved by ITC on 05/09/2017
 - a. To continue focus on addressing subclinical teen alcohol and other drug involvement (about 30% of the total youth population) in opportunistic settings, i.e., schools, juvenile justice, healthcare, using evidence-based approaches, such as, Screening, Brief Intervention and Referral to Treatment (SBIRT) and other evidence-based modalities.
 - i. Discussion focused on the level of influence committee has on this topic.
 - ii. Committee discussed need for additional data; need for model programs to highlight so other programs do not need to reinvent; need for guest speakers to committee at future meetings.
 - b. Select three to five evidence-based intervention/treatment strategies for dissemination and implementation. Strategies will be selected based on strong evidence of improved outcomes and cost-effective service delivery, feasibility for staff learning and organizational implementation. Focus will be on state investment in training, technical assistance and implementation coaching for the selected intervention/treatment strategies. Because this will involve a long-term focus, a coalition of treatment leaders and provider champions will have substantial input into the selection of strategies to ensure an initial buy-in among providers.
 - i. Wisconsin Youth Treatment Initiative grant discussed as a model; CST use of the CANS discussed as a model; how to translate EBP into funding was discussed; using train-the-trainer more was discussed; possibly using the CYFT as a clearinghouse for this information was discussed. Disseminating the information and funding seeing as largest barriers.
 - c. Increase focus on cross-system collaboration between adolescent treatment providers and other system partners, i.e., schools, juvenile justice, healthcare, existing coalitions, by developing referral pathways using “warm hand-off” best practices and inter-agency memorandums of understanding to formalize processes and procedures.
 - i. This item was tabled and committee decided to focus on at upcoming meeting.
 - i. This item was tabled and committee decided to focus on at upcoming meeting.
 8. Update on status of youth treatment initiatives grant
 - a. Jason Cram informed the committee that the four provider sites have been identified and the training of the EBP of MDFT will take place at the end of March; provide sites will begin utilizing the EBP in April 2018
 9. Public comments
 - a. There were no members of the public (other than committee members) present at the meeting therefore there were no public comments
 10. Announcements and/or additional information
 - a. There were no announcements or additional information
 11. Future agenda items
 - a. Review/approve 02/12/2018 CYFT meeting minutes
 - b. Report back from workgroup on the development of the committee member and chairperson “position descriptions and expectations”
 - c. Continue to discuss the CYFT Program Priorities
 - d. Strategic planning for CYFT to revise or update a mission and vision
 - e. Bring in speakers to CYFT on a routine basis
 - i. Christi Gaus-Bemis will speak with Dr. Kate McCoy and request she present to the CYFT at an upcoming meeting on the most recent Wisconsin Youth Risk Behavior Survey data
 - f. Evaluate makeup of committee and identify specific gaps so committee recruitment can be targeted
 12. 2018 CYFT committee dates, times, locations
-

- a. April 9, 2018 10:00 AM – 1:00 PM – Wisconsin Department of Corrections
 - b. June 11, 2018 10:00 AM – 1:00 PM – Wisconsin Department of Corrections
 - c. August 13, 2018 10:00 AM – 1:00 PM – Location TBD
 - d. October 8, 2018 10:00 AM – 1:00 PM – Location TBD
 - e. December 10, 2018 10:00 AM – 1:00 PM – Location TBD
13. Adjournment – the meeting was adjourned at 12:00 PM

Prepared by: Jason Cram on 3/16/2018.

These minutes were approved by the governmental body on: 4/9/2018



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Children, Youth, and Family Treatment Subcommittee (CYFT)

April 9, 2018

10:00 AM – 1:00 PM

Location of the Meeting:

Department of Corrections
3099 E. Washington Avenue; Madison, WI
Room 1M-K

AGENDA

1. Call to order and roll call
2. Review and approve 02/12/2018 meeting minutes
3. Report: 02/13/2018 Intervention and Treatment Committee
4. Membership and leadership description, expectations, and requirements workgroup
5. CYFT Priorities discussion
 - a. #3-Increase focus on cross-system collaboration
 - b. #4-Conduct an adolescent treatment and AOD prevention needs assessment
6. Youth Treatment Initiatives grant - update
7. Public comments
8. Announcements and/or additional information
9. Future agenda items
10. Adjourn

The purpose of this meeting is to conduct the governmental business outlined in the above agenda for the Children, Youth, and Family Treatment Subcommittee of the Intervention and Treatment Committee of the State Council on Alcohol and Other Drug Abuse (SCAODA). The mission of SCAODA is to enhance the quality of life for Wisconsin citizens by preventing alcohol and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities.

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Conference Call: 1-877-820-7831 Passcode: 458043

- June 11; August 13; October 8; December 10

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Children Youth and Family Treatment Sub-Committee
A Subcommittee of the Intervention and Treatment Committee of the
State Council on Alcohol and Other Drug Abuse

Mission, Action Plan, Membership, Expectations

Mission:

Ensure access to and effectiveness of substance use disorder treatment services and recovery supports for youth and their families.

Action Plan Relating to Children, Youth, and Families:

- Review and make recommendations for substance use disorder treatment
- Evidence based practice research, dissemination, and training
- Policy and data analysis, advising, and recommendations

- Workforce issues

Committee Membership Representation May Include:

1. State Agencies:
 - a. Department of Corrections -Division of Juvenile Corrections
 - b. Department of Public Instruction
 - c. Department of Children and Families
 - d. Department of Health Services
2. County/Tribe Agencies:
 - a. Tribal Social Services and/or Human Services
 - b. County Social Services and/or Human Services
 - c. Juvenile Justice
 - d. School Liaison Officer
3. Private Agencies
 - a. Treatment Providers
 - b. Prevention Providers
4. Councils and Coalitions
 - a. Alliance for Wisconsin Youth
 - b. Wisconsin Alliance for Drug Endangered Children
 - c. Council on Problem Gambling
 - d. Tobacco Coalition
5. Citizen Participation
 - a. Parent/Person with Lived Experience
 - b. Others as interested/referred

Committee Membership Expectations:

All Members Shall:

1. Adhere to the State Council on Alcohol and other Drug Abuse (SCAODA) by-laws.
2. Attend all meetings of the committee; attendance means presence in the room or on phone or similar medium for more than half the meeting.

3. Any committee member that has two unexcused absences in a 12 month period may be subject to removal.
4. Committee members shall agree to a term of at least two years.

The Chairperson/Co-Chairperson Shall:

1. Be responsible for carrying out the business of the CYFT including motions that are passed be acted upon in an orderly and expeditious manner and assuring that the rights of the members are recognized.
2. Appoint a designee to preside at a meeting if they are unavailable.
3. Be responsible for organizing the work of the CYFT, scheduling meetings, and setting the agenda.
4. Work with DHS staff to coordinate meeting logistics and disseminate meeting information, minutes and notices.
5. Attend or have designee attend Intervention and Treatment Committee (ITC) meetings and SCAODA meetings and be prepared to report on CYFT business.

Approved by ITC: 05/08/2018

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Planning & Funding Committee, SCAODA		Attending: Members: Duncan Shroust; Irene Secora; Karen Kinsey; Christine Ullstrup; Raeanna Johnson and Kevin Florek; Michele Krueger (for Vonda Benson); Brian Dean. Absent Members: Todd Campbell Staff: Michael Derr
	Time Started: 9:34 am	Time Ended: 11:35 pm
Location: ARC Community Services Building, 1409 Emil St., Madison, WI		Presiding Officer: Duncan Shroust, Committee Chair

Minutes

Call to Order:

Committee Chair Duncan Shroust called the meeting to order at 9:34 a.m. Attendees introduced themselves. Shroust noted that Todd Campbell is resigning from the Committee, and will assist him with identifying another person who would serve as this Committee's county representative.

Review of 11/16/2017 Meeting Minutes:

Duncan Shroust referenced the draft minutes from the last Committee meeting and asked for comments and corrections. None were offered. He then entertained a motion to approve the minutes as written. Motion carried unanimously.

Public Comment:

No persons offered any public comment on Committee business either in person or via telephone.

Number of Annual Committee Meetings:

DHS staff person Mike Derr discussed the handout listing a revised set of 2018 meeting dates for the committee that would reduce the number of annual meetings from eight to six. This would include no longer meeting in April and July. Committee members expressed their approval of this plan. In addition, due to a scheduling conflict for DHS staff and others, it was decided to reschedule the February 2018 Committee meeting to Friday, 2/9/18.

Substance Use Disorder (SUD) Public Spending:

Mike Derr briefly discussed with Committee members how SUD expenditures can be viewed and analyzed from several perspectives: geographic; funding source; programmatic and purpose, for example. He referenced the Committee's 2016 Funding Ad-Hoc Committee Report as an excellent resource for a starting point in a new funding analysis. As one example, public funding can be broken down by the five DHS Area Administration regions to determine the allocation of such funding by region and whether it matches the nature and intensity of needs within each region. Included in the handouts was one example of this -- a breakdown of SABG Community Aids grant awards in 2017, as allocated by each of the five DHS regions.

Derr also referred to the Division of Care and Treatment Services's Status Report table for the various grants to address the opioid abuse crisis, as another example of tracking the amount of grant funding addressing specific SUD needs and where such funding is allocated on a county or regional basis. Committee members requested that for future meetings, it would be helpful to review the 2018 SABG program obligations budget, and requested the list of grant recipients for the latest HOPE 2.0 grant awards.

Creation of Two Working Committees:

Duncan Shroust proposed that moving forward, Committee members explore AODA needs and programs from two distinct perspectives. First, consider what is currently happening across Wisconsin in terms of needs and treatment and prevention programming. And second, from a larger perspective consider funding levels and allocations by regions and across the state. Overall goals should be for the Committee to focus more on policy initiatives, increase the number of citizen

members or representation, and to speak intelligently with legislators to meet SUD needs, particularly in northern Wisconsin. Committee members should also work with DHS staff and providers to promote the measuring of SUD treatment outcomes, the implementation of evidence-based practices (EBPs), and the degree to which EBPs are implemented with fidelity. The upshot of this effort would be for the committee to develop an overall strategy and package of proposals and recommendations to share with legislators and policymakers.

Shrout added that another way to view this comprehensive effort is for one group of committee members to review data and updates provided from DHS staff and others to define specific program needs and outcomes. A second group would analyze more broadly current SUD problems and needs, programming and interventions, and most current EBDs and driving events. As such, Shrout proposed that two "rolling" committees or workgroups be defined to engage in this effort. These would not be more formal "ad hoc" committees appointed to achieve specific tasks, but instead more flexible working groups with charges that could change over time.

One rolling committee would focus on specific SUD treatment and prevention programming and their challenges, looking at funding and sustainability issues and how programs respond to current SUD needs and experiences. Shrout suggested that Christine Ullstrup, Karen Kinsey and Kevin Florek could serve on this first "Treatment" committee. A second rolling committee could examine statewide funding strategies, statewide and regional trends in SUD needs and programming, and gain a better understanding of Substance Abuse Block Grant and other grant program requirements and how they relate to overall trends in funding allocation and programming. He proposed that Raeanna Johnson, Vonda Benson/Michele Krueger, Irene Secora, and Duncan Shrout serve on this second "Larger Trends" committee.

As example, one committee could examine the political factors that are behind the statewide and regional allocation of AODA funds, such as the larger size of a county providing greater capacity and logistics to administering large-scale grant funding. Conversely, northern Wisconsin counties might need assistance with having their infrastructure and capacity increased so that they can effectively administer grant funds. Christine Ullstrup suggested that a committee might consider whether grant funding should be allocated to regions that are more equipped to efficiently deliver treatment or prevention programming to a widespread, rural population.

Karen Kinsey encouraged a rolling committee review of policies strategies such as increasing the beer tax, decreasing the blood level concentration for prosecuting drivers of OWI, and reducing the number and types of retailers that are licensed to sell alcohol. Committee members also mentioned the need to look at pharmaceutical companies and other manufacturers and consider who resistant they may be to policy changes addressing the opioid crisis or alcohol abuse. Kevin Florek suggested committees take a closer look at strategies providers are now using for fiscal sustainability, noting that Tellurian has moved away from seeking public funds, given the unpredictability and trend toward receiving fewer funds. Brian Dean talked about the continuing need to consider what schools can provide in this arena. He mentioned the \$200,000 per year has been budgeted in state funds over the next two years for the expansion of SBIRT programming to 30-60 additional school districts.

Looking ahead, Planning and Funding Committee members agreed that at the February 9th meeting, members should continue discussing and structuring how the two rolling committees should be developed and the scope of their review, including a list of concerns and topics that each committee should explore and come up with some sort of proposals. For the May 17th meeting, Mike Derr will share and provide a full rundown of available SUD data as it relates to treatment, recovery and prevention programming, as well as statewide and regional needs. Both rolling committees will use such data and information to move forward with their reviews and start developing policy recommendations. Along the same line, Mike Derr will work with all committee members by suggesting specific policy and grant funding-related projects that individual members could work on. Derr encouraged members to contact him and other Bureau members for information and data to assist in these efforts.

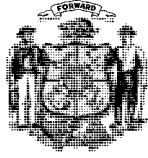
Update on DHS SUD Activities:

Mike Derr gave a quick overview and update on current initiative activities within DHS' Bureau of Prevention Treatment and Recovery. He recited the newest staff working within the Bureau and their areas of responsibility. Derr gave an update on the outcomes and activities of the various Opioid Abuse grant programs recently initiated. Also, Derr shared the recent grant funding announcement for the awarding of at least two new HOPE 2.0 grants to providers to serve opioid and methamphetamine abuse needs within higher need areas of the state. A brief update was shared that the Bureau is still awaiting the formal findings and recommendations from SAMHSA relating to the August 2016 site visit and review of the Substance Abuse Block Grant program administration. And finally, Derr gave an update on the bureau's efforts to rewrite Administrative Code DHS 75 (Community Substance Abuse Service Standards).

At 11:35 am, Duncan Shroust accepted a consensus motion from Committee members to adjourn the meeting.

Prepared by Michael Derr on 2/6/2018. These minutes are in draft form, and will be considered by the Planning and Funding Committee at its 5/17/2018 meeting.

Prepared by: on .
:



Duncan ShROUT
Chairperson

Sandy Hardie
Vice Chairperson

Norman Briggs
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Planning and Funding Committee

April 12, 2018

9:30 AM to 12:00 PM

ARC Community Services Building, 1409 Emil Street
Madison, Wisconsin 53707

MEETING AGENDA

- 1. Call to Order and Roll Call.....Duncan ShROUT
- 2. Review Jan. 18, 2018 meeting minutes.....Duncan ShROUT
- 3. Public Comment: Substance Use Disorder Planning Topics.....D. ShROUT & Christine Ullstrup
- 4. Continue Discussion of Committee Priorities & Concerns.....D. ShROUT & C. Ullstrup
- 5. DHS, Bureau & Prevention Treatment & Recovery Updates.....Mike Derr
- 6. Agency and Provider Updates.....Committee Members
- 7. Agenda Items for May 17, 2018 Committee meeting.....Committee Members
- 8. Adjournment.....All

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Planning & Funding Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA). The Committee’s primary objective is to assist SCAODA with coordinating substance use disorder planning and funding initiatives across state agencies.

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Conference Call: 1-877-820-7831

Access Code: 554523#

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Planning and Funding Committee, State Council on Alcohol and other Drug Abuse (SCAODA)		Attending: Members: Duncan ShROUT; Christine Ullstrup; Raeanna Johnson; Brian Dean; Vonda Benson; Karen Kinsey; Guests: Norman Briggs; DHS Staff: Mike Derr	
Date: 4/12/2018	Time Started: 9:34 am	Time Ended: 11:35 am	
Location: ARC Community Services, 1409 Emil St., Madison, WI		Presiding Officer: Duncan ShROUT, Committee Chair	

Minutes

Call to Order:

Committee Chair Duncan ShROUT called the meeting to order at 9:34 a.m. Attendees introduced themselves. Chairperson ShROUT reminded attendees that this meeting was initially scheduled for 2/15/2018, which had to be postponed due to weather. ShROUT noted that Irene Secora is resigning from the Committee, and will assist him and DHS staff with identifying another person who would serve as this Committee's prevention representative.

Review of 1/18/2018 Meeting Minutes:

Duncan ShROUT referenced the draft minutes from the last Committee meeting and asked for comments and corrections. None were offered. Christine Ullstrup moved that the minutes be approved and Raeanna Johnson seconded the motion. Motion carried unanimously.

Public Comment:

No persons offered any public comment on Committee business either in person or via telephone.

Discussion of Committee Role, Planning Topics, and SUD Priorities to Focus on:

Chairperson Duncan ShROUT reiterated that the committee's role is to help SCAODA give advice to the Governor and Legislature on AODA matters across the state. One committee task is to help match available funding to meet statewide substance use disorder (SUD) needs. ShROUT proposed that the committee develop a report that comprehensively assesses funding sources statewide and seeks to match that funding to meet specific AODA needs, as well as where and how to meet those needs, etc. ShROUT felt such a report should be 10 pages long and target the legislature as readers. In addition, ShROUT stated that the two "rolling workgroups" concept he proposed in January will be tabled for now.

Christine Ullstrup asked if the committee or DHS could contract with UW Population Health Institute to assist the committee with writing a comprehensive funding report. DHS staff person Mike Derr said this is definitely possible, and will look into this further.

Christine Ullstrup suggested following approach for discussing SUD priorities: *What are the current services (public and private)? What are the current SUD needs? (Or, who is affected as a result of the current status of services?) Where are the system and treatment gaps? Where are funding and resources coming from?* Brian Dean interjected that resources can include services and funding. Ullstrup recommended that the notes summarizing the committee's discussion in the January 2018 meeting minutes should be used to help frame this discussion.

Duncan Shroul suggested one possible model for the committee: the 2013 Burden of Excess Alcohol Use in Wisconsin Report. Mike Derr suggested that another resource committee members could use for planning and setting priorities is the 2017 SUD Needs Assessment that DHS completed.

Raeanna Johnson suggested the committee review breakdown of funding sources for various treatment and prevention programming. She also asked about how the Workforce Ad Hoc Committee's 2017 report might relate to the committee's current review of needs and how they could be met.

Duncan Shroul remarked that Wisconsin legislative bill AB 907 (Act 262) was designed to bring in or allow more SUD and mental health counselors to provide substance abuse counseling. Sen. Bewley supported this bill. Also, he noted that the go-to person in the legislature for the Council to work with is Rep. John Nygren.

Meeting guest Norman Briggs gave an overview on the highlights and possible impacts of Act 262. He noted that the Intervention and Treatment Committee discussed its concerns during its concerns and impressions. First, substance abuse counselors can now include licensed mental health professionals and counselors who stay within their scope of practice. Second, the administrative rules governing licensure of substance abuse counselors (DPS chapters 160-168) would now only apply to persons with an associate or bachelor's degree that seek a SAC certification. As a practical matter, ITC members felt that many clinics would not encourage most of their mental health professionals to serve as substance abuse counselors. Briggs also did not believe that Act 262 would impact insurance coverage much, and that some professionals who are currently dually-licensed might drop one license to save money and the hassle of certification.

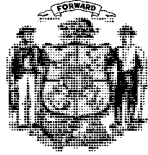
Given the committee's expressed concerns about the impact of Act 262, Duncan Shroul suggested that the ITC and SCAODA issue a letter stating the opinion that a person who thinks he/she is competent to be a substance abuse counselor should still consider obtaining SUD training, and send such letter out to mental health professionals across the state. Duncan asked Norman if ITC could prepare questions to ask DSPS to clarify certification questions, gaps and concerns, and Norman said the ITC would prepare such questions, with SCAODA members also having an opportunity to review and discuss those questions.

Norman Briggs also reported that the PEW Charitable Trusts' Andrew Whitacre recently gave a summary of the Phase 2 portion of the PEW Center's recommendations to the Governor's Task Force on Opioid Abuse and Commission on Substance Abuse Treatment Deliver, which included implementation of the Hub and Spoke Model. Proposed implementation steps could include: (1) using a standardized ASAM instrument at all levels of care; (2) Develop real-time data system for identifying treatment slots and openings; (3) removing barriers for new methadone clinics to operate; and (4) increasing consumer access to buprenorphine providers. (Act 262 removes the prior authorization requirement.)

This lead to discussion of DHS' efforts to fund and support two regional pilot projects in Wisconsin designed to consolidate counties' behavioral health service units into two consortiums, one headed by La Crosse County and the other by Chippewa County. Mike Derr will check with colleagues to obtain reports on the impacts of those initiatives and share them with the committee at an upcoming meeting.

Adjournment:

Raeanna Johnson moved that the meeting be adjourned, Brian Dean seconded the motion. The motion carried. Meeting adjourned at 11:35 a.m.



Duncan Shrout
Chairperson

Sandy Hardie
Vice Chairperson

Norman Briggs
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Planning and Funding Committee

May 17, 2018

9:30 AM to 12:00 PM

ARC Community Services Building, 1409 Emil Street
Madison, Wisconsin 53707

MEETING AGENDA

1. Call to Order and Roll Call.....Duncan Shrout
2. Review April 12, 2018 meeting minutes.....Duncan Shrout
3. Public Comment: Substance Use Disorder Planning Topics.....Duncan Shrout
4. DHS, Bureau & Prevention Treatment & Recovery Updates.....Mike Derr
5. 2018-22 SCAODA Strategic Plan Priorities Discussion.....D. Shrout & C. Ullstrup
6. Continue Discussion of Committee Priorities & Concerns.....D. Shrout & C. Ullstrup
7. Agency and Provider Updates.....Committee Members
8. Agenda Items for August 9, 2018 Committee meeting.....Committee Members
9. Adjournment.....All

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Planning & Funding Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA). The Committee’s primary objective is to assist SCAODA with coordinating substance use disorder planning and funding initiatives across state agencies.

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Conference Call: 1-877-820-7831

Access Code: 554523#

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Prevention Committee		Attending: Scott Stokes, Christy Niemuth, Raina Haralampopoulos, Allison Weber, Dennis Radloff, Kimberly Wild, Chino Amah Mbah, Paul Krupski, Sarah Johnson, Frank Buress, Ronda Kopelke, Kari Lerch, Jazzmyne Adams, Carol Wright, Chris Wardlow, Betsy Swenson, Sarah Linnan, Sara Koliner, Margarita Northrop, Mimi Johnson, Danielle Luther, Julia Sherman, Emily Holder
Date: 1/18/2018	Time Started: 12:30 p.m. Time Ended: 3:00 p.m.	
Location: Wisconsin State Patrol DeForest Post, 911 W. North Street, DeForest, Wisconsin 53532		Presiding Officer: Chris Wardlow, Interim Chair

Minutes

1). Welcome and Introductions: Chris Wardlow welcomed Members and Guests to the Governor's State Council on Alcohol and Other Drug Abuse's (SCAODA) Prevention Committee. Caroline Miller, the Chair to the Prevention Committee was not able to attend today's meeting and Chris has agreed to be the Interim Chair. Members and guests present introduced themselves and included what organizations/agencies they represent.

2). Public Comment: No public comment was made

3). Approve Meeting Minutes from October 19, 2017 Meeting: Chris requested Members to review the meeting minutes and requested a motion to be made to approve the minutes. Motion to approve the meeting minutes was made by Kari Lerch, Sarah Johnson seconded, no discussion, and the motion carried.

4). Updates on Discretionary Prevention Grants

Great Lakes Inter Tribal Council (GLITC) – Carol Wright, Strategic Prevention Framework Partnership for Success (SPF PFS) Grant Coordinator stated that GLITC was the recipient of grant to address underage drinking and prescription drug misuse and abuse. GLITC is without an epidemiologist and are hoping to hire one in the near future. Also GLITC has hired a new Epi Center Director who was a former CDC employee. They are waiting to hear if their carryover plan and data repository has been approved.

Opioid State Targeted Response (STR) - Scott Stokes, Section Chief for the Substance Abuse Section in the Division of Care and Treatment Services (DCTS) shared information about the grant and explained the different substance use disorder treatment funding that has be distributed which includes, expanding medication assisted treatment, recovery coach programs in hospital emergency rooms, recovery coaching through AmeriCorps, and re-issuing request for proposals (RFP) for unmet treatment needs to counties and tribes. Christy Niemuth, Prevent Prescription Drug/Opioid Overdose-Related Death Grant Coordinator shared that the STR prevention funding is going to 63 Alliance for Wisconsin Youth (AWY) coalitions to promote the Dose of Reality campaign, drug take-back events, installation of permanent drug take-back boxes, drug lock boxes or bags, drug deactivation units, naloxone training and distribution, and town hall meetings/other community education events.

Partnership for Success 2015 (PFS15) – Christy also provided an update on the Partnership for Success (PFS) grant which is in its third year and second year of implementation. Fourteen counties and coalitions are involved with this grant. Sarah Linnan, Assistant Researcher with Population Health Institute handed out a document titled "Strategic Prevention Framework Partnership for Success 2015: Coalition Activities Update". She discussed the grantee's first year of implementing the approved strategies and that the strategies were similar from past grants.

Prevention Prescription Drug/Opioid Overdose Related Deaths (PDO) - Christy gave an update of the PDO grant. Part of the activities in the grant is to train people in the dissemination and use of naloxone. Christy discussed what the grantees have been working on which includes the statewide standing order, dissemination of naloxone, and changing the stigma and attitudes among first responders and them using naloxone.

State Epidemiological Outcomes Workgroup (SEOW) - Sarah reported the Workgroup's last meeting was in early December and that they have increased their membership. Members of the Workgroup presented a draft version of an online data dashboard and discussed the coordination of having the dashboard online. An internal workgroup within SEOW is starting work on the 2018 epidemiological report which will be printed this year with the hopes that in the future that it will be online. Sarah will send Carol Wright the information about the Workgroup. Also, Chino Amah Mbah, Fellow with the Center of Substance Abuse Prevention (CSAP) completed a Transgender fact sheet that was provided at the meeting.

Strategic Prevention Framework for Prescription Drugs (SPF Rx) - Kimberly Wild, SPF Rx Grant Coordinator shared an updated on the grant. The planning year ended in August/September of 2017. Sauk and Dodge counties were chosen as the high need counties. Sauk county had their kick-off meeting in November/December and Dodge county will be meeting with the evaluation team from Population Health Institute.

5). Updates on the Ad Hoc and Workgroup

Prevention in the Workplace Ad Hoc Committee - Allison Weber, Prevention Coordinator and staff to the Committee discussed the framework that was selected by the Members to organize their recommendations. There are three main categories are, pre-employment, employment, and community. The Committee's future meetings will include presentations on employee assistance programs (EAP), trauma informed care (TIC), and drug courts and these will provide information to the members and assist in creating recommendations.

Opioid Advisory Workgroup – Christy shared that the Workgroup met this morning and they have decided that they will be meeting more frequently to address and advance their work together. They are the Advisory Workgroup for the prevention PDO and SPF Rx discretionary grants. The Workgroup was asked to be the Opioid Priority Action Team (PAT) of the Healthy Wisconsin plan and will be discussing the objectives and strategies at a future meeting.

6). Review the Prevention Committee Workplan – Chris and Christy shared with Members and Guests the current workplan and that they will be reviewing and revising the four year plan with more broad-based goals. It was agreed upon from past Prevention Committee meetings to review the workplan as an agenda item to ensure we are achieving the stated goals and planning to address future goals. Attendees discussed the future of the Prevention Specialist certification through the Wisconsin Department of Safety and Professional Services (DSPS) and requested to be updated and the possibility of having an "in-service training" about the certification process from an employee at DSPS.

7). Introduction and Implementation of Healthy Wisconsin and the Priority Action Teams - Employees within the Office of Policy and Practice Alignment (OPPA), Division of Public Health, Department of Health Services provided a presentation on the Healthy Wisconsin plan (handouts of the presentation were provided). Discussion continued about the alcohol priority and the Prevention Committee was offered to be the alcohol Priority Action Team (PAT) for the Healthy Wisconsin plan. The alcohol PAT/Prevention Committee would offer additions and revisions to the alcohol priority to be shared with the Public Health Council for their final approval. Ownership of the Healthy Wisconsin Plan is not with DHS and is intended to be a Wisconsin public health plan for all to use. The team provided examples of how they can support the Prevention Committee and their work in sharing success stories and elevating alcohol prevention strategies in a collaborative manner between coalitions and local public health departments. A future meeting with the Prevention Committee and OPPA Team will be scheduled to discuss the Prevention Committee being the alcohol PAT.

8). Agency Member Updates

Emily Holder, with the Department of Public Instruction (DPI) shared information about the recent AODA funding opportunities and the state budget. Emily passed around a document with a list of funded school districts. It was proposed that either Emily or another DPI employee participated on the OAW to collaborate on opioid prevention efforts.

Parents Who Host Lose the Most Campaign (PWH) - Raina Haralampopoulos, Outreach Specialist with Population Health Institute shared that this will be the last year that DHS will be financially supporting the campaign. Local coalitions can continue to implement the campaign and they will be responsible for purchasing materials in the future. Allison has had one conference call on the redesign of the PWH campaign and they are looking at other campaigns that could be replicated in Wisconsin throughout the state.

Julia Sherman from the Wisconsin Alcohol Policy Program discussed the recent tax reform that would significantly reduce the federal alcohol tax. Julia provided an update on the "click and collect" alcohol sales.

Danielle Luther with the Marshfield Clinic Health System shared information about the RecoveryCorps which had 12 members complete orientation and training. A warm-line will be available to anyone who needs assistance with treatment and recovery and staff and working on protocols and procedures. Northwoods Coalition recently hosted a kNOW Meth Kickoff event on January 11th in Eau Claire. During the Kickoff the Methamphetamine Report was released which had over 45 recommendations for reducing the use and impact of methamphetamine in Wisconsin. Teams at the event created 90 day action plans and they will be receiving technical assistance and follow-up every 90s to discuss progress made in the action plans. The Midwest Counterdrug Training Center out of Iowa will be supporting the technical assistance and follow-up with the teams.

Future agenda items: Set a meeting date before the scheduled Prevention Committee April meeting.

Future meeting dates of the Prevention Committee:

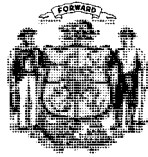
April 19, 2018

July 19, 2018

October 2018 – TBD

Prepared by: Mary Raina Haralampopoulos on 2/28/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 4/19/2018



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

**OPEN MEETING NOTICE
Prevention Committee**

March 1, 2018

1:30 PM to 4:00 PM Wisconsin State

Patrol DeForest Post
911 W. North Street
DeForest, Wisconsin 53532

MEETING AGENDA

1. Welcome and Introductions.....Caroline Miller, Chair
2. Public Comment: The committee will accept comments from the public relating to any committee business.....Caroline Miller, Chair
3. Review Alcohol Priority Action Team Proposed Charter.....Raina Haralampopoulos, Sara Koliner, and Julia Sherman
4. Review Healthy Wisconsin Alcohol Priority Objectives and Strategies.....Team from Office of Policy and Practice Alignment within the Wisconsin Department of Health Services
 - Suggestions on additions, changes, and edits to the document
5. Discussion on Format for Sharing Success Stories.....Committee Members
6. Review Next Steps.....Co-Chairs

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Prevention Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA). The Committee’s primary objective is to assist SCAODA with coordinating substance abuse prevention initiatives across state agencies.

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Conference Call: 1-877-820-7831 Passcode: 441096

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Prevention Committee - Alcohol Priority Action Team		Attending: Caroline Miller, Christy Niemuth, Raina Haralampopoulos, Allison Weber, Kimberly Wild, Chino Amah Mbah, Sarah Johnson, Ronda Kopelke, Jazzmyne Adams, Margarita Northrop, Matthew Collie, Annie Short, Nicole Butt, Julia Sherman
Date: 3/1/2018	Time Started: 1:30 p.m.	Time Ended: 3:00 p.m.
Location: Wisconsin State Patrol DeForest Post, 911 W. North Street, DeForest, Wisconsin 53532		Presiding Officer: Caroline Miller, Chair

Minutes

1). Welcome and Introductions: Caroline Miller welcomed members and guests to the Governor's State Council on Alcohol and Other Drug Abuse's (SCAODA) Prevention Committee, Alcohol Priority Action Team meeting. Members and guests present introduced themselves and their organizational affiliation.

2). Public Comment: No public comment.

3). Priority Action team (PAT) Charter: Matthew Collie provided an update on the intent of the PAT and introduced a draft team charter. The charter can serve as a sub set of what already exists under the Prevention Committee specifically for guiding the work of the PAT. The immediate goal is to review the goals, objectives, and strategies of the Healthy Wisconsin alcohol priority. By the end of June there will be an annual addendum made to the alcohol priority which will serve as the Healthy Wisconsin plan until 2020 when a new five year plan will be developed. Members decided to review the objectives and strategies first in order to help guide the direction of the charter.

4). Review Healthy Wisconsin Alcohol Priority Objectives and Strategies: Members requested clarification as to the data sources for the two alcohol priority objectives. Matthew will follow-up to identify the data sources and agreed that future drafts of the priority would include the source for all data. He will also share the updated data for this priority when it has been collected from the Office of Health Informatics.

Julia Sherman provided a document suggesting revisions to the current objectives and strategies that would expand the focus from more individual-based strategies to policy and environmental-based strategies. Committee members agreed to review Julia's redraft. Discussion included:

- Including the age of the targeted population for all objectives and defining "adults" as individuals over the age of 18.
- Concern from Anne Ziege that fall deaths and poisoning deaths can only be determined by ARDI, which is an estimation.
 - The group agreed to remove objectives pertaining to alcohol-related deaths because the data points to quantify it are not reliable.
 - Instead, it was decided to organize the objectives by age i.e. adult heavy/binge drinking versus underage drinking.
 - Based on this, the recommendation was made to change the goal to read: "Prevent and reduce underage and excessive alcohol consumption."
- It was recommended that Objective 1 be revised to read: "Reduce heavy drinking and binge drinking among those 18 and older" and Objective 2 to read: "Reduce underage drinking."
- Recommendations related to revising the new Objective 1 (reducing adult heavy and binge drinking):
- Incorporating Julia's revisions to the following strategies and including them as a part of this objective: 1.1 (SBIRT), 1.3 with the addition of tech schools, strategies 1.4 - 1.5, 2.2, and 2.4.
- 58% of alcohol-related deaths are acute, which means 42% of deaths are not being addressed by any of the current strategies. The WI Cancer Council has named alcohol as a risk for cancer and made it one of its three top priorities. Therefore, the group recommends adding Julia's strategy 5 to this objective.
- Recommendations related to revising the new Objective 2 (reducing underage drinking):

- Incorporating Julia's revisions to the following strategies and including them as a part of this objective: 1.1 (SBIRT) for schools, 1.4, and 1.5
- Include strategy 1.2 however, without funding it will be difficult to measure a statewide 85% compliance rate. It is recommended that the strategy should include language about encouraging local municipalities strive for an 85% compliance rate.
 - The committee wondered whether a systemic goal of developing a statewide system for collecting compliance check data could be included in the 2025 Healthy Wisconsin plan.
- Strategies should incorporate specific information for pregnant women. In particular, strategy 1.1 should include information on screening and referral for pregnant and post-partum women.

Objective 1 would now be underage drinking and Objective 2 would be about binge and heavy drinking in adults.

In addition the committee recommends:

- Deleting strategy 2.1 and 2.3 as they are either duplicative or too broad.
- Incorporating ACEs into the strategies. Potentially including information about raising awareness around ACES?
- This could be a strategy with similar language across both alcohol and opioids.
- Look at the SAMHSA website for recommendations related to ACES such as building strong collaborations at community levels, making sure police, CPS, schools are practicing trauma informed policies, etc.
- There could be a recommendation under both objectives related to ACES. For adults it's about recognizing trauma, how trauma may be impacting their own behaviors, and how to protect children from experiencing trauma. For youth it is more about building resiliency and reducing how trauma may impact them.

Action Items:

- Matthew will ensure that data sources for any indicators are included in the plan and share updated data for this priority when it has been collected from the Office of Health Informatics.
- Julia Sherman will revise the Goal, Objectives, and Strategies based on recommendations from the committee.
- Matthew will revise the front page of the priority according to the new goals and priorities (the Cancer Control Plan may have some language related to the new strategy on the link between alcohol use and cancer).
- Raina will work on drafting a strategy related to pregnant women. The committee would like to ensure that what is developed related to alcohol for pregnant women could also be incorporated into the Opioid Plan.
- Matthew will update the Charter based on today's discussion and send for feedback.
- Next steps – Public Health Council meeting will be April 6, 2018. Revisions will be shared with the group for additional comments prior to April 6. In 2019, the Department of Public Health (DPH) will use the health assessment data to inform the 2025 health plan. The PAT will continue to look at these issues and provide recommendations for the next Health Plan.

5). Celebrating Success Stories: Healthy Wisconsin is the state's health plan, and DPH is updating the Healthy Wisconsin website with that in mind. The website will include the ability for local providers to self-report success stories. This will be an ongoing project. DPH will provide updates as new resources are added. The committee recommended adding a few more guiding questions to the success story request form in order to potentially improve information sharing.

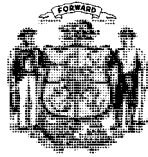
Future meeting dates of the Prevention Committee:

April 19, 2018

July 19, 2018

October 2018 – TBD

These minutes are in draft form. They will be presented for approval by the governmental body on: 4/19/2018



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

**OPEN MEETING NOTICE
Prevention Committee**

April 19, 2018

12:30 PM to 3:30 PM Wisconsin

State Patrol DeForest Post DeForest,

Wisconsin 53532

MEETING AGENDA

1. Welcome and Introductions.....Caroline Miller, Chair
2. Public Comment: The committee will accept comments from the public relating to any committee business.....Chair
3. Approve Minutes from January 18 and March 1 Meetings.....Chair
4. Updates on Discretionary Prevention Grants.....Nicole Butt, Sarah Linnan, Christy Niemuth, and Kimberly Wild
 - Great Lakes Inter Tribal Council/Tribal Grant PFS (GLITC)
 - Opioid State Targeted Response (STR)
 - Partnership for Success 2015 (PFS 15)
 - Prevent Prescription Drug/Opioid Overdose-Related Deaths (PDO)
 - State Epidemiological Outcomes Workgroup (SEOW)
 - Strategic Prevention Framework for Prescription Drug (SPF Rx)
5. Updates on the Ad Hoc and Workgroup
 - Prevention in the Workplace Ad hoc Committee.....Allison Weber
 - Opioid Advisory Workgroup.....Christy Niemuth
6. Review the Prevention Committee Workplan.....Chair
7. Update on the Alcohol Priority Action Team and *Healthy Wisconsin*.....Team from the Office of Policy and Practice Alignment, Division of Public Health, Wisconsin Department of Health Services (OPPA, DPH, DHS)

8. Agency Member Updates.....Committee Members
9. Future Agenda Items.....Committee Members

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Prevention Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA). The Committee's primary objective is to assist SCAODA with coordinating substance abuse prevention initiatives across state agencies.

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Conference Call: 1-877-820-7831 Passcode: 441096

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Prevention Committee - Employee Ad-hoc Workgroup		Attending: Jill Gamez, Dennis Heling, Michelle Giese, Frank Bures, Alexia Kulweic, Allison Raina Haralampopoulos, and Chino Amah Mba
Date: 1/17/2018	Time Started: 1:00 p.m.	Time Ended: 4:00 p.m.
Location: DeForest State Patrol - 911 W North St, DeForest, WI 53532.		Presiding Officer: Jill Gamez

Minutes

1). Welcome and introductions: Members present introduced themselves and included what organization they represent for the new member present.

2). Approval of previous meeting minutes: The December meeting minute was approved.

3). Public comment: No public comment was made.

4). Framework discussion: Jill asked the group for their thoughts about the proposed framework for the product of the workgroup which is: pre-employment, employment, and community. She also suggested another possible framework; dividing the product into five sections which include - policy development, health promotion programs, drug testing, assistance and treatment, and information and educational programs. The groups weighed the pros and cons of its initial proposed framework and also considered the new suggestion. The group came to an agreement to divide the framework into pre-employment and employment. The community aspect of the initial proposed framework can also be reflected in pre-employment and employment.

- a). Frank updated the group on his research on drug testing policies. He also brought in some sample drug testing kits for the group to see. He mentioned that the sample kits he brought in make use of urine and/or saliva. He explained to the group that not all drug testing screens are effective; some have false positive screens as they pick up ibuprofen. Others pick up different THC metabolites including THC that might be present in some prescription drugs. This is part of the reason why he wants the group to make recommendations about drug testing that addresses these issues. Allison also shared with the group an email she got from the Department of Workforce Development on drug testing.

5). Employee Assistance Program - Michelle updated the group on what she found out about EAP programs in the Fox Valley Area. Some employers said that their EAPs included 3-5 meetings as a form of support for their employees. Another employer had no educational program for their workplace on being substance use aware or on surrounding activities that doesn't involve alcohol. Some employers had no knowledge or awareness on how to make their workplace recovery-friendly or supportive of individuals in recovery. Allison also shared the email she received from an EAP provider with the group.

6). Brainstorming of recommendations: Some of the recommendations that were produced during the brainstorming of recommendations are: recommendations for employers on substance use, stigma, recovery, prevention, and resources available. Another recommendation was businesses partnering with and joining local coalitions so as to help address substance use disorders in the workforce. Also, there was a recommendation on incentivizing employers and workplaces to become trauma informed and recovery friendly.

The group further broke down their recommendations into pre-employment and employment.

- a). For pre-employment: drug testing, SBIRT (screening, brief intervention and referral to treatment), engagement of DWD, engagement of DPI (department of public instruction), the connection of treatment programs with employment ready programs and centers, job training programs with a prevention part, school prevention programs (useful for future employment), UW Extension programs, public outreach (messaging and education), re-entry programs.

- b). For employment: policies around drug testing, training supervisors and managers on SUDs, interagency collaboration and partnerships among state agencies that have a stake in issues touching on employment and health, engagement with the chambers of commerce, health insurance benefits, EAPs, wellness programs, public recognition for employers, interventions that support the workplace environment, shifting from harmful negative policies to supportive ones, engagement with unions, and peer support via recovery coaches.

7). Review of previous recommendations from previous reports: the group reviewed the document that contained recommendations from previous SCAODA prevention committee reports that touched on employment and/or workplace issues. It was agreed that some of the recommendations in past reports were similar to recommendations they are currently proposing. Jill suggested to the group that they narrow some of the recommendations down and start getting more specific. She suggested it be best if group members picked recommendations and research on possible policies, programs, and solutions that address/entail their chosen recommendations.

8). Future items: The group members chose recommendations they will look further into as stated above -

- Jill: training supervisors and managers on SUDs; Walmart's second chance program
- Michelle: look for a specific program that works with employers to help them become recovery-friendly
- Frank: look more into drug testing in the pre-employment phase
- Allison: EAPs
- Alexia: employer policies, employer incentive
- Duke: Homel's second chance program (Duke was absent in this meeting, this action item is what he proposed to look into at the last meeting)

Future meeting and future agenda items:

- The next meeting will be at Apricity on February 22, 2018 from 1:00 - 4:00 p.m. The tour of the facility will take place at 11:00 a.m. Address to be provided later.
- The drug court judge will be giving a presentation at this meeting around 1:15 p.m.
- Allison and Alexia will try and see if they can get someone from the DWD to give a presentation at a future meeting.
- Allison will try and get Scott from DHS to give a presentation on trauma-informed care.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Prevention Committee:

Workplace Prevention Ad-Hoc Committee

February 22, 2018

Apricity

1010 Strohmeyer Drive

Neenah, WI 54956

1:00PM-4:00PM

MEETING AGENDA

1. Welcome and Introductions.....Jill Gamez, chairperson
2. Approval of previous meeting minutes
3. Public Comment: The committee will accept comments from the public relating to any committee business
4. Drug Court presentation, Judge Metropolis and Sarah Bassing-Sutton
5. Scott Webb of DHS-trauma informed care and EAP(employee assistance programs)
6. Recommendation development
7. Statement of Need
8. Future Ad Hoc Committee Meeting Dates and Agenda Items

March 28, 2018: 1:00-4:00PM at Madison, WI

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Workplace Prevention Ad Hoc Committee's primary mission is to consider preventing substance use with the goal of creating safe and productive workplaces by researching, evaluating and developing recommendations for Wisconsin workplaces.

DHS is an equal opportunity employer and service provider. If you need accommodations because of a disability, if you need an interpreter or translator, or if you need this material in another language or in alternative format, you may request assistance to participate by contacting Allison Weber at 608-261-5156 or at allison.weber@wisconsin.gov

Conference Call: 1-877-820-7831 Passcode: 441096

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Prevention Committee: Workplace Prevention Ad-hoc Committee			Attending: Michelle Devine, Frank Bures, Eva Scheppa, Jill Gamez, Dennis Heling, Allison Weber, Raina Haralampopoulos, Chino Amah Mbah
Date: 2/22/2018	Time Started: 1:00 p.m.	Time Ended: 4:00 p.m.	
Location: Apricity - 1010 Strohmeyer Drive, Neenah, WI 54956			Presiding Officer: Jill Gamez

Minutes

- 1). Welcome and introductions: The group members introduced themselves for the benefit of the presenters.
- 2). Approval of previous meeting minutes: Motion to approve January's meeting minutes was made by Frank and seconded by Dennis. The minutes were approved.
- 3). Public comment: No public comments were made.
- 4). Drug Court Presentation: Judge Metrololis and Sarah Bassing-Sutton gave a presentation about their drug court. Theirs, like a lot of other drug courts, is a post-conviction court, with the Department of Corrections as the supervisors. Dane County's drug court is pre-conviction, while Milwaukee's is pre-charging. Some of the enquiries the judge makes about the clients (people with SUD related convictions such as Operating while intoxicated OWI) are: have they been staying sober, are they involved in a treatment program, are they progressing in their treatment, have they been productive, etc. They also administer a quarterly survey for participants to get more information about drug courts participants' prespective about their judges, their treatment, and the relationships formed with the judges. Their drug court sees people from the younger population coming in for narcotics and are addicted to narcotics, while the older populations are OWI offenders. The drug court uses a compass assessment which test for criminal risk factors, high offenses, high need, etc. Those with a higher propensity to commit more crimes get priority into the drug courts. The judge uses sentences as last resort to get people to do stuff they are mandated to do by the court. The presenters also mentioned how Apricity is a great resource they refer their clients to in relation to getting employment and being productive. Apricity helps them (drug court participants) learn about work ethics before going out to secure other types of employment. The judge talked about some of the hesitation of the employers to hire people with substance use disorders or who were in the drug court. The judge mentioned that Fidelity Bonding, which is an insuarance to employing a high-risk employee, might be something employers and the group might want to look into. When the clients of the drug courts relapse, the first recommended course of action is to up their treatment programs as opposed to sending them to jail.
Frank did ask if there are non-narcotic treatments available. The judge mentioned that there were not a lot of treatment providers in their area that use or implement non-narcotic treament, therefore the option isn't available.
- 5). Presentation on trauma-informed care and Employee Assistance Programs: Scott Weber of DCTS gave a presentation about trauma-informed care (TIC) in workplaces. He talked about how trauma has an impact on substance use disorders. He also mentioned that employee assitance programs (EAPs) need to be trauma-informed and be aware of Adverse Childhood Experiences (ACEs) as this will help them provide better services to employees. He did talk about an EAP that is TIC - they look at brain science, truama, cognitive and neural developmental issues and how these affect employees at work. Scott also mentioned that EAPs are in the best position to screen for ACEs, however, to his understanding, they currently(EAPs) do not screen and assess for ACEs. This (screening for ACEs) is something he believes that if EAPs do, will be quite beneficial to their services, to employees, and to their recommendations/referrals. Scott also mentioned that the conversation about EAPs and TIC might be happening, but EAPS might be using different languages when refering to trauma-informed care.
The group asked Scott how best employers can go about establishing an EAP, what are the things they should keep in mind when looking for an EAP and what are the criteria for a good EAP. Scott told the group that there are different types

of EAPs (hotlines, life-answered hotlines, face-to-face, etc.) and employers should figure out which is important and why. Having an EAPs with a life human being is important as EAPs are supposed to be relational/based on relationships. He also suggested looking at the EAP's referral services and provider networks (sometimes having a large provider network isn't necessarily good as the EAPs might not have a real relationship with these providers and that is vital). He also mentioned that some EAPs might be part of work-time hours and employers should consider if this might work for them. Cost is a driving factor in employers choosing an EAP plan - EAPs are cheaper for employers with over 500 employees. Some specific things that will benefit employers with EAPs include: supervisor trainings on AODA, trauma, and ACEs. Also, workplace culture needs to change by moving from being pre-contemplative to contemplative and action-oriented.

6). Recommendation development: The group talked about including in the recommendations section, that employers seek out EAPs that are trained in Alcohol and other drug abuse (AODA) or trained in co-occurring disorders.

Jill went over the list of recommendations developed in the prior meeting and asked the group members to pick recommendations they wanted to do and be responsible for. They are as follows:

Pre-employment drug testing - Frank

(Vocational) school-to-work programs (job training/future employment school programs' incorporation of substance use in the workplace) - Dennis

Treatment centers (connecting with employment ready programs and centers) - Michelle

Employment drug testing & policies - Michelle

Training supervisors and managers - Jill

Health insurance benefits (related to substance use) - Eva

Employee Assistance Programs - Eva

Wellness programs (workplace wellness grant, EVB educational programs effective in the workplace) - Jill

*Chino will post a document with all the recommendations and the current assignments on Basecamp.

7). Statement of need: The group looked at the draft of the report so far that Raina put together which contains the statement of need. The group also suggested that maybe the name of the report should reflect more than prevention. Since this ad-hoc is a sub committee of the Prevention Committee, the Prevention Committee would have to consider and maybe vote on the report and its content. Jill also told the group to post ideas on Basecamp of what other things they want included in the background section of the report.

8). Future Ad-Hoc Committee Meeting Dates and Agenda Items: The next meeting is on March 28, 2018 at the Deforest State Patrol Office from 1:00 - 4:00 p.m.

Department of Workforce Development will be on the agenda for the next meeting.

Fidelity bonding

There will be no meeting in May, as workgroup members will use this time to develop materials/drafts for the report.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

**Prevention Committee:
Workplace Prevention Ad-Hoc Committee**

March 28, 2018
Division of State Patrol
Southwest Region Headquarters
911 W. North Street
DeForest, WI 53532
1:00PM-4:00PM

MEETING AGENDA

1. Welcome and Introductions.....Jill Gamez, chairperson
2. Approval of previous meeting minutes
3. Public Comment: The committee will accept comments from the public relating to any committee business
4. Department of Workforce Development presentation.....Patrick Lonergan, David Leix and Janell Knutson
5. Recommendation development, report on progress
6. Statement of Need
7. Future Ad Hoc Committee Meeting Dates and Agenda Items

April 26, 2018: 1:00-4:00 PM at Marquette Co. Courthouse
Montello, WI

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Workplace Prevention Ad Hoc Committee's primary mission is to consider preventing substance use with the goal of creating safe and productive workplaces by researching, evaluating and developing recommendations for Wisconsin workplaces.

DHS is an equal opportunity employer and service provider. If you need accommodations because of a disability, if you need an interpreter or translator, or if you need this material in another language or in alternative format, you may request assistance to participate by contacting Allison Weber at 608-261-5156 or at allison.weber@wisconsin.gov

Conference Call: 1-877-820-7831 Passcode: 441096



Recovery Support Coordinators

Three RSC agencies: Justice Point, La Causa, and WCS. There are about 30 RSCs. Participant’s choice. Someone will receive a RSC if eligible for TANF, IV Drug, FDTC, ADTC, STR and/or involved/interested in MAT. RSCs are assigned most often by an Access Point.

Duties

1. Have face-to-face contact at least weekly
2. Develop initial Recovery Plan of Care (RPOC) within 30 days of enrollment and every 90 days thereafter
 - a. Monitor the provision of services by agencies as called for in the RPOC
 - b. Delegate tasks to team members responsible
 - c. Ensure that service authorizations are current. Complete SARJs to request extensions or additional services indicated in RPOC
3. Assist participant in accessing Recovery Support Services (RSS) and treatment services
4. Assist participant in developing a Recovery Support Team (RST) with both formal and natural supports and hold monthly meetings
5. Act as a bridge between and with other providers and systems
6. Attend appointments and court hearings as necessary
7. Troubleshoot and intervene as appropriate to make sure participants get to their treatment and other appointments
8. Ensure connection to CARS funded MAT services and subsequent treatment when requested by participant
9. Help to transition into another level of care (TCM, CCS)

Coordinate who is responsible for helping participant with:

10. Medical appointments and medical inquires
11. Social Services (DSS, SSA, foster care, payee)
12. Independent housing search
13. Legal advocacy (probation/parole officer, attorney, courts)
14. Benefits
15. Transportation, in crisis situations - provide or arrange (Milwaukee County is payor of last resort, DMCPs will fund if client is involved in FDTC)
16. Education and Employment

AODA CARS staff:

Assistant Program Administrator

Janet Fleege

Integrated Services Coordinator

Susan.Clark@milwaukeecountywi.gov

414-257-7767

Admin Coordinators

Cameron Overton – TANF, FDTC, RSC

Lisa Lollis – Residential

Mary Ann Repnik – OP/DT, RSS, Detox Sue Clark

Shari Gresk – Residential, ADTC, MAT

Christina Schultz – VTI, Technical Assistance, new provider onboarding, MAT

Milwaukee County Behavioral Health Division

Community Access to Recovery Services (CARS)
IV Drug Grant Program

June 1, 2018

Access to CARS

- Presentation to one of several community based Access Points

- IMPACT

- United Community Center

- Justice Point

- M&S Clinical Services

- BHD CARS Intake Team

- Walk in

- Mobile

- Based on need

- Appointments

- Based on need

ACCESS POINT VOLUME

2017

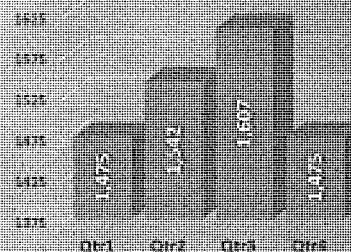
	178	106	342	133
	234	278	191	191
	321	239	275	214
	438	683	530	564
	112	101	140	128
	Qtr-1	Qtr-2	Qtr-3	Qtr-4
Access Point	CARS	IMPACT	JusticePoint	
M&S	UCC	WCS		

Access to CARS, cont

.. Comprehensive Assessment

- Self report
- Collateral information
- 1.5 – 2 hours
- Schedule 1st appointment
- Enter services authorization(s)

2017 Comprehensive Assessments Completed



Current Allocation

- \$510,000 Intravenous drug users
 - \$10,000 to purchase 125 dosages of nasal naloxone (Narcan)
 - \$500,000 voucher pool, for the provision of direct services

/Funded services:

- Medication Assisted Treatment (MAT)
- AODA Residential
- Day Treatment/Outpatient
- Recovery Support Coordination
- Recovery Support Services
 - Bridge Housing
 - Community Employment
 - Spiritual Support
 - Etc.

Priority Populations

- Pregnant intravenous drug users & Intravenous drug users
 - Provision of services within 48 hours
 - If waitlisted, Interim services
 - Alternate level of care

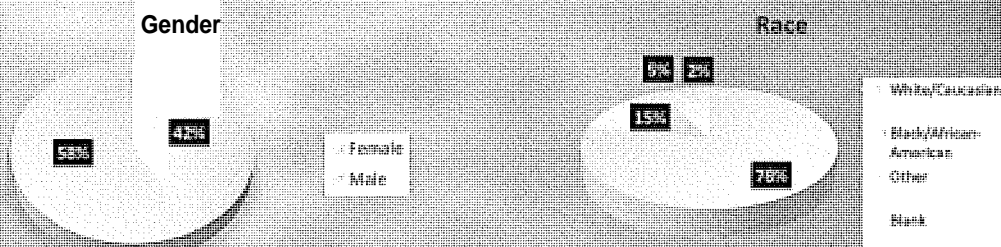
Program Goals 2018

- Provide services to at least 350 people
 - Currently 186 have been served
 - 2 pregnant women
- Establish outreach, connection and partnership with community based providers
 - Mobile screening
 - Direct referrals
- Provide Certified Application Counseling & Assistance
 - All Access Points have CAC certified staff

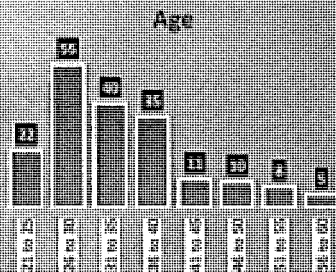
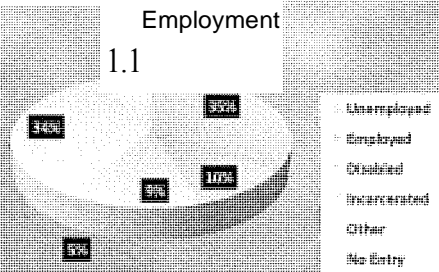
Program Goals 2018 cont.

- Ongoing operations meetings to discuss needs of IV drug consumers/MAT
 - Occur Bi-Monthly
 - CARS, First Step Community Recovery Center, IM PACT, WCS, Justice Point, M&S Clinical Services, La Causa, AIM, Outreach Community Health Center
- Increase by 10% the # of Intravenous drug users receiving MAT funded by BHD/CARS
 - Baseline 20 (from 2017)
 - Goal is 22 (for 2018)
- Provide Support Coordination (RSC) services to all Intravenous drug users
 - Advocates, help individuals navigate system, coordinates treatment, ensures correct level of care, weekly face-to-face contact, monthly team meetings, Recovery Plan of Care, discharge planning, transfer to other programs, access to and/or coordination with MAT
- Achieve at least 75% client satisfaction for Intravenous drug users with service provision
 - Past 2 years have maintained at least 75%

2018 IV Drug Program Data, n=186



0 IV Drug Program Data, n=186



Contact Information

Janet Fleege

- MCBHD/CARS
- janet.fleege@milwaukeecountywi.gov
- 414-257-6925

Sue Clark

- MCBHD/CARS
- susan.clark@milwaukeecountywi.gov
- 414-257-7767

Thank You

- Wisconsin Department of Health
- Division of Care and Treatment Services
- Bureau of Prevention Treatment & Recovery
 - Contract Manager: Elizabeth Collier



WISCONSIN | ePDMP



Wisconsin Enhanced Prescription Drug Monitoring Program

The WI ePDMP is a tool to help combat the ongoing prescription drug abuse epidemic in Wisconsin. By providing valuable information about controlled substance prescriptions in schedules II-V that are dispensed in Wisconsin, it can aid healthcare professionals in their prescribing and dispensing decisions. The WI ePDMP also fosters the ability of pharmacies, healthcare professionals, law enforcement agencies, and public health officials to work together to reduce the misuse, abuse, and diversion of controlled substance prescription drugs.

2017 WI ePDMP Utilization



- Up to 35,000 Patient Queries per Day
- Over 46,000 Healthcare Users

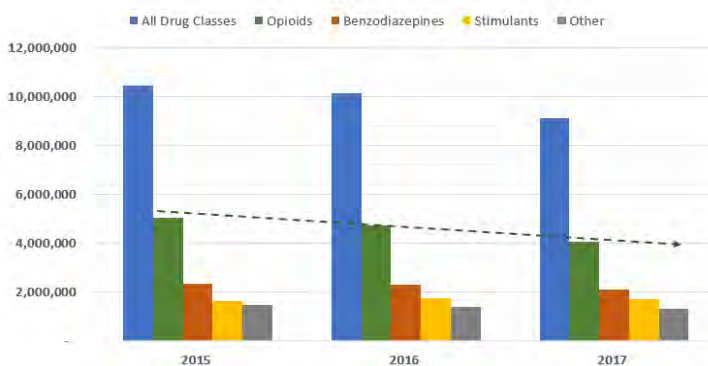
2017 WI ePDMP Data



- Over 9 million records submitted per year by over 2,000 submitters
- Connected to PDMPs in 15 other states

Controlled Substance Dispensing Trends

Dispensing by Drug Class



Dispensing by Drug Class 2015 - 2017

All Drug Classes	↓	14% Decrease
Opioids	↓	20% Decrease
Benzodiazepines	↓	13% Decrease
Stimulants	↑	5% Increase

Concerning Patient History Alert Trends 2015 -2017

- Patients with 5 or More Prescribers/Pharmacies ↓ 47% Decrease
- Patients with Daily Morphine Equivalent of Over 90 ↓ 37% Decrease



- Hydrocodone-Acetaminophen
- Amphetamine-Dextroamphetamine
- Tramadol HCl
- Oxycodone HCl
- Alprazolam

The WI ePDMP Statistics Dashboard provides interactive data visualizations, including county-level data, about the controlled substance prescriptions dispensed in Wisconsin, the law enforcement reports submitted to the WI ePDMP, and the use of the WI ePDMP by healthcare professionals and others. Visit <https://pdmp.wi.gov/statistics> for more data from the WI ePDMP.

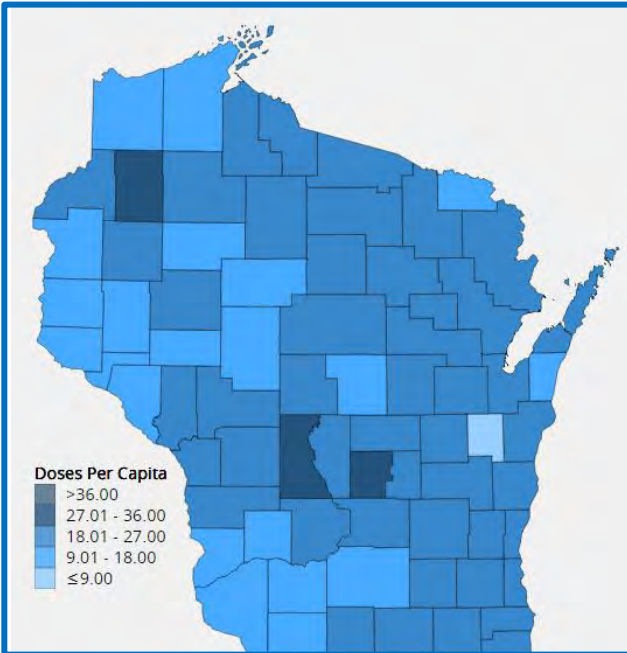


WISCONSIN | ePDMP



Dispensing Trends 2015 - 2017 Controlled Substance Prescription Drugs in Schedules II-V County Level WI ePDMP Statistics Report

Additional Data Available on the Public Statistics Dashboard at <https://pdmp.wi.gov/statistics>



Doses Per Capita Q4 2017

Doses Per Capita			
<i>Doses indicates the quantity of pills dispensed</i>			
AREA	Q1 2015	Q4 2017	CHANGE
WISCONSIN	28.15	20.60	↓27%
BROWN	25.43	21.2	↓17%
DANE	22.16	17.21	↓22%
LA CROSSE	24.44	19.53	↓20%
MARATHON	23.3	18.28	↓22%
MILWAUKEE	33.79	23.33	↓31%

Controlled Substance Dispensing 2015 - 2017 Trend					
<i>Dispensing indicates the number of prescriptions filled</i>					
AREA	All Drug Classes	Opioids	Benzodiazepine	Stimulants	Other
WISCONSIN	-13%	-19%	-11%		-12%
BROWN	-6%	-17%	-1%	9%	-4%
DANE	-11%	-21%	-9%	8%	-8%
LA CROSSE	2%	1%	-1%	8%	6%
MARATHON	-7%	-13%	-6%	4%	-4%
MILWAUKEE	-18%	-24%	-17%	3%	-13%

Department of Safety and Professional Services - Wisconsin Enhanced Prescription Drug Monitoring Program
 Web: pdmp.wi.gov Email: PDMP@wisconsin.gov Phone: (608) 266-2112



Law Enforcement Alerts 2017 County Level WI ePDMP Statistics Report

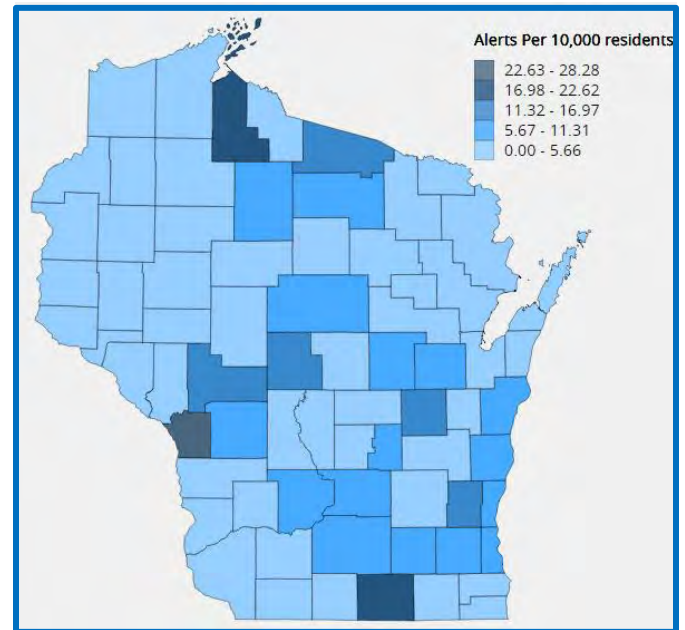
Additional Data Available on the Public Statistics Dashboard at <https://pdmp.wi.gov/statistics>

Law enforcement agencies are required by Wis. Stat. § 961.37 to submit an alert to the WI ePDMP based on "reasonable suspicion" or "belief" under the following circumstances:

- When an officer suspects that a person violated the Controlled Substances Act with a prescription drug (such as diversion or unlawful possession)
- When the person is suspected of having experienced a fatal or non-fatal opioid-related overdose
- When the person reports to the law enforcement agency that his or her controlled substance prescription has been stolen

An alert does not necessarily mean that the individual was arrested, convicted, or is guilty of any violation of law.

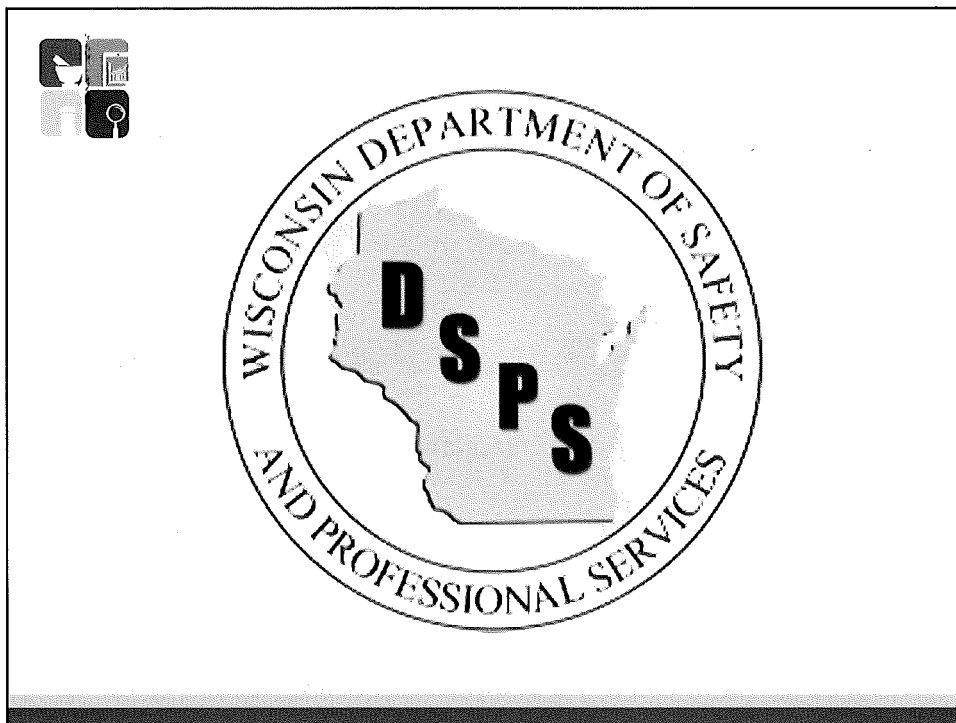
An alert is noted on the patient history in the WI ePDMP and notice of the event is sent the patient's healthcare prescriber(s).



Law Enforcement Alerts 2017

Law Enforcement Alerts Submitted					
COUNTY	VIOLATION CSA	NON-FATAL OVERDOSE	FATAL OVERDOSE	STOLEN PRESCRIPTION	TOTAL
BROWN	26	17	9	19	71
DANE	134	226	32	158	550
LA CROSSE	150	75	8	100	333
MARATHON	32	3	2	66	103
MILWAUKEE	122	548	46	275	991

County level detail indicates the frequency of law enforcement agency reporting to the WI ePDMP and may not be reflective of actual frequency of the reportable events in the county.

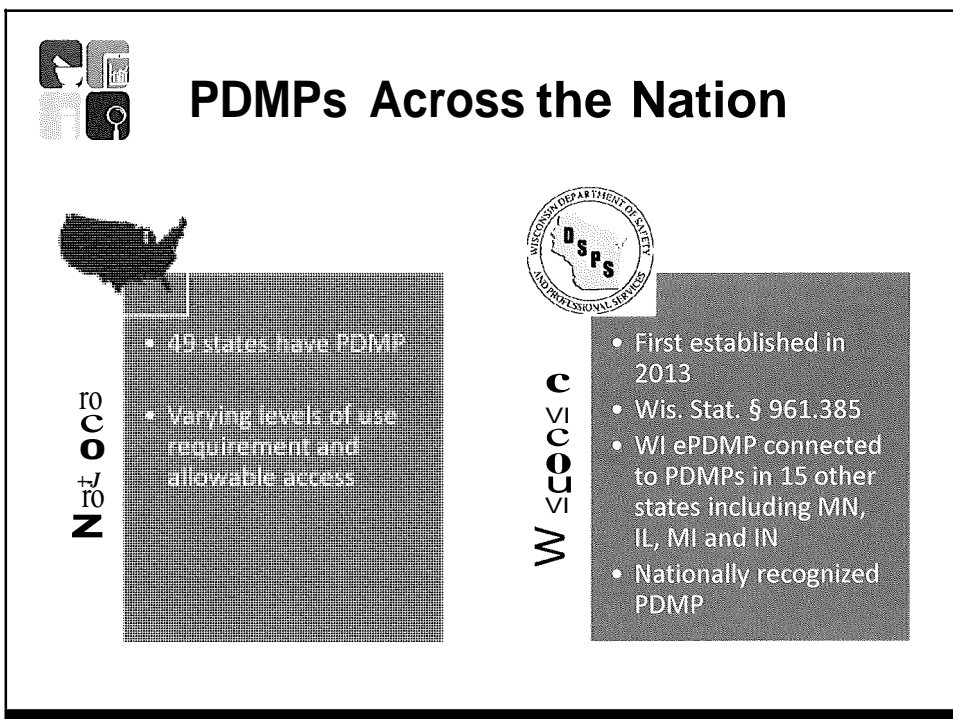
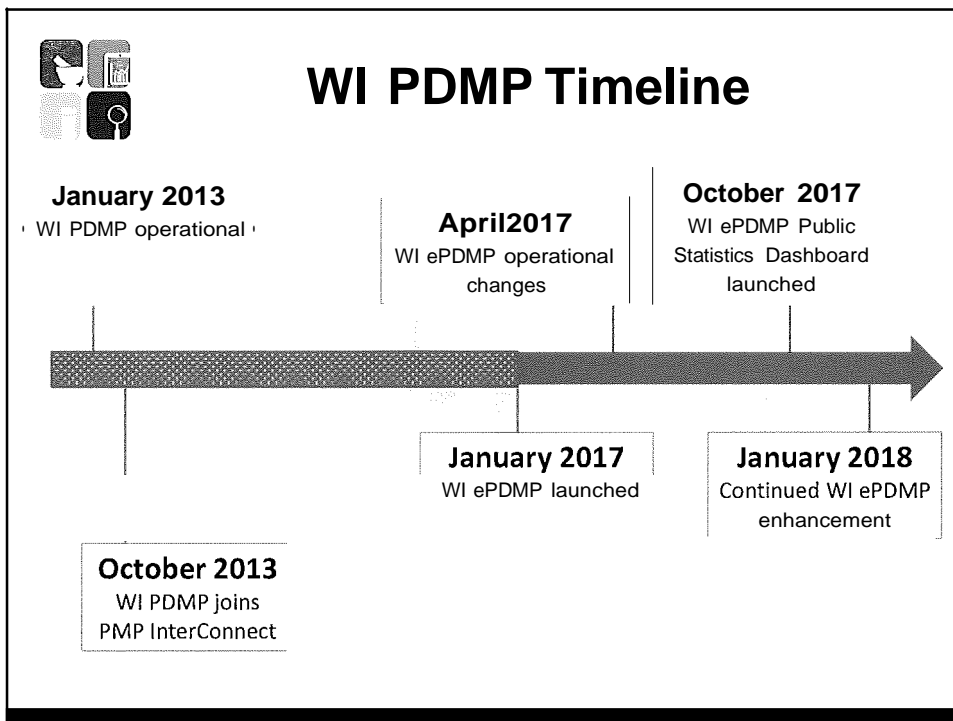


WISCONSIN | ePDMP

**The Wisconsin Prescription Drug
Monitoring Program**

State Council on Alcohol and Other Drug Abuse
June 1, 2018

The image is a title slide for a presentation. It features the text "WISCONSIN | ePDMP" in a large, bold, sans-serif font. To the left of this text is a small icon consisting of four squares: a person, a document, a magnifying glass, and a gear. Below the main title is the subtitle "The Wisconsin Prescription Drug Monitoring Program" in a bold, sans-serif font. At the bottom of the slide, it reads "State Council on Alcohol and Other Drug Abuse" and "June 1, 2018".





Wisconsin's POMP



Department of Safety and Professional Services

- Credentialing and Licensing
- Controlled Substance Board
- Related Boards: Medical Examining Board, Pharmacy Board, Board of Nursing, Optometry, Podiatry
- Division of Legal Services and Compliance

WI ePDMP

- Enhanced system launched January 2017
- Over 2,000 dispenser submitters
- Over 46,000 healthcare users
- Data for controlled substances in schedule 11-V dispensed in Wisconsin
- Over 9 million records submitted each year



WI ePDMP Components

Clinical Healthcare Tool

- Patient Prescription Histories
- Prescribing, Treatment, Dispensing Decision Support

Interdisciplinary Communication Tool

- Law Enforcement Alerts
- Law Enforcement and Medical Examiner Investigations

Prescribing Practice Assessment Tool

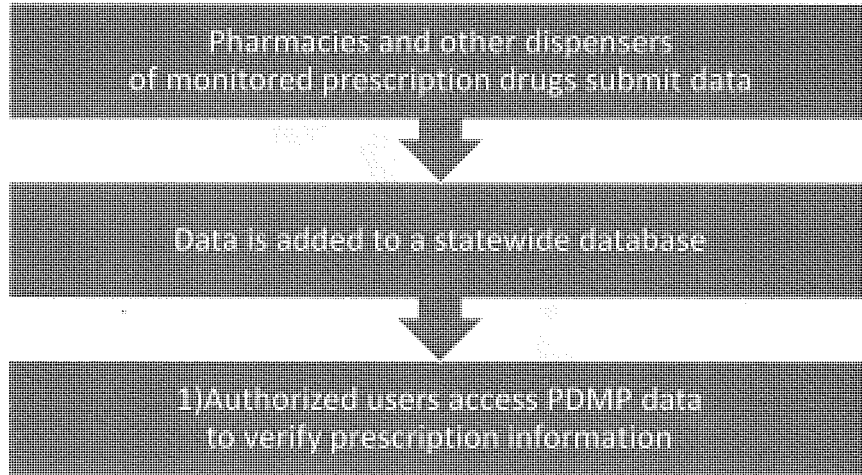
- Prescriber Metrics Report
- Medical Coordinator Access

Public Health Tool

- Interactive Statistics Dashboard
- Dispensing Data Trends (State- and County- Level)



What is a PDMP?



Authorized Users WI ePDMP

Clinical Decision Support	Prescribing Practice Assessment	Investigations	Public Health Analysis
<ul style="list-style-type: none"> ◦ Prescribers ◦ Delegates ◦ Pharmacists ◦ Delegates ◦ Registered Nurses ◦ Individuals who treat substance abuse 	<ul style="list-style-type: none"> • Prescribers • Medical Coordinators 	<ul style="list-style-type: none"> ◦ Law Enforcement Employees ◦ Government Employees ◦ Medical Examiners 	<ul style="list-style-type: none"> ◦ Researchers (de-identified) ◦ Public Statistics



Individuals Who Treat Substance Abuse

DSPS License types

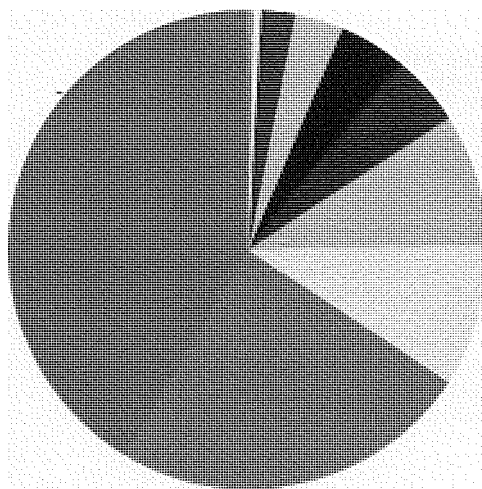
- Clinical Substance Abuse Counselor-132
- Substance Abuse Counselor-131
- Substance Abuse Counselor In Training-130

DSPS License with specialty designation

- Advanced Practice Social Worker-121
- Independent Social Worker-122
- Licensed Clinical Social Worker-123
- Licensed Marriage and Family Therapist-124
- Licensed Professional Counselor-125
- Marriage and Family Therapist Training License-228
- Professional Counselor Training License-226
- Social Worker-120



Authorized Healthcare Users WI ePDMP



De; 5%
MO 24%
II 00 2%
II PA 5%
FOM 0%
AFN? 9%
Dec; ate 41%
..... 3%

"Other"
140 Individuals
Authorized to
Treat Substance
Abuse



Authorized Users WI ePDMP

Clinical Decision Support

- Prescribers
- Delegates
- Pharmacists
- Delegates
- Registered Nurses
- Individuals who treat substance abuse

Prescribing Practice Assessment

- Prescribers
- Medical Coordinators

Investigations

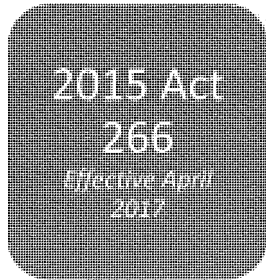
- Law Enforcement Employees
- Government Employees
- Medical Examiners

Public Health Analysis

- Researchers (de-identified)
- Public Statistics



H.O.P.E. Agenda Legislation



- Dispensers required to submit to the POMP by the end of the next business day (previously 7 days)
- Law enforcement and prosecutorial units allowed to request POMP data without a court order
- New POMP Role: Medical Coordinator
- POMP access for RNs, individuals who treat substance abuse
- Prescribers required to review POMP prior to prescribing a monitored prescription drug



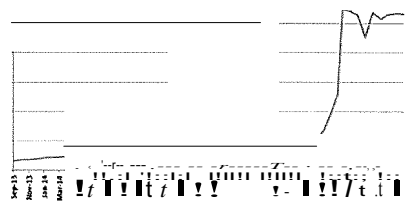
Exceptions To Review Requirement

1. • Patient is receiving hospice care
2. • Prescription order is for 3 days or less and is not subject to refill
3. • Drug is lawfully administered to the patient
4. • Emergency situation
5. • POMP system is down or other tech failure



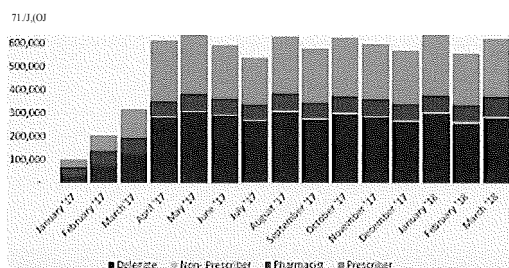
Healthcare Users

Average Healthc.are User Searches Per Day



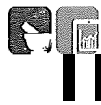
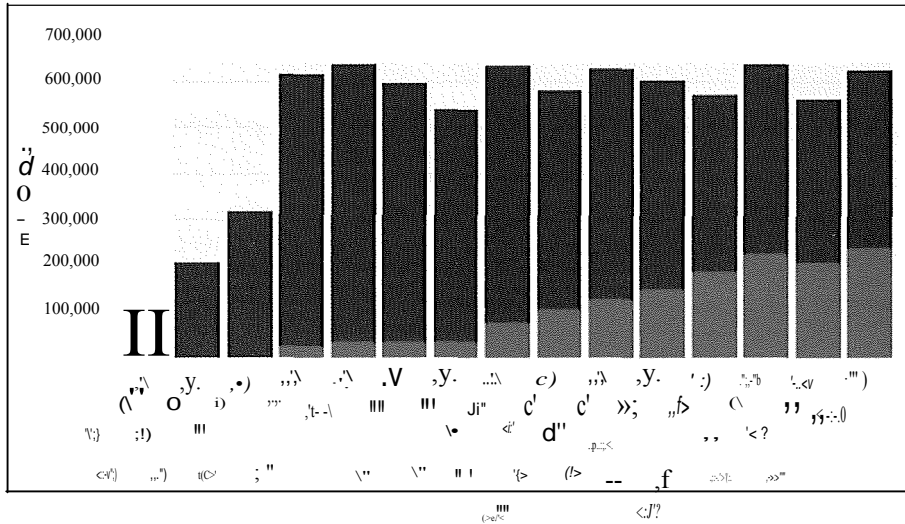
Daily Patient Queries
 December 2016: 4,800 queries/day
 August 28, 2017: 32,855 queries

Monthly Patient Queries
 January 2017: 101,000 queries
 January 2018: 640,200 queries






Direct EHR Integration



Healthcare Decision Support




Patients Panel

Patients Panel

Patients Prescribed to in the last 100 Days

Patient Info			Alerts								
Last Name	First Name	Date Of Birth	Current MME	High MME	Benzo-Oploid	LT Oploid Use	Early Refill	Multiple Provider	Multiple Same Day	Law Enforcement	Actions
HOLMES	SHERLOCK	01/06/1954	0								
TWO	TESTPATIENT	12/31/1980	0								



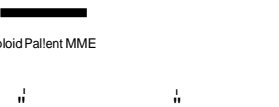
Prescriber Metrics Report

Patient Report
 Patients Panel
 Alerts
 Prescribing Practice Metrics
 Delegate Management
 ePDR Usage
 Medical Coordinator Management


Daily Prescribing Volume Ranking

Tile charts below display individual prescriber data for the last 100 days. Click on the chart to view details.

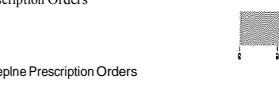
Average Opioid Patient MME



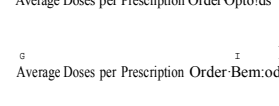
Average Doses per Prescription Order Opioid



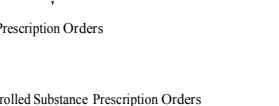
Oploid Prescription Orders



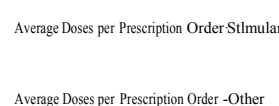
Average Doses per Prescription Order Benzodiazepine




Benzodiazepine Prescription Orders




Average Doses per Prescription Order Stimulant




Stimulant Prescription Orders

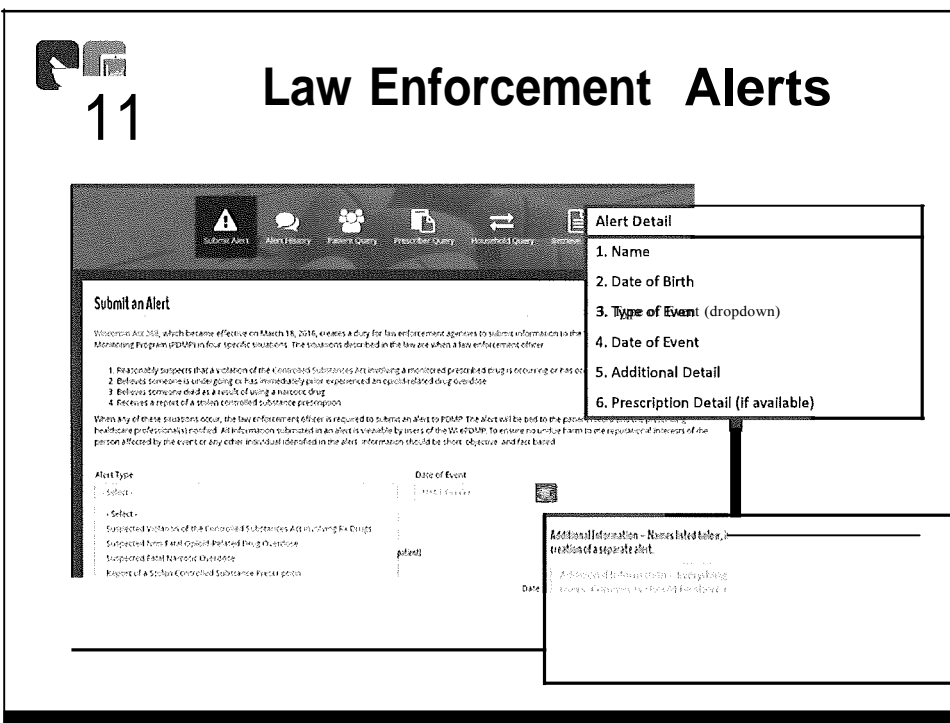
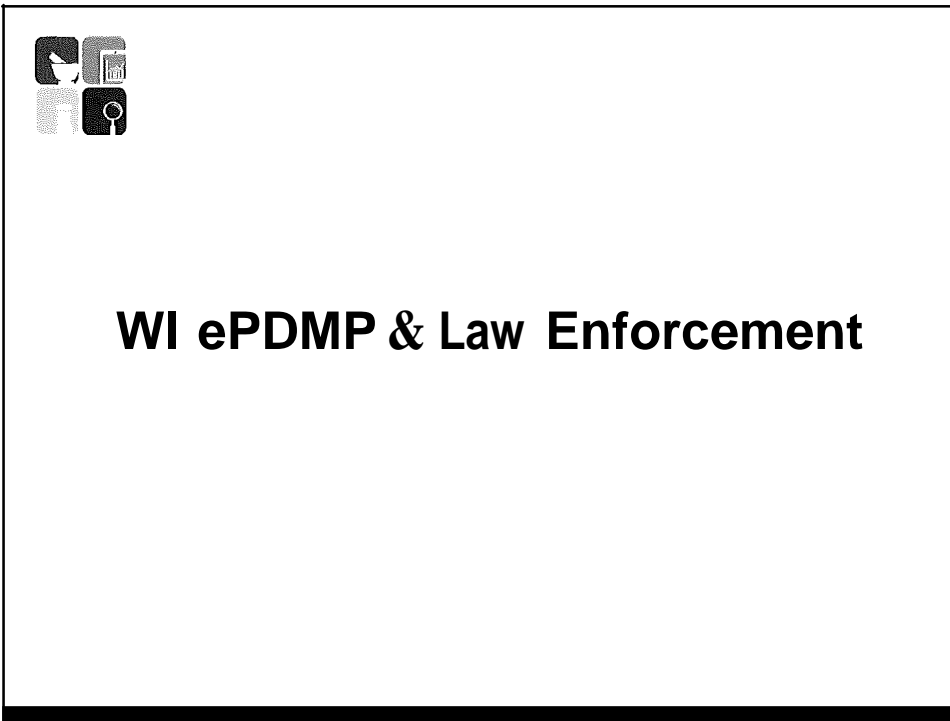


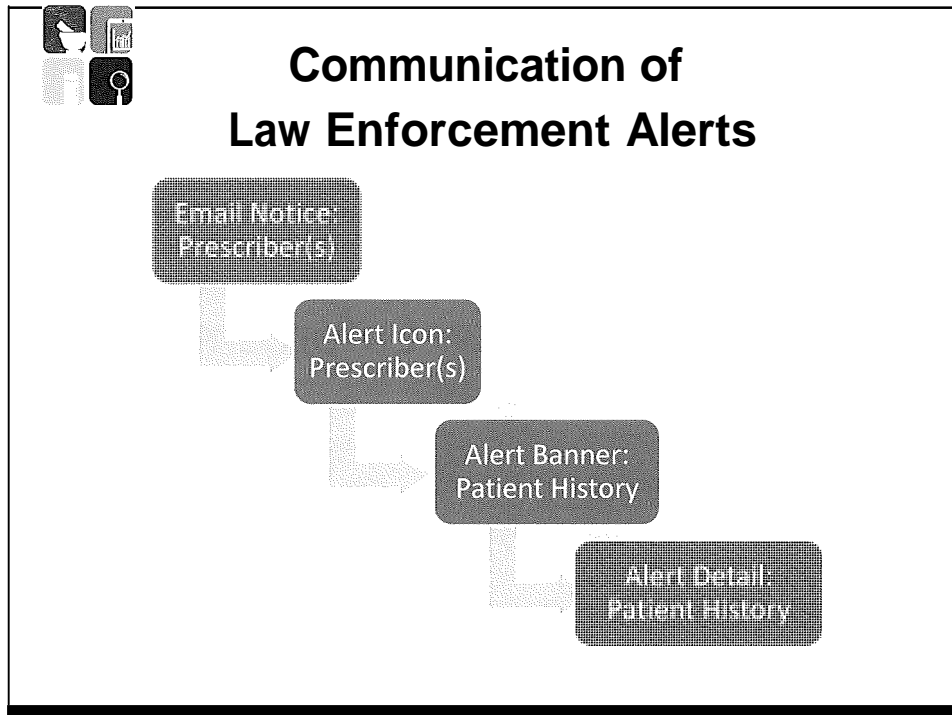
Average Doses per Prescription Order -Other



Other Controlled Substance Prescription Orders



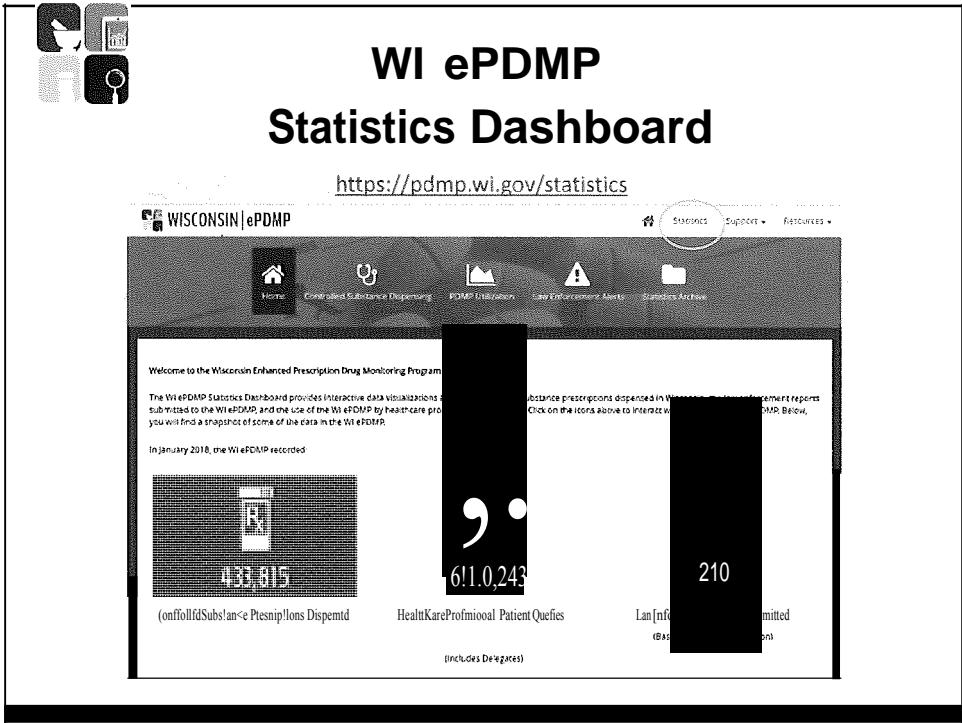
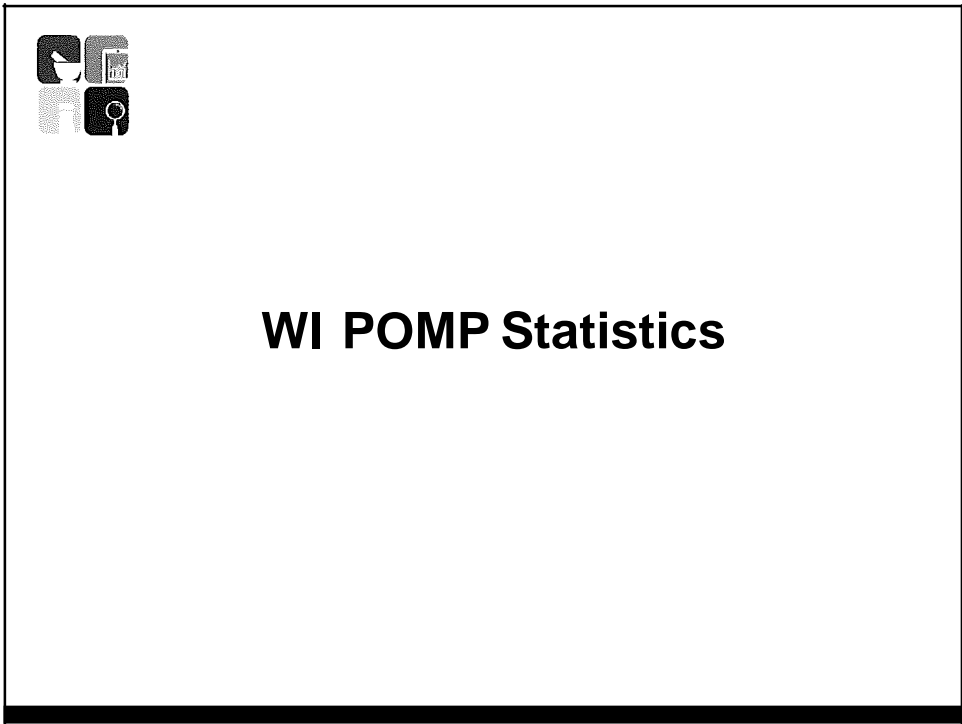




Law Enforcement POMP Access

Using WI PDMP For Active Investigations

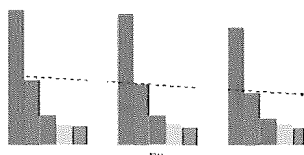
- Records about schedule 11-V controlled substance prescriptions dispensed in Wisconsin
- Potentially useful information to help guide investigations of drug diversion or overdose
- Not "evidence" and should not be used in isolation to make any determinations about a patient, prescriber, or dispenser





Statewide Dispensing Trends 2015-2017

Dispensing by Drug Class



Dispensing by Drug Class
2015 - 2017

All Drug Classes	↓	14% Decrease
Opioids	↓	20% Decrease
Benzodiazepines	↓	13% Decrease
Stimulants	↑	5% Increase

Top 5 Most Dispensed Drugs

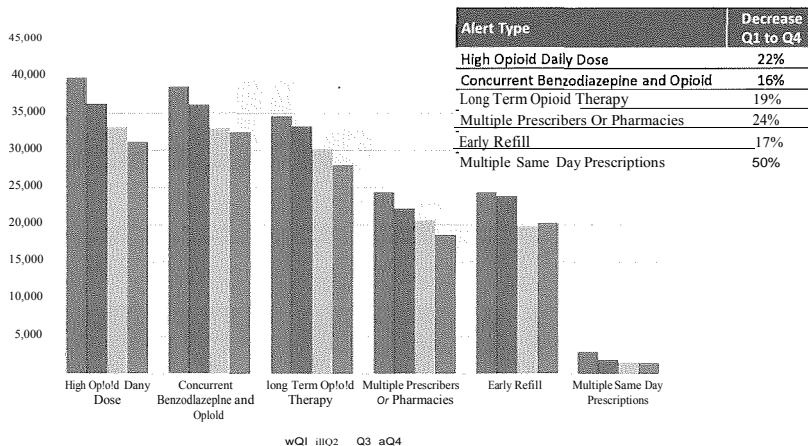
1. Hydrocodone-Acetaminophen
2. Amphetamine-Dextroamphetamine
3. Tramadol 1/1
4. Oxycodone H1
5. Alprazolam

Patients with 5 or More Prescribers/Phannades III 47% Decrease

Patients with Daily Morphine Equivalent of Over 90 37% Decrease



Data Driven Alerts 2017





For More Information

Andrea Magermans
Managing Director

Sarah Bradley
Deputy Director

608-266-0011
pdmp@wisconsin.gov

Website: <https://pdmp.wi.gov/>

2018 Substance Use Disorder Training Sessions and Conferences
(Treatment and Recovery Focus)
June 1, 2018 SCAODA Meeting

May:

National Association of State Alcohol and Drug Abuse Directors (NASADAD) Annual Meeting

May 21 – 24, 2018, in Bethesda, MD

<http://nasadad.org/wp-content/uploads/2018/05/BETHESDA-Meeting-Program-2018-FINAL-FINAL.pdf>

Justice for All – NADCP Annual Training Conference, featuring Vet Court Con
National Association Drug Court Professionals (NADCP)

May 30-June 2, 2018 at George R. Brown Convention Center in Houston, Texas

<http://www.nadcpconference.org/>

June:

National Rural Institute on Alcohol and Drug Abuse, June 10-June 14, 2018, University of Wisconsin-Stout, Menomonie, WI

<https://www.uwstout.edu/outreach-engagement/lifelong-learning/other-opportunities/national-rural-institute-alcohol-and-drug-abuse>

2018 Wisconsin Rural Health Conference, June 27-June 29, 2018, the Osthoff Resort, Elkhart Lake, WI

August:

Hope Consortium Conference

August 23rd & 24th at Lake of the Torches Resort in Lac Du Flambeau, WI

For more information, contact JoAnna Giraud, Marshfield Clinic Health System, at 715.221.8429 or Giraud.Joanna@marshfieldclinic.org

September:

22nd Annual Crisis Intervention Conference

September 20-21, 2018 at Kalahari Resort & Convention Center in Wisconsin Dells

<https://www.uwsp.edu/conted/ConfWrkShp/Pages/Crisis/default.aspx>



American Society of Addiction Medicine (ASAM) Conference – Wisconsin Chapter,
September 27-29, 2018 in Madison, WI

<http://www.wisam-asam.com/>

October:

2018 Annual National Association for Alcoholism and Drug Abuse Counselors (NAADAC) Conference “Shoot for the Stars”

October 5-9, 2018 in Houston, Texas, at the Westin Galleria

Registration will open on February 12th!

The three-day Annual Conference will take place on October 6-8, 2018. In addition, attendees may register to attend full-day pre-conference sessions on October 5, 2018, full-day post-conference sessions on October 9, and/or a two-day U.S. Department of Transportation - Substance Abuse Professional (SAP) Qualification/Re-Qualification training on October 9 & 10.

<https://www.naadac.org/2018annualconference>

Wednesday-Thursday, October 17-18, 2018

Kalahari Resort and Convention Center at Wisconsin Dells

<https://www.uwsp.edu/conted/ConfWrkShp/Pages/MHSA/default.aspx>

2018 Substance Use Disorder Training Sessions and Conferences

(Prevention Focus)

June 1, 2018 SCAODA Meeting

May and June:

This year the Alliance for Wisconsin Youth (AWY) Regional Prevention Centers will be hosting two prevention trainings in Wisconsin, including the following two events in May and June:

PARTNERS IN SUBSTANCE ABUSE PREVENTION 2018 REGIONAL CONFERENCE

– Northeastern, Southeastern, and Southern regions – Community Advocates and Northeastern WI Area Health Education Center

<https://www.uwsp.edu/conted/ConfWrkShp/Pages/SAPRT2018.aspx>

NORTHWOODS COALITION ANNUAL MEETING AND TRAINING (AMAT) -

Northern and Western Regions – Northwoods Coalition, Marshfield Clinic Health System

Preconference: June 20, 2018 Ethics Training (6 hours)

AMAT: June 21 and 22, Holiday Inn Hotel and Convention Center, Stevens Point, WI

(See next page for registration information)

kNOw Meth, sponsored by Northwoods Coalition, WI Dept. of Justice, Marshfield Clinic Health System, and Alliance for WI Youth. One-day training session covering methamphetamine trends in Wisconsin, tools for people on the front lines of the methamphetamine epidemic, and overview of the Wisconsin Treatment and Alternatives and Diversion program. Offered at the following three times and locations:

- May 2, 2018 – Nicolet Technical College in Rhinelander
- May 17, 2018 – WI Indianhead Technical College in Ashland
- June 21, 2018 – WI Indianhead Technical College in Rice Lake

Registration: <http://cvent.com/d/vgqnm2>

August:

2nd Annual HOPE Consortium Conference – *featuring over 20 sessions on substance use disorder treatment and recovery*

August 23 -24, Lake of the Torches in Lac du Flambeau, WI

**31st Annual National Prevention Network Conference – A Revolution in Prevention:
Understanding the past, Informing the Future**

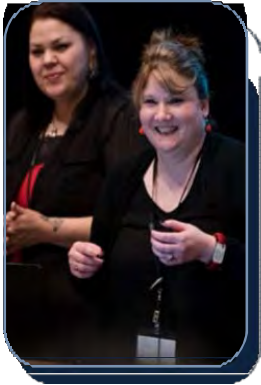
<http://www.npnconference.org/>

Other trainings are posted on the AWY website here: <http://www.allwisyouth.org/events-calendar/>



Save the Date

Northwoods Coalition Annual Meeting and Training and Ethics Preconference



Preconference

Ethics- June 20, 2018, Holiday Inn Hotel & Convention Center, Stevens Point, WI

6 hour Center for the Application of Prevention Technologies - Opportunity for those pursuing Prevention Specialist certification



AMAT

AMAT | June 21 & 22, 2018, Holiday Inn Hotel & Convention Center, Stevens Point, WI

Opening ceremony to honor our Tribal Nations with presentation of the flags and Youth Drum group

Mark Yarbrough | *Suffer From BURNOUT? Give 'em the F.I.N.G.E.R.*

Tamra Omen | *Love Drives, Hope Wins*

Breakout Sessions | Mental Health Prevention | NWC know Meth Campaign | Social Media 101 | High School Drug Testing | Youth Engagement | And more!



Conference Information

- Scholarships available, valued up to \$50 to cover registration, application coming soon.
- Make hotel reservations online 24 hours a day by using the following link: [Northwoods Coalition Annual Meeting](#) or call 715-344-0200, press 3 and reference **Northwoods Coalition Annual Meeting & Training** and Group Block Code **MCR**.
- CEUs available! CHES / MCHES and Continuing Legal Education credits will be applied for.

Contact Marshfield Clinic Health System - Center for Community Outreach, Joanna Giraud at 715-221-8429 or giraud.joanna@marshfieldclinic.org with questions.



Brad D. Schimel
Wisconsin Attorney General

P.O. Box 7857
Madison, WI 53707-7857

NEWS FOR IMMEDIATE RELEASE

May 2, 2017

**First *kNOw Meth* Methamphetamine Enforcement Public Safety Summit
Held in Rhinelander**

“Ten years ago, we managed to reduce meth in Wisconsin by shutting down the big labs, but the more potent, addictive, and cheaper meth being abused today is from Mexico and has surged in the state,” said Attorney General Schimel. “This public safety summit will give northern Wisconsin officials the tools they need to crack down on the meth ravaging their communities.”

“We have heard from our partners and communities that law enforcement and criminal justice officials would like more training just on the topic of methamphetamine,” said Danielle Luther, Manager – Alcohol and Drug Programs at Marshfield Clinic Health System – Center for Community Health Advancement. “The training will be repeated in two additional locations to centralize the trainings in locations of the areas most affected.”

This one-day training offered will cover methamphetamine trends in Wisconsin, clandestine lab safety and awareness, best practices for investigation, an overview of DOJ’s Treatment Alternatives and Diversion program and tools for people on the frontlines of the methamphetamine epidemic in Wisconsin.

Page 1 of 3

Attendees at the summit include approximately 55 law enforcement and criminal justice professionals. A similar training will be held in Ashland later this month, and in Rice Lake in June.

In January 2018, Attorney General Schimel committed \$50,000 to support the *kNOw Meth* public awareness campaign and training. The public awareness campaign, launched in partnership with the Alliance for Wisconsin Youth, Marshfield Clinic Health System, and the Northwoods Coalition, raises awareness about methamphetamine use in Wisconsin communities. The campaign informs the public:

- Methamphetamine is a highly addictive stimulant impacting Wisconsin communities;
- Methamphetamine impacts more than just the person abusing the substance, including children and the environment, and;
- Communities should look for signs of addiction, methamphetamine use and trafficking.

In February 2017, Attorney General Schimel briefed the Wisconsin State Legislature on the growing threat of methamphetamine and included findings from a January 2017 joint [report](#). The report details methamphetamine use increased 250 to 300 percent from 2011 to 2015. Recently, the Wisconsin State Crime Laboratory Bureau (WSCLB) has experienced a 32.3% increase in methamphetamine submissions, from 1,148 in 2016 to 1,696 in 2017.

DOJ also combats methamphetamine through its commitment to the Drug Endangered Children Program (DEC). Cynthia Giese, a DCI Special Agent in Charge (SAC), leads Wisconsin's DEC program and also is currently serving as the interim president of the nationwide program as well. DEC is comprised of multi-disciplinary professionals including law enforcement, child protective services, medical providers, prosecutors, school personnel, and corrections officers. All of these professionals play a role in the rescue and support of drug endangered children. The children are provided with services that assist in providing the drug endangered child with a safe environment in which to live and grow up.

Attorney General Schimel has taken additional actions against rising methamphetamine use in Wisconsin:

- Appointed an assistant attorney general (AAG) to aid local district attorneys and law enforcement in the prosecution of methamphetamine-related cases. This AAG represents the state in criminal cases; advises local prosecutors on matters relating to methamphetamine trafficking; and assists in the development of legislation concerning the growing threat that methamphetamine poses to local communities.

- Hired an analyst at the Wisconsin Statewide Information Center (WSIC) and purchased equipment for investigating meth labs; and is providing training and financial support for the efforts of local law enforcement agencies and multi-jurisdictional drug task forces. Funding for these initiatives comes from a \$1.5 million Methamphetamine Initiative Grant from the United States Department of Justice.
- Hired four additional criminal investigation agents who are focused on drug interdiction and drug trafficking.
- Increased spending on treatment alternative and diversion courts (TAD) in 51 counties and two tribes, with more than \$6 million provided annually to support these local programs.
- In 2017, Attorney General Schimel successfully sought a stay from the Supreme Court of the *United States in Anderson, et al. v. Loertscher*, a challenge to the state's Unborn Child Protection Act. The Unborn Child Protection Act or 1997 Wisconsin Act 292 gives state actors the legal authority to assist substance-addicted, pregnant women with their addiction, thus protecting both the mothers and their unborn children.

The [Northwoods Coalition](#), formed in 1995, is the largest and oldest network of coalitions dedicated to substance abuse prevention in Wisconsin. Representatives from more than 50 coalitions in a 34-county region, including the 11 Wisconsin Tribal Nations, serve on a non-governing advisory board to help shape policies, practices and programs to address public health issues arising from use of alcohol and other drugs. Marshfield Clinic Health System staff provide support including education, training, technical assistance and other resources to members of Northwoods Coalition.



SCAODA 2018 Meeting Dates

March 2, 2018 @ WI DATCP

2811 Agriculture Drive, Madison

June 1, 2018 @ WI DATCP

2811 Agriculture Drive, Madison

September 7, 2018 @ WI DATCP

2811 Agriculture Drive, Madison

December 7, 2018 @ WI DATCP

2811 Agriculture Drive, Madison

BY-LAWS
of the
State of Wisconsin
State Council on Alcohol and Other Drug Abuse
As Approved
June 6, 2008
Amended 9-10-10, 9-9-11, 12-13-13, 12-12-14

<please note: lines underlined below are taken directly from statute.>

ARTICLE I

Purpose and Responsibilities

Section 1. Authority

The council is created in the office of the governor pursuant to sec. 14.017 (2), Wis. Stats. Its responsibilities are specified under sec. 14.24, Wis. Stats.

Section 2. Purpose

The purpose of the state council on alcohol and other drug abuse is to enhance the quality of life of Wisconsin citizens by preventing alcohol, tobacco and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities by:

- a. Supporting, promoting and encouraging the implementation of a system of alcohol, tobacco and other drug abuse services that are evidence-based, gender and culturally competent, population specific, and that ensure equal and barrier-free access;
- b. Supporting the prevention and reduction of alcohol, tobacco, and other drug use and abuse through evidence-based practice with a special emphasis on underage use; and
- c. Supporting and encouraging recovery in communities by reducing discrimination, barriers and promoting healthy lifestyles.

Section 3. Responsibilities

The state council on alcohol and other drug abuse shall:

- a. Provide leadership and coordination regarding alcohol and other drug abuse issues confronting the state.

- b. Meet at least once every 3 months.
- c. By June 30, 1994, and by June 30 every 4 years thereafter, develop a comprehensive state plan for alcohol and other drug abuse programs. The state plan shall include all of the following:
 - i. Goals, for the time period covered by the plan, for the state alcohol and other drug abuse services system.
 - ii. To achieve the goals in [par. \(a\)](#), a delineation of objectives, which the council shall review annually and, if necessary, revise.
 - iii. An analysis of how currently existing alcohol and other drug abuse programs will further the goals and objectives of the state plan and which programs should be created, revised or eliminated to achieve the goals and objectives of the state plan.
- d. Each biennium, after introduction into the legislature but prior to passage of the biennial state budget bill, review and make recommendations to the governor, the legislature and state agencies, as defined in [s. 20.001 \(1\)](#), regarding the plans, budgets and operations of all state alcohol and other drug abuse programs. The council also recommends legislation, and provides input on state alcohol, tobacco and other drug abuse budget initiatives.
- e. Provide the legislature with a considered opinion under [s. 13.098](#).
- f. Coordinate and review efforts and expenditures by state agencies to prevent and control alcohol and other drug abuse and make recommendations to the agencies that are consistent with policy priorities established in the state plan developed under [sub. \(3\)](#).
- g. Clarify responsibility among state agencies for various alcohol and other drug abuse prevention and control programs, and direct cooperation between state agencies.
- h. Each biennium, select alcohol and other drug abuse programs to be evaluated for their effectiveness, direct agencies to complete the evaluations, review and comment on the proposed evaluations and analyze the results for incorporation into new or improved alcohol and other drug abuse programming.

- i. Publicize the problems associated with abuse of alcohol and other drugs and the efforts to prevent and control the abuse. Issue reports to educate people about the dangers of alcohol, tobacco and other drug abuse.
- j. Form committees and sub-committees for consideration of policies or programs, including but not limited to, legislation, funding and standards of care, for persons of all ages, ethnicities, sexual orientation, disabilities, and religions to address alcohol, tobacco and other drug abuse problems.

ARTICLE II

Membership

Section 1. Authority

Membership is in accordance with section 14.017(2), Wis. Stats.

Section 2. Members

2.1 The 22-member council includes six members with a professional, research or personal interest in alcohol, tobacco and other drug abuse problems, appointed for four-year terms, and one of them must be a consumer representing the public. It was created by chapter 384, laws of 1969, as the drug abuse control commission. Chapter 219, laws of 1971, changed its name to the council on drug abuse and placed the council in the executive office. It was renamed the council on alcohol and other drug abuse by chapter 370, laws of 1975, and the state council on alcohol and other drug abuse by chapter 221, laws of 1979. In 1993, Act 210 created the state council on alcohol and other drug abuse, incorporating the citizen's council on alcohol and other drug abuse, and expanding the state council and other drug abuse's membership and duties. The state council on alcohol and other drug abuse's appointments, composition and duties are prescribed in sections 15.09 (1)(a), 14.017 (2), and 14.24 of the statutes, respectively.

The council strives to have statewide geographic representation, which includes urban and rural populated areas, to have representation from varied stakeholder groups, and shall be a diverse group with respect to age, race, religion, color, sex, national origin or ancestry, disability or association with a person with a disability, arrest or conviction record, sexual orientation, marital status or pregnancy, political belief, or affiliation, or military participation.

2.2 There is created in the office of the governor a state council on alcohol and other drug abuse consisting of the governor, the attorney general, the state superintendent of public instruction, the secretary of health services, the commissioner of insurance, the secretary of corrections, the secretary of transportation and the chairperson of the pharmacy examining board, or their designees; a representative of the controlled substances board; a representative of any governor's committee or commission created under [subch. I](#) of ch. 14 to study law enforcement issues; 6 members, one of whom is a consumer representing the public at large, with demonstrated professional, research or personal interest in alcohol and other drug abuse problems, appointed for 4-year terms; a representative of an organization or agency which is a direct provider of services to alcoholics and other drug abusers; a member of the Wisconsin County Human Service Association, Inc., who is nominated by that association; and 2 members of each house of the legislature, representing the majority party and the minority party in each house, chosen as are the members of standing committees in their respective houses. [Section 15.09](#) applies to the council.

2.3 Selection of Members

From Wis. Stats. 15.09 (1)(a); Unless otherwise provided by law, the governor shall appoint the members of councils for terms prescribed by law. Except as provided in [par. \(b\)](#), fixed terms shall expire on July 1 and shall, if the term is for an even number of years, expire in an odd-numbered year.

2.4 Ex-Officio Members

- a. Ex-officio members may be appointed by a majority vote of the council to serve on the council, special task forces, technical subcommittees and standing committees. Other agencies may be included but the following agencies shall be represented through ex-officio membership: The Wisconsin Departments of: Revenue, Work Force Development, Safety and Professional Services, Veteran Affairs and Children and Families, the Wisconsin Technical Colleges System and the University of Wisconsin System.
- b. Ex-officio members of the council may participate in the discussions of the council, special task forces, technical subcommittees, and standing committees except that the chairperson may limit their participation as necessary to allow full participation by appointed members of the council subject to the appeal of the ruling of the chairperson.

- c. An ex-officio member shall be allowed to sit with the council and participate in discussions of agenda items, but shall not be allowed to vote on any matter coming before the council or any committee of the council, or to make any motion regarding any matter before the council.
- d. An ex-officio member may not be elected as an officer of the council.
- e. An ex-officio member shall observe all rules, regulations and policies applicable to statutory members of the council, and any other conditions, restrictions or requirements established or directed by vote of a majority of the statutory members of the council

2.5 Selection of Officers

Unless otherwise provided by law, at its first meeting in each year the council shall elect a chairperson, vice-chairperson and secretary from among its members. Any officer may be reelected for successive terms. For any council created under the general authority of s. 15.04 (1) (c), the constitutional officer or secretary heading the department or the chief executive officer of the independent agency in which such council is created shall designate an employee of the department or independent agency to serve as secretary of the council and to be a voting member thereof.

2.6 Terms of Voting Members

- a. Voting members shall remain on the council until the effective date of their resignation, term limit or removal by the governor, or until their successors are named and appointed by the governor.
- b. Letter of resignation shall be sent to the governor and council chairperson.
- c. Each voting member or designee of the council is entitled to one vote.

2.7 Code of Ethics

All members of the council are bound by the codes of ethics for public officials, Chapter 19, Wis. Stats., except that they are not required to file a statement of economic interest. Ex-officio members are not required to file an oath of office. As soon as reasonably possible after appointment or commencement of a conflicting interest and before

voting on any grant, members shall reveal any actual or potential conflict of interest. Chapter 19.46 of Wisconsin State Statutes states that no state public official may take any official action substantially affecting a matter in which the official, a member of his or her immediate family, or an organization with which the official is associated has a substantial financial interest or use his or her office or position in a way that produces or assists in the production of a substantial benefit, direct or indirect, for the official, one or more members of the official's immediate family either separately or together, or an organization with which the official is associated.

2.8 Nondiscrimination

The council will not discriminate because of age, race, religion, color, sex, national origin or ancestry, disability or association with a person with a disability, arrest or conviction record, sexual orientation, marital status or pregnancy, political belief, or affiliation, or military participation.

2.9 Nomination Process for Appointed Members and Officers

As per Article II, Section 2.1, the governor is required to appoint six citizen members. In addition, the council elects the chairperson, vice-chairperson and secretary, annually. The council will follow this process when making recommendations to the governor concerning appointments and nominating a slate of officers:

- a. The council, along with the office of the governor and department staff, will monitor when council terms will expire. It will also monitor the composition of the council with respect to the factors specified in Article II, Section 2.1.
- b. The vice-chairperson of the council shall convene a nominating committee and appoint a chairperson of that committee as needed to coordinate the process for all appointments to the council as outlined in Article II, Section 2 and annually put forth a slate of officers as identified in Article II Sections 3.1, 3.2 and 3.3. The Council Chairperson may ask for nominations from the floor to bring forth nominations in addition to the slate of officers brought forth by the nominating committee. The nominating committee shall make recommendations to the council regarding nominations and appointments prior to the September council meeting and have such other duties as assigned by the council.
- c. The nominating committee of the council, with support of bureau staff, will publicize upcoming vacancies, ensuring that publicity includes interested and underrepresented groups, including

alcohol, tobacco and other drug abuse agencies, alcohol, tobacco and other drug abuse stakeholder groups, consumers, and providers of all ethnic groups. Publicity materials will clearly state that council appointments are made by the governor. Materials will also state that the governor normally considers the council's recommendations in making council appointments.

- d. While any person may apply directly to the governor according to the procedures of that office, all applicants will be asked to provide application materials to the council as well. Bureau staff will make contact with the office of the governor as necessary to keep the committee informed regarding applicants, including those that may have failed to inform the committee of their application.
- e. Applicants shall provide a letter of interest or cover letter, along with a resume and any other materials requested by the office of the governor. The nominating committee, in consultation with department staff, may request additional materials. The nominating committee, with support of bureau staff, will collect application materials from nominees, including nominees applying directly to the governor. The nominating committee or staff will acknowledge each application, advising the applicant regarding any missing materials requested by the nominating committee. The nominating committee or staff will review each application to ensure that all required nomination papers have been completed.
- f. The nominating committee may establish questions to identify barriers to attendance and other factors related to ability to perform the function of a member of the state council on alcohol and other drug abuse and to identify any accommodations necessary to overcome potential barriers to full participation by applicants. The nominating committee may interview applicants or designate members and/or staff to call applicants. Each applicant shall be asked the standard questions established by the committee.
- g. The nominating committee shall report to the full council regarding its review of application materials and interviews. The report shall include the full roster of applicants as well as the committee's recommendations for appointment.
- h. The council shall promptly act upon the report of the nominating committee. Council action shall be in the form of its recommendation to the governor. Department staff shall convey the council's recommendation to the office of the governor.

2.10 Removal from Office

The Governor may remove appointed members from the council. The council may recommend removal but the Governor makes the final decision regarding removal.

Section 3. Officers

3.1 Chairperson

The chairperson is the presiding officer and is responsible for carrying out the council's business including that motions passed be acted upon in an orderly and expeditious manner and assuring that the rights of the members are recognized. The chairperson may appoint a designee to preside at a meeting if the vice-chairperson is unable to preside in their absence. The chairperson is also responsible for organizing the work of the council through its committee structure, scheduling council meetings and setting the agenda. The chairperson may serve as an ex-officio member of each council committee. The chairperson shall represent the positions of the council before the legislature, governor and other public and private organizations, unless such responsibilities are specifically delegated to others by the council or chairperson. The agenda is the responsibility of the chairperson, who may consult with the executive committee or other council members as necessary.

3.2 Vice-Chairperson

The vice-chairperson shall preside in the absence of the chairperson and shall automatically succeed to the chair should it become vacant through resignation or removal of the chairperson until a new chairperson is elected. The vice-chairperson shall also serve as the council representative on the governor's committee for people with disabilities (GCPD). If unable to attend GCPD meetings, the vice-chairperson's designee shall represent the council.

3.3 Secretary

The secretary is a member of the executive Committee as per Article IV, Section 5. The secretary is also responsible for carrying out the functions related to attendance requirements as per Article III, Section 6.

3.4 Vacancies

In the event a vacancy occurs among the Officers (Chairperson, Vice-Chairperson, or Secretary) of the State Council on Alcohol and Other

Drug Abuse, the following procedure should be followed: In the event of a vacancy of the Chairperson, the Vice-Chairperson assumes the responsibility of Chairperson until such time as new Officers are elected according to the procedures outlined in the By-Laws. In the event of a vacancy of the Vice-Chairperson, the Secretary assumes the responsibility of the Vice-Chairperson until such time as new Officers are elected according to the procedures outlined in the By-Laws. In the event of a vacancy of the Secretary, the Chairperson shall appoint a replacement from the statutory membership until such time as new Officers are elected according to the procedures outlined in the By-Laws.

ARTICLE III

Council Meetings

Section 1. Council Year

The council year shall begin at the same time as the state fiscal year, July 1.

Section 2. Meetings

2.1 Regular and special meetings

Regular meetings shall be held at least four times per year at dates and times to be determined by the council. Special meetings may be called by the chairperson or shall be called by the chairperson upon the written request of three members of the council.

2.3 Notice of meetings

The council chairperson shall give a minimum of seven days written notice for all council meetings. An agenda shall accompany all meeting notices. Public notice shall be given in advance of all meetings as required by Wisconsin's Open Meetings Law. If a meeting date is changed, sufficient notice shall be given to the public.

2.3 Quorum

Section 3. Public Participation

Consistent with the Wisconsin Open Meetings law, meetings are open and accessible to the public.

Section 4. Conduct of Meetings

- 4.1 Meetings shall be conducted in accordance with the latest revision of Robert's Rules of Order, unless they are contrary to council by-laws or federal or state statutes, policies or procedures.

Section 5. Agendas

- 5.1 Agendas shall include approval of minutes from prior meetings, any action items recommended by a committee, an opportunity for public comment, and other appropriate matters.
- 5.2 Requests for items to be included on the agenda shall be submitted to the chairperson two weeks prior to the meeting.

Section 6. Attendance Requirements

- 6.1 All council members and committee members are expected to attend all meetings of the council or the respective committees. Attendance means presence in the room for more than half of the meeting.
- 6.2 Council or committee members who are sick, hospitalized or who have some other important reason for not attending should notify the secretary or the secretary's designee or committee staff person or chairperson at least a week before the meeting. If that is not possible, notice should be given as soon as possible.

Section 7. Staff Services

The division of mental health and substance abuse services shall provide staff services. Staff services shall include: record of attendance and prepare minutes of meetings; prepare draft agendas; arrange meeting rooms; prepare correspondence for signature of the chairperson; offer information and assistance to council committees;

analyze pending legislation and current policy and program issues; prepare special reports, and other materials pertinent to council business.

Section 8. Reimbursement of Council and Committee Members

According to Section 15.09 of Wisconsin Statutes: Members of a council shall not be compensated for their services, but, except as otherwise provided in this subsection, members of councils created by statute shall be reimbursed for their actual and necessary expenses incurred in the performance of their duties, such reimbursement in the case of an elective or appointive officer or employee of this state who represents an agency as a member of a council to be paid by the agency which pays his or her salary.

ARTICLE IV

Committees

Section 1. Committee Structure

- 1.1** There shall be an executive committee as provided below. The executive committee is a standing committee of the council.

- 1.2** The council may establish other standing committees and subcommittees as necessary or convenient to conduct its business. Of the standing committees established by the state council on alcohol and other drug abuse, at least one shall have a focus on issues related to the prevention of alcohol, tobacco and other drug abuse, at least one shall have a focus on issues related to cultural diversity, at least one shall have a focus on issues related to the intervention and treatment of alcohol, tobacco and other drug abuse, and at least one shall have a focus on issues related to the planning and funding of alcohol and other drug abuse services. Subcommittees are a subset of a standing committee. Subcommittees are standing committees, which by another name is a permanent committee. Standing committees meet on a regular or irregular basis dependent upon their enabling act, and retain any power or oversight claims originally given them until subsequent official actions of the council (changes to law or by-laws) disbands the committee. Of the standing subcommittees established by the state council on alcohol and other drug abuse, at least one shall have a focus on children youth and families and is a subcommittee of the intervention and treatment committee, at least one shall have a focus on cultural competency and is a subcommittee of the cultural diversity committee, and at least one shall have a focus on epidemiology and is a subcommittee of the prevention committee.

Ad-hoc committees are established to accomplish a particular task and are to be temporary, with the charge being well-defined and linked to SCAODA's strategic plan, not to exceed duration of twelve calendar months. Ad-hoc committees are formed by standing committee chairs. Ad-hoc committees must report their progress at the meeting of their standing committee. Ad-hoc committees can be granted extensions by the standing committee chair.

It is the intent of this section that:

- There should be periodic review of the structure and progress of the work of the committees, subcommittees and ad-hoc committees.
- If the officers have concerns about the work of the standing committees, subcommittees or ad-hoc committees, they could convene an executive committee meeting to discuss options, "for the good of the order."
- The intent of this group is to recommend that ad-hoc committees be time-limited (recommend one year) and the committee chair determines if the work should go forward beyond the original charge.
- The charge should be well-defined and linked to SCAODA's strategic plan.
- The committee chairs should be primarily responsible for creating and disbanding ad-hoc groups.
- The committee chairs should be responsible for monitoring the work and duration of the work in coordination with SCAODA.

1.3 Committees may determine their own schedules subject to direction from the full council.

Section 2. Composition of Committees

2.1 Council committees may include members of the public as well as council members.

2.2 The council chairperson may appoint a chairperson who must be a member of the council, for each committee. The council chairperson, with the advice of the committee chairperson may appoint other committee members.

2.3 Committees may designate subcommittees including ad hoc committees, as necessary or convenient subject to limitation by the full council.

2.4 A council member shall not chair more than one committee.

- 2.5** A committee chairperson's term shall not exceed the length of their appointment or four years whichever comes first. With the majority vote of the council, a chairperson may be reappointed.

Section 3. Requirements for all Committees

- 3.1** A motion or resolution creating a committee shall designate the mission and duties of the committee. The council may also specify considerations for the chairperson to follow in appointing committee chairpersons and members and such other matters as appropriate.
- 3.2** All committee members are expected to attend all meetings of the committee. Attendance means presence in the room for more than half of the meeting.
- 3.3** Any committee may authorize participation by telephone conference or similar medium that allows for simultaneous communication between members as permitted by law.
- 3.4** Committee members who are sick, hospitalized or who have some other important reason for not attending should notify the chairperson or the chairperson's designee at least a week before the meeting. If that is not possible, notice should be given as soon as possible.
- 3.5** Any committee member who has two unexcused absences within a twelve month period will be contacted by the committee chairperson to discuss the reasons for absence and whether the member will be able to continue serving. Members who do not believe that they can continue should tender their resignation in writing to the committee chairperson. Any resignations will be announced to the council chairperson and to the committee.
- 3.6** The committee chairperson may remove committee members, other than executive committee members, after notice of proposed removal to and an opportunity to be heard by the member consistently with this process.

Section 4. Requirements for Committee Chairpersons

The chairperson of each committee is responsible for:

- a. Ensuring that the by-laws and every applicable directive of the council are followed by the committee as indicated in Chapters 15.09, 14.017 and 14.24 of Wisconsin Statutes;
- b. Ensuring that recommendations of the committee are conveyed to the full council;

- c. Submitting meeting minutes in the approved format to the council; and
- d. Coordinating work with other committees where items could be of mutual interest.

Section 5. Executive Committee

5.1 The executive committee shall be comprised of at least three members, including the council chairperson, vice-chairperson and secretary.

- a. Provide policy direction to and periodically evaluate the performance of the council and its activities relating to direction from the division of mental health and substance abuse services.
- b. Meet at the request of the chairperson as needed;
- c. Provide for an annual review of the by-laws;
- d. Act on behalf of the council when a rapid response is required, provided that any such action is reported to the council at its next meeting for discussion and ratification; and
- e. Other duties designated by the council.

5.3 Rapid Response

The executive committee may act on behalf of the full council only under the following circumstances:

- a. When specifically authorized by the council;
- b. When action is needed to implement a position already taken by the council;
- c. Except when limited by the council, the executive committee may act upon the recommendation of a committee, other than the executive committee, if such action is necessary before a council meeting may reasonably be convened, provided that if more than one committee has made differing recommendations concerning the subject, the executive committee may not act except to request further study of the subject; or
- d. Except when limited by the council, the executive committee, by unanimous consent, may take such other action as it deems

necessary before a council meeting may reasonably be convened.

ARTICLE V

Amendments

The by-laws may be amended, or new by-laws adopted, after thirty days written notice to council members by a two-thirds vote of the full council membership present at a regularly scheduled meeting.

