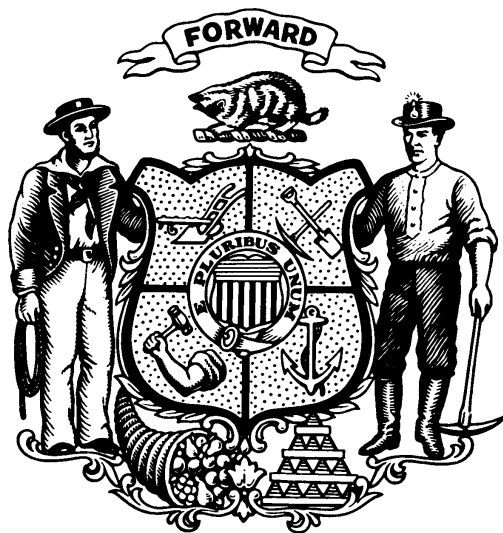


WISCONSIN STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE



June 7, 2019
MEETING

Roger Frings
Chairperson

TONY EVERS
Governor



Tobacco-Free Environment

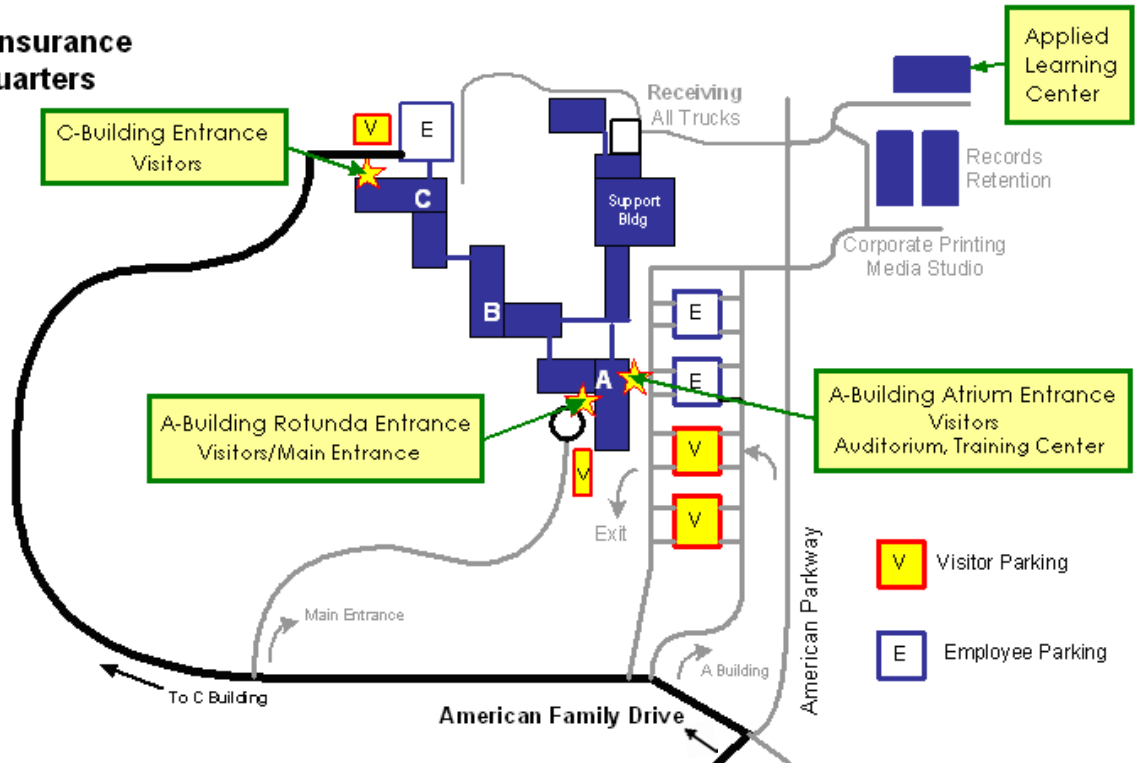
American Family Insurance is a tobacco-free environment. We prohibit the use of tobacco products and electronic cigarettes (e-cigarettes) everywhere, by anyone, at all times.

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!

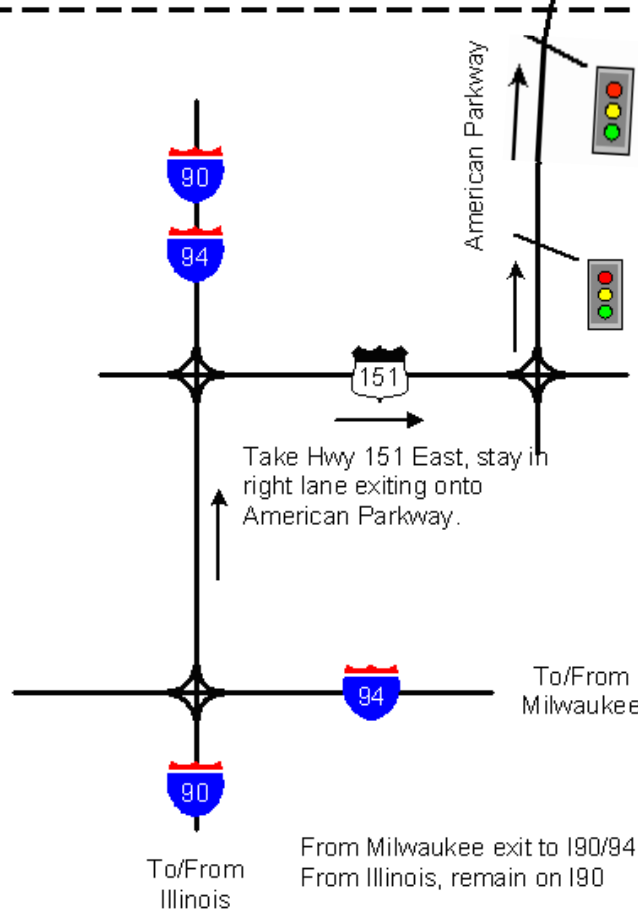
Directions
**American Family Insurance
 National Headquarters**



Main Campus Directions

Turn left onto American Family Ins. Dr and take the 1st 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.

To/From Illinois
 From Milwaukee exit to I90/94 North.
 From Illinois, remain on I90

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

June 7, 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 March 15, 2019 meeting minutes.....p. 6
3. Public input (maximum five minutes per person).....Roger Frings
4. Committee reports:
 - Executive Committee.....Roger Frings.... p. 11
 - ✓ Review Committee meeting minutes and agenda
 - ✓ Status of SCAODA membership
 - Diversity Committee.....Thai Vue.... p. 16
 - ✓ Review Committee meeting minutes and agenda
 - Intervention & Treatment Committee.....Norman Briggs & Roger Frings....p. 18
 - ✓ Review Committee meeting minutes and agenda
 - ✓ **Motion** – Credentialing of Substance Abuse Workers
 - ✓ **Motion** – Adding Substances into electronic PDMP
 - ✓ Children, Youth and Family Treatment Sub-Committee
 - Planning and Funding Committee.....Christine Ullstrup.... p. 27
 - ✓ Review Committee meeting minutes and agenda
 - ✓ **Motion** – Supporting Four Legislative Proposals
 - ✓ **Motion** – Support DHS Medicaid Expansion
 - Prevention Committee.....Chris Wardlow.... p. 36
 - ✓ Review Committee meeting minutes and agenda
 - ✓ Workplace Prevention Ad Hoc Committee

5. Legislative and Budget Update.....Roger Frings
6. SABG FFY 2020-21 Plan & Needs Assessment.....Bureau Staff
 - 2019 MHBG/SABG Needs Assessment – Status
 - UW Pop. Health Inst. Behavioral Health Gaps Study – Overview, *Abra Vigna, UW*...p. 48
 - Review of SABG Plan Priorities.....p. 52
7. Presentations on Programs.....Guest Presenters
 - Community Improvement and Job Training Program.....*Jay Tucker and Torre Johnson, WI Community Service*p. 55
8. Lunch
9. Presentations on Programs (continued)Guest Presenters
 - Waukesha County’s WI-PDO Project*John Kettler*.... p. 58
 - Urban Youth SUD Primary Prevention Program*Jason Cram*... p. 65
10. Agency reports:
 - Department of Health Services.....Julie Willems Van Dijk
 - Department of Revenue.....DOR Secretary Designee
 - Department of Public Instruction.....DPI Superintendent Designee
 - Department of Safety & Professional Services.....DSPS Secretary Designee
 - Department of Veterans Affairs.....Colleen Rinken
 - Department of Justice.....Tina Virgil
 - Department of Corrections.....DOC Secretary Designee
 - Other Agency Updates.....Agency Designee
11. Bureau of Prevention, Treatment and Recovery Update.....Joyce Allen, DHS... p. 69
12. Report from Wisconsin Council on Mental HealthMishelle O’Shasky, WCMH Chair
13. September 6, 2019 Meeting Agenda Items.....Council Members
14. 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.



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**

March 15, 2019

9:30 a.m.

American Family Insurance Training Center - Madison, WI

Members Present: Sue Shemanski, Dr. Subhadeep Barman, Chris Borgerding, Norman Briggs, Tina Virgil, Thai Vue, Christine Ullstrup, Roger Frings, Julie Willems Van Dijk, Sen. Janet Bewley, Katie Domina, Jan Grebel, Brenda Jennings, Natalie Aicher (Skype),

Members Excused: Autumn Lacy, Kristi Sullivan, Duncan Shroul, Sandy Hardie, Michael Knetzger, Rep. Jill Billings

Ex Officio Members Present: Fil Clissa, Jennifer Wickman, Ann DeGarmo, Kenyon Kies, Dr. Mark Wegner,

Ex Officio Members Excused: Katie Wagner-Roberts, Colleen Rinken, Mishelle O'Shasky, Dr. David Galbis-Reig

Staff: Jason Cram, Michelle Lund, Cecilia Culp, Mike Derr, Alex Wright-O'Neil, Allison Weber, Mai Zong Vue, Jason Harris, Joyce Allen, Scott Stokes, Dennis Radloff, Gary Roth, Amanda Lake Cismesia, Kate Rifken, Sarah Coyle, Paul Krupski

Guests: Chris Wardlow, Denise Johnson, David MacMaster, Lindsay Just, Saima Chauhan, Chelsea Wasielewski, Harold Gates, Michael Waupoose, Gail Nahwahquaw, Lorie Goeser, Laura Gebhart, Sarah Bremser, Vaughn Bowles, John Weitakamp, Amy Simonsen, Michelle Wick

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

Introductions: Members introduced themselves.

Approval of December 7, 2018 Minutes: Thai Vue moved to approve the minutes. Christine Ullstrup seconded. The motion passed unanimously, Norman Briggs abstained.

Public input:

No public input was received.

Committee Reports:

Executive Committee – Roger Frings reported that when the committee last met on February 19th, members discussed ways to improve SCAODA’s presence with the State legislature regarding separate pieces of legislation as well as the state budget. There were no public comments offered on substance use disorder topics during the meeting.

Diversity Committee – Thai Vue reported that the committee last met on January 25th; at that meeting Roger Frings attended and educated the members on overall SCAODA responsibilities and expectations, as well of those of the committees. Members discussed committee membership, structure, and member recruitment. The committee recently developed an application to recruit new members. Discussion also occurred regarding the Diversity community workshop at the statewide conference.

Intervention and Treatment Committee – Norman Briggs reported that the ITC last met on January 8th. Briggs read a 1/11/19 letter that the committee sent to the Department of Safety & Professional Services (DSPS) in regards to emergency rule EmR1835; he moved that the Council approve and sanction the committee’s decision to send that letter. Chris Wardlow seconded the motion. Extensive discussion ensued on the complexity of several issues relating to lack of SUD workforce. Saima Chauhan and Amanda Lake Cismesia explained some of the difficulties surrounding licensure and Medicaid reimbursement. Norman Brings explained the impacts Act 262 that was passed in 2018. ITC submitted a workforce report in the past that was previously approved, and showed that numbers of qualified workers had declined over time, and Act 262 had attempted to address that shortage. Lorie Goeser explained some of the lack of standardization of substance use treatment training in the state. The group returned to the motion. All Council members approved and the motion passed, with Tina Virgil abstaining. Briggs reported that a committee member proposed that the ePDMP data program expand to include naltrexone, Vivitrol, and gabapentin. The committee is creating an ad-hoc workgroup, headed by Joe Muchka, which addresses substance use among the senior population. Dr. Subhadeep Barman noted that methadone, when dispensed for opioid addiction, is technically not prescribed and therefore wouldn’t be addressed by the ePDMP. He also added that naltrexone and gabapentin are not controlled medications.

Planning and Funding Committee – Christine Ullstrup reported that PFC last met on 1/16/19. (The 2/20/19 scheduled meeting was postponed and rescheduled for 3/20/19.) The committee seeks to establish action plan priorities and determine how they fit with the SCAODA Strategic Plan as a whole. One action plan priority is to inform Wisconsin citizens on the negative financial impacts of substance use disorders. The committee is currently reviewing available needs assessments and staying informed of activity at the state level. By end of 2019, the Committee seeks to compile a concise document that summarizes those reports and findings. Committee members also want to advocate for adequate funding and infrastructure for outreach activities, as well as for prevention, treatment, and recovery programming. At the March 20th

meeting the committee will discuss the governor's budget and legislative proposals, and address planning/implementation of Medicaid SUD reimbursements, residential facilities, etc. The Committee will also look at relevant information about how neighboring states fund SUD treatment, especially residential treatment, and have that information as the state starts implementing the Section 1115 waiver. Ullstrup noted that she is still seeking new committee members, and that the Committee has extended meeting times to address the new plans.

Prevention Committee – The Prevention Committee last met on January 17th. Chris Wardlow reported that Wisconsin, as of 2018, is no longer an ICRC state, which brings about concerns about prevention specialist training and licensure. There are significant communication issues between DSPS and DHS. Wardlow noted a lack of accountability in license renewal for continuing education. Wardlow extended thanks to the DHS prevention staff for their support. The Healthy Wisconsin team is looking to identify data gaps on alcohol burden in the state. Wisconsin still leads the U.S. in adult alcohol consumption. The Committee is interested in consequence data. Members have identified stakeholders at the state level that collect that data and they are invited to future community meetings to share information. Recently, Kate McCoy from DPI presented the Youth Risk Behavior Survey, which measures risk behaviors for mental health and substance use concerns in adolescents. DPI obtained new data collecting software to create a pool of state data and draw comparisons to federal data. Julia Sherman is helping the Committee draft a proposal to form an ad-hoc group to study alcoholic environments and form recommendations, and will bring the proposal to the June SCAODA meeting. They may also bring the Workplace Prevention Ad Hoc Committee's final report to the Council meeting. The next Prevention Committee meeting is on April 18th.

Legislative and Budget Update:

Roger Frings gave an update. The 2019-21 biennium budget was introduced on Feb. 28 by Governor Evers. The legislative fiscal bureau is currently analyzing the budget. Public hearings will likely be scheduled in the near future. Julie Willems Van Dijk, the DHS Deputy Secretary, presented high level information on the DHS 2019-2021 Budget Proposal. Additional information is available on the DHS website.

Cecilia Culp presented a legislative tracking document to the Council. The link to the document will be posted on the SCAODA website with view-only access. It contains bills and rules related to mental health and substance use, their authors, brief descriptions, relevant lobbyists/sponsors, and relevant links.

Presentations:

Medications for Treatment of Opioid Use Disorder – Dr. Subhadeep Barman gave a presentation to the council on the opioid epidemic and medication-assisted treatment (MAT) strategies. Norman Briggs asked what drugs are contributing to the increases of opioid deaths. Dr. Barman replied that non-opioid drugs such as benzodiazepines and cocaine taken in combination with opioids have increased death rates. Sarah Bremser asked how old a patient must be to receive MAT for opioid use disorder. Dr. Barman replied that patients as young as 14 have been

prescribed it. David MacMaster asked how tobacco addiction plays into treatment. Dr. Barman replied that tobacco cessation is always included in treatment plans when applicable. Dr. Barman also discussed generic forms of buprenorphine which brings down the cost for low-income patients, but acknowledged that access to MAT is still difficult for them. Paul Krupski added information about the Governor's Council on Substance Use Disorder Treatment report that went out in 2018 about access to MAT services. Thai Vue asked about diversity in Barman's populations, and Barman acknowledged that minorities have difficulty accessing services in Wisconsin.

SAMHSA Tribal-State Policy Academy – Michael Waupoose and Vaughn Bowles gave a presentation to the council. Waupoose asked the Council to help bring tribal representation to the Council, and treat this as more than just a token seat. He emphasized the need for cultural humility when pertaining to tribal issues. He also urged members to educate themselves about privilege, oppression, and Native communities instead of relying upon those communities to educate them. Also, every subcommittee should have diversity goals on their annual plans and hold themselves responsible for achieving them. Council members should advise the governor on strategies for improving the lives of Native Americans in the state. Bowles emphasized that in small communities, such as the Menominee tribe, the statistics are not as telling as the information given by the community members themselves, and that personal connection goes a long way. Christine Ullstrup asked how the Council should go about recruiting Native members. Waupoose responded that first, the committee has to emphasize building meaningful relationships with tribes. Thai Vue noted similarities between Native American and Hmong cultures. Sen. Bewley asked if Waupoose was seeing Native languages used as a tool to connect with each other and promote recovery, and Waupoose said that it is essential.

Healthy Wisconsin State Health Improvement Plan – Dr. Mark Wegner gave a presentation to the council on the Healthy Wisconsin's initiative for prioritizing reduction of alcohol and opioids abuse as a key strategy for improving health statewide. This initiative is coordinated by DHS' Division of Public Health. David MacMaster asked why tobacco is considered a separate category from substance abuse. Wegner assured him that tobacco prevention and cessation is a high priority, and that it is essential integrate tobacco cessation efforts with those to reduce alcohol and drug abuse.. Thai Vue asked whether the Healthy Wisconsin initiative has a future plan for addressing disparities in health equity. Dr. Wegner replied that they work closely with the Minority Health Funding Program, and that social determinants -- especially in minority communities -- play a huge role in those gaps.

Agency Reports:

Department of Health Services – No additional reports and updates provided.

Department of Revenue – Ann DeGarmo noted two proposed upcoming tax policies that would impact tobacco.

Department of Public Instruction – Brenda Jennings reported that grant competitions are currently being held for school districts to fund AODA and mental health, and there is more

information on this program on the DPI website. The Social and Emotional Learning Symposium and the Growing School Mental Health Summit are coming up shortly

Department of Safety and Professional Services – No report provided.

Department of Veterans Affairs – No report provided.

Department of Justice – Tina Virgil announced the approaching drug takeback program in April. Under Act 261, DOJ was awarded a grant for opioid, meth enforcement efforts.

Department of Corrections – No report provided.

Wisconsin Technical Colleges – No report provided.

UW System – Jennifer Wickman noted that the university is putting together a directory for experts. She gave a brief update on the university's efforts to track alcohol and substance use consumption and disorders on the various campuses.

WI Board for People with Developmental Disabilities – Fil Clissa reported that the Board is reviewing the Governor's Budget. The Board has identified a transportation issue for non-drivers and how it affects treatment access.

Bureau of Prevention Treatment and Recovery Update:

Joyce Allen and Jason Harris gave brief updates on the State Opioid Response Grant program and recent awards to counties and tribes.

UW-PHI is currently working with Bureau staff to develop and implement its behavioral health gap analysis, which will inform the FFY 2020-21 block grant plan and needs assessment. A survey and targeted interviewing will be the primary methodologies for collecting data and feedback.

Scott Stokes introduced Amanda Lake Cismesia as the new DHS 75 coordinator. He also announced some upcoming trainings and events.

Report from Wisconsin Council on Mental Health:

Mike Derr shared a letter on behalf of Mishelle O'Shasky from the WCMH. He will forward a copy to SCAODA members via email.

June 7, 2019 Meeting Agenda Items:

Roger Frings and attendees referenced several potential topics for the next meeting, including: presentations from representatives of grant-funded prevention programs; a presentation on urine drug testing services; an update on the 2020-21 SABG Plan and priorities; and preliminary findings of the 2019 updated MHBG/SABG Needs Assessment.

Adjournment: The meeting was adjourned at 2:30 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: 2/19/2019	Time Started: 9:05 am	Time Ended: 9:51 am	
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 9:05 a.m.

Norman Briggs moved that the Committee's November 12, 2018 draft minutes be approved. Sandy Hardie seconded the motion. Motion carried – minutes are approved.

Committee members reviewed the preliminary draft agenda for the March 15, 2019 SCAODA meeting and offered a few recommendations and updates relating to the agenda items. Regarding the DSPS emergency rule provision for MPSW 1.09, Mike Derr will contact Sharon Henes for an update. Mike will check with the DHS Secretary's Office regarding the status of future Mental Health/SUD Advocacy meetings. Roger Frings indicated that the Council should continue to seek time with the Secretary's Office to advocate for SUD policy and proposals.

The group briefly discussed the status of the Council membership and current vacancies. Roger and Mike Derr will continue seeking updates from agencies on designees under the new Evers Administration. Roger Frings gave a brief update on the status of 2019 legislative proposals and Gov. Evers' budget, which will be introduced on 2/28/19. He is looking for a contact in the Governor's office to work closely with for updates and details. Roger is waiting to meet with legislators until the budget is released; we're waiting for direction from the Evers administration. Roger and Mike also described their November 2018 meeting with Rep. Billings, who shared a legislative tracker template that the Bureau of Prevention Treatment & Recovery will use to develop its own tracking tool.

Norm Briggs would like Council meetings to continue including presentations from grantees. These presentations help to educate the legislators and other members and raise awareness on the nature and accomplishments of local programs. The June Council meeting will feature prevention programs. Mike Derr noted possible future meeting agendas to include best practices in drug testing programs, the SABG 2020-21 Plan and Application, 2019 MH/SUD Needs Assessment, and further legislative and budget updates.

No public comments were offered during the meeting.

The meeting adjourned at 9:51 a.m., pursuant to motion by Sandy Hardie, seconded by Norm Briggs. Motion carried.

Prepared by: Michael Derr on 5/7/2019.

|



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

May 7, 2019

2:00 – 2:45 PM, Room 951
Via conference call

MEETING AGENDA

1. Call to OrderRoger Frings
2. Review of February 19, 2019 Meeting Minutes.....Roger Frings
3. SCAODA’s June 7, 2019 Meeting Agenda.....Roger Frings/Mike Derr
4. Council and Committee Membership.....Committee Members
 - Vacant citizen seat(s) – fill with Tribal rep and/or Prevention rep?
 - Prevention Committee chairperson
5. Status: New Legislation and State Budget.....Committee Members
6. Public Comment: Substance Use Disorder (SUD) Planning Topics.....Roger Frings
7. Other Topics.....Committee Members
8. 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.

Conference Call: 1-877-820-7831

Access Code: 554523#

**Membership of the State Council on Alcohol and Other Drug Abuse, (SCAODA)
1 W. Wilson St., Room 850, Madison, WI 53702 (608) 267-7704**

STATUTORY MEMBERS (as of May 21, 2019)

Key	Statutory Members	Member	Comments	Designee	Term
S	1. The Governor	Tony Evers	Statutory appointment	Katherine Domina	A term to expire at the pleasure of the Governor.
S	2. The Attorney General	Josh Kaul	Statutory appointment	Tina Virgil	NA
S	3. The State Superintendent of Public Instruction	Carolyn Stanford Taylor	Statutory appointment	Brenda Jennings	NA
S	4. The Secretary of Dept. of Health Services	Andrea Palm	Statutory appointment	Julie Willems Van Dijk	NA
S	5. The Commissioner of Insurance	Mark Afable	Statutory appointment	Roger Frings	NA
S	6. The Secretary of Corrections	Kevin Carr	Statutory appointment	Autumn Lacy	NA
S	7. The Secretary of Transportation	Craig Thompson	Statutory appointment	Jan Grebel	NA
S	8. The Chairperson of the Pharmacy Examining Board	Thad Schumacher ?	Statutory appointment	Kristi Sullivan ?	NA
S	9. A representative of the Controlled Substances Board	Subhadeep Barman	Statutory appointment		NA
S	10. Governor's Law Enforcement and Crime Commission	Vacant (Seeking to convert to "Citizen" position)	Appointment expires at the pleasure of the Governor.		A term to expire serving the pleasure of the Governor.
C G	11. Citizen Member (replacing Duncan Shrout)	Mary Ann Gerrard	Appointment expires July 1, 2019.		4 Year Term
C G	12. Citizen Member	Sandy Hardie	Appointment expires July 1, 2019.		4 Year Term
C G	13. Citizen Member	Thai Vue	Appointment expires July 1, 2021		4 Year Term
C G	14. Citizen Member (replacing Caroline Miller)	Kevin Florek	Appointment expires July 1, 2021		4 Year Term
C G	15. Citizen Member	Michael Knetzger	Appointment expires July 1, 2021		4 Year Term
C G	16. Citizen Member	Norman Briggs	Appointment expires July 1, 2019.		4 Year Term
C P	17. Citizen Member representing Providers	Christine Ullstrup			A term to expire serving the pleasure of the Governor.
S	18. Member, WI County Human Service Association, Inc.	Sue Shemanski	Statutory appointment identified by WCHSA		Appointment chosen by WCHSA
D m	19. State Representative Minority Party	Representative Jill Billings		Kathy Divine	Chosen by Assembly Minority leader
R M	20. State Representative Majority Party	Representative John Nygren		Chris Borgerding	Chosen by Assembly Majority leader
R M	21. State Senator Majority Party	Senator Patrick Testin		Natalie Aicher	Chosen by Senate Majority leader
D m	22. State Senator Minority Party	Senator Janet Bewley		Joseph Hoey	Chosen by Senate Minority leader

M = Majority Party m = Minority Party R = Republican
D = Democrat C = Citizen Member
P = Provider G = Serves at the Pleasure of the Governor

* S = Statutory Members are either appointed by the Governor, or in the case of legislative members, appointed by their respective leaders. There is one member appointed by the Wisconsin County Human Service Association. Statutory members vote, and serve voluntarily as advisors to the Governor.

**Membership of the State Council on Alcohol and Other Drug Abuse, (SCAODA)
1 W. Wilson St., Room 850, Madison, WI 53702 (608) 267-7704**

EX-OFFICIO MEMBERS * (Non-Voting Members)

Ex-Officio Members	Member	Designee
1. University of Wisconsin System	Ray Cross	Jennifer Wickman
2. Secretary, Department Of Revenue	Peter Barca	Ann DeGarmo
3. Secretary, Department Of Workforce Development	Caleb Frostman	VACANT
4. Secretary, Department Of Safety and Professional Services	Dawn Crim	Yolanda McGowan
5. Wisconsin Technical College System	Morna Foy	Katie Wagner-Roberts
6. Department Of Veterans Affairs	Mary Kolar	Colleen Rinken
7. Liaison to the WI Council on Mental Health	Mishelle O'Shasky	N/A
8. Liaison to the WI Board for People with Developmental Disabilities	Beth Swedeen	Fil Clissa
9. DHS, Division of Public Health	Mark Wegner	N/A
10. Department of Children and Families	Emilie Amundson	Kenyon Kies
11. Addictionologist – WI Society of Addiction Medicine	Dr. David Galbis-Reig	N/A

* Ex-Officio members, not appointed by the Governor, are non-voting, and voluntarily serve the State Council.

The State Council consists of 22 statutory members and 11 Ex-Officio members and has four standing committees:

1. Cultural Diversity Committee
2. Intervention and Treatment Committee:
 - ✓ Children, Youth & Family Treatment Sub-committee
3. Planning and Funding Committee
4. Prevention / SPF-SIG Advisory Committee
 - ✓ Workplace Prevention Ad Hoc Committee



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

OPEN MEETING NOTICE

Diversity Committee

April 26, 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 January 25, 2019 Meeting.....Committee Chair
- 4. DCTS Updates.....Mai Zong Vue
- 5. Administrative Rule (DHS 75) Revision Updates.....Mike Derr
- 6. DCTS Organizational Chart.....All
- 7. Tribal Recruitment – July 19 meeting.....Mai Zong Vue
- 8. Diversity Workshop & Reception Update.....Gail Kinney
- 9. Diversity Planning & Action Steps.....Thai Vue
- 10. Others.....Mai Zong Vue
- 11. 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#



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)

April 9, 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 06/07/2019
5. GUEST SPEAKER – Sharon Henes regarding ER 1835 and 2017 Act 262
6. Office of the Commissioner of Insurance (OCI) update (Roger Frings)
7. DHS 75 rule writing updates (Amanda Lake)
8. *A Time to Lead* WINTIP document and discussion (Dave MacMaster)
9. 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)
10. 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: May 14, 2019

Next SCAODA Meeting: June 07, 2019

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Intervention and Treatment Committee of SCAODA			Attending: Norman Briggs, Roger Frings, David Macmaster, Joe Muchka, Amanda Lake, Michelle Lund, Holly Stanelle, Sandy Adams, Sheila Weix, Chelsea Wasielewski, Laura Gaphardt, Saima Chauhan, Nichole Wright, Tamara Feest, Jill Gamez, Greg Winkler
Date: 4/9/2019	Time Started: 10:02am	Time Ended: 2:40pm	
Location: Department of Corrections, Madison, WI			Presiding Officer: Norman Briggs and Roger Frings

Minutes

*Note: February 12, 2019 ITC meeting was cancelled due to weather.

1. Meeting called to order by Roger Frings at 10:02am.
2. There were no additions to the agenda.
3. Review of 01/08/2019 meeting minutes: A change was made to update the approval date to 04/09/2019. A motion was made to approve the minutes as amended by Saima Chauhan; seconded by Joe Muchka; motion carried unanimously with no abstentions.
4. Discussion of June SCAODA meeting:
 - a. Jill Gamez provided a summary of the workforce report that will be presented to the council with recommendations for employers and other stakeholders for improving substance use disorder impacts on the workforce. Roger Frings discussed efforts to involve workforce development representatives in the discussion. Norman Briggs and David Macmaster discussed the inclusion of employee assistance programs. Sheila Weix requested that the report include information and education regarding medication assisted treatment. Jill Gamez will share this feedback with the subcommittee.
 - b. Other SCAODA agenda items include: Governor Evers' budget and Healthy WI Initiative, Substance Abuse Block Grant plan priorities, a report regarding the WI Population Health Institute behavioral health services gap analysis, a presentation regarding best practices for drug testing, and presentations from substance abuse prevention programs.
 - c. Roger Frings also discussed that the legalization of marijuana may continue to be a topic of consideration for the council in coming meetings. ITC members requested to review the June 2016 Marijuana in Wisconsin report, which did not receive the full support of SCAODA, but contained a thorough analysis of research on the issue. This will be sent out by Amanda Lake.
 - d. Roger Frings shared about efforts to incorporate SCAODA representation in monthly advocacy meetings with the DHS secretary's office and leadership team. Mr. Frings also provided information regarding the 2019 Assembly Committee on Substance Use and Prevention.
5. Guest Speaker Sharon Henes regarding EmR 1835 and 2017 Act 262:
 - a. The group received a late cancellation from Ms. Henes that she was not able to attend the meeting.
 - b. Amanda Lake shared a report compiling concerns that have been identified by substance abuse counselors regarding Act 262. The group discussed concerns, with agreement regarding the need for clarification of credentialing, EmR 1835 education and experience requirements for various levels of certification/ licensure, scope of practice for providers of various credentials, addressing reimbursement issues, and improving substance abuse counselor representation in decision-making. Sheila Weix made a motion to bring the report and recommendations to SCAODA at the June meeting. Dave Macmaster seconded the motion. The group discussed and developed amended recommendations related to the identified concerns. The committee voted to bring the recommendations as amended to the council, which carried with all in favor.
6. OCI Update: Roger Frings shared activities within the Office of the Commissioner of Insurance to identify ideas for a more active role related to substance abuse treatment services and best practices. Mr. Frings requested committee members to email questions or ideas to him. Several committee members expressed their support and interest in this topic, and it was recommended to add a presentation from OCI to a future meeting agenda.
7. DHS 75 Rule writing updates: Amanda Lake shared updates regarding the DHS 75 revision, which is currently in process with internal DHS workgroups developing draft revisions for sections of the rule by level of care. Once the initial drafts are completed, the advisory committee will convene to provide input and participate in review and revision of the rule. There will also be public hearings held at later date allowing for additional stakeholder

and public input regarding the revision. The target date for completion of an initial draft revision is late 2019, with the revised rule going for administrative and legislative approval in 2020.

8. *A Time to Lead* WINTIP document and discussion: David Macmaster provided a summary regarding the history, goals, and intent behind *A Time to Lead: The Case for Integrating Treatment of Tobacco Use Disorder in the Treatment of Other Substance Use and Mental Health Disorders* and the efforts and vision of WINTIP for integration of tobacco treatment with behavioral health services. Committee members requested for the report to consider and respond to vaping as well as traditional tobacco use. Mr. Macmaster will present that feedback to the WINTIP group.
9. Section Updates:
 - a. Children, Youth and Families: Michelle Lund shared regarding the youth substance use services capacity and demand report and requested input from the committee regarding the statement of scope for the project. The committee recommended inclusion of statewide high-level data, rather than a smaller sample that may not be generalizable to all areas.
 - b. Treatment for Women and their Children Urban Rural Women's Grants: Norman Briggs reported that the grant funding opportunity for Urban Rural Women's grants will be out in June. Mr. Briggs expressed concern regarding the delay in executing contracts within the Department of Health Services.
 - c. Substance Use Amongst Senior Population Workgroup: Joe Muchka reported that the group was not able to meet in February due to weather, but is continuing to review literature and prior research regarding substance use and older adults, with efforts aimed at identifying the scope of the problem, exploring age-specific treatment, treatment outcome data, and provider training. ITC members affirmed the importance of ongoing work on this topic.
10. Public Comments: None.
11. Joe Muchka motioned to adjourn the meeting at 2:40pm; Sheila Weix seconded.

Prepared by: A. Lake on 4/10/2019.

These minutes are in draft form. They will be presented for approval by the governmental body on: 5/14/2019



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)

May 14, 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 04/09/2019 ITC Meeting Minutes
4. Discussion of upcoming SCAODA meeting on 06/07/2019
5. GUEST SPEAKERS – Daniel Kiernan and Sophie Lee from Division of Medicaid Services, regarding 1115 waiver
6. Office of the Commissioner of Insurance- discussion regarding OCI role related to substance use services (Roger Frings)
7. DHS 75 rule writing updates (Amanda Lake)
8. PDMP- discussion regarding possible addition of other substances, usage, limitations, and provider survey (Amy Anderson)
9. 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)
10. 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.

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 alternate format, you may request assistance to participate by contacting Amanda Lake at 608-266-8113 or amanda.lake@wisconsin.gov.

Next SCAODA Meeting: June 07, 2019

Next ITC Meeting: July 09, 2019

SCAODA Motion Introduction

Committee Introducing Motion: Intervention and Treatment Committee
Motion: The State Council on Alcohol and Other Drug Abuse recommends that the Department of Safety and Professional Services should continue to issue Substance Abuse Counselor In-Training, Substance Abuse Counselor, Clinical Substance Abuse Counselor, Clinical Supervisor In-Training, and Independent Clinical Supervisor credentials to new and renewing applicants that are also master's level mental health professionals.
Related SCAODA Goal: #3
<p>Background: The Opiate Task Force, the Pew report and the workforce report by the Intervention and Treatment Committee all emphasized the need to expand the workforce capable of effectively treating substance use disorders. The legislature subsequently passed Act 262 which made a number of changes to the statutes governing the authority of mental health professionals to treat substance use disorders. Key among those changes was the elimination of the requirement for licensed mental health professionals to obtain certification as a substance abuse counselor or earn a substance abuse specialty to be attached to their mental health professional license. A number of stakeholders raised issue with that decision and urged for changes to return to a process by which individuals receiving treatment from a mental health professional could be assured, through evidence of education and training to obtain certification, that that mental health professional had the ability to effectively treat their disorder. The situation was further complicated by the fact that the Medical Assistance program would not reimburse mental health professionals for treating substance use disorders if those professionals did not possess AODA certification.</p> <ul style="list-style-type: none">• Positive impact: Persons receiving treatment for a substance use disorder can be assured that the treating professional has a minimum level of competence and the treating professional will be paid for their services by the Medical Assistance program.• Potential Opposition: Mental health professionals who may have the education and training necessary to treat substance use disorders within their scope of practice but who do not possess certification will incur additional expenses in order to comply with these requirements.
Rationale for Supporting Motion: The action recommended by the motion would resolve the issues described in the background statement.

SCAODA Motion Introduction

Committee Introducing Motion: Intervention and Treatment Committee
Motion: The State Council on Alcohol and Other Drug Abuse supports the addition of Naltrexone and Gabapentin in the Wisconsin electronic Prescription Drug Monitoring Program consistent with recommendations from the American Society of Addiction Medicine.
Related SCAODA Goal: #3
<p>Background: Prescription Drug Monitoring Programs (PDMPs) are statewide electronic databases that collect designated data from pharmacies and medical offices that dispense controlled substances in the state. PDMPs are maintained at the state level and housed in various statewide regulatory, administrative, or law enforcement agencies. The overseeing agency provides access to the data to individuals who are authorized under state law to receive the information for purposes of their profession, mainly prescribers, dispensers, and substance abuse counselors. According to the Public Policy Statement on Prescription Drug Monitoring Programs from the American Society for Addiction Medicine, "States should expand the medications reportable to the PDMP to include methadone and buprenorphine from OTPs, and cannabis obtained through a prescriber."</p> <p>While the statement does not include Gabapentin or Naltrexone, it should be noted that abuse of Gabapentin is on the rise and eight other states have already added it to their PDMPs. The dispensing of Naltrexone for opioid and alcohol use disorders is one of the three approved medications for medication assisted treatment of opioid use disorders, and is a non-narcotic alternative to methadone and buprenorphine. Currently 34 states have included the lifesaving medication for overdoses, Naloxone/Narcan in their tracking programs, which serves as precedent for including all forms of Naltrexone.</p> <ul style="list-style-type: none">• Positive impact: Such additions would 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) consistent with recommendations from the American Society of Addiction Medicine.• Potential Opposition: Such inclusion place additional obligations on the managers and users of the PDMP.
Rationale for Supporting Motion: The benefits of including these additional prescription drugs outweighs the additional costs.

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: CYFT of SCAODA			Attending: Chelsey Wasielewski, Mary Rauwolf, Janae Goodrich, Robin Moskowitz, Jason Cram, Michelle Lund, Sara Bremser, Erin Fischer, Mari Kriescher, Stacy Stone, Katie Hagen, Judy Tippel
Date: 2/4/2019	Time Started: 10:03 a.m.	Time Ended: 11:15 AM	
Location: Department of Corrections			Presiding Officer: Chelsey Wasielewski

Minutes

1. Meeting called to order at 10:03; Chelsey Wasielewski presiding
2. No agenda additions
3. 04/01/2019 meeting of the CYFT will now be held at the Department of Corrections; meeting previously scheduled for Sheboygan
4. Paul Schmidt submitted his resignation from the committee via email on 02/04/2019; resignation accepted by committee
5. Jason Cram provided updates on 12/07/2019 SCAODA meeting as well as 01/08/2019 ITC meeting
 - a. New WI Assembly Committee on Substance Use and Prevention was discussed
 - b. The March SCAODA meeting date was changed from March 1 to March 15
 - c. ITC submitted a letter to the DSPS in regards to EmR1835
 - d. ITC discussed a motion to increase the number of drugs being monitored by the PDMP
6. 12/10/2018 CYFT meeting minutes were reviewed and approved; motion by Sara Bremser, seconded by Mary Rauwolf
7. Jason Cram informed the committee of the new DHS leadership team and read aloud the email introducing the team
8. Interagency Council of the YTI grant
 - a. Janae Goodrich and Robin Moskowitz of UW Population Health provided updated statistics in regards to enrollment and GPRA data
 - b. Michelle Lund provided additional updates from a program perspective including carryover money updates; cohort meeting calls and meetings; and advertising and outreach efforts
 - c. Judy Tippel and Katie Hagen provided updates on the Racine County YTI program including overview, challenges, benefits, and outreach efforts
9. Jason Harris from DHS attended a portion of the meeting as a guest speaker; Mr. Harris presented on the SOR/STR funding and provided information on how the funding is allocated across the state; Mr. Harris indicated funding amounts will likely remain consistent with 2019 funding; committee members encouraged Mr. Harris to advocate for funding to address non-opioid substance use issues such as methamphetamines; Mr. Harris was thanked and commended for the work he is doing in the state
10. Mary Rauwolf, CYFT Committee Member and Parents Addictions Network (PAN) representative presented on the work PAN does in Dane County, WI
 - a. Goal is to change the paradigm when it comes to addressing addiction issues
 - b. Provides recovery supports, referral, and resources to families and friends of those battling a drug addiction
 - c. Ms. Rauwolf shared her personal experiences that led her to become part of PAN
11. Capacity and Demand Report – developing a statement of scope
 - a. Jason Cram provided a brief history that led to the CYFT adopting the project of developing a Capacity and Demand Report
 - b. Committee agreed that this is not to be a directory
 - c. One suggestion was to approach this from a funding stream/financial mapping perspective; follow the money
 - d. One suggestion was to approach this from an contractual oversight perspective; what agency administers what contract(s)
 - e. The intended audience was considered; coalitions, ITC/SCAODA, schools, parents, law enforcement
 - f. The committee considered what resources are available for data sources
 - g. The committee discussed the siloed nature of the service delivery system in WI

- h. The committee discussed if this should be a capacity and demand report v/s informational v/s tool kit v/s a call to action
 - i. The committee considered to what extent ACES, trauma, mental health, and co-occurring issues should be included in the report
 - j. The committee discussed the inclusion tobacco and vaping in addition to alcohol, marijuana, and opioids in the report
 - k. The committee considered the need for education, training, prevention, aftercare, resources in the community, at school, and in the home; one such resource suggested was Botvin Life Skills Training another was MDFT
 - l. The committee agreed that consideration must be given to diverse populations, rural and urban areas, and all substances not just opioids and alcohol
 - m. Jason Cram agreed to take all of these suggestions and develop a draft statement of scope in preparation for the 04/01/2019 meeting
12. Future agenda items
- a. Capacity and Demand Report statement of scope
 - b. Guest speaker – Bill Lauer Friends of Recovery
 - c. Ms. Wasielewski stated she will not be available for the 04/01/2019 meeting
13. Sara Bremser motioned to adjourn the meeting at 12:42 p.m.; Stacy Stone seconded

Prepared by: Jason Cram on 2/13/2019.

These minutes are in draft form. They will be presented for approval by the governmental body on: 4/1/2019



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)

April 1, 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 02/04/2019 CYFT Meeting Minutes
5. Report: 02/12/2019 Intervention and Treatment Committee – MEETING CANCELED
6. DHS and Children, Youth, and Family Section updates
7. Interagency Council of the Youth Treatment Initiatives Grant
8. Program Presentation: Bill Lauer – Friends of Recovery Wisconsin
9. Capacity and Demand Report – review/approve statement of scope
10. Public comments
11. Future agenda items (2019 meetings remaining: Jun 3, Aug 5, Oct 7, Dec 2)
12. Adjourn

The purpose of this meeting is to conduct the governmental business outlined in the above agenda for the Children, Youth, and Family Treatment Subcommittee of the Intervention and Treatment Committee of the State Council on Alcohol and Other Drug Abuse (SCAODA). The mission of SCAODA is to enhance the quality of life for Wisconsin citizens by preventing alcohol and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities. 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; Kellie Blechinger; Jill Gamez (by phone); Karen Kinsey Not Present: Duncan Shrout; Kevin Florek; Brian Dean Guests: Dan Kiernan (DHS/DMS, by phone); Roger Frings DHS Staff: Mike Derr
Date: 1/16/2019	Time Started: 9:38 am	Time Ended: 12:20 pm	
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 9:38 a.m. Attendees introduced themselves. Kellie Blechinger introduced herself as Vonda Benson's replacement as the DOC representative on the committee, and gave a summary of her experience and background..

Review of 11/7/2018 Meeting Minutes:

Christine Ullstrup referenced the draft minutes from the November 7, 2018 Committee meeting and asked for comments and corrections. Jill Gamez suggested a revision on page 2, first bullet under the "Action Steps" section pertaining to the State of Minnesota's funding mechanisms for SUD services. Jill Gamez moved that the minutes be approved, with modification, and Raeanna Johnson seconded the motion. Motion carried unanimously.

Public Comment:

No comments were offered.

Expansion of Medicaid Coverage:

Dan Kiernan of DHS, Division of Medicaid Services spoke by phone to committee members. He noted that even though the Section 1115 Waiver Demonstration Project has been approved by SAMHSA, DHS will need about a year to prepare the details of expanding Medicaid coverage over SUD residential treatment and other services, before that expansion will be implemented. Jill Gamez noted that there is a 30-day window for enrolling persons in Comprehensive Community Services (CCS), which is Medicaid funded. She is concerned that CSS is a voluntary program, and yet may be the only Medicaid-covered program for consumers. The voluntary enrollment status means that some consumers who are in need of CCS may nonetheless choose to not enroll. Dan will continue to keep committee members apprised of progress with the coverage implementation steps. Mike Derr provided all committee members with Dan Kiernan's contact information.

Committee Member Expectations and Guidelines:

Meeting participants discussed what sectors and program areas should be considered to recruit additional committee members. Areas included Voices for Recovery, county behavioral health agencies, prevention specialists, and managers with experience in fund raising. Participants reviewed the revised handout on guidelines. After brief discussion, the guidelines were approved, and Mike Derr was asked to make them available to interested new committee members.

Committee Priorities and Action Steps for 2019:

Committee members reviewed the various priorities and action steps discussed at the Nov. 7th meeting and made progress toward refining those action steps.

- Karen Kinsey would like the Committee to strongly advocate for Medicaid expansion and similar policies, and to actively participate in the development of expansion policy.
- Roger Frings noted that Gov. Evers will probably introduce his budget in mid-February, and that the Committee should review the portion of the budget pertaining to SUD priorities and programming, and share a list of recommendations. Perhaps the Committee can draft a letter of recommendation for Council approval at the March 15th meeting. He strongly encouraged Committee members and colleagues to attend Joint Finance Committee meetings across the state when the budget is being considered. The Committee will further consider the budget at its next meeting.
- Jill Gamez will be sharing specific materials about Minnesota’s consolidated behavioral health treatment funds at the state level. These funds cover consumers who do not have insurance and don’t qualify for Medicaid. Jill compared how Arbor Place functions and collects reimbursements in Wisconsin’s county-based system vs. Minnesota’s state-directed system, which uses a standardized ASAM assessment criteria system. Counties in MN play a less active role in directing services, though they do authorize placements. MN has three levels of treatment intensities (low, medium and high); reimbursement amounts depend on what level of intensity is provided. Both Jill and Christine Ullstrup stated that when Medicaid expansion is implemented, residential beds in WI will be filled. Yet there will still be consumers not eligible for Medicaid who need treatment; who will pay for that treatment, the counties?
- DHS’ Bureau of Prevention Treatment and Recovery is beginning efforts to write up the 2019 MHBG and SABG Needs Assessment, as part of the FFY 2020-21 Application and Plan for both block grants. Mike Derr will keep the Committee updated on those efforts and on highlights.
- Raeanna Johnson, with assistance from Kevin Florek and Brian Dean, will review several past reports (i.e., 2017 SABG Needs Assessment, P&F Committee’s 2016 Funding Report, The PEW Foundation’s stage 1 and 2 recommendations to Governor Walker during 2017-18, and the Governor’s Opioid Task Force recommendations during 2018). From that review, the Committee would like to help develop a shorter report describing SUD needs, funding resources, and offer a series of recommendations for the WI Legislature and policymakers to adopt, including encouraging the use of Medication Assisted Treatment (MAT). Several Committee members encouraged the use of maps/overlay data in the report to help illustrate needs and priorities. Christine encouraged DHS to find grant funds to contract with a technical consultant to assist with creating this report consolidating existing data findings and recommendations; in other words, seek a way to ‘repackage’ existing data. Also, the Committee needs to identify what data and charts to focus a report around. Christine briefly discussed the “211 Hotline” program, which was established pursuant to a PEW report recommendation. Jill Gamez noted that MN has the “Fast Tracker” system.
- The Committee again reviewed the 2018 residential treatment survey findings and charts, and discussed options for polishing up a final summary and conclusions. Jill Gamez will send out additional survey questions that Committee members can explore.

Adjournment: By Committee acclamation, the meeting was adjourned at 12:20 pm.

Prepared by: Michael Derr on 3/18/2019.

Minutes approved by Committee during its 4/17/19 meeting..



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

April 17, 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
 - Governor’s/DHS Budget
 - Tracking Legislation
 - Synthesizing SUD Reports and Assessments
 - Medicaid coverage of Residential SUD Treatment
 - Other States’ funding of SUD services
5. SABG FFY 2019-2020 Plan & Needs Assessment.....Mike Derr
 - 2019 Programs funded by SABG
6. Agency and Provider Updates.....Committee Members
7. Agenda Items for May 15, 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. 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.

Conference Call: 1-877-820-7831

Access Code: 554523#

www.scaoda.state.wi.us

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; Kellie Blechinger; Jill Gamez; Karen Kinsey; Brian Dean; Kevin Florek
Date: 4/17/2019	Time Started: 9:43 am	Time Ended: 1:55 pm	Not Present: Raeanna Johnson; Duncan Shrout; Kellie Blechinger Guests: Roger Frings DHS Staff: Mike Derr
Location: ARC Community Services, 1409 Emil St., Madison, WI			Presiding Officer: Christine Ullstrup, Committee Chair

Minutes

Call to Order:

Committee Chairperson Christine Ullstrup called the meeting to order at 9:43 a.m. Attendees introduced themselves, and filled out lunch orders.

Review of 1/16/19 Meeting Minutes:

Christine Ullstrup referenced the draft minutes from the Jan. 16, 2019 Committee meeting and asked for comments and corrections. No comments were offered. Kevin Florek moved that the minutes be approved, and Jill Gamez seconded the motion. Motion carried unanimously.

Public Comment:

No comments were offered or made.

Governor's Budget:

Committee reviewed handouts highlighting Gov. Evers' proposed 2019-21 budget and DHS budget initiatives, including expansion of Medicaid to cover an estimated 82,000 additional persons. Roger Frings stated that the key to the DHS proposed budget is the Medicaid expansion, he believe the Committee and Council should both support that. **Karen Kinsey moved that the Committee recommend full Council support of the Medicaid expansion proposed in Gov. Evers' budget**, and Jill Gamez seconded the motion. Expanding Medicaid coverage would increase the number of individuals accessing SUD treatment and recovery services. Gamez believes that policymakers still need to address and resolving billing and credentialing issues relating to SUD counseling and treatment. **The proposed motion carries.**

Tracking Legislation:

Committee members and attendees reviewed the various legislative proposals included in the online legislative tracker file. For many of the proposals, the committee took a neutral position. When reviewing the proposed bills relating to OWI offenses and penalties, Karen Kinsey stated that legislators should also fund additional treatment and diversion programs to help prevent future offenses.

The Committee decided to take a position supporting four specific bills: (1) AB 065/SB 073 -- prohibiting the sale of vapor products to minors; (2) SB 118 – creating guidelines for placement of cigarettes, tobacco and nicotine products in retail locations; (3) AB 139/SB 134 – requiring DHS to include reports of naloxone and other opioid antagonist administration by ambulance service providers to the WARDS data system; and (4) AB

131/SB 141 -- \$1,296,400 provided for each year to the Veterans Outreach and Recovery Program. **Jill Gamez moved that the SCAODA support passage of the above-noted four bills, and that for current legislative proposals focusing on OWI offenses, encourage the Legislature and Governor to continue referencing viable options for treatment and interventions as an important element is addressing OWI issues and problems across the State.** Kevin Florek seconded the motion. After further discussion, **the motion carried.** Mike Derr will prepare the motion introduction form for Committee review at the May 20th meeting.

Christine Ullstrup stated that she will check with Sen. Alberta Darling's office regarding additional funding for treatment and diversion programs as part of the OWI proposals, particularly SB 009 which criminalizes a first offense relating to operating a vehicle while intoxicated.

Committee Action Steps for 2019:

Committee members discussed further efforts to create usable and short information sheets that committee and Council members and other stakeholders can use when meeting with policy makers to education them on local SUD issues. It was stated that multiple reports just are not user friendly in their current format and length; they are too cumbersome to make it through the data and information. These shorter information sheets would be a tool to advocate for local resources.

Steps moving forward include looking at mapping tools as a group. There was also discussion about possibly securing an independent consultant to assist with this project.

2019-20 SABG Plan and Assessment:

Mike Derr gave a brief overview of the Bureau process for developing and completing the FFY 2020-21 Plan and Needs Assessment. The Bureau evaluation team is currently writing up a needs assessment; preliminary highlights will be shared with the full Council at the June 7th meeting. Derr briefly went through the handout of the draft outline of the 2019 Mental Health and Substance Use Needs Assessment.

Adjournment: By Committee consensus, the meeting was adjourned at 1:55 pm.

Prepared by: Michael Derr on 5/19/2019.



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

Planning and Funding Committee

May 20, 2019

9:30 AM to 2:00 PM

Tellurian, Inc., 5900 Monona Drive, Suite 300
Monona, Wisconsin 53716

MEETING AGENDA

1. Call to Order and Roll Call.....Christine Ullstrup, Chair
2. Review April 17, 2019 meeting minutes.....Christine Ullstrup
3. Public Comment: Substance Use Disorder Planning Topics.....Christine Ullstrup
4. Update: Committee Work Projects/Priorities for 2019.....Committee Members & Guests
 - Medicaid coverage of Residential SUD Treatment - (Dan Kiernan and Sophie Lee, DHS)
 - Governor's/DHS Budget
 - Tracking Legislation
 - Synthesizing SUD Reports and Assessments
5. Update: SABG FFY 2019-2020 Plan & Needs Assessment.....Mike Derr
6. Agency and Provider Updates.....Committee Members
7. Agenda Items for July 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. 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.

Conference Call: 1-877-820-7831

Access Code: 554523#

SCAODA Motion Introduction

Committee Introducing Motion: Planning and Funding Committee

Motion: (A) Support passage of the following four legislative proposals made during the 2019 legislative session:

- (1) AB 065/SB 073 -- prohibiting the sale of vaper products to minors and the purchase of those products by or for minors;
- (2) SB 118 -- creation of guidelines for the placement of cigarettes, nicotine products, or tobacco products in retail locations that are inaccessible to customers without assistance (i.e., behind the counter or in locked cases);
- (3) AB 139/SB 134 -- requires DHS to include reports of naloxone or other opioid antagonist administration by ambulance service providers to the WI Ambulance Run Data System;
- (4) AB 131/SB 141 -- requires DVA to administer a program to provide outreach, mental health services, and support to certain WI residents who are serving or who have served in the armed forces, and who may have a mental health condition or substance use disorder; provides \$1,296,000 in funds per year during the 2019-21 fiscal biennium.

(B) For current legislative proposals focusing on OWI offenses, encourage the Legislature and Governor to continue referencing viable options for treatment and interventions as an important element is addressing OWI issues and problems across the State.

Related SCAODA Goal: #1 and #3

Background: Over the past several years, the opioid addiction crisis and resulting deaths has increased significantly. Yet problems remain with alcohol abuse and tobacco use that also need addressing . While legislation needs to strengthen penalties for OWI offenses, legislation should also promote a more holistic, comprehensive approach to addressing alcohol and drug use by promoting treatment and interventions to help minimize future high-risk, unsafe behaviors.

- Positive impact: See the Rationale for Supporting Motion section below .
- Potential Opposition: Motion Part (A): Little opposition has been noted or expressed for any of the four legislative proposals in the morning. Motion Part (B): Some parties may oppose more explicit reference to viable options for treatment and interventions in OWI-related legislation for fear of minimizing the seriousness of OWI offenses.

Rationale for Supporting Motion: One of SCAODA's primary goals under its 2018-2022 Strategic Plan is to transform the perception of the State's substance use disorder problems from one of unlawful behavior to one of promoting healthy behavioral outcomes. A second related primary goal under the Plan is to advocate for adequate funding and capacity for communities and providers to implement effective prevention, treatment and recovery services for all who are in need. The four proposed legislative bills all would promote more positive, healthy behaviors through a variety of requirements and guidelines that extend beyond tougher sentencing and law enforcement requirements. Two of the bills are designed to limit youth access to tobacco-related products, preventing future health problems associated with tobacco usage. In addition, Part (B) of the Motion encourages lawmakers to support comprehensive, holistic approaches to alcohol use disorders through intervention and treatment alternatives that help reduce alcohol misuse and negative consequences of such misuse.

SCAODA Motion Introduction

Committee Introducing Motion: Planning and Funding Committee
Motion: The Council should fully support the proposed Medicaid expansion as contained in Department of Health Services' budget under Governor Tony Ever's proposed 2019-21 biennium budget.
Related SCAODA Goal: #3
<p>Background: For the past several years, Wisconsin has been going through a health care crisis, including a dramatic rise in the number of persons who have died from opioid and other drug overdoses. Many citizens who do not have insurance have not been able to access necessary substance use disorder treatment, in part because Medicaid coverage has not been expanded in Wisconsin.</p> <ul style="list-style-type: none">• Positive impact: The proposed medicaid expansion is projected to enable approximately 82,000 additional persons to access affordable health care coverage. By covering persons who currently lack insurance, uncompensated care for providers will decline. The proposed expansion would generate more than \$300 million in savings which can be invested back in health care to improve the lives of every Wisconsin citizen.• Potential Opposition: Concern that expanding Medicaid coverage may over the long-term increase health care costs covered by Wisconsin citizens, in the event the federal portion of covering those costs was to decline.
Rationale for Supporting Motion: The Committee supports increasing the number of persons who can access necessary substance use disorder treatment and recovery services by qualifying for and receiving Medicaid. Also, supporting the Medicaid expansion is necessary in order to fund other substance use disorder (SUD) and mental health initiatives proposed in the Governor's budget, including increasing the number of SUD counselors and other persons in the workforce, increasing the number of providers, and improving the overall health of citizens across Wisconsin.

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Prevention Committee - Alcohol Priority Action Team		Attending: Kari Lerch, Sarah Johnson, Maggie Northrop, Kate McCoy, Julia Sherman, Danielle Luther, Ronda Kopelke, Annie Short, Allison Weber, Emily Holder, Christy Niemuth, Kimberly Wild, Raina Haralampopoulos, Jenny Hallet, Roger Frings, Christina Denslinger, Nicole Butt, Sarah Linnan
Date: 1/17/2019	Time Started: 09:30 Time Ended: 12:00	
Location: Wisconsin State Patrol DeForest Post, 911 W. North Street, DeForest, Wisconsin 53532		Presiding Officer: Chris Wardlow

Minutes

1. Welcome and Introductions
2. Public Comment – no public comment
3. Review November 19th minutes – motion to approve
 - Kari Lerch motioned and Sarah Johnson seconded.
4. Alcohol Priority Action Team

Maggie Northrop – Division of Public Health/Healthy Wisconsin

- Matthew Collie has moved to a different position within Division of Public Health (DPH) – so Maggie is now the point of contact for DPH for the purposes of Healthy Wisconsin; working closely with Micki (from DPH)
- During the last meeting, Sarah Johnson had some questions about which Youth Risk Behavior Survey (YRBS) and Behavioral Risk Factor Surveillance Survey (BRFSS) questions they were looking at for the Healthy Wisconsin – Maggie provided answers
- Working with DPH to potentially improve data quality and access and may incorporate that group with this group in future meetings as the need becomes identified

Kate McCoy – Department of Public Instruction (DPI)/Youth Risk Behavior Survey (YRBS)

- Kate McCoy provided an overview of the YRBS
 - There is an opportunity to do some good alignment and collaboration with the national, state, and local level datasets
- Making some changes to the local-level surveys so they are more standardized to allow for more comparison and alignment of those data sets (more standardized timeframe for data collection and reporting, survey questions plus ability to do one of four optional modules for more customization, county-wide reports as an option (local health depts. as partners), and stakeholders helped shape these decisions during the spring/summer of 2018)
 - Optional modules: drug-free communities, youth tobacco survey, adverse city and protective factors (includes some risk questions, some mental health questions, some resilience questions), and safe and supportive school climate
- DPI provides grants to schools for alcohol and drug abuse prevention – by standardizing the survey, will be able to analyze the data and see if those grants are making an impact and what the effectiveness of programming actually is
- Will also be able to identify places who are doing a good job and can be targeting those communities and programs to learn from them
- The schools will get their own data (at school and district level data, but won't be publicly-available) and if certain criteria are met (at least 50% of public schools in the area have to have more than 50% of their students participate in the survey) the county-level data can be publicly available
- They have a dashboard where they can track everything in real time – as of 8:00 a.m. today, 583 schools had started the registration process or someone had requested a registration form be sent to their school; 402 schools have actually registered
- Also now have access to ECIDS – early childhood integrated data system
- Having people from this group looking at the survey and then reporting back – what might be the top priority topics to cover – would be very helpful

Julia Sherman – review the updated Alcohol Culture and Environment (ACE) Report charge to the Alcohol Priority Action Team (APAT)

- Draft of what the APAT would be looking at over the next year or so
- Much of this is just “what we need” to fulfill the Healthy Wisconsin
- Feedback from group:
 - Sarah: lacking some major topic fields (pregnancy; Fetal Alcohol Syndrome; college drinking culture; connections with other drug use, risky drug-taking behavior – not just opiate use; drunk driving)?
 - Jenny: what about employers offering support and programs to help people in recovery – having employment and a supportive environment can be really helpful and lack of it is a major barrier to many
 - Julia/all: The Workplace Prevention report is forthcoming so this should be addressed

- **DECISION: Julia will add “alcohol education” and college age/campus culture to the charge**

- To move this forward, there would be a motion in this committee and then it would go to full SCAODA
- There is a quorum

MOTION: Julia Sherman moves that we forward this draft to the SCAODA for their approval/authorization; Jenny Hallet seconded the motion, motion passed.

- The prevention committee should forward a motion/request to SCAODA for approval to create the workgroup ad hoc committee, based on the amended charge; then – SCAODA gives a one-year window for the group to complete its work
- The workplace prevention ad hoc committee is not done with their report – the motion should include phrasing to address that THIS ad hoc committee will form upon the completion of the workplace prevention ad hoc committee’s report being finalized

- **MOTION: JULIA: will add in this “upon completion” phrasing to the motion, Sarah Johnson seconded – Members voted: all members present were in favor, none were opposed**

- **Chris Wardlow will then provide this update to SCAODA at March meeting**

Chris Wardlow – Discussion about future speakers and draft topics and questions for future presentations

- Matthew Collie had sent out a list of people to come talk and asked for feedback on what people wanted for speakers coming to the group
- There was an interest in talking to Wisconsin Hospital Association (WHA)
 - We would want someone from there to talk about: how hospitals use ICD10, report data to state agencies, and the burden of collecting that data
 - Roger Frings knows Eric Horgorden – who does all of their government affairs work; suggests making an initial contact with him and if he isn’t the right person to speak on these things, then he would know the right person to point us to
 - Roger will give his email address to Raina and Maggie, they will reach out to him
- Other data needs?
 - Julia: still have the coroner/death reporting data gap – who do we go to for addressing this gap?
 - Division of Vital records – but this was listed as a lower tier from when group ranked people to come talk to group – should we re-visit this and bump it up as a priority?
 - Julia: since we don’t know who the new appointee for public health will be – let’s go with Vital Records for next meeting, and wait and see what happens with DPH

- **DECISION: will invite someone from vital records for next meeting (Maggie), if no one can come – will invite someone from WHA**

5. AGENCY UPDATES

- Danielle Luther (Northwoods Coalition): This grant year, the 4 regions have decided to create regional action plans in addition to their local coalition work. One region is focusing on alcohol, two regions are looking at youth resiliency, and the other region is looking at co-occurrence between mental health and AODA issues. In addition to that, still working on lots of trainings related to AODA and working on additional projects (they allow coalitions to pick from 10 major projects to work on, Northwoods track their progress, coalitions provide updates, and get some funding for completion)
 - Recovery Corps – they have filled 19 of 20 recovery coach positions (in the 2nd year of this). Have already served over 200 individuals through the HOPE consortium

- Treatment Consortium – to build on strengths of specific providers (any door is the right door to enter if you’re looking at treatment); they created a fact sheet about that (lists treatment partners) –passed out at meeting
- Ronda Kopelke (Marshfield Clinic): on governing board of family health center; strong push to offer more outpatient and inpatient treatment options for substance use; directly taking responsibility for prevention services within Marshfield clinic health system; she will keep us informed as things continue to develop
- Emily Holder (Department of Public Instruction) – recently launched their AODA grant program (will provide funding to successful school districts through 19-21 school years); will be doing an informational grant-writers webinar next week for schools who are thinking of applying (have until April to apply)
 - Reinforcing that this is the YRBS window for schools; hoping that they will be able to also have school-based mental health grants to offer to schools in the future
 - Has shared the official grant announcement that went out to school districts with Christy – if people want the announcement so they can disseminate it and the announcement about the YRBS window – Emily can send this around/out to people
 - They also have an AODA and tobacco listserv through DPI, people can be added to it if they want to know what’s going on from that perspective
- Allison Weber – workplace ad hoc committee
 - Workgroup started with a small group, but now there are only 3 members who have been working on this report and recommendations
 - The year-long window has closed, but were granted an extension from SCAODA
 - Hoping that there will be something to present at the March SCAODA meeting, but it will also come through this committee – we would send the report via email to the prevention committee so they can see it before the March SCAODA meeting
 - Chris (as interim chair) could work with Jill Gamez (chair of ad hoc) to really get a push on this and have them check-in with each other to decide on a timeline for the rest of the report
 - on the report so this committee can see it and give feedback before going to full SCAODA?
- **DECISION: report could be in a good-enough shape to present to full SCAODA (all the content and recommendations will be good, but formatting may be off). Then this committee can give feedback and work on it at April meeting – then the report would be DONE and finalized by June SCAODA meeting. Chris will have a conversation with Jill to set this timeline (Allison, Raina, Chris, Jill conference call).**

Tentative: April 18th will be next meeting for this committee

- Sarah Johnson: motion to adjourn

Prepared by: Cecilia Culp on 1/24/2019.

These minutes are in draft form. They will be presented for approval by the governmental body on: 4/18/2019

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**

April 18, 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 January 17 Meeting.....Interim Chair
4. Alcohol Priority Action Team (APAT) Work.....Maggie Northrop, OPPA/DHS
 - o Presentation on alcohol and death certificates – Michelle Smith, Vital Records, DHS
 - o Discussion about future speakers and draft topics and questions for future presentations
5. Governor’s Budget Review and Feedback.....Interim Chair
6. Workplace Prevention Ad Hoc Workgroup.....Jill Gamez, Chair of Workgroup
7. Agency Member Updates.....Committee Members
8. 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.

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 Raina Haralampopoulos at 608-267-3783 or at Mary.Haralampopoulos@wisconsin.gov.

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

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 1st 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

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:
Workplace Prevention Ad-Hoc Committee**

March 22, 2019
1:00PM-3:00PM
Conference call

MEETING AGENDA

1. Welcome and Introductions.....Jill Gamez, chairperson
2. Approval of previous meeting minutes.....members
3. Public Comment: The committee will accept comments from the public relating to any committee business
4. Update from DWD perspective (if available)..... Roger Frings, SCAODA chairperson
5. Working meeting to review content for the report to the Prevention Committee
6. Future Ad Hoc Committee Meeting Dates and Agenda Items

Next meeting, April 5, 2019 10:00AM-2:00PM
Division of State Patrol
Southwest Region
911 W. North Street
DeForest, WI 53532

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

DHS is an equal opportunity employer and service provider. If you need accommodations because of a disability, if you need an interpreter or translator, or if you need this material in another language or in alternative format, you may request assistance to participate by contacting Allison Weber at 608-266-5156 or at allison.weber@wisconsin.gov

<https://scaoda.wisconsin.gov>

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

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:
Workplace Prevention Ad-Hoc Committee**

April 5, 2019
10:00AM - 2:00PM
Division of State Patrol
Southwest Region
911 W. North Street
DeForest, WI 53532

MEETING AGENDA

1. Welcome and Introductions.....Jill Gamez, chairperson
2. Approval of previous meeting minutes.....members
3. Public Comment: The committee will accept comments from the public relating to any committee business
4. Update from DWD perspective (if available)..... Roger Frings, SCAODA chairperson
5. FINAL working meeting to review content for the report to the Prevention Committee.....members
6. Future Ad Hoc Committee Meeting Dates and Agenda Items

Next Meeting TBD

SCAODA Prevention Committee Meeting
Thursday, April 18, 2019
9:30AM- 12:00PM
Division of State Patrol
Southwest Region
911 W. North Street
DeForest, WI 53532

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Workplace Prevention Ad Hoc Committee’s primary mission is to consider

preventing substance use with the goal of creating safe and productive workplaces by researching, evaluating and developing recommendations for Wisconsin workplaces.

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

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: SCAODA Workplace Prevention ad hoc Committee		Attending: Michelle Devine Giese, Chris Wardlow, Frank Bures, Jill Gamez, Roger Frings, Scott Stokes, Allison Weber, Cecie Culp	
Date: 4/5/2019	Time Started: 10:00am	Time Ended: 3:00pm	
Location: DeForest State Patrol; 911 W. North Street; DeForest, WI		Presiding Officer: Jill Gamez	

Minutes

1. Welcome and Introductions
2. Public Comment – no public comment
3. Approval of previous meeting minutes
 - a. Chris Wardlow – motion to approve
 - b. Jill Gamez – seconded motion
 - c. Motion passed – minutes approved
4. APPENDIX A
 - a. At Opioid Forum in March – both Gov. Evers and AG Kaul expressed support for medical marijuana, so this appendix is very important and relevant
 - b. Add a box at bottom of appendix – indicating “at the time of publication, marijuana is illegal in Wisconsin and federally (this also would not apply to individuals who hold federal contracts – pilots, truck drivers, etc.) – marijuana is legalized in neighboring states in these ways (MN, IL, MI). Employers should therefore assess what the needs of their specific industries, businesses, organizations are and what the safety considerations are to determine the best policy on marijuana use.”
5. Rest of Report
 - a. **Allison: will find better images for cover page**
 - b. **DECISION: New title – “Substance Use and the Wisconsin Workforce: Analysis and recommendations for reducing and addressing alcohol and drug use in the Wisconsin workforce.”**
 - c. **Add some text in Executive Summary** – stating that “given the size of the workgroup and the scope of this topic, all of the recommended topics were considered but for the scope of this report, these primary topics are what rose to the top as the most important to address and, as such, are what recommendations were decided on and captured in this report.”
 - d. Add acknowledgements for those who contributed in a small way – get this info from Allison or Chris.
 - e. BACKGROUND
 - i. Start with substance use in Wisconsin is an issue
 - ii. This report focuses on the workforce – as an employer, you have a place at the table for this – because: xyz
 - iii. Report also targets state agencies that impact the workforce – you have a seat at the table because: xyz -- part of the broader solution and can be valuable partners in addressing substance use community-wide
 - iv. Keep 4th paragraph and then flesh out background section to include other reasons

- v. Will go back and forth between “Substance Use” and “substance use disorder” in report – pull definitions from Surgeon General report – create a glossary; define substance (GLOSSARY will go in after executive summary)
- vi. Add in some language explicitly stating the connection between “treatment and recovery support also serves as a preventive measure to relapse, onset of a diagnosable SUD”
- vii. CHRIS: will add a paragraph on Prevention**

f. EXECUTIVE SUMMARY

6. Next steps and action items:

EVERYONE WILL COMPLETE THEIR SECTIONS AND MAKE CHANGES BY WEDNESDAY – END OF DAY – AND SEND TO CECIE.

CECIE WILL COMPILE FULL REPORT AND MAKE BIG CHANGES WEDNESDAY NIGHT

DHS STAFF WILL WORK ON FINALIZING THE REPORT ON THURSDAY/FRIDAY

Report goes out to Prevention Committee members on Friday.

Prepared by: C.Culp on 4/5/2019.

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

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:
Workplace Prevention Ad-Hoc Committee**

May 8th, 2019
Family Health Center
Marshfield Dental Center
1307 N. St. Joseph Avenue
Marshfield, WI 54449
10:00AM – 3:00PM

MEETING AGENDA

1. Welcome and Introductions.....Jill Gamez, chairperson
2. Approval of previous meeting minutes.....members
3. Public Comment: The committee will accept comments from the public relating to any committee business
4. Review Prevention Committee meeting and comments.....members
5. Work on revisions.....members
6. Future Ad Hoc Committee Meeting Dates and Agenda Items

Next Meeting TBD

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

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

<https://scaoda.wisconsin.gov>

Overview of the 2019 Behavioral Health Needs Assessment

The 2019 Behavioral Health Needs Assessment is comprised of two components. The first is a secondary data analysis that is a shortened version of the traditional Needs Assessment report that is written every 2 years and will focus on the available data regarding the prevalence of MH/SU disorders, numbers served and unmet need, and workforce capacity. The analysis will involve county Program Participation System (PPS) data, Medicaid data, commercial insurers' data from the Wisconsin Health Information Organization (WHIO), National Survey on Drug Use and Health (NSDUH) data, and a variety of other sources.

The second component is a mixed-method evaluation of the current functioning of the behavioral health system which is being conducted by the UW Population Health Institute (UW-PHI) in three parts: key informant interviews, a broadly deployed statewide survey and a series of consumer focus groups. Each are described in further detail, below.

The design and tools selected were developed in collaboration with an advisory team internal to the Division of Care and Treatment Services (DCTS). The diverse team included DCTS management, staff with MH/SU clinical experience, MH/SU Planners, MH/SU evaluators, the Special Populations Coordinator, and consumer advocates.

Key Informant Interviews

With the guidance of an internal advisory team, 43 key stakeholders were identified for 1:1 interviews. These stakeholders primarily consist of providers and administrators. The list of stakeholders was curated to provide a balance of provider perspectives between Mental Health and Substance Use services, experiences in urban vs rural areas, experience with the youth vs adult arms of the system, understanding of the roles of the public vs private behavioral health services, and state vs local perspectives.

Online Survey

After a review of the existing literature on surrounding states behavioral health gaps analysis, a list of 50 possible survey questions were refined and reworded with the help of the DCTS advisory team. After a brief period of piloting the tool with a small group of providers, invitations to complete the survey were deployed broadly to public and private providers, DHS advisory committees, and advocacy groups within the behavioral health field using a variety of listservs.

Consumer Focus Groups

UBUNTU Research and Evaluation is a learning organization run by Black women who use liberation and beloved community frameworks to evaluate, facilitate, and strategize with individuals, organizations, and communities. UBUNTU was subcontracted with UWPHI to recruit and conduct 8-10 consumer focus groups with communities identified as historically most negatively impacted by gaps in the behavioral health system (e.g. Black/African Americans, Tribal

communities, LGBTQ youth, (transgender, intersex, nonbinary and gender nonconforming) TING individuals, Deaf and Hard of hearing individuals, Hmong, Latinx) across the state of Wisconsin. Each focus group will be audio recorded and subsequently transcribed by a third party subcontracted by UBUNTU. The third party is bound by a non-disclosure agreement to protect participant's reasonable notion of confidentiality.

Status of Data Collection as of May 20th, 2019

Key Informant Interview Status:

As of May 20th, UW-PHI and UBUNTU have conducted interviews with 36 behavioral health administrators, providers, and advocates around the state. Every potential interviewee received an introductory email including information about the study and an invitation to participate. Some individuals received additional follow-up emails and calls if they did not respond to the initial invitation. In all, we have been unable to reach 7 of the individuals originally referred to us for interviews. The rest have successfully completed interviews with one of our UW-PHI or UBUNTU team members.

Although the majority of this work is complete, three interviews of individuals from the northwest and center (i.e. Adams County) of the state are still forthcoming. Information from these additional interviews will be integrated into later phases of analysis. Below is a table summarizing information about the participants that we have reached so far.

	BH system focus			Ages served			Population density*		
	MH	SU	MH & SU	Youth	Adult	Y&A	Rural	Urban	R&U
TOTAL Interviewed (N=36)	10	8	18	7	12	17	6	8	6
State DCTS staff (n=7)	2	3	3	1	5	2	N/A	N/A	N/A
Other state agency staff (n=7)	1		6	1		6	2	1	2
County BH admins (n=4)			4			4	1	2	1
County BH program managers (n=2)			2			2	1	1	
Direct providers (n=9)	4	3	2	4	4	1	2	4	3
Advocacy agencies (n=6)	3	2	1	1	3	2	N/A	N/A	N/A

* Data not available for staff working statewide. For this variable, n=20.

Focus Groups Status:

UBUNTU has reached out to various organizations throughout the state in order to coordinate focus groups with the targeted populations. This process entails relationship building with organization and discussing the mental health gaps study and answering questions. UBUNTU aims to make each focus group meaningful and responsive to each group of consumers by adjusting protocols and activities and subcontracting interpreters to facilitate.

Completed:

1 focus group with Hmong elders in Wausau May 4th (5 adults)

Scheduled:

May 30th- 1 focus group with Hmong youth (Milwaukee)

June -1 focus group with Black youth (Milwaukee)

June 19th- 1 focus group with Black trans women (Milwaukee)

June 4th/June 20th- 2 focus group with Spanish-speaking adults (Milwaukee)

June 15th- 1 focus group with Hmong elders (Wausau)

Coordinating:

LBGTQ+ adults (Green Bay)

Refugee population (Milwaukee)

Evaluative Questions Guiding Selection of Methodology and Analysis:

What are the major systems-level gaps in behavioral health services across the state of Wisconsin? Are there areas/regions wherein the gaps are particularly pronounced? Are their populations that are particularly underserved by the system? Are there specific services or positions that are particularly absent, inaccessible or inadequate? What are the perceived causes/sources of the gaps? How and in what ways does implicit bias play a role in producing these gaps? In what ways should the system prioritize changes according to administrators, providers, and consumers?

Data Analysis Plan

Qualitative data generated by the key informant interviews is analyzed by four independent coders using a balance of deductive coding (derived from the evaluation questions) and inductive coding (themes emerging from iterative review of participant reflections and member checked by the internal review group). These codes are then applied to analyze the responses to the open-answer questions embedded in the online survey. The themes that emerged will subsequently member checked by the internal review group and our preliminary findings summarized below.

The transcriptions of the consumer focus groups will be coded by UBUNTU's evaluation team through two methods: analytic memos and coding. Coding will occur in two phases: open coding and axial coding. The facilitator will lead the data analyzing process and use peer reflection with other members of the research team to provide a critical lens on the analysis process and add a third party view on the data in relation to the guiding evaluation questions.

FFY 2018-19 SABG Priorities and Performance Indicators

Priority No./Description	Performance Indicators	Baseline Measure	Second-Year Target	Responsible Staff
#1) Prevent TB transmission among persons who inject drugs	Rate of treatment agencies in compliance with TB screening, information and referral vs. total certified agencies	2015: 4 agencies issued citations out of approx. 300 (98.7 in compliance)	2017 or 2018: 5 or fewer agencies will receive citation	Mike Derr/DQA
#2) Increase prevention, outreach & treatment for persons who inject drugs	No. of annual treatment admissions of persons who inject drugs w/ county-authorized providers.	2015: 2,292 treatment admissions of persons who inject drugs w/ county-authorized providers	2017: Min. of 2384 annual treatment admissions of persons who inject drugs w/ co. authorized providers	Kate Rifken; Beth Collier
#3) Improve access to recovery-oriented SUD services for special populations	1) Pct. of persons receiving SUD treatment who are from underserved pop. group, as compared to portion of general pop. that is comprised of that group	2015: 18.8% of persons receiving SUD treatment were from underserved pop. group (18.1% of general pop. is from sub-groups)	2017: 19.5 of persons receiving SUD treatment are from underserved pop. group	Chris Keenan
	2) No. of trainings/TA/consultation sessions or modules provided to service providers and special pop. communities focusing in on increasing access to culturally-appropriate services	2016: 3 training, TA and consulting sessions were provided to special pop. communities or service providers	2018: A min. of 6 trainings, TA or consulting sessions & modules to be provided to special pop. communities or service providers	Mai Zong; Bernestine Jeffers
#4) Reduce youth access to tobacco and maintain retail outlet non-compliance rate under 10 percent	Proportion of successful purchases to tobacco products by youth	2015: Rate of success tobacco purchases by youth was 7.2%	2017: Rate of successful tobacco purchases will be less than 10%.	Mike Derr; Nancy Michaud
#5) Increase no. and quality of SUD services targeting pregnant women & women w/ dependent children (PWWDC)	No. of counties/tribes receiving training and TA on EBPs and SUD treatment for PWWDC	2015-16: 5 counties/tribes received training and TA .	2017-18: 5 additional counties/tribes receiving training and TA in '16-'17 have begun implementing at least one EBP.	Bernestine Jeffers

FFY 2018-19 SABG Priorities and Performance Indicators

Priority No./Description	Performance Indicators	Baseline Measure	Second-Year Target	Responsible Staff
#6) WI will expend > 20% of SABG funds on primary prevention services	Pct. of SABG funds expended on primary prevention services	FFY 2014 award: 24.6% of funds expended on primary prevention services, training and TA	FFY 2016 award: At least 20% of funds to be expended on primary prevention services	Allison Weber; Mike Derr
#7) Reduce rate of adult and youth binge drinking.	1) Pct. of adults (ages 18-55) who report binge drinking (consuming 5 or more beverages w/in past 30 days)	2015: 22.9% of adults reported binge drinking	2017: Pct. of adults reporting binge drinking will not exceed 22.0%	Kate Rifken
	2) Pct. of youth (ages 12-17) who report binge drinking	2014: 7.1% of youth reported binge drinking, exceeding national avg of 6.2%	2016: Pct. of youth binge drinking reported will not exceed national average	Kate Rifken; Allison Weber
#8) Prevent misuse and abuse of opiates in order to reduce no. of opiate-related deaths	1) No. of opiate related deaths will decline	2015: 614 opiate-related deaths	2017: No. of opiate-related deaths will decrease by at least 5% over 2016 level.	
	2) No. of persons misusing opiates who received county-authorized treatment services annually	2016: 4156 persons received county-authorized treatment for opiate-related harms	2018: No. of persons receiving county-authorized treatment will increase by 10% over 2016.	Kate Rifken; Amanda Lake Cismesia
	3) No. of persons receiving training or education on EBPs for opioid use disorder prevention/treatment	2016: 3966 persons received training or education on EBPs	2018: At least 4000 persons will receive training or education on EBPs	Kate Rifken; Amanda Lake Cismesia
#9) Expand use of EBPs for meth addiction to prevent addictions and misuse	Increase no. of persons admitted to county-authorized and other programs for meth treatment	2016: 947 persons received county-authorized meth treatment	2018: No. of persons receiving county-authorized meth treatment will increase by at least 10% over 2016	Kate Rifken; Dennis Radloff

FFY 2018-19 SABG Priorities and Performance Indicators

Priority No./Description	Performance Indicators	Baseline Measure	Second-Year Target	Responsible Staff
#10) Increase capacity of MH and SUD system providers to expand use of EBPs	1) Unduplicated no. of DATA-waived, federally approved buprenorphine prescribers in WI	March 2017: There were 520 buprenorphine prescribers in WI	March '19: No. of buprenorphine prescribers will increase by at least 2% from March '18 levels.	Kate Rifken
	2) Implement MDFT training through Youth Treatment Implementation Grant	2017: WI awarded Youth Treatment Implementation Grant to provide MDFT training	FY 2019: WI will continue providing MDFT training to 4 sites selected in 2018, conduct a train-the-trainer	Jason Cram (?)
	3) Pct. of primary prevention programs implemented by counties/other providers that are evidence-based	2015: 76 providers implemented 235 primary prevention programs; of those, 190 (81%) were EBPs	2017: At least 87% of primary prevention programs are EBPs	Allison Weber
#11) Increase amount of training and TA to MH and SUD professionals to increase no. of providers and capacity of provide effective services	Implementation of the 4 strategies: (a) Minority Leadership Initiative; (b) Dinner with the Docs; (c) implement CPCP; (d) expand training and TA for SA provider clinical supervision	FFY 2017: Four strategies were identified for development and implementation	FFY 2019: A min. of 15 training & education events are held that incorporate one or more of the 4 identified strategies.	Bernestine Jeffers; Amanda Lake Cismesia;
#12) Increase use of EBP services for persons in contact with criminal and juvenile justice systems	No. of persons participating in a Treatment Alternative Program (TAP)	2016: 496 persons participated in a SABG-funded TAP	2018: A min. of 547 persons will participate in a TAP (10% increase over 2016)	Becci Main
#13) Increase no. of certified peer specialists (CPS) in WI	No. of CPS in Wisconsin	May 2017: There were 410 CPS in WI	May 2019: An additional 60 persons will become CPSs.	Kenya Bright



Mission



Wisconsin Community Services, Inc. (WCS) has been providing the Community Improvement and Job Training (CIJT) Program since 2014.

The purpose of the WCS CIJT Program is to rebuild and strengthen Milwaukee's Harambee, North Division and surrounding neighborhoods by providing gang prevention and substance abuse prevention programming for at-risk youth and young adults ages 16-23.

The mission of the WCS CIJT Program is to help young adults, ages 16-23, recognize their own self-worth and prevent involvement in negative behaviors, such as crime, gang activity, and alcohol or drug use. The program achieves this mission by advancing participants towards self-reliance through: Education, Employment Training & Placement, AODA Education and Counseling, Positive Social Connections (groups, workshops, social outings, and community service), Other Supportive Services, One-on-One Mentoring, and Continuous Interaction with Program Staff.



Target Population & Location

Because of the high rates of poverty and low levels of educational attainment in the target areas, many of the youth and young adults are at high risk to become victims of or involved with violence and/or crime. Below are two stories from individuals served by CIJT in these neighborhoods. Note the risk factors they faced, how they overcome these difficult barriers and the part that CIJT played.

Dacia:
A single teenage mother who was **struggling with resources** and **not trying to go to school**, she **dropped out of traditional high school** and with encouragement from CIJT staff, **enrolled in an evening HIGD program**. Using our employment services, Dacia was able to **secure employment** with a local retail store. Finding it **difficult to make it to work each school day**, she **asked for transportation assistance**, and CIJT was able to help. Throughout her journey, she stayed connected with CIJT, and we were able to deliver needed services at the different stages in her life.

Kashawn:
Kashawn was a **youth gang member** who **would not leave the streets alone**. He **used marijuana heavily** and was in **denial**. He was always **willing to complete work** when it was assigned. When involved in **structured activities**, he was one of the **best to take initiative**. He sometimes needed to be reminded to **rehabilitate his criminal record** and in the **community** over time, **gang members on the block recognized him and tried to call him over**. **WCS staff intervened and reminded him about his work ethic**, he had a **look of pride on his face** when he told them, "I can't find a work right now."

*Not their real names

The WCS CIJT Program is located at 642 W. North Avenue in Milwaukee's central city. While the office is located in the Harambee neighborhood, it is on border of one of Milwaukee's most challenged neighborhoods - North Division.







Education & Employment Counseling

Education

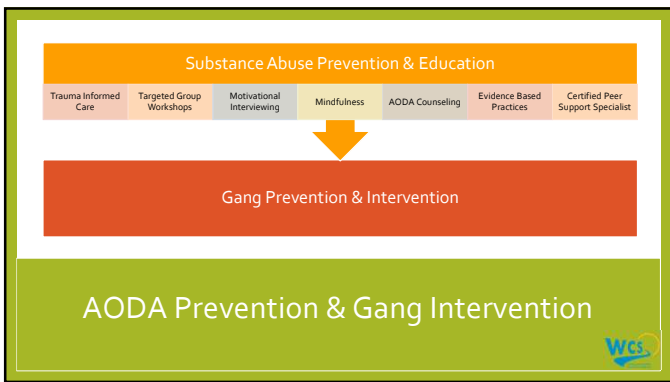
- Career Pathways
- GED/HSED

Employment Readiness

- Job Readiness Workshop
- Vocational Training

Entrepreneurship

WCS



Substance Abuse Prevention & Education

Trauma Informed Care Targeted Group Workshops Motivational Interviewing Mindfulness AODA Counseling Evidence Based Practices Certified Peer Support Specialist

↓

Gang Prevention & Intervention

AODA Prevention & Gang Intervention

WCS



Positive Social Connections, Supportive Services, & Mentoring

COMMUNITY SERVICE PROJECTS CULTURAL & COMMUNITY OUTINGS ONE ON ONE MENTORING


LIFE SKILLS DRIVER'S LICENSE RECOVERY

WCS



THANK YOU

Questions?



Waukesha County's WI-PDO Grant Project

John Kettler MS, CSAC, LPC, ICS
Felicia Behnke MSW, LCSW, SAC-IT

June 7th, 2019

WCDHHS WI-PDO Grant Project: History

Waukesha County Department of Health & Human Services (WCDHHS) awarded a **\$225,522** Wisconsin Prescription Drug/Opioid Overdose-Related Deaths Prevention Project (WI-PDO) Grant from WI Department of Health Services (DHS) through Substance Abuse and Mental Health Services Administration (SAMHSA)

www.waukeshacounty.gov/overdoseprevention

WCDHHS WI-PDO Grant Project: History


Start Up: planning, contracting, creating policy, and implementation

During the 2017 SAMHSA National Prevention Week: WCDHHS holds news conference to kickoff WI-PDO Grant activities

During the 2018 SAMHSA National Prevention Week: WCDHHS holds news conference to honor lives saved by planting trees

During the 2019 SAMHSA National Prevention Week: WCDHHS holds news conference to honor lives saved by proclaiming National Prevention week.

WCDHHS WI-PDO Project: Grant Objectives



- ✓ Identify Risk Factors & Protective Factors in Waukesha County through collaboration with DHS & UW Population Health Institute
- ✓ Conduct community-level Naloxone trainings and distribute free kits
- ✓ Conduct prevention education sessions throughout Waukesha County
- ✓ Provide outreach to individuals, families, & providers to connect them with support, treatment & resources

Community Naloxone trainings

- Collaboration with contracted agencies who provide naloxone trainings
- Train the trainer
- Each agency has their own Standing Order
- Paperwork- Pre and Post Test
 - UW Population Health Institute

Community Naloxone trainings continued...

- **Target groups for naloxone trainings:**
 - People who are using opioids
 - Family Members
 - First Responders
 - Community Members
- **Training includes:** how to use naloxone, signs & symptoms of opioid overdose, who is at risk for overdose, what an opioid is, warm handoff to first responder if naloxone is used, naloxone use report

Community Naloxone trainings continue...

- Website
- Calendar
- Community Partners
- Monthly Trainings

Nasal Naloxone Kits

- MOU with a pharmacy for Nasal Naloxone purchase
- **Nasal Naloxone Kit contents:**
 - 1 box of NARCAN® (naloxone HCl) Nasal Spray
 - which includes 2 doses of 4 mg naloxone
 - 1 pair of Nitrile Gloves
 - 1 Mask
 - Kit cards (includes: where to get refill, pregnancy services, Good Samaritan Law, Act 194/33, Treatment, Where to get tested)
 - Naloxone Use Report

Intramuscular (IM) Naloxone Kit

- MOU with a pharmacy for purchase of Intramuscular Naloxone and Syringes
- **IM Kit contents:**
 - 5 vials of 0.4mg/1 ml single dose Naloxone Hydrochloride Injection, USP
 - 5 syringes- 3ML LL SYRNG MIS 23GX1
 - 1 pair of Nitrile gloves
 - 1 Mask
 - Kit cards (includes: where to get refill, pregnancy services, Good Samaritan Law, Act 194/33, Treatment, Where to get tested)
 - Naloxone Use Report

Opioid Awareness & Prevention Training

- Education about Opioid misuse, signs and symptoms of overdoses, locking up medications, who is at risk of overdose, what is an Opioid
- No Naloxone at these trainings
- Community presentations (e.g., churches, agencies, etc.)
- General education about opioid use disorders

Outreach

- Connecting individuals to support, treatment, & resources
- Outreach can be done with survivors of overdose, family members, providers etc.
- Survivors and family members are contacted within 72 hours of the overdose
- Created Data collection
- Collaboration with Mobile Crisis Unit, Police Departments, community members, and agencies

WCDHHS WI-PDO Project: 5/1/2017 through 5/1/2019 Naloxone Training

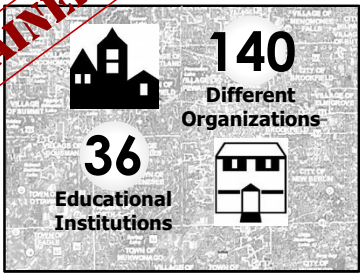
282 Trainings 3,203 People

WCDHHS WI-PDO Project:
5/1/2017 through 5/1/2019

TRAINED

36
Educational Institutions

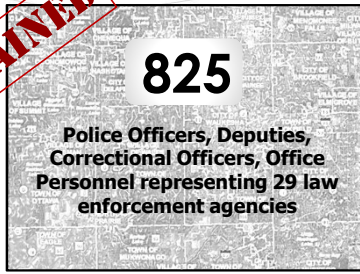
140
Different Organizations



WCDHHS WI-PDO Project:
5/1/2017 through 5/1/2019

TRAINED

825
Police Officers, Deputies,
Correctional Officers, Office
Personnel representing 29 law
enforcement agencies



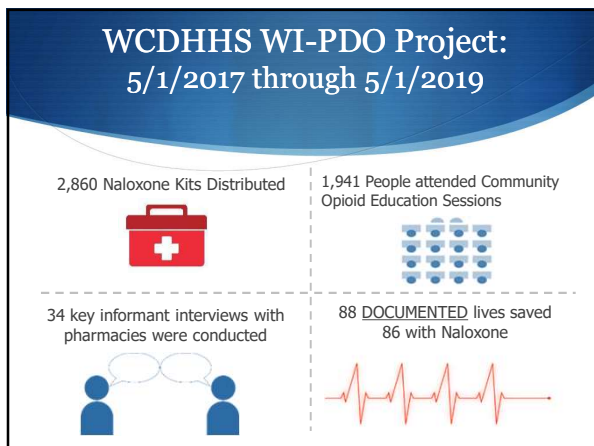
WCDHHS WI-PDO Project:
5/1/2017 through 5/1/2019

2,860 Naloxone Kits Distributed

1,941 People attended Community Opioid Education Sessions

34 key informant interviews with pharmacies were conducted


88 **DOCUMENTED** lives saved
86 with Naloxone



**WCDHHS WI-PDO Project:
Outreach
8/1/2019 - 5/1/2019**

283 people including survivors, family members, and providers

- 124 survivors of an overdose
- 73 family members
- 86 providers (therapists, doctors offices, recovery coaches, social workers, etc.)



Lessons Learned

- Buy-in
- Stigma
- Education
- Collaboration
- Culture Change

Next Steps

- Naloxone Training in Spanish
- Increasing focus on people who are using opioids
- Sustainability

Q & A

Contact information:

John Kettler jkettler@waukeshacounty.gov
Felicia Behnke fbehnke@waukeshacounty.gov



LEADING THE WAY

www.waukeshacounty.gov/overdoseprevention



Date: September 11, 2018

DCTS Action Memo 2018-12

To: County Departments of Community Programs
County Departments of Health and Human Services
County Departments of Human Services
Tribal Chairpersons/Human Service Facilitators

From: Patrick Cork, Administrator

Urban Youth Primary Substance Use Prevention Request for Applications

Document Summary

This memo outlines a funding opportunity for counties and tribes to provide primary substance use prevention services for youth in grades K-12 in urbanized areas. Up to four grants of \$50,000 each will be awarded. The deadline to apply for this funding is October 5, 2018.

Background

The Department of Health Services (DHS) receives Substance Abuse Prevention and Treatment Block Grant funding from the Substance Abuse and Mental Health Services Administration. Grantees must spend at least 20% of their Substance Abuse Prevention and Treatment Block Grant allotment on primary prevention strategies.

DHS provides funding for multiple substance use prevention programs. One program is currently titled “Inner City AODA Youth.” Presently, this program contracts with four counties. Each contract is \$50,000. The purpose of this program is to provide primary prevention services to youth in grades K-12. The current contracts have reached their maximum number of renewals. DHS intends to use this request for applications to provide \$50,000 grants to four counties or tribes. With this request for applications, the program will be known as “Urban Youth Primary Prevention.”

Eligibility for Funding

- The county or tribe must in whole or in part contain an urbanized area as defined by the [U.S. Census Bureau](#) and the service being provided must target the urbanized area.
- The population being served must be youth in grades K-12.
- The service provided must adhere to [one or more of the six primary substance use prevention strategies](#) endorsed by Substance Abuse and Mental Health Services Administration.
 - Information dissemination
 - Education
 - Alternatives
 - Problem identification and referral
 - Community-based process
 - Environmental

- The county or tribe is in the process of or has completed a [Strategic Prevention Framework](#) that includes youth substance use primary prevention.
- The county or tribe must utilize an evidence-based curriculum or model that enhances protective factors for youth in grades K-12 and reverses or reduces substance use risk factors for this population. The Substance Abuse and Mental Health Services Administration [Evidence-Based Practices Resource Center](#) and the [National Institute on Drug Abuse](#) are two sources for information regarding evidence-based practices.

Application Design

All content created for the application must be typed in single space format using 12-point Times New Roman font. All pages should have one-inch margins. Applications will be reviewed and scored by an evaluation committee. Applicants may not contact members of the evaluation team without the contract administrator's written approval.

Application Parts

- **Cover page (Pass/Fail):** One page that lists the name of county or tribe applying for funding with relevant contact information including subcontract contact information if applicable.
- **Abstract (10 points):** No more than two paragraphs that include a description of the project details with a specific focus on the target population and program design.
- **Project narrative (50 points):** No more than six pages organized according to the following headings:
 - **Organization experience and capacity:** Describe the experience the organization and, if applicable, any subcontracted organizations have in providing primary substance use prevention services. Additionally, provide a description of the organization's capacity to provide the intended strategy and practice.
 - **Geographic eligibility:** Describe how the service area meets the definition of an urbanized area.
 - **Target population:** Describe the specific target population intended to be served, including specific demographic characteristics. Describe how this target population resides in the urbanized area.
 - a. **Statement of need:** Provide statistical evidence of why the target population who resides in the urbanized area is in need of primary substance use prevention services. Possible sources of information include:
 - i. [Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016, P-45718-16](#)
 - ii. [County Health Rankings](#)
 - iii. [National Survey on Drug Use and Health](#)
 - iv. [Wisconsin Office of Children's Mental Health – 2017 Report](#)
 - b. **Strategic Prevention Framework:** Describe the progress made in completing a [Strategic Prevention Framework](#) that includes youth primary prevention.
 - c. **Primary prevention strategies:** State the specific [primary prevention strategy/strategies](#) selected and how they will be addressed.
 - d. **Evidence-based practice:** Describe the evidence-based practice that will be used to address the primary prevention strategy with the target population. The evidence-based practice must be applicable to the target population. In the description, provide citations or links to the specific evidence-based practice.
 - e. **Program design:** Describe how the program will be organized and implemented, including duration, projected enrollment, description of outreach activities, service locations, etc.

- f. **Evaluation:** Describe evaluation strategies that will be used to determine if the intended outcomes of the evidence-based practice are being met.
- o **Contract Application (20 points):** Complete the [DCTS Annual Grant/Contract Application, F-21276](#) utilizing SMART Objectives (see: [Performance Measures and SMART Objectives Handout, P-00620](#))
- o **Budget Worksheet (20 points):** Complete the [DCTS Summary Line Item Budget, F-01601](#).

Application Process

- Applications must include:
 - o The pieces listed in the Application Design section.
 - o A completed [Certification Regarding Debarment and Suspension, F-01788](#)
- Applications must be received by October 5, 2018, at 3:00 p.m. Late applications will not be considered. A date of mailing or postmark is not sufficient.
- Applicants must submit one signed original copy, three copies of the original copy, and one unprotected electronic storage device (example: thumb drive) containing all of the application materials in their original format (not PDF). Use the appropriate address below. Email or fax submissions are not acceptable.

<p>Shipping Company Department of Health Services Attn: Jason Cram 1 W. Wilson St. Room 951 Madison, WI 53703</p>	<p>USPS Department of Health Services Attn: Jason Cram 1 W. Wilson St., Rm. 951 PO Box 7850 Madison, WI 53707-7850</p>
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Funding Terms and Conditions

- The initial contracts resulting from this request for applications will be for a period of one year from January 1 through December 31, 2019.
- Each of the four one-year contracts will be \$50,000.
- The contracts resulting from this request for applications will be stand-alone contracts for 2019. These awards will not be made as an appendix to the state-county contract for 2019.
- There is no carryover funding as part of this opportunity. All funds must be spent during the contract period.
- There is no match requirement for these contracts.
- The applicant must adhere to the Substance Abuse Prevention and Treatment Block Grant funding restrictions. (see: [Using Substance Abuse Block Funds, P-01230](#)).
- The contracts resulting from request for applications will be eligible for four additional one-year renewals by mutual agreement and based on performance for a possible total of five years of funding. Subsequent annual funding will require at a minimum a new contract application and budget.
- Counties or tribes awarded one of the four contracts must report client-level data and expenditures through the Program Participation System and the Substance Abuse Prevention Services Information System.
- Counties or tribes awarded one of the four contracts must submit semiannual performance reports.

DHS reserves the right to reject any and all applications. DHS may negotiate the terms of the contract, including the award amount, with the selected applicant prior to entering into a contract. If contract negotiations cannot be concluded successfully with a recommended applicant, DHS may terminate contract negotiations.

All questions about this request for applications must be submitted by email to Jason Cram at jason.cram@dhs.wisconsin.gov. Questions submitted by phone will not be answered.

CENTRAL OFFICE CONTACT

Jason M. Cram, M.P.A.
Bureau of Prevention, Treatment and Recovery
Division of Care and Treatment Services
Department of Health Services
1 W. Wilson St., Rm 951
Madison, WI 53703
608-261-9046
jason.cram@dhs.wisconsin.gov

Memo Websites

[DCTS Action Memos](#)

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[DCTS Information Memos](#)

DCTS Information Memos are posted online in PDF format.

[DCTS Action and Information Memos Email Subscription Service](#)

Receive an email each time a new memo is released. This email will include a link to the online version of the memo.

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

June 7, 2019 SCAODA Meeting

1.) 2019 Wisconsin Statewide 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

For more information about the conference please go to:

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

For questions please contact, Raina Haralampopoulos at Mary.Haralampopoulos@dhs.wisconsin.gov

2.) Region 5 Strategic Planning Summit for Tribal Wellness and Opioid & Substance Abuse Response

July 9-11 at the Radisson Blu Mall of America in Bloomington, MN

For more information please contact: Tyler LaPlaut, tlaplaut@glitc.org

3.) Mid-Year Training Institute – CADCA

July 14-18 at the Gaylord Texan in Dallas, TX

Registration: <https://www.cadca.org/myti2019>

4.) National Drug Endangered Children Conference

July 16-18 at the La Crosse Center in La Crosse, WI

Registration: <https://www.nationaldec.org/>

5.) National Prevention Network Conference

August 27-29 in Chicago, IL

Registration is Open: <http://nnpconference.org/registration>

6.) National Dialogues on Behavioral Health

November 3-6 in New Orleans



WISCONSIN DEPARTMENT of HEALTH SERVICES

Division of Care and Treatment Services

Wis. Admin. Code ch. DHS 75 Listening Sessions

The Department of Health Services is [revising Wis. Admin. Code Ch. DHS 75](#), which establishes standards for community substance use disorder prevention and treatment services.

A core task of this project is to collect and evaluate input from substance use treatment providers throughout the state regarding proposed changes. Listening sessions have been scheduled to provide an opportunity for providers to submit comments for consideration.

Treatment providers, county behavioral health staff, tribal behavioral health staff, and other substance use treatment stakeholders are encouraged to submit ideas and comments regarding revisions at the listening sessions listed below or by email at DHSDCTSDHS75@dhs.wisconsin.gov.

When submitting comments, please reference the relevant section of [Wis. Admin. Code ch. DHS 75](#). Please also indicate whether the organization you represent currently holds Wis. Admin. Code ch. DHS 75 certification.

All of the listening sessions will have conference call capability for those not able to attend in person.

A public hearing will be held following completion of an initial draft of the rule. The public hearing is expected to be held in the spring of 2020.

Schedule

Tuesday, May 21, 2019, 1:00 p.m. to 3:00 p.m.: Eau Claire

Eau Claire County Human Services
721 Oxford Avenue
Eau Claire, WI 54703
Room GO52
Call-in: 1-877-820-7831, Passcode: 793544

Thursday, May 23, 2019, 12:00 p.m. to 2:00 p.m.: Green Bay

St. Mary's Hospital
1726 Shawano Avenue
Green Bay, WI 54303
Conference Room C
Call-in: 1-877-820-7831, Passcode: 793544

Monday, June 17, 2019, 1:00 p.m. to 3:00 p.m.: Milwaukee

Washington Park Senior Center
4420 West Vliet Street
Milwaukee, WI 53208
Main Hall
Call-in: 1-877-820-7831, Passcode: 793544

Thursday, June 20, 2019, 10:00 a.m. to 12:00 p.m.: Waukesha

Waukesha State Office Building
141 NW Barstow Street
Waukesha, WI 53188

Room 151
Call-in: 1-877-820-7831, Passcode: 793544

Thursday, June 27, 2019, 10:00 a.m. to 12:00 p.m.: Lac du Flambeau

Peter Christensen Health Center
129 Old Abe Road
Lac du Flambeau, WI 53548
Bev Bauman Community Room
Call-in: 1-877-820-7831, Passcode: 793544

Tuesday, July 16, 2019, 1:00 p.m. to 3:30 p.m.: Madison

Wisconsin Department of Health Services,
1 West Wilson Street
Madison, WI 53707
Room 751
Call-in: 1-877-820-7831, Passcode: 793544

Do not reply directly to this email message. If you have a question, email the [Division of Care and Treatment Services](#).

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This email was sent to michael.derr@dhs.wisconsin.gov using GovDelivery Communications Cloud on behalf of: Wisconsin Department of Health Services · 1 West Wilson Street · Madison, WI 53703





#HopeActLiveWI: Responding to Wisconsin's Opioid Crisis

Free Buprenorphine X-Waiver Training Series

The Department of Health Services has partnered with the Wisconsin Society of Addiction Medicine to increase treatment capacity for opioid use disorder through expanded prescribing of buprenorphine, one of three Food and Drug Administration-approved medications for the treatment of opioid use disorder.

In-person training sessions for health care providers eligible to prescribe buprenorphine are scheduled for the dates and locations listed below. Each session, when paired with an online session offered through the American Society of Addiction Medicine, provides the necessary education for participants to qualify for a waiver to prescribe buprenorphine as part of a medication-assisted treatment plan for opioid dependency. Course details are available on the [Wisconsin Society of Addiction Medicine's website](#).

Registration is open for all of these classes.

- [May 17, Stevens Point](#)
- [June 4, Wauwatosa](#)
- [June 28, Eau Claire](#)
- [July 16, Madison](#)
- [July 29, Appleton](#)
- [August 16, Wauwatosa](#)
- [August 27, La Crosse](#)

Other upcoming training events

- **June 11-12, 2019:** [Wisconsin Statewide Substance Use Prevention Training](#), Wisconsin Dells (Registration is open)
- **July 16-18, 2019:** [Wisconsin Alliance for Drug Endangered Children Annual Conference/National Alliance for Drug Endangered Children Annual Conference](#), La Crosse (Registration is open)
- **September 19-20, 2019:** [Crisis Intervention Conference](#), Wisconsin Dells
- **October 29-30, 2019:** [Mental Health and Substance Use Recovery Training](#), Wisconsin Dells

Do not reply directly to this email message. If you have a question, email the [Division of Care and Treatment Services](#). Visit the [DHS website](#) for more information on Wisconsin's opioid crisis.

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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.

