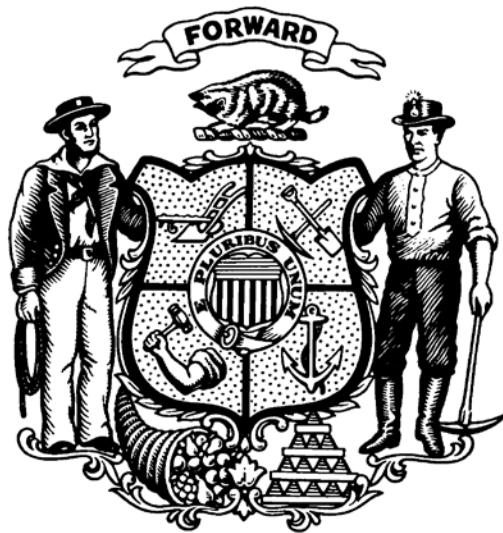


# WISCONSIN STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE



March 15, 2019  
MEETING

**Roger Frings**  
Chairperson

**TONY EVERS**  
Governor





## Tobacco-Free Environment

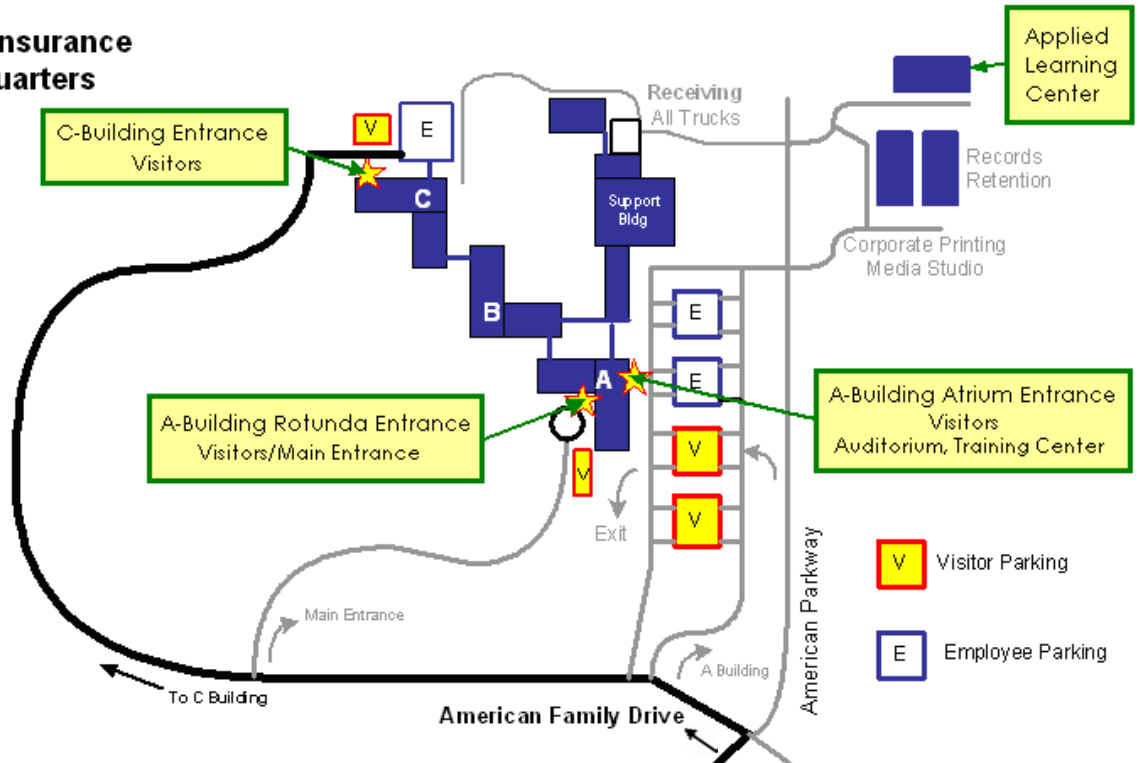
American Family Insurance is a tobacco-free environment. We prohibit the use of tobacco products and electronic cigarettes (e-cigarettes) everywhere, by anyone, at all times.

**Use of tobacco products and e-cigarettes 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 and e-cigarettes while using our facility.

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

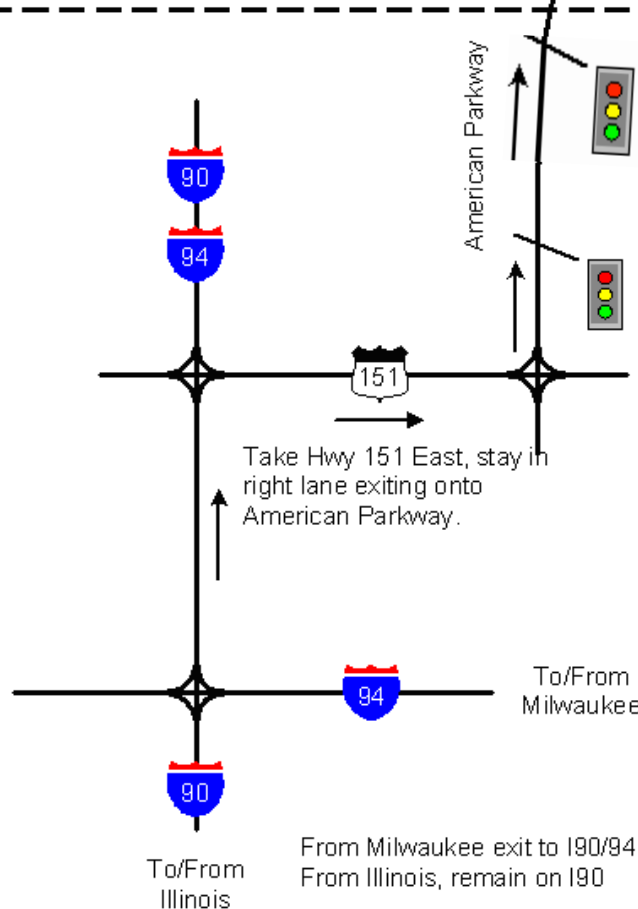
Directions  
**American Family Insurance  
National Headquarters**



**Main Campus Directions**

Turn left onto American Family Ins. Dr and take the 1<sup>st</sup> right to access A bldg./Training Center visitors parking

- Visitors are able to use both flat lots for parking only
- If you need to drop off materials/attendees please follow the road around the parking ramps to the A bldg. visitors entrance
- Please note roads around parking are one way



Merge to left lane on American Parkway. Second intersection past stop light is American Family Drive.

RETURN: Reverse route. Exit onto American Parkway, stay in right hand, enter onto Hwy 151. Entrance to I90/94 is immediately ahead. Southbound - on 151 merge to second lane from right which becomes far right lane as you approach the interstate.

**Highway Directions to AF-NHQ Campus**



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**

March 15, 2019, 9:30 AM to 2:30 PM  
American Family Insurance Conference Center  
6000 American Parkway, Madison, WI 53783  
**A-Building, Room A3141**

**MEETING AGENDA**

1. Welcome and introductions.....Roger Frings, SCAODA Chairperson
2. Approval of December 7, 2018 meeting minutes.....p. 6
3. Public input (maximum five minutes per person).....Roger Frings
4. Committee reports:
  - Executive Committee.....Roger Frings..... p. 13
    - ✓ Review Committee meeting minutes and agenda
    - ✓ Status of SCAODA membership
  - Diversity Committee.....Thai Vue..... p. 15
    - ✓ Review Committee meeting minutes and agenda
  - Intervention & Treatment Committee...Norman Briggs & Roger Frings.....p. 24
    - ✓ Review Committee meeting minutes and agenda
    - ✓ Children, Youth and Family Treatment Sub-Committee
  - Planning and Funding Committee.....Christine Ullstrup..... p. 36
    - ✓ Review Committee meeting minutes and agenda
  - Prevention Committee.....Chris Wardlow..... p. 41
    - ✓ Review Committee meeting minutes and agenda
    - ✓ Workplace Prevention Ad Hoc Committee

5. Legislative and Budget Update.....Roger Frings/Cecilia Culp
6. Presentations on Programs.....Guest Presenters
  - Medications for Treatment of Opioid Use Disorder .....*Dr. Subhadeep Barman*
  - Tribal-State Policy Academy Initiative -- *Michael Waupoose, Shelby Cleereman, Robert TwoBears, Vaughn Bowles*.....p. 47
  - Healthy Wisconsin Initiative – Alcohol & Opioid Priority Action Teams  
*Dr. Mark Wegner, DHS, Division of Public Health*.....p. 53
7. Lunch
8. Agency reports:
  - Department of Health Services.....DHS Secretary Designee
  - Department of Revenue.....DOR Secretary Designee
  - Department of Public Instruction.....DPI Superintendent Designee
  - Department of Safety & Professional Services.....DSPA Secretary Designee
  - Department of Veterans Affairs.....Colleen Rinken
  - Department of Justice.....Tina Virgil
  - Department of Corrections.....DOC Secretary Designee
  - Wisconsin Technical Colleges.....Katie Roberts
  - UW Systems.....Jennifer Wickman
  - WI Board for People with Developmental Disabilities.....Fil Clissa
9. Bureau of Prevention, Treatment and Recovery Update.....Joyce Allen, DHS... p. \_\_
  - State Targeted Response (STR)/State Opioid Response (SOR) Grants.....Jason Harris
10. Report from Wisconsin Council on Mental Health .....Mishelle O’Shasky, WCMH Chair
11. June 7, 2019 Meeting Agenda Items.....Council Members
12. Adjournment..... SCAODA Chair

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. Members of the State Council are appointed by the Governor. The Council’s primary function is charged with providing leadership in Wisconsin around substance use disorder issues, advising Wisconsin state agencies on substance use disorder prevention, treatment and recovery activities, and coordinating substance use disorder planning and funding initiatives across state agencies. The Bureau of Prevention Treatment and Recovery within DHS staffs the Council. 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 Mike Derr at 608-267-7704 or at [Michael.Derr@wisconsin.gov](mailto:Michael.Derr@wisconsin.gov).

**Conference Call:** (via Skype) 844-341-6886 [608-316-9000 in Madison]

**Conference ID Code:** 507694

See also <https://scaoda.wisconsin.gov/meetings.htm> for instructions on joining by phone.

Scott Walker  
Governor



Roger Frings  
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

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

December 7, 2018

9:30 a.m.

American Family Insurance Training Center - Madison, WI

Members Present: Roger Frings, Paul Krupski (for DHS Secretary), Chris Borgerding, Bryan Radday, Autumn Lacy, Sue Shemanski, Jan Grebel, Christine Ullstrup, Thai Vue, Colleen Rinken, Michael Ayers, Ryan Shogren, Sen. Janet Bewley, Jennifer Fyock, Sandy Hardie,

Members Excused: Subhadeep Barman, Rep. Jill Billings, Norman Briggs, Brenda Jennings, Michael Knetzger, Duncan Shrout, Kristi Sullivan,

Ex Officio Members Present: Mishelle O'Shasky, Mark Wegner, Fil Clissa, Dshal Young, Brittany Lewin,

Ex Officio Members Excused: Gary Bennett, BJ Dernbach, David Galbis-Reig, Katie Wagner-Roberts, Matthew Sweeney,

Staff: Mike Derr, Mai Zong Vue, Holly Audley, Beth Collier, Cecilia Culp, Allison Weber, Scott Stokes, Joyce Allen, Alexandra Wright-O'Neil, Cory Flynn, LeeAnn Mueller, Bernestine Jeffers, Dennis Radloff, Christy Niemuth, Gary Roth,

Guests: Chris Wardlow, Nancy Michaud, David Macmaster, Joe Muchka, Sheila Weix, Bradley Boydman, Denise Johnson, Bill Lauer, Jamie Schranst(?), Meagan Sulikowski, Amy Anderson, Harold Gates, Amanda Lake, Carly Bieri, Chantel Wiedmeyer, Melissa DeGoede, Christian Kastman, Jessica Geschke, Jim Van den Brandt, Sue Wilhelm

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**Call to Order:** Roger Frings called the meeting to order at 9:30 a.m.

**Introductions:** Members introduced themselves. Chairperson Roger Frings noted that several Council members are unable to attend for health reasons. He also reminded attendees of the Governor's Opioid Task Force meeting scheduled for December 14<sup>th</sup>.

**Approval of Sept. 7, 2018 Minutes:** Dashal Young moved to approve the minutes. Thai Vue seconded. The minutes were approved unanimously. Fil Clissa added a correction to Dec. 7<sup>th</sup> meeting agenda: “Ann Sievert” should be replaced with “Fil Clissa” on page 6 in the booklet.

### **Public input:**

Mike Derr briefly outlined the changes that could occur next year when the new governor takes office. There are relatively few changes, since most appointees are chosen by agency, not the governor. There will be more information as the next SCAODA meeting approaches.

### **Committee Reports:**

*Executive Committee* – Roger Frings reported that the committee last met on November 12<sup>th</sup>, where they set today’s agenda, and discussed council priorities for 2019. At the November meeting, committee members expressed that the full Council should strive to meet all goals of the Four-Year Plan over the next few years, but subcommittees can focus on specific goals. Meeting dates for 2019 have been established: March 15, June 7, Sept. 6, and December 6 (later moved to December 13).

*Diversity Committee* – Thai Vue reported that the committee last met on November 2<sup>nd</sup>, and members discussed the following topics: update from the DCTS office; SCAODA strategic planning for 2018-2022; the objectives provided in August; changing the name of SCAODA because of the wording of substance abuse vs. substance use disorder; diversity committee structure changes; and the recently-completed October Mental Health/Substance Use Disorder conference. He also informed the attendees of the Hmong New Year.

*Intervention and Treatment Committee* – Roger Frings reported that the committee last met in October. Discussions included a need for relevant data, the 4-year strategic plan, adolescent/youth treatment program, Children, Youth and Family Treatment Subcommittee, rising level of SUD needs for the senior population, emerging SUD practices, and monthly advocate meetings with the DHS Secretary’s advocacy group. Also, DHS staff updated that David Nelson and Patrick Cork have retired, Lorie Goeser resigned, and the second-stage Pew Report was released and reviewed. Mike Derr provided updates on the DHS 75 administrative rule rewrite project.

*Planning and Funding Committee* – Christine Ullstrup reported that the committee last met on November 12<sup>th</sup>. Members put together a committee member job description and recruitment process. They are still seeking additional members. Also, members discussed plans and priorities for 2019, and came up with several projects: Reviewing the needs assessment and current funding sources; producing a simplified document for legislators that discusses existing needs and funding sources and offering recommendations; and reviewing the Pew Report recommendations regarding the Hub and Spoke model and other changes. The Committee wants to focus on what is happening in the legislature and how to monitor and influence adopted bills. Ullstrup announced that with the recent announcement of the federal waiver extending Medicaid coverage to residential treatment, the Committee would like the Council to encourage the public and stakeholders to get highly involved in policy setting.



*Prevention Committee* – Chris Wardlow reported that the committee last met on November 19<sup>th</sup>. Caroline Miller has resigned from the Committee as well as Council. The Alcohol Priority Action Team produced the Healthy Wisconsin Addendum Report. The Team wants to include action items related to the priorities, and update the alcohol culture and environment report. The Committee continues to focus on data gaps. The Committee will invite people from different agencies to collect data relevant to alcohol and solicit recommendations to support and enhance the data. They are hoping to have someone from Vital Records, the Trauma Registry, the Office of the Medical Examiner, the Youth Risk Behavior Survey, and other organizations to learn from. Committee members are interested in updating the Burden of Alcohol Use Report. Also, the Workplace Prevention Ad-Hoc committee continues to work on drafting a final report.

Roger Frings requested that when standing committees meet, that he be included in the recipient list when calendar invites and announcements are sent out.

### **Council Participation in the Legislative Process**

Roger Frings informed attendees that he met with Rep. Billings and Joe Hoey to discuss the Wisconsin Legislature's awareness of the Council and its activities. He solicited suggestions from both legislators and the members of SCAODA.

Thai Vue asked if there were any chances to interact directly with legislature, and whether that is individually or through a committee. Frings replied that the process currently is if the Council takes a position on a piece of legislation, it goes through the Executive Committee and then the full council. Joyce Allen suggested looking at the Council bylaws for details. Frings' goal is to visit legislative offices and make himself available for questions and comments during the winter, and he invites other council members to join him.

Senator Bewley said she would welcome any participation, formal or informal. The Council does not have to take a stand on legislation in order to talk about it. Information is available to committee members so that they can ask questions for clarification. Communication doesn't have to be limited to specific pieces of legislation but can also be purely informative. She emphasized the desire to make connections and build relationships.

Sandy Hardie said that legislation summaries and recommendations need to be condensed and simplified, and she suggested the Council or standing committees writing executive summaries to aid busy legislators. The Council and committees needs to make sure that the right information is disseminated and brought to the table. Christine Ullstrup added that these reports also have to be more widely accessible and better synthesized across committees. Chris Wardlow suggested that those executive summaries are presented at full SCAODA meetings as well. Roger Frings coordinated with several legislators and members, and all have offered to facilitate meetings.

### **Child abuse and neglect prevention board report**

Mike Derr presented and discussed a legislative tracking table used by the Child Abuse and Neglect Prevention Board. The table was distributed as a separate handout during the meeting. Council members asked whether DHS staff could track and develop legislative updates periodically, such as weekly. Joyce Allen responded that work demands would make that

impractical, but that staff would consult with Roger Frings to come up with possible approaches for developing or sharing legislative updates.

Senator Bewley added that there is a legislative bill tracker online that will e-mail updates on any category of bills that a reader selects. Mishelle O'Shasky mentioned that the Legislative & Policy Committee conducts the legislative tracking and summaries for the Mental Health Council and its stakeholders.

**Guest Presenters:**

Federal FY2019 SYNAR Survey Report – Nancy Michaud of DHS, Division of Public Health, gave an overview of the Report, which was inserted in the meeting booklet, starting on page 39. The highlight is that retail store non-compliance rates in restricting tobacco sales continues to decline, down to 5.8% during CY 2018, well below the 10% national average. Possible reasons include the recent implementation of other tobacco control programs and greater awareness by retail stores. One concern, however, is the recent use of flavored e-cigarettes.

Dashal Young asked about the cost of e-cigarettes. Michaud replied that a starter JUUL device with 4 pods costs about \$30. In comparison to the price of cigarettes, it is cheaper to purchase and use. Janet Bewley asked if retailers can sell under cost. Michaud was not certain, but the FDA recently announced steps on restricting some flavored e-cigarette products from being sold. The rulemaking process will likely take years. Mishelle O'Shasky asked if vape shops require patrons to be 18 to enter. Michaud replied that while it is not a state law, they tend to enact that rule on their own.

Department of Revenue designee Matt Sweeney did not attend the meeting and therefore did not give a presentation on alcoholic beverages taxes and enforcement efforts.

Christian Kastman and Jim Van Den Brandt, representatives of Group Health Cooperative of South Central Wisconsin, presented on their organization's approach to the opioid epidemic. The presentation slides distributed as a separate handout. Group Health Cooperative (GHC) values having a wide array of services available to minimize pain and keep chronic pain patients away from opioids. David Macmaster asked about utilization review activities: is there an annual or lifetime benefit cap for those with chronic issues? He also asked if tobacco use disorders were included in their service range. Van Den Brandt responded that there were no caps for their products, but some levels of care have benefit limitations in accordance with mental health parity laws. GHC partners with the University of Wisconsin for tobacco usage reduction.

Security Health Plan Opioid management program – Sue Wilhelm and Melissa DeGoede presented on their organization's opioid management program. A copy of the PowerPoint presentation was distributed at the meeting. (Both presenters noted that the Emergency Room per 1000 and Inpatient Utilization per 1000 charts should be reversed.)

The Tribal State Policy Academy Initiative presentation was postponed to the Council's March meeting.

**Agency Reports:**

DHS – Paul Krupski reported that Jennifer Malcore’s last day at DHS is today. The State Opioid Response (SOR) Grant program was summarized in a document that was distributed before the meeting. There were several questions regarding insurance and overlap with the WisHope program. Dennis Radloff clarified that WisHope is not funded by the state. Fil Clissa asked if the ADRC is equipped to handle calls about the Addiction helpline. Krupski replied that ADRC staff can use the helpline as well to assist individuals looking for addiction services.

The 2017 annual report of the Commission on Substance Use Disorder Treatment is being finalized, and it will be shared with the group once it is finished. A flowchart of the substance use disorder clinical model included in the report was handed out during the meeting. The flowchart should be considered a goal to reach, not a concrete plan.

The federal Medicaid waiver received approval on Oct. 31<sup>st</sup>, including coverage for AODA residential treatment. Since the DHS administration is changing, what will happen with that waiver is yet to be determined. Implementation plans are due in January, regardless of the administration change. Krupski encouraged members to check the DHS website for updates. Community feedback will be solicited as the process continues.

DPI – Brenda Jennings was unable to attend, so Mike Derr gave announcements on her behalf. Information was printed on page 93 of the booklet. AODA program grant materials are now available online, and applications are due in April. The student mini-grant competition is presently open. The Youth Risk Behavior Survey has been modified to make it easier for school systems to use.

DSPS – No report was given.

DVA – Mike Ayers announced that Colleen Rinken was hired as the Veteran’s Mental Health Director, and she will be replacing Ayers on the committee. Rinken gave updates on the VORP Program. All 11 regions are hired and working. Supportive case management and comprehensive case management are both pieces of the new VORP. Four facilities have been opened, and the latest one has 10 of 17 beds already filled. Christine Ullstrup asked about the clinical model of housing. Rinken replied that there were five different kinds of housing, but clinical models being used were the most intensive. The program focuses on person-centered care. The locations are located in Chippewa Falls, Green Bay, Union Grove, and the King veterans center.

DOJ – Ryan Shogren announced that on Oct. 27<sup>th</sup> the department held the semi-annual Wisconsin Drug Take-Back event. Thirty-four tons of unused prescriptions were turned in, coming in 2<sup>nd</sup> in the nation. The Opiate Summit was held in Milwaukee with 600 participants. The department is planning to hold this again next year, and will form a committee in January. The department received a \$1 million COPS anti-methamphetamine grant to combat flow of meth into the state. The department also received \$2 million to combat the opioid epidemic through another grant. DOJ partnered with the federal Drug Enforcement Agency (DEA) to put up safe containers to contain waste from dismantled methamphetamine laboratories.

DOC – Autumn Lacy announced that SUD treatment standards across divisions have been implemented in community corrections and juvenile corrections. Community case management services are being coordinated. Formal assessments have been implemented in the women’s prison system, and DOC is hiring in the male facilities. DOC was approved to present at a national probation and parole conference in Florida, and is putting together a pilot toolkit to help other corrections systems implement medication assisted treatment (MAT). The department is currently collecting data to expand the pilot. Pursuant to the PEW recommendations, DOC is planning to implement all 3 MAT approaches in one prison. Lacy anticipates many barriers will need to be addressed to improve chances for success. Correctional officers have been equipped with Narcan. Parole agents are also being equipped with Narcan as a pilot. In addition, DOC is expanding the Vivitrol pilot. Joyce Allen added that DHS is seeking proposals from county jails to award state grant funds for MAT programming within the jails.

UW/Tech Colleges – No report was given.

WI Board for People with Developmental Disabilities – Fil Clissa is currently conducting research on barriers to substance use disorder treatment for people with disabilities, and is looking at service models, advocacy, and policy changes to help foster improved access.

#### **Bureau of Prevention Treatment and Recovery Updates:**

Joyce Allen announced that the bureau submitted the latest annual SABG report to SAMHSA, and that the state continues to meet SABG program criteria and requirements. The State Targeted Response (STR) grant program has served over 900 people over the first year. It’s successor, the State Targeted Response (SOR) program, will be able to serve even more people. Winnebago Mental Health Institute successfully implemented the electronic health records system, DHSCconnect. Other facilities will follow. A FEMA disaster assistance counseling grant has been received for the flooding that happened earlier in the year. Keith Lang and Orrin Hammes helped MHBG specialist Ryan Stachoviak complete a second grant to extend services for nine months. Scott Stokes announced upcoming training events, which are listed on page 94 of the booklet. Paul Krupski added that the Governor’s Opioid Task Force tasked DHS to hold three faith based summits events. There were about 225 attendees. A final report will be available soon. The initial evaluation from attendees was positive.

#### **Wisconsin Council on Mental Health Update:**

Mishelle O’Shasky reported that council minutes reflect a lot of overlap with those of SCAODA. She would like to see efforts among the two Councils to collaborate, share information, and meet jointly to discuss common needs and issues. She noted programs in the northern portions of Wisconsin receiving mental health and SUD funding. Dasha Young asked why Ashland was so aggressive about methamphetamine use, and O’Shasky replied that it’s a bigger problem than opioids there.

#### **Next Meeting Agenda Items:**

The next meeting is on March 15, 2019.

- Tribal State Policy Academy initiative
- Dr. Subhadeep Barman will present on best practices for MAT
- Healthy Wisconsin presentation

**Adjournment:**

The meeting was adjourned at 2:24 p.m.

## OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Executive Committee, State Council on Alcohol and Other Drug Abuse (SCAODA)		Attending: See narrative below.
Date: 11/12/2018	Time Started: 1:09 pm	Time Ended: 1:48 pm
Location: DHS, 1 W. Wilson St., Room 1050C, Madison, WI; also via phone conference		Presiding Officer: Roger Frings, Committee Chair

### Minutes

*Present:* Roger Frings, Sandy Hardie and Norman Briggs (all by phone)

*Absent:* None

*Staff:* Mike Derr

Roger Frings called the meeting to order at 1:09 p.m.

Norman Briggs moved that the Committee's July 31, 2018 draft minutes be approved. Sandy Hardie seconded the motion. Motion carried – minutes are approved.

- Committee members reviewed the preliminary draft agenda for the Dec. 7, 2018 SCAODA meeting and offered a few recommendations. Roger Frings will line up representatives from two health HMOs to present on insurance coverage issues relating to opioid use and SUD services.
- In reviewing the approved 2018-22 SCAODA Strategic Plan, committee members stated that the full Council should not concentrate on only one or two goals as priorities for the upcoming year. However, committees might want to consider selecting one or two goals to focus efforts around each year.
- Roger Frings will meet with Rep. Billings (and ask Mike Derr to join) to help establish concrete steps for the Council to heighten and improve its level of involvement with the upcoming legislative session and Governor's budget bill. The group will also discuss methods for tracking proposed legislation and sharing with council and committee members.

No public comments were offered during the meeting.

The meeting adjourned at 1:48 p.m., pursuant to motion by Sandy Hardie, seconded by Norm Briggs and carried 3-0.

Prepared by: Michael Derr on 2/18/2019.



Roger Frings  
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

February 19, 2019

9:00 – 9:45 AM, Room 1050C  
Via conference call

**MEETING AGENDA**

- 1. Call to Order .....Roger Frings
- 2. Review of November 12, 2018 Meeting Minutes.....Roger Frings
- 3. SCAODA’s March 15, 2019 Meeting Agenda.....Roger Frings/Mike Derr
- 4. Status: New Legislation and State Budget.....Committee Members
- 5. Public Comment: Substance Use Disorder (SUD) Planning Topics.....Roger Frings
- 6. Other Topics.....Committee Members
- 7. Adjournment.....Roger Frings

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.

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 Mike Derr at 608-267-7704 or at [Michael.Derr@wisconsin.gov](mailto:Michael.Derr@wisconsin.gov).

**Conference Call:** 1-877-820-7831

**Access Code:** 554523#

### OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Diversity Committee			Attending: Thai Vue, Harold Gates, Denise Johnson, and Allison Weber; By Phone: Kathy Scheier and Sandy Hardie; Guest: Amy Anderson; Excused: Anthony Harris and Gail Kinney
Date: 8/3/2018	Time Started: 9:30AM	Time Ended: 2:30PM	
Location: Independent Living Council 3810 Milwaukee St., Madison, WI 53714			Presiding Officer: Thai Vue
<b>Minutes</b>			



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**Welcome and Introductions** were done by members and committee chair

**Public Comment** –none

**Meeting Minutes** were tabled for the next meeting in order to clear up the part about Thai Vue being nominated as chair. No action taken.

**DHS** prevention coordinator Allison Weber gave the committee an update on the Emerging Leader Program and noted that it will begin again in 2019. There will be an event at the end of 2018 to reunite alumni, past mentors and leaders and staff from DHS to launch the new program. She also mentioned that the 2018 Substance Abuse and Mental Health conference will be on Oct.17&18 at the Kalahari Resort in the WI Dells.

**DSPS Updates:** Gail is not here but Denise mentioned there is difficulty in the licensing process through DSPS.

**Diversity /Strategic Plan Update:** Summary was sent out but the attendance has been poor for the last meetings. Thai shared some handouts including the one from the consultant at Faithful Consulting LLC. The committee decided on: “The Diversity Committee enhances The State Council on Alcohol and other Drug Abuse’s (SCAODA) efforts as the leader in establishing culturally and linguistically appropriate services (CLAS)”. Denise asked that the group write out SCAODA.

**Motion** to approve vision statement for the Diversity committee: Sandy **Second:** Denise **Motion carries**  
Sandy asked that we wait for SCAODA to give the committee their goals before the Committee adopts goals for Diversity. The group will revisit the goals after the September SCAODA meeting. Thai said that he has been advocating for the committees and sub-committees of SCAODA to be more a part of the priority and goal setting process for SCAODA 2018-2022 strategic plan.

Harold reminded the group that CLAS goes back to 1999 and SCAODA needs a friendly reminder on that. Thai shared a handout from the WI Public Health Council that he sits on, on CLAS. Harold gave the group a handout from NIATx on change models. He noted the website for members to refer to: [www.niatx.net](http://www.niatx.net). The committee watched the video with CC. Denise asked that we add a captioning resource. There was some discussion on showing the short video on change models to SCAODA or at the planning committee? Sandy will suggest it to Mike Derr and Duncan ShROUT. Denise commented that hospitals have interpreters listed for many languages but not often for deaf and ASL.

**Diversity Reception:** Denise said that last year the group planned much further ahead and this year they are getting too close to the event. Harold agreed. Allison asked if it could be a last session instead of an add-on after a full day. Group wondered if there could be a presentation on CLAS. Mai Zong needs to be consulted. Denise said an evening reception was too much, something fun is needed, perhaps entertainment highlighting different cultures. Allison suggested tables with cultural themes. Denise commented that networking is not that fun for her (deaf) culture. The cost needs to be looked at. Allison said she will talk to Mai Zong about plans.

**Membership Recruitment:** Thai is also working with the Minority Health Advisory Committee and he shared their application for membership. Thai said that there are 7 members of the Diversity Committee now as Tish Minor passed away. Allison said that there is a need for a good on-boarding process, maybe a binder with information. Denise said that the website is not user-friendly. Harold suggested that the group ask the Minority Health Advisory Committee what was successful for them. Denise noted that the meeting minutes and agendas need to be posted on the SCAODA website. Both Thai and Kathy said that they were recruited to be on the committee.

**Future Agenda Items:** Denise asked that there be more meetings, there were only 3 in the last year as 1 was cancelled. There need to be 4 meetings a year at least. The next meeting is in Milwaukee on November 2<sup>nd</sup> at Denise’s office. Thai asked if 10-2 would be better. All agreed as it gives people more time to get there if they are driving far. Denise asked if the next year’s meetings could be on the next agenda. The group also needs to discuss goals and 4 year strategic plan for the committee. Harold asked that CLAS and the NIATx process improvement model be kept on the agenda. Thai thanked the committee, guest and venue

**Motion to adjourn:** Denise **Second:** Sandy **Motion Carries**  
**Adjourn**

Prepared by: Allison weber (for MaiZong Vue) on 8/6/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 11/2/18

### OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Diversity Committee			Attending: Thai Vue and Denise Johnson, on phone: Gail Kinney; excused: Sandie Hardy; interpreters: Amy and Karen; staff: Mai Zong Vue; guest: Peter Thao
Date: 11/2/2018	Time Started: 10:15AM	Time Ended: 1:15PM	
Location: IndependentFirst, 540 S. 1 <sup>st</sup> Street, Milwaukee, WI 53204			Presiding Officer: Thai Vue
<b>Minutes</b>			

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**Welcome and Introductions** were done by members and Thai, Committee Chair

**Public comment** –none

**Meeting minutes** – due to lack of quorum, the August 3 meeting minutes were postponed for the next meeting. However, corrections were made on the DSPS discussion per Denise. No action taken.

**DHS Updates** – staff shared that Pat Corks retired and Rose Kleman is the interim Area Administrator for DCTS. Dave Nelson also retired and his position will be filled in the future. DCTS received a small technical assistance grant for both mental health and drug and alcohol use programs. Committee asked for contact information for Rose so Gail can draft letter to congratulate Rose. Committee asked for staff to invite someone from the workgroups of DHS 75 Community Substance Abuse Services and DHS 62 Assessment of Drivers with Alcohol of Controlled Substance Problems to give an update of the workgroup's progress on the administrative rule revisions.

**SCAODA Strategic Plan: 2018-2022 Updates:** Thai shared that the Plan was reviewed and voted at the last SCAODA meeting. The Committee reviewed the Diversity Committee section. A lengthy discussion was held on the consistency of terminology: state and federal use different terms for drug and alcohol. It was suggested that the Committee may want to raise the question: should the Council name be changed? Committee members feel that SCAODA is the leader and its name needs to reflect consistency of federal terms in order to prevent confusion. Committee members recognize that this initial dialogue on the name change for the Council will require more time but needs to hold the conversation.

**Diversity Committee Organizational Structure** - Thai asked if the Committee needs additional positions such as Secretary and Co-Chair? Gail shared that there was a document done with her, Denise and Mike that may already address this structure question. Denise will look for document and send to Mai Zong to send to all members to review.

**Diversity Committee Goal Review** – Not action. It was already reviewed.

**Diversity Reception 2018** – Gail gave an overview of the reception discussion. Around 22-25 people attended it. The questions posted to the group discussions were: What would you like to know? What would you like to learn? What would you like to have? Gail the groups to also provide action steps for the goals and definition of underserved population. The underserved definitions were interesting as they include homeless. Denise shared that she is seeing more homeless on the south side today in Milwaukee and asked if we need to cover this population? Denise sees more and more on the south side today. It was shared that a homeless project has been created and asked if Diversity can bring the staff from this project to come and share. Mai Zong will check to see if she could invite this staff.

Questions for next year: Why do we have too many people sign up and low turned out? E.g. this year there were 200 people signed up but only 25 people showed up? Denise said perhaps the label for the workshops or event needs to change—hide our diversity a bit. Space is an issue. From now on, have the room for 50 people only unless the Committee does something different. Moving forward, the Committee should sign 2-3 people to work on it as a subcommittee to prevent being a reactive group. The subcommittee structure will give ownership and accountability for the annual event. It was concluded that staff send an email to all members to suggest speakers and topics for 2019's event by January 1. Staff will send a survey out to gather this information. For example, Denise could list Neil Goodman and the language deprivation book.

**Membership Recruitment Update** - Gail said that two people were interested in joining Diversity and gave the names to Mai Zong. Mai Zong reported that the application information was sent but have not heard. Gail will follow up on the two individuals. Denise suggested to hold off the application form and invited them to Diversity Committee. Once they attended a Committee meeting, the applications can be handed to them.

Members discussed the need to have 6-8 meetings in 2019 again. There was a consensus to hold more meetings but not sure of the months. Staff will send a survey out so all members to choose. The first meeting in 2019 will be January 4, 2019 in Madison.

**Future Agenda Items** – Agenda items for next meeting are:

1. 2019 meeting dates and location
2. Diversity's planning and action steps
3. Updates of the DHS Administrative Rule Revisions
4. Diversity Organizational Structure
5. Diversity Reception Subcommittee

**Motion to adjourn:** Denise Johnson   **Second:** Thai   **Motion Carries**  
**Adjourn**

Prepared by: Mai Zong Vue) on 11/6/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 1/4/19



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**

Diversity Committee

January 25, 2019

10 AM to 2:30 PM

Catholic Multicultural Center  
1862 Beld Street  
Madison, WI 53713

**MEETING AGENDA**

1. Welcome and Introductions..... Committee Chair
2. Public Comment: The committee will accept comments from the public relating to any committee business.....Committee Chair
3. Approve Minutes from August 3 and November 2, 2018 Meeting.....Committee Chair
4. Greetings from SCAODA Chair.....Roger Frings
5. Administrative Rule (DHS 40) Revision Updates.....Joanette Robertson
6. Review and Approve 2019 Dates Updates.....Thai and Sandy
7. Review and Approve New Member Application .....Mai Zong Vue
8. Diversity Workshop & Reception Subcommittee.....Committee Chair
9. Diversity Planning & Action Steps.....Thai Vue
10. Diversity Committee Organizational Structure.....All
11. DCTS Update .....Mai Zong Vue
12. Future Agenda Items.....Committee Members

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Diversity Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA). The Committee's mission is to enhance and honor the lives of Diverse Populations of Wisconsin by providing access to culturally and linguistically appropriate substance disorder use related services.

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**Conference Call:** 1-877-820-7831

**Access Code:** 554523#



## OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Intervention and Treatment Committee			Attending: Roger Frings, Norman Briggs, Laura Gebhardt, Amanda Lake, Jason Cram, Tamara Feest, Sheila Weix, Bill Lauer, Chelsey Wasielewski, Lindsay Just, Joe Muchka, David MacMaster, Dawn Spencer
Date: 11/13/2018	Time Started: 10:06 AM	Time Ended: 2:07 PM	
Location: Dept of Correction, 3099 E. Washington Ave. Madison, WI			Presiding Officer: Norman Briggs, Roger Frings

### Minutes

1. Motion to approve October Minutes made by Lindsay Just and seconded by Dave MacMaster. Motion carried with Bill Lauer and Tamara Feest abstaining.
2. Holly Audley was not available and will plan to attend in January.
3. Mike Derr will send a letter to Chelsey Wasielewski regarding her appointment to the ITC and election to the CYFT chair.
4. Sheila Weix recommended a future agenda item/guest speaker be on the topic of the waiver; possibly someone from the behavioral health section of Medicaid.
5. Regarding the recent election (conversation facilitated by Roger Frings):
  - a. SCAODA is statutory
  - b. Opioid Taskforce is not statutory
  - c. The future of the Opioid Taskforce is unknown
  - d. There are 16 cabinet positions and numerous other appointed positions that need to be filled
  - e. Transition is stressful for all
  - f. Representatives from SCAODA will meet with elected officials in 2019 to raise awareness of Council
  - g. Any necessary replacements of SCAODA membership will take place after Governor Elect Evers is sworn in
6. Mike Derr, SABG Planner for DHS attended the meeting to provide an update on the DHS 75 rewrite project:
  - a. Statement of scope was handed out which was approved in early 2018
  - b. List of advisory committee members was distributed
  - c. Due to staff changes at DHS, project has slowed down in later 2018 but will regain momentum once a position has been filled in early 2019
  - d. Due to rule being outdated, likely most will be rewritten
  - e. Focus will be placed on incorporating ASAM into rule
  - f. Possibility of new administration scraping project but unlikely due to rule being outdated
  - g. Must convey message that stakeholders are involved and part of project
  - h. Once draft is written, hearings and comment periods will be held
  - i. Roger Frings recommended that any changes to advisory committee be given consideration to the balance of new legislature
  - j. Any public hearings will be posted on the public notice website ([www.wisconsinpublicnotice.org](http://www.wisconsinpublicnotice.org))
  - k. Goal of project is to streamline process, allow for flexibility, by accurate, consider future, be comprehensive
  - l. The current scope addresses prevention and treatment; members from ITC recommends it also includes recovery but not regulate it
  - m. Statement of scope can be updated
  - n. Members of ITC recommend committee includes direct practice clinicians
  - o. Mike Derr concluded by saying rules are minimum standards
7. Committee broke for lunch from 11:30 AM to 12:25 PM.
8. Roger Frings provided an overview on the upcoming 12/7/18 SCAODA Meeting:
  - a. No motions to consider
  - b. Discussion will include SCAODA presences within the legislative process
    - i. Sheila Weix recommended increase use of public testimony at committee level representing SCAODA
    - ii. Recommendation to stay in contact with legislators at individual level

- iii. Dave MacMaster stated the tobacco prevention and treatment groups do a very good job at advocating at the legislative level
  - iv. Discussion regarding the Mental Health Council having a Mental Health advocacy day at the capitol
    - v. Wisconsin Voices for Recovery holds an advocacy day at the capitol
    - vi. WCHSA holds a Human Services day at the capitol in April which is very well organized
    - vii. Roger Frings recommended that all ITC members subscribe to the Senate and Assembly Journal and Records listserv; Roger will send the listserv address to all
    - viii. Statutory reference for SCAODA can be found [here](#) or by going to <https://docs.legis.wisconsin.gov/statutes/statutes/14/I/017?view=section>
  - c. Synar Report
  - d. Tribal and State Policy Academies
  - e. DOR Alcohol enforcement efforts
  - f. Insurance industry presentation
  - g. Agency Reports
    - i. Add DOC to list of agency reports
  - h. 2019 training and conference updates
  - i. Mental Health Council report
  - j. March SCAODA agenda items
9. Advocates Meeting Update (Norman Briggs):
- a. DHS will suspend these meetings due to change in administration with the possibility of the meetings being restarted once new administration in place
  - b. DSPS, DHS, and DQA met regarding certification of substance use counselors; DSPS put hiatus on rejection of SU certification for mental health professionals; emergency rule may be written
  - c. Agencies are losing money on mental health counselors providing substance use treatment and not receiving reimbursement because they are not certified
10. Section Updates:
- a. CYFT did not meet since last ITC Meeting
  - b. Treatment for Women and Their Children did not meet since last ITC meeting
  - c. SU Amongst Senior Population Workgroup (Joe Muchka)
    - i. Workgroup underway
    - ii. Membership includes Joe Muchka, Chelsey Wasielewski, Lindsay Just, and Sheila Weix
    - iii. Will be speaking with DHS staff regarding data sources and references
    - iv. In the process of conducting a literature review
    - v. Will be consulting with [WI Alcohol Policy Project \(https://law.wisc.edu/wapp/\)](https://law.wisc.edu/wapp/)
    - vi. Will be approaching ADRC coordinator at DHS
    - vii. Workgroup typically meets after ITC meetings
11. Jason Harris, STR Coordinator at DHS, attended ITC as a guest speaker
- a. STR ends 04/30/19 (started 5/2017)
  - b. SOR money more than STR
  - c. SOR will expand beyond currently funded counties
  - d. “Maintenance of effect” approach – if current goals are being met, programs should continue to receive funding
  - e. RFAs issued in 2018 will begin in 4/2019
  - f. Spoke about GPRA data collection process and PPS data collection process
  - g. Hand out given to committee on summary of distribution of money
  - h. Roger Frings thanked and commended Mr. Harris on his work and service
12. David MacMaster shared WinTiP handout
13. Motion to adjourn made by Joe Muchka and seconded by Sheila Weix at 2:07 PM
14. 2019 Meeting Rotation and Location
- a. SCAODA meets 9:30 AM to 2:30 PM (meets in Madison):
    - i. March 15, 2019 (NOTE: Meeting date changed from March 1, 2019)
    - ii. June 7, 2019
    - iii. September 6, 2019
    - iv. December 6, 2019

- b. ITC meets 10:00 AM to 2:30 PM (meets at DOC in Madison):
  - i. January 8, 2019
  - ii. February 12, 2019
  - iii. April 9, 2019
  - iv. May 14, 2019
  - v. July 9, 2019
  - vi. August 13, 2019
  - vii. October 8, 2019
  - viii. November 12, 2019

Prepared by: Jason Cram on 12/3/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 1/8/2019

Tony Evers  
Governor



Roger Frings  
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)**

January 8, 2019 - 10:00 a.m. to 2:30 p.m.

**Location of the Meeting:**

Department of Corrections; Room 1M-M  
3099 E. Washington Ave.; Madison, WI 53704

**AGENDA**

1. Call to order and roll call
2. Guest: Holly Audley, DHS-DCTS Assistant Administrator – DSPS Behavioral Health Review Committee
3. Review and approval of November 2018 minutes
4. Additions to the agenda
5. Updates from SCAODA meeting on December 7, 2018
6. Discussion of upcoming SCAODA meeting on March 1, 2019
7. Section updates
  - Children, Youth and Families (Jason Cram)
  - Treatment for Women and their Children (Norman Briggs)  
Urban Rural Women's Grants
  - Substance Use Amongst Senior Population Workgroup (Joe Muchka)
8. Public Comments

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: February 12, 2019

Next SCAODA Meeting: March 1, 2019

## OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Intervention and Treatment Committee of SCAODA			Attending: Norman Briggs, Holly Stanelle, Dave Macmaster, Joe Muchka, Lindsay Just, Amanda Lake, Amy Anderson, Sheila Weix, Saima Chauhan, Laura Gaphardt, Sandra Adams, Jason Cram, Holly Audley
Date: 1/8/2019	Time Started: 10:05 AM	Time Ended: 2:00 PM	
Location: Department of Corrections, Madison, WI			Presiding Officer: Norman Briggs and Roger Frings
<b>Minutes</b>			

1. Meeting called to order by Norman Briggs at 10:05 AM
2. Guest Speaker Holly Audley from DHS – DCTS regarding the DSPTS Behavioral Health Review Committee
  - a. Committee is advisory only
  - b. DSPTS appoints members
  - c. Possible changes to committee appointments with change in Secretary
  - d. Multiple ITC members stated recertification of SU clinicians is very challenging
  - e. Changes in requirements has made it more difficult recruiting from outside of state
  - f. Ms. Audley reemphasized the BHRC is advisory only and a different group exists for rule writing and emergency rule writing; the BHRC addresses initial certification issues only
  - g. Emergency Rule EmR1835 was discussed; the BHRC is not responsible for this rule however Ms. Audley suggested if the ITC has an opinion on the emergency rule, they should submit their comments in writing
  - h. Ms. Audley was thanked for her service and participation
3. In regards to a response to EmR1835, after much committee discussion and deliberation and due to public comments closing on 01/29/2019, the Committee Chairs elected to invoke the SCAODA Rapid Response Clause and draft a letter to be sent to the DSPTS.
4. The committee broke for lunch from 11:50 AM to 12:30 PM
5. The committee drafted language for a letter to be sent to the DSPTS in regards to EmR1835; Norman Briggs drafted the language based on committee input and based on Roger Fring's framing of the administrative rule process; Roger Frings made a motion to approve the language; Dave Macmaster seconded; no discussion; language of letter approved unanimously. Jason Cram will place letter on SCAODA letterhead; obtain committee chair signatures; and send letter via USPS and email to the Administrative Rules Coordinator before deadline.
6. The 11/13/2018 minutes of the ITC were reviewed; Dave Macmaster made a motion to approve and Joe Muchka seconded; motioned carried unanimously with no further discussion or abstentions
7. Caroline Miller has resigned from the ITC; a new committee member list will be drafted by Jason Cram and distributed at the next meeting; any new committee appointments will receive a letter recognizing their appointment
8. Amy Anderson put forth the following motion for consideration "Motion For Improving Wisconsin's Prescription Drug Monitoring Program (ePDMP) – In order to better serve the community, increase patient safety measures, improve treatment outcomes for those with substance use disorders, and gain valuable long term statistical information about medications for addiction treatment (MAT), it is proposed that the Prescription Drug Monitoring Program expand to include Naltrexone and injectable Naltrexone (Vivitrol), Gabapentin/Neurontin, and Methadone." Roger Fringes seconded the motion which then initiated discussion.
  - a. Dave Macmaster requested WI-ASAM provide input on motion
  - b. Concern was raised that these additions could expose PHI; Ms. Anderson indicated that this would not be the case and there is precedence established by SAMHSA and other states
  - c. Saima Chauhan opined that the data would be useful for grant applications and making informed decisions on policy related matters
  - d. Roger Frings asked if there was capacity within the PDMP to track these prescriptions; Sheila Weix expressed concern that the burden of reporting is already high for pharmacists and would only increase with this reporting; additionally, Vivitrol is prescribed in the office therefore the burden of reporting may fall to others

- e. Joe Muchka suggested this matter be referred to the PDMP advisory committee and Holly Stanelle asked if the ITC is in a position to make recommendations on this matter
  - f. Additional information is needed in order for committee members to feel fully informed; Amy Anderson will obtain data from other states who follow this process
  - g. Amy Anderson agreed to table the motion and have the discussion continued at the February 12 meeting
9. Updates from 12/07/18 SCAODA Meeting
- a. There are openings on SCAODA some of which are due to the election
  - b. March SCAODA meeting date changed from 3/1 to 3/15
  - c. SCAODA will be making more of a legislative presence and plans to make legislative visits
  - d. Assembly to have Substance Use committee
  - e. Members encouraged to utilize the legislative notification service
  - f. Members encouraged to voice opinions to law makers as a citizen voice
  - g. Synar report provided to SCAODA
  - h. Two insurance companies presented at SCAODA (Security and GHC of South Central WI) regarding the treatment and monitoring of opioid drugs
  - i. State agencies provided their reports to SCAODA
  - j. Roger Frings handed out the DHS budget and emphasized the substance use expenditures (source is the LFB website). Mr. Frings also handed out a WI-OCI publication (PI-238) titled "Fact Sheet on Benefits for the Treatment of Opioid Addiction and Other Substance Use Disorders"; these two documents were discussed at SCAODA on 12/07/18 and handed out to ITC members on 01/08/2019.
10. Section updates:
- a. CYFC meeting met in December in Stevens Point; Jason Cram provided update on membership and progress in Capacity and Demand Report; February meeting is scheduled for 02/04/19 and agenda previewed
  - b. Norman Briggs provided update on Treatment for Woman and their Children Urban Rural Women's Grants; grants extended through 2019 with new GFO coming out in 2019 for implementation in 2020
  - c. Joe Muchka provided a report on the Substance Use Amongst Senior Population Workgroup
    - i. Mr. Muchka received information from staff at DHS
    - ii. Mr. Muchka will contact Dr. Castillo and request she attend either an ITC meeting or a workgroup meeting; Dr. Castillo is an expert in this area
    - iii. The workgroup is active and is in the data gathering phase
    - iv. Expected report is fall of 2019
11. Preparation for next meeting
- a. DHS 75 (make this a standing agenda item)
  - b. PDMP discussion
  - c. Dr. Castillo guest speaker if possible
  - d. DSPS guest speaker if possible
12. Joe Muchka motioned to adjourn the meeting at 2:00 PM; Lindsay Just seconded.

Prepared by: Jason Cram on 2/1/2019.

These minutes are in draft form. They will be presented for approval by the governmental body on: 02/12/2019



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)

February 12, 2019 - 10:00 a.m. to 2:30 p.m.

**Location of the Meeting:**

Department of Corrections; Room 1M-M  
3099 E. Washington Ave.; Madison, WI 53704

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

**AGENDA**

1. Call to order and roll call
2. Additions to the agenda
3. Review and approval of 01/08/2019 ITC Meeting Minutes
4. Discussion of upcoming SCAODA meeting on 03/15/2019
5. DHS 75 rule writing updates
6. TENTATIVE GUEST SPEAKER – Sharon Henes regarding ER 1835 and 2017 Act 262
7. ITC written comments regarding EmR1835 dated 01/11/2019
8. *A Time to Lead* WINTIP document and discussion – Dave MacMaster
9. PDMP: provider survey; possible addition of Gabapentin; approved access, usage, and limitations regarding MAT (Amy Anderson)
10. Section updates
  - Children, Youth and Families (Jason Cram)
  - Treatment for Women and their Children (Norman Briggs)  
Urban Rural Women’s Grants
  - Substance Use Amongst Senior Population Workgroup (Joe Muchka)
11. Public Comments

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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Next ITC Meeting: April 9, 2019  
Next SCAODA Meeting: March 15, 2019

**OPEN MEETING MINUTES**

Instructions: [F-01922A](#)

Name of Governmental Body: CYFT of SCAODA			Attending: Riger Frings, Sara Bremser, Jason Cram, Michelle Lund, Lindsay Just, Chelsey Wasielewski, Erin Fischer, Jennifer Witkowski, Mari Kriescher, Lisa Schuman, Stacy Stone, Mary Rauwolf, Judy Tippel, Katie Hagen, Tricia Holstein, Ashley Thieme-Hartman, Magen TerBeest
Date: 10/8/2018	Time Started: 10:02 AM	Time Ended: 12:45 PM	
Location: Addiction Resource Council - Waukesha, WI			Presiding Officer: Chelsey Wasielewski

**Minutes**

1. Roger Frings, SCAODA Chair and ITC Co-Chair, attended the meeting as part of his tour of SCAODA committees. Mr. Frings provided his vision for SCAODA:
  - a. Increased involvement and interaction with legislature
  - b. Increased involvement with and awareness by state agencies
  - c. ITC will continue to support CYFT through advancing of the SCAODA strategic plan and serving as a resource to CYFT.
2. August minutes were reviewed and approved .
3. Lindsay Just, Addiction Resource Council, Inc. Director, presented to the CYFT on the mission and activities of the organization she directs.
4. Katie Hagen and Judy Tippel from Racine County who represent the Youth Treatment Initiatives (YTI) Program provided an update on the work Racine County is doing to advance this program. The CYFT serves as the Interagency Council for the YTI program.
5. Jason Cram provided the CYFT with an update on current funding opportunities through DHS that are of relevance to the CYFT. Currently, DHS is finalizing the procurement for the funding of four Urban Youth Primary Prevention grants. The 2019 grant recipients are Milwaukee, Kenosha, Brown, and Waukesha.
6. 2019 Meeting Rotation and Location
  - a. SCAODA meets 9:30 AM to 2:30 PM (meets in Madison):
    - i. December 7, **2018**
    - ii. March 1, 2019
    - iii. June 7, 2019
    - iv. September 6, 2019
    - v. December 6, 2019
  - b. ITC meets 10:00 AM to 2:30 PM (meets at DOC in Madison):
    - i. January 8, 2019
    - ii. February 12, 2019
    - iii. April 9, 2019
    - iv. May 14, 2019
    - v. July 9, 2019
    - vi. August 13, 2019
    - vii. October 8, 2019
    - viii. November 12, 2019
  - c. CYFT meets 10:00 AM to 1:00 PM (location varies) :
    - i. December 10, **2018** – Stevens Point
    - ii. February 4, 2019 – Madison – Department of Corrections
    - iii. April 1, 2019 – Sheboygan
    - iv. June 3, 2019 – Waukesha – ARC
    - v. August 5, 2019 – Lac du Flambeau
    - vi. October 7, 2019 – Oneida
    - vii. December 2, 2019 – Madison – Office of Commissioner of Insurance
7. Committee members recommended the development of an Acronym “Cheat” Sheet. Jason Cram will work on this over the course of upcoming meetings.
8. Committee discussed the plan to have guest speakers at upcoming meetings. Suggestions included:



- a. Stacy Stone of the Lac du Flambeau to discuss their programming
  - b. Mary Rauwolf of the Parent Addictions Network to discuss their programming
  - c. Traci Goll or designee from Horizon High School – Recovery School; Roger Frings will coordinate
  - d. Bill Lauer from friends of Recovery to present on Recovery Housing
  - e. Alliance for Wisconsin Youth – Lindsay Just will coordinate
  - f. Peer Recovery Support – Sara Bremser will coordinate
  - g. Proposed schedule:
    - i. December 10, 2018 – Open
    - ii. February 4, 2019 – Madison – Department of Corrections – Mary Rauwolf, PAN
    - iii. April 1, 2019 – Sheboygan – Bill Lauer – Friends of Recovery
    - iv. June 3, 2019 – Waukesha – ARC – Alliance for Wisconsin Youth
    - v. August 5, 2019 – Lac du Flambeau – Stacy Stone, Lac du Flambeau services
    - vi. October 7, 2019 – Oneida - Open
    - vii. December 2, 2019 – Madison – Office of Commissioner of Insurance – Horizon High School
9. At 12:10 PM Chelsey Wasielewski joined the meeting as she had a previously scheduled meeting. Ms. Wasielewski was nominated at the August CYFT meeting to be chair of the CYFT. Sara Bremser made a motion for Ms. Wasielewski to be Chair of the CYFT and Mari Kriescher seconded the motion. Motion unanimously carried. Roger Frings will direct Michael Derr of DHS to draft a letter on behalf of SCAODA recognizing her as the Chair of the CYFT and Mr. Frings will put forth a vote at the next ITC meeting to approve Ms. Wasielewski's seat on the ITC.
10. Capacity and Demand Report discussion
- a. Committee needs to hear from content experts before a statement of scope can be developed
  - b. Committee should consider other similar reports for organization
  - c. Committee should approach wishope.org for resources and consultation (Peter Brunzelle)
  - d. Committee should look at myconnectionnew.org for resources and consultation
  - e. Committee should look at WCHSA for resources and consultation
  - f. Consider a joint meeting with the Children and Youth Committee of the WCMH and/or the Criminal Justice Committee of the WCMH
11. The chair opened the floor to public comments. No comments were made.
12. The agenda was completed at 12:45 PM. Ms. Wasielewski requested a motion to adjourn. Judy Tippel motioned to adjourn and Lindsay Just seconded the motion.

Prepared by: Jason Cram on 11/29/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 12/10/2018



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)

December 10, 2018

10:00 AM – 1:00 PM

**Location of the Meeting:**

Portage County Health and Human Services Department

Ruth Gilfry Building – Conference Rooms 103 and 104

817 Whiting Avenue, Stevens Point, WI 54481

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

**AGENDA**

1. Call to order and roll call
2. Additions to the agenda
3. New members and membership recruitment update
4. Report: 11/13/2018 Intervention and Treatment Committee
5. Report: 12/7/18 SCAODA Meeting
6. Program Presentation: None scheduled for December 2018
7. Project Planning: Capacity and Demand Report
8. Youth Treatment Initiatives Grant Update – Interagency Council
9. DHS CYFT funding initiatives: Urban Youth Primary Prevention
10. Public comments
11. Announcements and/or additional information
12. Future agenda items; 2019 meeting dates and locations; program presentation schedule
13. 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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## OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: CYFT of SCAODA			Attending: Sara Bremser, Jennifer Witkowski, Jason Cram, Judy Tippel, Katie Hagen, Stacy Stone, Erin Fischer, Susan Selzler, Michelle Lund
Date: 12/10/2018	Time Started: 10:00 AM	Time Ended: 11:15 AM	
Location: Portage County Human Services			Presiding Officer: Sara Bremser

### Minutes

1. Meeting called to order at 10:05; Sara Bremser presiding.
2. No agenda additions.
3. Jason Cram provided an update on the 11/13/2018 ITC meeting.
  - a. Jason Harris of DCTS provided an overview of the SOR/STR funding. Jason Harris will be invited to an upcoming CYFT meeting to do the same.
  - b. The election resulted in a new Governor which will ultimately result in new leadership at DHS.
  - c. A workgroup of the ITC is working on a report which will address SUD in older adults in WI.
4. Jason Cram will follow up with Mary Rauwolf in regards to her presenting on the Parents Addictions Network (PAN) program at the February 2019 CYFT meeting.
5. Item #7 on the agenda "Project Planning: Capacity and Demand Report" will be tabled until the February 2019 CYFT meeting due to the committee chair being absent.
6. Youth Treatment Initiative Grant – Interagency Council:
  - a. Racine: less than expected referrals; discussed plans for outreach; notes competition with other programs in the area; committee members recommend increased communication with DOC – DJC and religious organizations.
  - b. Michelle Lund provided an update on the intended uses of carryover funds if approved which includes assistance to the sites for outreach. Michelle Lund also provided an update on the other two sites in regards to referrals.
7. 10/08/2018 CYFT meeting minutes; Stacy Stone motioned to approve and Jennifer Witkowski seconded; motion carried unanimously.
8. Jason Cram provided a brief update on the award of the four Urban Youth Primary Prevention contracts to Brown, Waukesha, Milwaukee, and Kenosha counties.
9. Stacy Stone provided an update on a tribal-wide survey regarding services, concerns, and issues regarding drug use.
10. There were no public comments.
11. Meeting adjourned at 11:30 AM; motion by Jennifer Witkowski and seconded by Stacy Stone.

Prepared by: Jason Cram on 01/25/2019.

These minutes are in draft form. They will be presented for approval by the governmental body on: 2/4/2019



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 4, 2019 10:00 AM – 1:00 PM

**Meeting Location and Call-In Details:**

WI Department of Corrections; 3099 E. Washington Avenue; Madison, WI;  
Room 1M-K (Park in front of building)

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

**AGENDA**

1. Call to order and roll call
2. Additions to the agenda
3. Program updates and announcements
4. Review and approval of 12/10/2018 CYFT Meeting Minutes
5. Report: 01/08/2019 Intervention and Treatment Committee
6. DHS and Children, Youth, and Family Section updates
7. Interagency Council of the Youth Treatment Initiatives Grant
8. Program Presentation: Mary Rauwolf – Parents Addictions Network
9. Jason Harris, DHS – State Targeted Response to the opioid epidemic funding
10. Capacity and Demand Report – Develop a statement of scope
11. Public comments
12. Future agenda items
13. 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. The mission of the CYFT Subcommittee is “Ensure access to and effectiveness of substance use disorder treatment services and recovery supports for youth and their families.”

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## 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: Christine Ullstrup; Raeanna Johnson; Brian Dean; Kevin Florek; Jill Gamez; Vonda Benson (by phone)
Date: 11/7/2018	Time Started: 9:36 am	Time Ended: 12:01 pm	Not Present: Duncan Shrout; Karen Kinsey; Guests: None DHS Staff: Mike Derr
Location: ARC Community Services, 1409 Emil St., Madison, WI			Presiding Officer: Christine Ullstrup, Committee Co-Chair

### Minutes

#### **Call to Order:**

Committee Co-Chairperson Christine Ullstrup called the meeting to order at 9:36 a.m. Attendees introduced themselves.

#### **Review of 10/3/2018 Meeting Minutes:**

Christine Ullstrup referenced the draft minutes from the October 3, 2018 Committee meeting and asked for comments and corrections. Christine clarified language regarding comments she had made noting the upcoming November election. Kevin Florek moved that the minutes be approved and Jill Gamez seconded the motion. Motion carried unanimously.

#### **Public Comment:**

No persons offered any public comment on Committee business via telephone. Vonda Benson mentioned that her last day with Department of Corrections (DOC) is Dec. 21<sup>st</sup>, as she is retiring. Her replacement at DOC will start in January, and hopefully be able to serve on the Committee. Kevin Florek asked the group what the impact of Tony Evers' election as Governor would be on SCAODA and its committees, and a discussion ensued.

#### **New Committee Members and Expectations:**

Committee members reviewed the draft handout listing the committee description, duties and responsibilities of members, member composition, required knowledge and skills, and what committee members will commit to. Comments regarding additions and suggested language revisions were offered by Kevin Florek, Raeanna Johnson, Jill Gamez and Christine Ullstrup. Florek suggested that the criteria language for member composition be left broad, but that members have the freedom to recruit persons meeting a specific background to fill a Committee need. Gamez offered language to insert into the Committee Description paragraph. Mike Derr will incorporate the suggested changes and comments into an updated draft, to be reviewed at the 1/16/09 meeting.

#### **2018-22 Strategic Plan – Committee Priorities for 2019:**

Committee members discussed the desire to establish priorities and activities for 2019 that are consistent with the recently-approved SCAODA 2018-22 Strategic Plan. Many suggestions for topics and activities to study and offer recommendations on were shared by committee members and staff:

- Jill Gamez stated that the Committee should study issues that are most likely to be considered during the 2019 legislative session. Christine Ullstrup added that the Committee should closely monitor legislation and work with Roger Frings and Council leadership to meet with legislators to advocate for and promote specific actions. Jill offered to write up an action plan draft based on the Council's 2018-22 Strategic Plan and P&F Committee objectives.
- Mike Derr alluded to Duncan Shroust's previous suggestion that the Committee study various funding sources and recommend how funding should be allocated geographically and among various programming. The Committee's 2016 Funding Report would be of assistance in this realm.
- Raeanna Johnson and Brian Dean stated that the Committee should develop a stripped down version of the most recent needs assessment and offer recommendations for specific areas of focus, such as residential treatment. These reports would be offered to the full Council and Legislature to take action. Johnson also referenced the PEW reports for the Committee to adopt recommendations from. Mike Derr noted that DHS will start developing the next SUD needs assessment during 2019 as part of the next SABG application and plan.
- Other topics mentioned included closely monitoring the new Medicaid waivers that will expand coverage over residential treatment and other services, and working closely with the Governor's Opioid Task Force and whatever form this body takes under Governor Evers.

#### **Action Steps by Committee Members:**

At this point, Christine Ullstrup and Mike Derr asked individual Committee members to start taking on specific projects or tasks for the purpose of addressing and meeting the above-stated priorities:

- Jill Gamez will review and summarize the Minnesota administrative code counterpart to DHS 75, including an explanation of its three levels of care.
- Committee members should read and review the 2017 Needs Assessment, the Committee's 2016 Funding Report, and the PEW Study recommendations, and be prepared to discuss specific recommendations and areas of focus in January and subsequent committee meetings. Raeanna Johnson will take the lead on pulling together key concepts from those documents, with assistance from Brian Dean and Kevin Florek.
- Mike Derr will keep Committee members informed and updated on the 2019 Needs Assessment process, including opportunities for members to provide input and feedback.
- Christine Ullstrup, Jill Gamez and Mike Derr will keep Committee members updated on the DHS 75 rulemaking rewrite process.
- Mike Derr will work with the DHS evaluation team to create a polished one-page summary of the residential SUD treatment bed survey findings and potential follow-up surveys.
- Christine Ullstrup and Roger Frings will identify key stages, dates and personnel in the state legislative and budget processes to promote effective Committee and Council advocacy of specific legislation and policies.

- Mike Derr and Karen Kinsey will communicate with Dan Kiernan of the DHS Medicaid office and track current efforts to expand Medicaid coverage across residential treatment and other areas, and promote opportunities for Committee member and stakeholder involvement. Christine suggested that the Council be asked to issue a statement supporting the expansion of MA coverage and encouraging stakeholder and Committee participation in the waiver approval and rate setting process.
- Mike Derr and Committee members will seek information regarding specific Medicaid rates covering CCS (Comprehensive Community Services) services, including room and board.
- Christine Ullstrup felt it would also be beneficial to further explore current Department of Corrections initiatives relative to SUD services. For example, DOC's Division of Community Corrections regional offices have invited Meta House and other treatment providers discuss their services to staff.

**Other Topics:**

Committee members reviewed the proposed six meeting dates for 2019. Members jointly agreed that given the amount of upcoming action steps and projects, the Committee should hold eight meetings, including meetings in April and August. Also, the group decided to schedule meetings for the third Wednesdays during the months of Jan., Feb., April, May, July, Aug., Oct and Nov. Meetings will continue to occur from 9:30 a.m. to Noon at the ARC Community Services building on Emil Street in Madison.

Mike Derr gave a brief summary of the SCAODA Public Forum held during the Fall Mental Health & SUD Recovery Conference in WI Dells on October 17<sup>th</sup>. A written summary of the forum discussion was shared with Committee members.

Christine Ullstrup and Jill Gamez mentioned possible candidates who are interested in serving on the Committee. Mike Derr will send them a description of committee and updated version of the committee description and member expectations.

**Adjournment:** A motion to adjourn the meeting was made by Brian Dean and seconded by Raeanna Johnson. Motion carried. Meeting adjourned at 12:01 pm.

Prepared by: Michael Derr on 1/9/2019.



Roger Frings  
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

January 16, 2019

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.....Christine Ullstrup, Chair
2. Review November 7, 2018 meeting minutes.....Christine Ullstrup
3. Public Comment: Substance Use Disorder Planning Topics.....Christine Ullstrup
4. Committee Member Guidelines and Expectations.....Christine Ullstrup
5. Update on Committee Projects/Priorities discussed Nov. 7<sup>th</sup>.....Committee Members; Mike Derr
6. Agency and Provider Updates.....Committee Members
7. Agenda Items for Feb. 20, 2019 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#





Roger Frings  
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

February 20, 2019 **[Moved to March 20, 2019]**

9:30 AM to 2:00 PM

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

**MEETING AGENDA**

1. Call to Order and Roll Call.....Christine Ullstrup, Chair
2. Review January 16, 2019 meeting minutes.....Christine Ullstrup
3. Public Comment: Substance Use Disorder Planning Topics.....Christine Ullstrup
4. Status of Committee Work Projects/Priorities for 2019.....Committee Members
5. SCAODA Public Forum at Fall MH/SUD Recovery Conference.....Christine Ullstrup
6. Agency and Provider Updates.....Committee Members
7. Agenda Items for April 17, 2019 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: SCAODA Prevention Committee - Alcohol Priority Action Team			Attending: Christy Niemuth; Cecilia Culp; Emily Holder; Sarah Johnson; Jenny Hallett; Annie Short; Matthew Collie; Margarita Northrop; Raina Haralampopoulos; Chris Wardlow; Julia Sherman; Nicole Butt; Roger Frings; Danielle Luther (phone)
Date: 11/20/2018	Time Started: 09:30 a.m.	Time Ended: 12:00 p.m.	
Location: Wisconsin State Patrol DeForest Post, 911 W. North Street, DeForest, Wisconsin 53532			Presiding Officer: Chris Wardlow

**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 and Alcohol Priority Action Team meeting. Chris continues to serve as the Interim Chair of the Committee. Chris introduced himself and asked members and guests to introduce themselves and their organizational affiliations.

2). Public Comment: No public comment.

3). Approve Minutes from the July 19<sup>th</sup> meeting: Chris Wardlow asked for the members to review the meeting minutes from the July 19<sup>th</sup> meeting of the Prevention Committee. Julia Sherman made a motion to approve the meeting minutes, seconded by Nicole Butt, there was no discussion and the motion passed.

4). Alcohol Priority Action Team Work

- Matthew Collie (Healthy Wisconsin) and Maggie Northrop (Pop Health Fellow) presented the draft Healthy Wisconsin addendum and discussed how this group could support the Alcohol Priority Action Team for Healthy Wisconsin.
- Roger Frings (Chair, State Council) suggested that the Healthy Wisconsin addendum should be presented to the full SCAODA and for more collaboration between the SCAODA and the Public Health Council (as they are both governor-appointed councils).
- The Opioid Workgroup (Christy Niemuth, DHS) might also team up on this and do a joint presentation to give a brief overview of both initiatives to the full SCAODA.
  - Roger will speak to Mike Derr (DHS) to get this on the agenda for the March SCAODA meeting.
- Members of the group gave feedback to Matthew Collie and Maggie Northrop on the Healthy Wisconsin report.
  - Mainly, clarification on data measures (if measure is use within last 30 days, past year, etc.).
  - If anything else comes up, contact Matthew and/or Maggie.

a. Identify the Alcohol Priority Action Team's Theme: the group discussed that working on the Burden of Excessive Alcohol Use and the Alcohol Culture and Environment reports would be a good focus. The Burden of Excessive Alcohol Use report would be a good fit because it gives clear terms on the financial impact of alcohol in Wisconsin – this is something policymakers understand and care about. The Alcohol Culture and Environment report would be a good fit because we can use it to suggest recommendations, screening questions for medical practitioners, recommendations for coroners, and can do it collectively and have it in a document of recommendations that we can move forward.

b. Identify data gaps (what is needed/what is wanted): the group discussed the following two major data priorities: (1) the need for more granular data (municipal level, further broken down into age, race, sex, information would also be ideal) and (2) the need for more accurate data reporting made by medical examiners, coroners, emergency departments, police departments, etc. on when alcohol (as well as other drugs) is involved in an incident.

c. Share data sources that are available: Julia Sherman prepared a document for the meeting that discusses data gaps in Wisconsin and other data sources. Again, the Burden of Excessive Alcohol Use and the Alcohol Culture and Environment reports are a good source of data that the public can use, as well as to help inform policymakers. Additional data sources that were discussed included TRACKS (nationwide platform – traffic reporting system) and WARDS (Wisconsin Ambulance Run Database System – all WI EMS have to enter their data into this within 7 days, this is a mandated rule).

d. Identify individuals to attend the next meeting to discuss data: the group discussed the following potential people/groups to come talk to the committee at a future meeting based on the discussion from today:

- Maggie knows someone from Vital Records
- Dane County Medical Examiner's office
- Annie Short knows an ME in Milwaukee she could talk to
- Emily Holder (DPI) suggested Kate McCoy – evaluation consultant re: local data collection
- Raina: Ann Ziege suggested Trauma Registry has data on alcohol involvement – someone from that staff has presented in the past and is interested in the “alcohol angle” – Eric Anderson (works with DPH emergency health folks and oversees the trauma data system at OHI)
- Chris Wardlow suggested it would be worth reaching out to Penny to talk about the Burden report
- Roger suggested Eric Borgerding (Wisconsin Hospital Association) might also be a good contact

#### OTHER

- If the committee wants to move forward with updating these reports, then there would be a motion in this committee to develop an ad hoc committee (which gives us a year to take the time to update and amend a version of the ACE report, for example), and if that gets approved, then it goes to SCAODA to let them know we want to do this ad hoc, and they sign off on it, and then we go forward with things starting the ad hoc committee.

**DECISION:** This group will work on a charter/workplan/scope of work for updating the ACE report – put together some language for next meeting for what it would look like to put together an ad hoc committee to update the ACE report, and then prepare for March meeting to present to full SCAODA.

#### 5. Agency Member Updates

**Department of Health Services:** Raina shared an update on the new media campaign – Allison Weber is taking the lead on this new campaign, using KW2 (a media company in Madison). KW2 is planning focus groups of parents of middle and high schoolers in the near future for the campaign – focusing only on underage drinking.

- From Allison's email: Media Campaign-KW2 continues to research and plan the media campaign. Thanks to all who attended the sessions at the Alcohol Policy Seminar, it was very helpful and the feedback will shape the future campaign. There will be several more focus groups with parents of middle and high schoolers in the near future.

**Workplace Prevention ad hoc committee:** Raina updated that the committee is working on draft report, most of the content has been written. Group has ended up with only three actual members working on the project. Cecie has been working on appendices and researching citations. Allison is waiting to hear back from the chair for next steps and extension request

- From Allison's email: Workplace prevention ad hoc committee - the committee is working on the DRAFT. Most of the content has been written and is being edited by the members. The group has ended up with only 3 actual members so it is a big project. Cecie is also starting to work on some of the appendices and research citations. For the October meeting the time for the in-person meetings was used for members to individually work on content. (waiting to hear from the Chair, Jill Gamez for next steps/ extension request).

**Department of Public Instruction:** Emily Holder shared that grant season is in full swing; should be able to award student AODA awards this week; approx. 85 student groups were funded this year (up to \$1000). State AODA grant program will launch in January (will run through April). The Building a Harvest successful school conference – will be in early December 5, 2018. YRBS will launch in January; will be working to get weighted data for 2019 (special thanks to DHS for online system upgrade).

**Wisconsin Alcohol Policy Project:** Julia Sherman shared that the Alcohol Policy Seminar occurred in October. The evaluations seemed really good. They had more local health departments than community coalitions attending this year – that is a good thing. Stoller industries has been ordered to remove Emodka's from their stores – working on a “hip-pocket tool” that can be used (with Sarah Davis, Law School) to help make it easy for folks to complain – which also raises community awareness at a level that isn't lobbying.

**Great Lakes Inter-Tribal Council:** Nicole share that they finally have a project director on board. They also have a new prevention coordinator at LCO and a new half-time prevention coordinator and Bad River. At their meeting on Thursday they printed a lot of Dose of Reality materials (yard signs, pamphlets) and disseminated among the 4 tribes that are involved and that get PFS funding

**Faith-Based Summits:** Raina shared that there will be a debriefing call in the beginning of December 5, 2018. There were 3 sites (Milwaukee, DePere, and Rice Lake) with a total of 188 participants; Tracy Johnson's group will be the

facilitators. If individuals wanted to follow up with AWY for anything specific, they had the opportunity to include that on their evaluation forms (so DHS is hoping to work with the RPCs to do that follow-up). The big question now is: what does the Governor want to do – hard to know because of the transition. Main goal is to keep building relationships and capacities of the RPCs. One thing to note: they felt very Western/Christian – even the term “faith-based” doesn’t include spiritual or native communities – so it didn’t feel like an open invite to everyone – hoping that the Prevention Training planning committee can discuss better ways to engage and recruit coalitions. Julia added that states that have been able to make major jumps forward are often the states that have major buy-in from their religious/faith communities. Moving forward, we need to figure out a way to keep the momentum and keep the communication with them open to keep moving the initiative forward.

**Roger** shared that several insurers did a presentation for the opioid taskforce about how they are looking at treatment alternatives – he is making arrangements for a local insurer (Group Health Cooperative) to do a presentation for SCAODA at the December meeting. Things are stalled right now as we wait to see who gets appointed to the new administration, things will likely pick up again in January. There is an assumption that the December 14 meeting for the Opioid task force will be the last meeting and that Governor-elect Evers will either create something new/different out of that or it will fall back on SCAODA, in which case, both houses of the legislature will be creating committees that deal specifically with opioids (in light of the task force dissolving). Roger is trying to meet with incoming administration people – he has some contacts and is prioritizing meeting with leadership officials in both the senate and the Assemble, as well as committee members who handle substance use and insurance issues in both houses, between now and January. He has already met with Representative Nygren and Representative Joe Billings to discuss legislative strategies going into next legislative session; how to increase relevancy of SCAODA with the legislature again; he would like to sit down with someone from Governor-elect Evers’s team to make himself available. Both Representatives Nygren and Billings have offered to help him set up meetings with relevant parties.

**Public Health Madison – Dane County:** Sarah Johnson shared that she has been tasked to work with other city departments (definition of the project is still emerging) – examining alcohol license density and using public health safety info to compare areas of high and low density.

**NEWAHEC:** Annie Short shared that through the area health education centers, NEWAHEC received funding from HRSA to work on opioids. They are using that money to work with the pharmacy students and look into doing some pilot programs with them, like call-back program: students would work with pharmacies and for anyone who was recently prescribed an opioid, the student would call them within 4-5 days to make sure patient is taking drug correctly and ask questions to identify misuse or if patient is developing dependency, and provide info on how to safely dispose of drugs. This is in partnership with UW Pharmacy School – so there will also be a research component attached to this. Pharmacies are now offering MAT – looking at recovery coaches in partnership with patients who are prescribed MAT. Because NEWAHEC is an area health education center, they are also working on doing some webinars and training students on the disease of addiction and how to identify trends and signs to look for, etc.

## 6. Future Agenda Items

- Alcohol Culture and Environment Report – update
- Burden of Excessive Alcohol Use Report – update
- Bringing in presenters
  - Matthew will put together a list of people mentioned in today’s meeting to send around to the group, if people can comment and rank on who is the most important to have come talk to the group and what type of info we want to hear from them, then we can start reaching out and contacting folks
- Any additional thoughts: email them to Raina

Prepared by: Cecilia Culp on 12/5/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 1/17/2019

Tony Evers  
Governor



Roger Frings  
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  
Prevention Committee**

January 17, 2019

9:30 AM to 12:00 PM

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

**MEETING AGENDA**

1. Welcome and Introductions.....Chris Wardlow, Interim Chair
2. Public Comment: The committee will accept comments from the public relating to any committee business.....Interim Chair
3. Approve Minutes from November 19 Meeting.....Interim Chair
4. Alcohol Priority Action Team (APAT) Work.....Maggie Northrop, OPPA/DHS
  - o Youth Risk Behavior Survey discussion.....Kate McCoy, DPI
  - o Update on *Healthy Wisconsin*
  - o Review the Updated Alcohol Culture Environment (ACE) Charge to the APAT.....Julia Sherman
  - o Discussion about future speakers and draft topics and questions for future presentations
5. Agency Member Updates.....Committee Members
6. 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

<https://scaoda.wisconsin.gov>

## OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Workplace prevention ad hoc committee			Attending: Jill Gamez, Michelle Devine Geise, Eva Scheppa, Frank Bures, Cecie Culp, Roger Frings, Chris Warlow, Raina Haralampopoulos, Allison Weber
Date: 1/30/2019	Time Started: 10:00AM	Time Ended: 12:00PM	
Location: conference call			Presiding Officer: Jill Gamez

### Minutes

- 1.) Jill Gamez called the meeting to order and introductions were made.
  - 2.) Approval of previous meeting minutes: Michelle made a motion and Eva seconded the motion. Motion carried.
  - 3.) Public comment: there was no public comment.
  - 4.) Michelle presented the case study that she has been working on for the report and the committee commented. The group wondered about the sustainability of the program. There was discussion on the connections to local business groups such as the Chamber of Commerce, the Better Business Bureau and others for specific areas of business. The group also discussed where the case study would be placed in the report.  
The cover page was also discussed. The group decided to remove the “tobacco” wording from the title and asked for more diversity in the pictures as well as pictures better reflecting the content of the report. The title agreed upon is “An Analysis of Reducing the Effects of Substance Use in the Workforce”.  
The group talked about the other sections of the report briefly, including drug testing sections and the contributions of DWD. Group will re-work drug-testing sections to more reflect the supportive nature of the overall report for individuals with substance use disorders in the workplace and include additional considerations to make when assessing the implementation of a drug-testing program. Roger recommended that we reach out to DWD and let them see the DRAFT report. He will reach out to his contacts at DWD and get back to Allison.
  - 5.) Chris Wardlow joined the call and gave the ad hoc committee some guidance on the timelines for the report. The DRAFT should be ready to present to the Prevention committee on April 18th. The committee should plan on sending the DRAFT report to the Prevention committee a few weeks prior to the meeting. The report should then, if approved by the Prevention committee, be presented to SCAODA on June 7, 2019. Chris also offered his expertise in prevention to work on the Evidence-based practices to recommend in the report.
  - 6.) Future ad hoc meetings were planned for 2.14.19, 3.1.19 and 3.12.19.
  - 7.) Meeting adjourned by chair Jill Gamez
- The next meeting will be a conference call on 2.14.19 from 10:30 AM-12:00PM

Prepared by: Allison Weber on 2/1/2019.

These minutes are in draft form. They will be presented for approval by the governmental body on: 2/14/2019

**OPEN MEETING MINUTES**

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Workplace Prevention ad hoc committee		Attending: Michelle Devine Geise, Chris Wardlow, Allison Weber, Cecie Culp
Date: 2/14/2019	Time Started: 10:30	Time Ended: 11:00
Location: Conference Call		Presiding Officer: Michelle Devine Geise

**Minutes**

1. Michelle called the meeting to order
2. Introductions
3. Public Comment: There was no public comment
4. Department of Workforce Development Update:
  - Allison: provided an update on DWD
  - Allison and Roger wrote to new deputy secretary of DWD, they shared the draft report and gave them a “heads up” about it
  - DWD asked for more detail and it seemed like they thought people from DWD were part of the committee – Allison responded and said that they were not part of the committee but were just letting them know and sent them meeting minutes and agenda to clarify and provide additional information/detail
  - Since then, neither she nor Roger have heard back from them
  - Stay tuned ....
5. Working group to review content for report
  - Michelle just got info on the New Hampshire case study last night – how do we want to move forward?
  - What is the structure of how this group will do work as a group?
  - Basecamp is considered a working document and is therefore eligible for edits/revisions
  - In the past, when the group has met, they have gone through documents and changed wordings, but kept overall nature of peoples’ input in place; normally just looking for wording or format changes (ex: make something its own case study, but not really a recommendation); read other peoples’ work and comment
  - Best use of time: Michelle will work on case study stuff on her own and then send an email to let people know it is on basecamp and that it is open for edits and feedback
  - Frank has also added Appendix A (on cannabis) to Basecamp – that is also open for edits and feedback
  - Do not know the status of Eva’s section
  - DECISION: do not need a case study for each section – if we know of one and it is worth citing, then we should, but it’s not necessary for every section
  - ACTION ITEMS: Michelle will send out an email to everyone letting them know that sections are up on Basecamp and they should offer feedback and edits by: FEBRUARY 25. Either make recommendations/edits/feedback in Basecamp, or sent them to Allison and/or Cecie – we can then compile all the feedback and can discuss at March 1<sup>st</sup> meeting.
6. Meeting adjourned by Michelle  
The next meeting will be a conference call on 03.01.2019

Prepared by: Cecie Culp on 2/25/2019.

These minutes are in draft form. They will be presented for approval by the governmental body on: 3/1/2019



Substance Abuse and Mental Health  
Services Administration

5600 Fishers Lane • Rockville, MD 20857  
www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)



OCT 29 2018

Dear Governor:

Thank you for the continued efforts to address mental and substance use disorders in your state. Now, more than ever, it is imperative that we work together at all levels to advance the behavioral health of the nation. As you know, the Substance Abuse and Mental Health Services Administration (SAMHSA) is committed to ensuring individuals across America's communities receive the services and treatment that they need.

Serving America's communities is a top priority of SAMHSA, the U.S. Department of Health and Human Services, and the entire Trump Administration. A critical part of these communities are our American Indian/Alaska Native (AI/AN) populations. In tribal communities across the nation, individuals and families are being negatively affected by mental and substance use disorders. This population is being disproportionately affected by substance abuse. According to the 2017 National Survey on Drug Use and Health (NSDUH), 13.7 percent of AI/AN aged 18 and older reported having a substance use disorder in the past year compared to 7.6 percent in the overall US population. NSDUH data also showed that 5.9 percent of AI/AN aged 18 and older had a co-occurring mental and substance use disorder compared to 3.4 percent of the overall population. Additionally, approximately 13,000 AI/AN individuals reported having an opioid use disorder.

Tragically, the suicide rate in these communities is significantly above the national average; the rate in these communities quadruples that of the general public. We must take steps enabled in programs such as the Opioid State Targeted Response (STR) program, the State Opioid Response grant, and the Substance Abuse Prevention and Treatment Block Grant to ensure that these problems are effectively addressed.

I am grateful that in fiscal year 2018 funding was appropriated by Congress in the amount of \$50 million to specifically address these issues in tribal communities. While the Tribal Opioid Response grant is a step in the right direction to address the opioid crisis in Indian country, we know more needs to be done. Tribal communities need to work with state and federal partners to take collective action in addressing the crisis in their communities.

This population will continue to be a top priority for SAMHSA and I am calling upon you to ensure that tribes, tribal organizations, and AI/AN individuals are engaged and involved in your programs in a meaningful and beneficial manner. As you are aware, a new requirement of the State Opioid Response grant, which did not exist as a required activity in your previous STR grant, is to assess the needs of tribes and ensure those needs are incorporated as you plan efforts within your states. We will be working to review these efforts and I look forward to hearing



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about the partnerships you are developing and continuing to expand with tribal communities within your state.

SAMHSA is committed to addressing substance use in all communities throughout the country. Your assistance in initiating measures to engage the AI/AN populations in grant-funded activities will make a much needed significant difference in changing the lives of affected individuals and their families.

I thank you for your continued partnership and your attention to this very important issue.

Sincerely,

A handwritten signature in black ink, appearing to read 'E. F. McCance-Katz', with a date '(2/12)' written to the right of the signature.

Elinore F. McCance-Katz, M.D., Ph.D.  
Assistant Secretary for Mental Health  
and Substance Use

Michael Waupoose & Vaughn Bowles

## **SAMSHA TRIBAL-STATE POLICY ACADEMY**

### What were Tribal-State Policy Academy goals?

- Ensure that AI/AN Tribes are meaningfully aiding in developing of new state policies
- Strengthen tribal-state relationships to improve AI/AN behavioral health outcomes
- ◉ Develop priorities for the State Opioids Response (SOR) grants
  - Directly fund tribes effort through the Substance Abuse Prevention and Treatment Block Grant (SABG)

## Team Composition

- ◎ Tribal team member criteria
  - Tribal leaders
  - Health administrators
  - Behavioral health providers
  - Clinicians
  - Health board
  - Epidemiologist
  
- ◎ State team member criteria
  - Employees experience working with AI/AN groups

## Representatives Present

- ◎ WI Tribes Represented
  - Menominee
  - Forest County Potawatomi
  - Ho-Chunk
  
- ◎ State Representatives

## Top 5 Action Steps

1. Improve the understanding of history, culture, & perspectives between tribal and state partners to build effective collaborations.
2. Improve communication between and among tribes and with the state.

## Top 5 Action Steps

3. Develop & implement tribal systems of care to enhance prevention, treatment, and recovery of services.
4. Promote community wellness, elevate recovery & reduce stigma.

## Top 5 Action Steps

5. Develop resources for funding sustainability that supports tribal priorities

Thank You

Questions?



# *Healthy Wisconsin*

## State Health Improvement Plan

Mark Wegner, M.D., M.P.H.

Wisconsin Division of Public Health

March 15, 2019

State Council on Alcohol and Other Drug Abuse



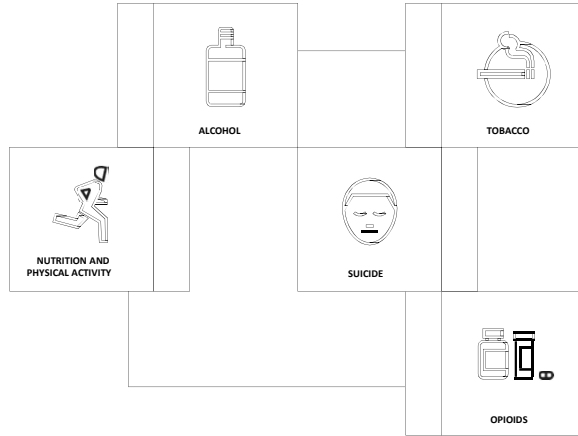
# *Healthy Wisconsin*

- State Health Assessment
  - Provides an overview of Wisconsinites' health
  - Guides selection of priorities
- State Health Improvement Plan
  - Identifies priorities
  - Creates strategies and measures

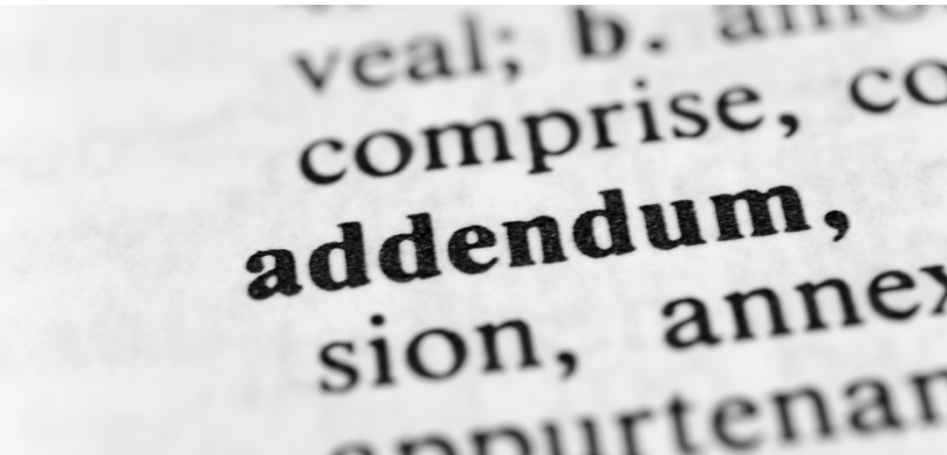




# Healthy Wisconsin



# 2018 Addendum





# Alcohol



## Goal: Prevent and Reduce Underage and Excessive Alcohol Consumption

- **Objective 1:** Reduce underage drinking
- **Objective 2:** Reduce heavy and binge drinking among adults aged 18 and older
- **Objective 3:** Reduce alcohol-related deaths



# Opioids



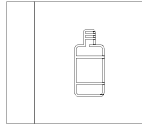
## Goal: Prevent Harmful Opioid Use and Reduce Opioid-related Consequences

- **Objective 1:** Prevent initiation of opioid misuse
- **Objective 2:** Reduce death and harm due to nonmedical or illicit opioid use
- **Objective 3:** Increase access to a full continuum of family-centered treatment services





## Priority Action Teams

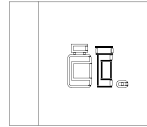


### Alcohol

State Council on Alcohol and Other Drugs (SCAODA) Prevention Committee

### Opioids

SCAODA Opioids Advisory Workgroup



WISCONSIN DEPARTMENT  
of HEALTH SERVICES



## What's next?



WISCONSIN DEPARTMENT  
of HEALTH SERVICES



## Contact Information

***Healthy Wisconsin***

[healthy.wisconsin.gov](http://healthy.wisconsin.gov)

[healthywisconsin@dhs.wisconsin.gov](mailto:healthywisconsin@dhs.wisconsin.gov)



## Priority: Alcohol

Wisconsin continues to have a serious problem with excessive drinking. Binge drinking (drinking more than five drinks on one occasion for men and more than four for women) is very common in Wisconsin. Although rates have been relatively flat for the last decade, adults in Wisconsin still binge drink at much higher rates than other adults in the U.S.<sup>1</sup>

### Background and Data

To support reductions in excessive alcohol consumption, it is important to understand how youth use alcohol. Starting to drink at an early age can make people more likely to misuse prescription medicine and opioids. Preventing underage drinking reduces the immediate risk from unintentional injury and unplanned sexual activity while also reducing a youth's lifetime risk of alcohol or drug misuse. The percentage of Wisconsin youth who report binge drinking and regular alcohol use has been steady or slowly declining for the past decade, and more work needs to be done to reduce those numbers to below national rates.

Women in Wisconsin who are between the ages of 18 and 44 binge drink more than women in the rest of the U.S. (2015: Wisconsin: 25%, U.S.: 16.9%).<sup>2</sup> The rates for both binge and heavy drinking for women aged 18-44 have increased between 2014 and 2016; the increase in binge drinking, from 20% in 2014 to 30% in 2016, is especially striking. Additionally, two out of three women in Wisconsin who recently had a baby reported they drank in the three months before pregnancy, and about one in 12 reported drinking in the last three months of pregnancy.<sup>3</sup>

Drinking too much can lead to alcohol-related diseases and death. Both can be difficult on communities and cost a lot of money. Hospital and health care costs, missed time at work, motor vehicle crashes, and criminal justice expenses are just a few of the areas impacted by drinking too much. Excessive drinking costs Wisconsin about \$6.8 billion each year.<sup>4</sup>

### ACEs and Alcohol

Adverse Childhood Experiences (ACEs) are connected to risk behaviors that can lead to substance use disorders, and are linked to negative health outcomes in adulthood. Researchers have found that toxic stress during childhood, such as ongoing childhood abuse or neglect, impacts the pleasure and reward center of the brain that is implicated in substance dependence as well as executive functioning, which includes impulse control. In general, people who report binge or heavy drinking report higher rates of one or more ACEs. Wisconsin adults with four or more ACEs have a significantly higher rate (28%) of binge drinking compared to adults with no ACEs (19%).<sup>5</sup> More work is being done to understand the connection between ACEs and alcohol consumption to help reduce binge and heavy drinking rates in Wisconsin.

### Current Activities

The alcohol priority objectives and strategies have been revised to reflect current data trends and evidence-based practices implemented across the state. Organizations and communities across Wisconsin, with the support of the *Healthy Wisconsin* Alcohol Priority Action Team (PAT) are applying many strategies to reduce excessive drinking. The PAT, which consists of members of the Governor's State Council on Alcohol and Other Drug Abuse (SCAODA) Prevention Committee, guides many of the efforts to reduce binge and heavy drinking in our state.

Municipal enforcement of existing law, through alcohol age compliance checks and party patrols, contributed to the success of steady or slowly declining youth drinking rates for the past decade. Wisconsin Stat. § 125.07(1)(a)3 was changed in 2017 to make it illegal to provide a location for underage drinking, even when adults do not provide the alcohol. This change was an important step in reducing underage drinking in the state.



# Priority: Alcohol



Goal: Prevent and reduce underage and excessive alcohol consumption

## Objective 1

Reduce underage drinking:

- › Reduce binge drinking among youth from 18% in 2013 to 16% in 2020 (YRBS)<sup>6</sup>  
2017: 16%
- › Reduce alcohol use among high school students from 33% in 2013 to 29% by 2020 (YRBS) **(New)**<sup>A,6</sup>  
2017: 30%

## Strategies

Strategy 1: Support local policies that make alcohol less available and accessible to youth and prevent underage drinking by continuing enforcement of the minimum legal drinking age (MLDA) and encouraging alcohol compliance checks at the municipality level.

Strategy 2: Support and disseminate the work of organizations and groups that offer evidence-based policies and practices that prevent and reduce illegal alcohol consumption at the municipality level.

Strategy 3: Educate and engage health care systems, health care providers, schools, and community leaders to promote and provide alcohol education to both youth and adult family members, including screening, brief intervention, and referral to treatment (SBIRT) programs for adolescents.

Strategy 4: Support community and school-based efforts to increase resiliency in youth. **(New)**

## Objective 2

Reduce heavy and binge drinking among adults aged 18 or older:<sup>B</sup>

- › Reduce adult binge drinking among adults aged 18 or older from 25% in 2012 to 23% in 2020 among adults (BRFS)<sup>5</sup>  
2014: 22%      2015: 23%  
2016: 25%
- › Reduce binge drinking among women aged 18–44 from 18% in 2009-2011 to 16% in 2020 (BRFS)<sup>5</sup>  
2014: 20%      2015: 25%  
2016: 30%
- › Reduce heavy drinking among women aged 18–44 from 8% in 2016 to 3% by 2020 (BRFS) **(New)**<sup>5</sup>
- › Reduce heavy drinking among adults aged 65 or older from 6% in 2016 to 5% by 2020 (BRFS) **(New)**<sup>5</sup>
- › Reduce heavy drinking by men from 10% in 2016 to 5% by 2020 (BRFS) **(New)**<sup>5</sup>

## Strategies

Strategy 1: Support and disseminate the work of organizations and groups that offer evidence-based policies and practices that prevent and reduce excessive alcohol consumption. **(New)**

Strategy 2: Educate and engage employers, health care systems, health care providers, and community leaders to promote and provide alcohol education, including prenatal education, on the risk of alcohol use during pregnancy, as well as promote and provide screening and treatment, including screening, brief intervention, and referral to treatment (SBIRT).

Strategy 3: Encourage Wisconsin's universities, colleges, and technical schools to review and select appropriate actions from the National Institute of Alcohol Abuse and Alcoholism's College Intervention Matrix.

Strategy 4: Develop and implement municipal policies that prevent and reduce illegal and excessive drinking.

Strategy 5: Increase awareness of the connection between ACEs and alcohol abuse. **(New)**

# Priority: Alcohol



Goal: Prevent and reduce underage and excessive alcohol consumption

## Objective 3

Reduce alcohol-related deaths:

- › Reduce deaths by fall by 5% from 60 in 2014 to 57 in 2020 (death certificates, Office of Health Informatics)<sup>7</sup>
  - 2015: 42
  - 2016: 37
- › Reduce deaths by motor vehicle by 5% from 168 in 2014 to 160 in 2020 (FARS, National Highway Traffic Safety Administration)<sup>8</sup>
  - 2015: 191
  - 2016: 193

## Strategies

Strategy 1: Increase awareness of excessive drinking as a public health problem; support municipal leaders, public health agencies, and community coalitions with education and training on using public health, school, and law enforcement data, and implementing population level alcohol policy. **(New)**

Strategy 2: Encourage aging and disability resource centers (ARDC) and other agencies that serve older adults to create information on alcohol and alcohol and drug interactions with the goal of increasing overall awareness of the special risks that alcohol consumption may pose to seniors.

Strategy 3: Increase awareness of the connection between alcohol use and chronic disease, including cancer, by working with partners to disseminate educational materials to the public and local leaders.

Strategy 4: Educate health care professionals on alcohol use as a cancer risk factor and screen and refer patients for high-risk alcohol consumption.

Strategy 5: Encourage communities, law enforcement agencies, and coalitions to compile Place of Last Drink (POLD) data from operating while intoxicated (OWI) citations with the goal of reducing overserving, and improving the community alcohol environment.

## References:

<sup>A</sup> High school students who used alcohol in the 30 days before the survey.

<sup>B</sup> BRFSS definitions of “binge drinking” and “heavy drinking.” [www.dhs.wisconsin.gov/wish/brfs/define.htm](http://www.dhs.wisconsin.gov/wish/brfs/define.htm)

<sup>1</sup> Centers for Disease Control and Prevention. “Excessive Drinking Data and Maps. Costs of Excessive Alcohol Consumption by State, 2015.” [www.cdc.gov/alcohol/data-stats.htm](http://www.cdc.gov/alcohol/data-stats.htm) (accessed June 2018).

<sup>2</sup> Centers for Disease Control and Prevention. “Alcohol Consumption among Women for 2015.” State Specific Alcohol Consumption Rates for 2015. [www.cdc.gov/ncbddd/fasd/monitor\\_table.html](http://www.cdc.gov/ncbddd/fasd/monitor_table.html) (accessed August 2018).

<sup>3</sup> Wisconsin Department of Health Services, Division of Public Health, Office of Health Informatics. Wisconsin PRAMS Data.

<sup>4</sup> Black, P.D., Paltzer, J.T. “The Burden of Excessive Alcohol Use in Wisconsin.” University of Wisconsin Population Health Institute, February 2013.

<sup>5</sup> Wisconsin Department of Health Services, Division of Public Health. “Wisconsin Behavioral Risk Factor Survey.” [www.dhs.wisconsin.gov/stats/brfs.htm](http://www.dhs.wisconsin.gov/stats/brfs.htm).

<sup>6</sup> Wisconsin Department of Public Instruction, Student Services, Prevention and Wellness. “2017 Wisconsin Youth Risk Behavior Survey Results.” Wisconsin Youth Risk Behavior Survey. [dpi.wi.gov/sspw/yrebs](http://dpi.wi.gov/sspw/yrebs) (accessed June 2018).

<sup>7</sup> Wisconsin Department of Health Services, Division of Public Health, Office of Health Informatics. Wisconsin Death Certificates.

<sup>8</sup> National Highway Traffic Safety Administration (NHTSA). “Fatality Analysis Reporting System (FARS).” [www.nhtsa.gov/research-data/fatality-analysis-reporting-system-fars](http://www.nhtsa.gov/research-data/fatality-analysis-reporting-system-fars).





# Priority: Opioids

Drug overdoses, especially of opioids, are a big problem in Wisconsin. Over the last 10 years, deaths from people overdosing on opioids have more than doubled, with nearly every county in Wisconsin experiencing at least one opioid overdose death in the past year. In 2016, more than 27,000 hospital visits were related to opioids and over 4,200 were for opioid overdoses.

## Background and Data

Opioids prescribed for pain relief have been a major cause of drug overdoses. In 2016, prescription medicine was the reason for seven out of 10 opioid-related deaths in Wisconsin. The number of people in Wisconsin aged 12 and older who have used prescription opioids non-medically or illegally is estimated at 196,000, with 33,000 qualifying for the diagnosis of pain reliever use disorder on an annual basis.<sup>1</sup>

Heroin is also a serious problem. Three out of four people who use heroin started with prescription opioids, and individuals often use both heroin and prescription drugs. In Wisconsin, the number of heroin deaths increased more than tenfold in the past decade, with 371 occurring in 2016.

Overdoses related to synthetic opioids, mainly fentanyl, have also recently increased. Fentanyl is a prescription opioid, but is also produced illicitly. Because it is 10 times more potent than heroin it is sometimes mixed with other illicit drugs to increase its effect. However, this greatly increases the chances of overdose. In 2016 alone, there were 275 deaths involving synthetic opioids, double the previous year's total, and three times the number in 2014.

Mental health issues are associated with substance use disorder. At least six out of 10 of those with a substance use disorder also have a mental illness, and one in five people with a mental health condition also have a substance use disorder. People with a substance use disorder are six times more likely than the general population to attempt suicide.

## ACEs and Opioids

Studies have shown toxic stress during childhood, such as ongoing childhood abuse or neglect, impacts the pleasure and reward center of the brain that is involved with substance dependence. Recent Wisconsin data have shown a connection between prescription opioid use and the number of adverse childhood experiences (ACEs) a person has had. According to 2017 BRFSS data, 13% of people with zero ACEs used a prescribed opioid in the past year, while over twice that proportion (30%) of people with four or more ACEs used a prescribed opioid.<sup>2</sup> With more data being collected and attention being paid to opioid use and misuse in Wisconsin, the connection between ACEs and opioids will continue to be studied to better inform policy decisions, prevention, and intervention efforts.

## Current Activities

Progress has been made in reducing the availability of prescription opioids through improved prescribing practices and implementation of the Wisconsin Prescription Drug Monitoring Program. As a result, from 2014 to 2017 the number of opioid prescriptions filled in Wisconsin has been reduced by 20%.<sup>3</sup> The Opioids Priority Action Team (PAT), when revising the priority's objectives and strategies, recognized the need for a three-pronged approach to tackling opioid misuse and abuse: 1) preventing initiation, 2) increasing treatment, and 3) reducing death and harm. The Opioids PAT consists of the existing State Council on Alcohol and Other Drug Abuse (SCAODA) Opioids Advisory Workgroup, and leverages the existing workgroup structure to review and advise regarding Wisconsin's opioid epidemic.

Managing the health crisis related to opioids calls for a multi-faceted approach. Overdose deaths can be prevented by limiting the supply of illicit substances and making naloxone, the overdose reversal drug, widely available. Those who have a substance use disorder require treatment. Prevention efforts can help through education, providing alternative pain treatment methods, and reducing the social conditions that foster reliance on counterproductive coping through substance misuse.



# Priority: Opioids



**Goal: Prevent harmful opioid use and reduce opioid-related consequences**

## Objective 1

Prevent initiation of opioid misuse:

- › Reduce the percentage of adolescents who have used an opioid prescription drug for non-medical purposes from 14.9% in 2013 to less than 13% by 2020 (YRBS)<sup>4</sup>

2017: 11%

## Strategies

Strategy 1: Support communities to foster healthy youth by adopting evidence-informed policies and practices that build protective factors and reduce risk factors for opioid misuse.

Strategy 2: Support community coalitions as the vehicle through which communities can successfully prevent and reduce harmful opioid use and related consequences.

Strategy 3: Increase community awareness and substance abuse prevention messaging in order to reduce opioid misuse and the stigma of addiction.

Strategy 4: Increase community awareness about the correlation between trauma or adverse childhood experience and opioid use disorder in order to prevent and reduce opioid use and the stigma of opioid use disorder.

Strategy 5: Ensure proper disposal of prescription drugs.

Strategy 6: Improve pain management practice in Wisconsin in accordance with best practices, including adoption of the Wisconsin State Medical Examining Board's Opioid Prescribing Guidelines, while ensuring that chronic pain sufferers have safe and consistent access to care.

## Objective 2

Reduce death and harm due to nonmedical or illicit opioid use:

- › Reduce the number of opioid-related overdose deaths from 622 in 2014 to 590 in 2020 (WISH)<sup>5</sup>

2015: 614      2016: 827

- › Reduce the number of opioid-related hospitalizations from 12,134 in 2014 to 11,530 in 2020 (WISH)<sup>5</sup>

2015: 13,355      2016: 15,226

- › Reduce the number of opioid-related overdose emergency department visits from 8,041 in 2014 to 7,640 in 2020 (WISH)<sup>5</sup>

2015: 9,763      2016: 11,875

## Strategies

Strategy 1: Broadly promote naloxone distribution, training, and administration to prevent overdoses and overdose-related deaths.

Strategy 2: Establish and promote evidence-informed opioid use screening, early intervention, and referral for treatment across health care, school, and social service organizations in order to connect people, including pregnant women, to the appropriate level of care.

Strategy 3: Ensure harm reduction programs are widely available and accessible to individuals who are at risk of an overdose.

Strategy 4: Promote pre-arrest diversion programs to increase access to services and reduce initiation into the criminal justice system.

# Priority: Opioids



Goal: Prevent harmful opioid use and reduce opioid-related consequences

## Objective 3

Increase access to a full continuum of family-centered treatment services throughout Wisconsin, including in rural areas and within underserved populations

- › Increase the number of Wisconsin counties with active DATA-waive prescribers from 43 in 2018 to 50 in 2020 (SAMHSA, PDMP Data)<sup>1,3</sup> **(New)**
- › Increase the number of Medicaid members receiving medication-assisted treatment from 14,583 in 2017 to 17,500 by 2020 (Medicaid Claims and Encounters) **(New)**
- › Increase the number of county-authorized participants receiving medication-assisted treatment from 356 in 2017 to 450 in 2020 (Program Participation System) **(New)**

## Strategies

Strategy 1: Increase access to all forms of FDA-approved medication-assisted treatment and evidence-based alternative treatment modalities through prescriber medication and treatment expansion.

Strategy 2: Increase substance use treatment services for people with opioid use disorder, including those in the criminal justice system. Services would include but not be limited to medication-assisted treatment, connection with recovery support services, and services within jails, prisons, and treatment courts.

Strategy 3: Reduce barriers to accessing treatment services by ensuring programs provide ancillary services, such as child care and transportation, or by making referrals to other community agencies.

## References

State Council on Alcohol and other Drug Abuse. "911 Good Samaritan Recommendations: Analysis and Recommendations for Reducing Drug-Related Overdoses in Wisconsin." August 2013. [scaoda.wisconsin.gov/adhoccommitteereports.htm](http://scaoda.wisconsin.gov/adhoccommitteereports.htm).

State Council on Alcohol and other Drug Abuse report. "Reducing Wisconsin's Prescription Drug Abuse: A Call to Action." January 2012. [scaoda.wisconsin.gov/adhoccommitteereports.htm](http://scaoda.wisconsin.gov/adhoccommitteereports.htm).

State Council on Alcohol and other Drug Abuse report. "Wisconsin's Heroin Epidemic: Strategies and Solutions." July 2014. [scaoda.wisconsin.gov/adhoccommitteereports.htm](http://scaoda.wisconsin.gov/adhoccommitteereports.htm).

<sup>1</sup> Substance Abuse and Mental Health Services Administration (SAMHSA). "2016 National Survey on Drug Use and Health." [www.samhsa.gov/samhsa-data-outcomes-quality/major-data-collections/reports-detailed-tables-2016-NSDUH](http://www.samhsa.gov/samhsa-data-outcomes-quality/major-data-collections/reports-detailed-tables-2016-NSDUH).

<sup>2</sup> Wisconsin Department of Health Services, Division of Public Health. "Wisconsin Behavioral Risk Factor Survey." [www.dhs.wisconsin.gov/stats/brfs.htm](http://www.dhs.wisconsin.gov/stats/brfs.htm).

<sup>3</sup> Wisconsin Department of Safety and Professional Services. "Wisconsin Prescription Drug Monitoring Program" [pdmp.wi.gov/statistics](http://pdmp.wi.gov/statistics).

<sup>4</sup> Wisconsin Department of Public Instruction, Student Services, Prevention and Wellness. "Wisconsin Youth Risk Behavior Survey." [dpi.wi.gov/sspw/yrbs](http://dpi.wi.gov/sspw/yrbs).

<sup>5</sup> Wisconsin Department of Health Services, Division of Public Health, Office of Health Informatics. "WISH (Wisconsin Interactive Statistics on Health) Query System." [www.dhs.wisconsin.gov/wish/index.htm](http://www.dhs.wisconsin.gov/wish/index.htm).







**State Opioid Response Grant Budget Summary**

Wisconsin’s share of the federal State Opioid Response Grant awarded by the Substance Abuse and Mental Health Services Administration is \$11,979,333. This is expected to be an annual federal fiscal year allocation to support prevention, intervention, treatment, and recovery services.

<b>Initiative</b>	<b>Budgeted Amount</b>	<b>Description</b>
Unmet Treatment Needs	\$5,433,364	Provide funding to counties and tribes with the most unmet opioid-related treatment needs based on wait times for services and number of deaths from opioid overdoses. Up to 40 counties and tribes will receive funding through an application process to provide or contract for medication-assisted treatment.
Medication-Assisted Treatment Implementation and Expansion	\$1,500,000	Provide funding to six organizations to provide medication-assisted treatment in areas of the state with the greatest need for treatment services. Contracts for this initiative awarded to the Forest County Potawatomi, Milwaukee County, Southwestern Wisconsin Community Action Program, and Tellurian under the State Targeted Response to the Opioid Crisis grant will be extended. Two proposals submitted previously will now be funded. This includes projects managed by the United Community Center and ARC Community Services. Each of the six projects will receive \$250,000.
ED2Recovery	\$1,400,000	Provide funding to maintain and expand a program that helps opioid overdose survivors avoid another overdose and encourages them to stay engaged in treatment. The contract with Wisconsin Voices for Recovery awarded under the State Targeted Response to the Opioid Crisis grant will be extended.
Opioid Treatment Centers	\$1,008,000	Provide funding to the two opioid treatment centers established under the State Targeted Response to the Opioid Crisis grant. Contracts with La Clinica and a partnership of Dodge and Fond du Lac counties will be extended.
Prevention Activities	\$730,000	Provide funding to community coalitions belonging to the Alliance for Wisconsin Youth to support projects to prevent opioid use.
Grant Administration	\$526,821	Provide funding for state staff managing grant activities, including costs associated with salaries and benefits.
Naloxone Distribution	\$427,500	Provide funding for naloxone training and distribution. County, tribal, and municipal health departments are expected to be partners in this initiative.
Addiction Recovery Helpline	\$400,000	Provide funding for a service to connect people seeking treatment for an opioid addiction (or other substance addiction) with local resources. A contract with 211 Wisconsin awarded under the State Targeted Response to the Opioid Crisis grant will be extended. This service is available by calling 211.
Training Best Practices on Outcomes Data	\$303,648	Provide funding to train all grantees on best practices on client outcomes tracking. This also includes coordinating data reporting to the Substance Abuse and Mental Health Services Administration. The UW Population Health Institute will be a partner in this initiative.
Trainings	\$200,000	Provide funding for trainings to develop the ability of the state’s behavioral health workforce to provide services.
Overdose Response Best Practices Toolkit	\$50,000	Provide funding to create a toolkit for counties and tribes on best practices for responding to an opioid overdose.

## **2019 Substance Use Disorder Training Sessions and Conferences (Prevention Focus)**

March 15, 2019 SCAODA Meeting

### **2019 Wisconsin Substance Use Prevention Conference**

June 11 and 12, 2019

Kalahari Resort and Convention Center, 1305 Kalahari Drive, Wisconsin Dells, WI 53965

By attending this training, participants will learn more about substance use prevention tools and strategies:

- Learn more about substance use prevention tools and strategies,
- Gain awareness of local policy development,
- Share lessons learned and success stories,
- Network and build relationships, and
- Acknowledge the roles that ACEs, trauma, equity, and stigma play in substance use so that these factors can be considered and incorporated into prevention work.

Registration fee: \$175

More information about the conference will be coming soon. If there are any questions please contact, Raina Haralampopoulos at [Mary.Haralampopoulos@dhs.wisconsin.gov](mailto:Mary.Haralampopoulos@dhs.wisconsin.gov)

**2019 Substance Use Disorder Training Sessions and Conferences**  
**(Treatment and Recovery Focus)**  
March 15, 2019 SCAODA Meeting

**March and April 2019:**

**Opioid Forum: March 19-20, 2019 at the KI Convention Center in Green Bay**

This event will feature workshops on prevention and harm reduction, treatment and recovery, and criminal justice topics. The registration fee will be \$70 per person. A full agenda will be available in January 2019. This event is part of Wisconsin's State Targeted Response to the Opioid Crisis funded by the Substance Abuse and Mental Health Services Administration.

**Wisconsin's Opioid Crisis: A Trauma-Informed Response: April 2-3, 2019 at the KI Convention Center in Green Bay**

This event will feature workshops on the trauma's role in the misuse and abuse of opioids. The registration fee will be \$70 per person. A full agenda will be available in February 2019. This event is part of Wisconsin's State Targeted Response to the Opioid Crisis funded by the Substance Abuse and Mental Health Services Administration.

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For information on both events, including agendas, workshop descriptions, a link to the online registration form, and hotel information, go to:

<https://www.dhs.wisconsin.gov/opioids/conferences.htm>

Feel free to share this information with your community partners and/or councils and/or committees you may staff or support. If you work with any health care providers who are eligible to prescribe the FDA-approved medications for medication-assisted treatment for opioid use disorder, please alert them to the preconference events for the Opioid Forum on March 18, 2019. Information about those events is available at the same link: <https://www.dhs.wisconsin.gov/opioids/conferences.htm>

Seats and hotel rooms are going quickly for the Opioid Forum. People should register and reserve their hotel room as soon as possible.

Both events will be paperless. We have developed an app for people to access information and materials for each session. Information about how to download the app is included in the confirmation email people receive when they complete the event's online registration form.



# SCAODA 2019 Meeting Dates

March 15, 2019

June 7, 2019

September 6, 2019

December 13, 2019

American Family Insurance Conference Center  
6000 American Parkway  
Madison, WI  
Building A, Room A3141

**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**

A simple majority (51%) of the membership qualified to vote shall constitute a quorum to transact business.

#### **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.
- 6.3 Any statutory members or designees of the council or committee who has two unexcused absences from meetings within any twelve month period will be contacted by the secretary of the council or committee chair to discuss the reasons for absence and whether the member will be able to continue serving. Appointed members who do not believe that they can continue should tender their resignation in writing to the secretary of the council or committee chair. Any council member resignations will be announced by the chairperson and forwarded by written notice to the Governor of the need for a new appointment. The replacement member would fulfill he resigned member's term.

## **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.

**5.2** The executive committee will have the following responsibilities:

- 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.



