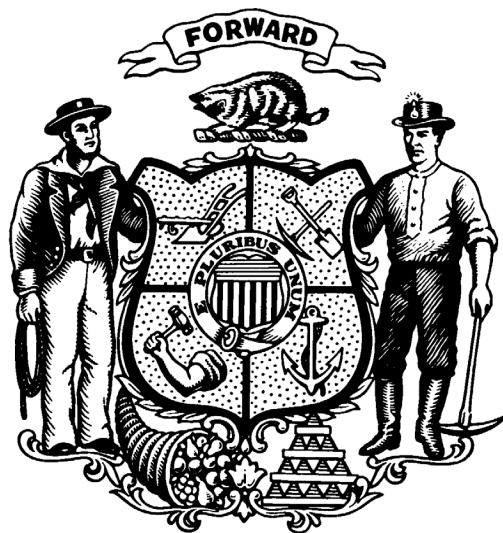


WISCONSIN STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE



**June 7, 2024
VIRTUAL
MEETING
(via Zoom)**

**Kevin Florek
Chairperson**

**Tony Evers
Governor**

Tony Evers
Governor



Kevin Florek
Chairperson

Jennifer Stegall
Vice Chairperson

Christine Ullstrup
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

Meeting of the State Council on Alcohol and Other Drug Abuse (SCAODA)

June 7, 2024

9:30 AM to 1:00 PM

<https://dhs.wisconsin.gov/j/1605250713>

Phone: 1-669-254-5252

Meeting ID: 160 525 0713

AGENDA

1. **Call Meeting to Order**..... Kevin Florek, SCAODA Chairperson
 - a. Welcome and Introductions
 - b. Review and approval of the minutes of March 8, 2024
 - c. Public Comment: The Council will accept comments from the public relating to any SCAODA business
2. **Updates from the Wisconsin Council on Mental Health**.....Kimberlee Coronado, WCMH Co-Chair
3. **SCAODA Committee Updates**
 - a. Executive Committee.....Kevin Florek
 - b. Diversity Committee.....Christina Malone and Denise Johnson
 - c. Intervention and Treatment Committee.....Roger Frings and Sheila Weix
 - d. Planning and Funding Committee.....Christine Ullstrup and Beth Collier
 - e. Prevention Committee.....Stacy Stone and Chris Wardlow
 - i) Wisconsin Alcohol Policy Project.....Felice Boris-Rudin
4. **Agency Reports:**
 - a. Department of Health Services.....Paul Krupski
 - b. Substance Use Initiatives.....Michelle Haese
 - c. Department of Safety and Professional Services..... Sarah Barry
 - d. Other Agencies.....Agency Designees
5. **Updates from the Bureau of Prevention Treatment and Recovery**.....Teresa Steinmetz
6. **Treatment Atlas Presentation**.....Kelsey Knowles
7. **Call for future SCAODA agenda items**.....Kevin Florek
8. **Adjourn**.....Kevin Florek

The purpose of this meeting is to conduct the governmental business outlined in the above agenda.

The Council’s primary function is providing leadership in Wisconsin on substance use disorder (SUD) issues, advising Wisconsin state agencies on SUD prevention, treatment, and recovery activities, and coordinating SUD 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, need an interpreter or translator, or need this material in another language or format, you may request assistance to participate by Kim Dawson at Kimberly.Dawson@wisconsin.gov or 608-261-0658.

OPEN MEETING MINUTES

Name of Governmental Body: State Council on Alcohol and Other Drug Abuse		Attending: Members in Attendance: Kevin Florek, Tina Virgil, Jennifer Stegall, Autumn Lacy, Jan Grebel, Subdhadeep Barman, Christine Ullstrup, Nichol Wienkes, Representative Dave Considine, Ann DeGarmo, Fil Clissa, Elizabeth Salisbury-Afshar, Denise Johnson, Christina Malone Guests: Chris Wardlow, Roger Frings, Hannah Huffman, John Achter, Lakesha J, Latisha Spence-Brookens, Sarah Johnson, Beth Collier, Terry Schemenauer, Michelle Devine, Tom Vonck, Felice Borisy-Rudin, Kathy Peterson, Liz Adams, Marcy Hulburt, Miah Olson, MJ Griggs Department of Health Services Staff: Kimberly Dawson, Ryan Stachoviak, Allison Weber, Hannah Foley, Holly Audley, Julie Nalepinski, Teresa Steinmetz, Michelle Haese, Leilani Nino, Nancy Michaud, Saima Chauhan, Cindy Matz, Leilani Nino, Annie Vulpas, Micah Nickey
Date: 3/8/2024	Time Started: 9:30 a.m. Time Ended: 12:51 p.m.	
Location: Online via Zoom		Presiding Officer: Kevin Florek

Minutes

1. Call Meeting to Order

K. Florek, SCAODA Chairperson, called the meeting to order at 9:32 a.m.

Review and approval of the minutes of December 1, 2023.

T. Virgil moved to accept the minutes. C. Ullstrup seconded the motion. Motion carried; minutes approved.

Public Comment

Miah Olson, Substance Use Disorder Counseling Department Chair at Fox Valley Technical College provided comment to the Council. M. Olson raised the issue that professionals with Substance Abuse Counselor In Training (SAC-IT) and Clinical Supervisor In Training (CS-IT) certifications who have left the profession are facing challenges re-entering. There is currently a limit on the number of times a SAC-it and CS-IT certificate can be renewed (twice), with no path to re-entry once renewals are exhausted, even for professionals who may have left to pursue additional education, or temporarily work in an adjacent field. The Council discussed this issue and had questions concerning the reasoning behind renewal limits; acknowledging the barriers they create, particularly given the high demand for Substance Use Disorder (SUD) Counselors. The Council is interested in inviting DSPS to the June 7th, 2024, SCAODA Council Meeting to provide context on this issue.

2. Updates from the Wisconsin Council on Mental Health

R. Stachoviak provided updates from the Wisconsin Council on Mental Health’s activities. The Council is working on strategic planning and considering how best to operationalize their plans. Additionally, the Council wants to change their chair composition. They currently operate with one chair and two-co chairs but want to switch to a tri-chair model. This change would require an update to the Council’s bylaws. The next Wisconsin Council on Mental Health Meeting will be held March 20th, 2024, and is open to the public.

3. Synar report and Tobacco 21 Presentation

Nancy Michaud, Youth Access Program Coordinator with Wisconsin Tobacco Prevention and Control Program, presented on the 2024 [Annual SYNAR Report](#). N. Michaud explained that each year, states are required to report on progress made in enforcing youth and young adult tobacco access laws and future plans to ensure compliance with the Synar requirements. The Synar amendment was enacted in the 1990s to require states to prohibit tobacco sale to minors, provide training to tobacco retailers, and maintain a retailer violation rate under 20%. Noncompliance can result in the loss of up to 10% of Substance Use Block Grant (SUBG) funding. The retailer violation rate is calculated via random, unannounced visits to retailers. These visits are done in partnership with the University of Wisconsin Survey Center. Through this partnership, 1,000 tobacco retail sites are inspected. Besides the annual Synar Survey, year-round compliance checks are conducted through Wisconsin Wins. Despite, year-round compliance checking, enforcement proves to be a challenge when there are 10 inspectors for roughly 7,000 tobacco retailers.

In previous years the retail violation has been well below the 20% limit, at 5.5%. However, the violation rate worsened when the federal legal age of tobacco sale was raised from 18 to 21 years old and was exacerbated by the pandemic - these two events impacted the tripling of violation rate (14.1%). This high rate has continued, with this year's Synar Survey indicating a 13.6% violation rate.

When the Federal Government enacted the Tobacco 21 law (raising the legal sales age to 21) on December 20, 2019, states were given a three-year grace period to align their state laws, without penalties on SUBG funding. Another one-year extension was provided, acknowledging the impact the pandemic had on state operations. The extension is set to expire on December 20, 2024, and Wisconsin has yet to amend existing state law to align with federal regulations.

The lack of alignment with federal law leads to confusion amongst the public, tobacco retailers, and those tasked with enforcement of tobacco laws. N. Michaud shared anecdotes ranging from sheriffs to municipal clerks, to tobacco retailers unwilling to observe federal Tobacco 21 laws due to the State's lack of adoption.

Additionally, noncompliance poses a risk for penalties to SUBG funding. If a state Tobacco 21 law is not adopted before December 20, 2024, Wisconsin is at risk of losing up to 10% of SUBG funding (~\$2.8 million).

Lastly, but most importantly, without a state Tobacco 21 law, we risk more young people being sold tobacco products, that could lead to a lifelong addiction to nicotine.

Wisconsin Wins continues to promote outreach via retailer education, compliance checks, community events, and a [Tobacco 21 media awareness campaign](#).

Following N. Michaud's presentation, the Council asked how best to support state Tobacco 21 efforts. N. Michaud stated that supporting legislation, and any effort that can promote the media campaign and educating the public. The Council discussed potential reasons why Tobacco 21 (previously passed by Assembly with bi-partisan support) was not voted on in the Senate. The Council discussed opportunities for increased political momentum.

4. Wisconsin Association of Sober Housing Presentation

Michelle Devine and Tom Vonck provided a presentation on the Wisconsin Association of Sober Housing (WASH). WASH was started in 2018 as Wisconsin's state affiliate of the National Alliance of Recovery Residences (NARR). WASH is tasked with certifying recovery residences statewide according to National Standards. They engage Recovery Residence Operators in ongoing quality improvement, providing training and technical assistance. Recovery Residences operate under many names (sober living, transitional house, ¾ house) and their purpose is to bridge from treatment to living independently in long-term recovery. These Residences acknowledge that bundling outpatient programs and housing

may not be aligned with individualized care nor person-driven recovery for all individuals. They identify four level of support ((1) Peer-Run, (2) Monitored, (3) Supervised, (4) Clinical) – with most organizations seeking WASH certification at levels 2 and 3. Presenters concluded with sharing opportunities for WASH to be a resource: Conversation partners, facilitating communication with residence operators, advising when implementing policy related to recovery housing, and providing technical support with DHS and county health departments.

In the Question & Answer portion of the presentation the Council asked how WASH compares to other state's certifications. Presenters responded that prior to its formation in 2018, WASH spent about 5 years visiting other state's certification teams to learn their processes. They found a wide range of state sponsored certification and compliance approaches.

Next the Council asked about options for individuals unable to pay. Presenters discussed the Recovery Voucher program funded by opioid settlement dollars, via Division of Energy, Housing and Community Resources (DEHCR) and Department of Administration (DOA). Residencies must apply for the voucher. The dollars then go to Recovery Voucher Administrators who act as the administrators on behalf of the resident. The voucher program has provided sponsorship, but still with some gaps in coverage. More information is available online:

<https://energyandhousing.wi.gov/Pages/AgencyResources/RecoveryVoucherGrant.aspx>. T. Steinmetz added that individuals can also be funded by their county or tribal system, so long as it's part of their treatment plan. This is another way for recovery to be paid for besides opioid settlement funded recovery vouchers.

The Council asked if Recovery Residencies are open to youth, or if they are only available to adults in recovering. Presenters responded, only adult.

The Council asked if Recovery Residences allow MOUD? Presenters responded that NAAR requires you to have policy to explain if you are able to support MOUD, but not all homes are certified.

T. Steinmetz, Bureau of Prevention Treatment and Recovery Director explained that in order for Department of Health Services (DHS) to have state oversight there would need to be legislative approval for oversight. DHS is not able to create state certification without legislation. There is however language for recovery centers receiving state or federal funding, that requires they be on the DHS Registry.

M. Haese, Director of Substance Use Initiatives in the Office of the Secretary, shared that DHS is collaborating with DOA on the \$2 million overseen by DOA, supporting people in recovery at risk of experiencing homelessness (Recovery Vouchers). M. Haese notes that litigation dollars have specific requirements; opioid settlement dollars are required to be used to support those with opioid use disorder, cannot be used for other substances use disorder. M. Haese suggests inviting a representative from DOA to speak at June 7th, 2024, SCAODA Council Meeting.

5. SCAODA Committee Updates

Executive Committee

K. Florek discussed Council engagement and asked for suggestions for building attendance and having a bigger voice. Council members are asked to email K. Florek at kflorek@tellurian.org. According to SCAODA bylaws (Article 3, Section 6) two absences without notice within a 12-month period will result in being contacted by Council Secretary to inquire about ability to continue serving.

R. Frings commented that attendance of 45-50 people says a lot about degree of interest, but urged Council to consider how momentum can be built beyond quarterly updates. R. Frings suggested attending conferences to increase visibility and continue issuing position statements sent to legislators. D. Johnson suggested using social media to post videos informing about SCAODA.

Diversity Committee

D. Johnson provided update that the Diversity Committee now has 12 members. The Committee is working on their strategic plan and altering their mission. They plan to invite several Council members to be involved in their next meeting. D. Johnson reminded the Council about the DHS 75 public hearing on social worker credentialing for SUD that afternoon and wanting to better understand Council's sentiments on the topic.

Intervention and Treatment Committee

R. Frings provided update that Intervention and Treatment Committee is collecting input on the impact of Medicaid unwinding. Anecdotally, Sheila Weix is noticing roughly 30% of clients are not re-enrolling (but some opting into private marketplace).

R. Frings also shared that a recent software upgrade resulted in the Wisconsin Prescription Drug Monitoring Program tool (ePDMP) not being up to date. S. Weix is in contact with DSPS to obtain more information about how the issue is being addressed.

In January, S. Weix reported that the 4th Hub and Spoke site had been selected under pilot program.

The Intervention and Treatment Committee continues to review their strategic plan and is preparing to present to the Council at the June 7th Meeting.

Planning and Funding Committee

Christine Ullstrup provided the update that the Planning and Funding Committee is accepting new members. The Committee recently met with Bill Hanna, DHS Medicaid Director to discuss the 1115 waiver.

The Committee continues to review their strategic plan and is preparing to present to the Council at the June 7th Meeting.

The Committee has one motion for review by the Council on page 89 of the meeting booklet. The Committee would like to request that SCAODA support legislation to raise legal age for selling tobacco to 21.

Chris Wardlow notes that the Council previously wrote a letter in support of Tobacco 21, after the motion was raised by Prevention Committee at June 2023 Council Meeting. C. Wardlow appreciates Planning and Funding Committee raising awareness to this issue again, to continue the political pressure.

J. Stegall adds that session is coming to an end and recommend the Council consider strategic timing in the legislative schedule to maximize efforts. J. Stegall, also suggests leaning on the co-sponsors in the Assembly who initially passed the bill. The Council discussed options for timing of the letter and ultimately decided the motion is not contingent on writing in a timeline. Executive Committee can be trusted in their determination of when to send the letter.

Motion: That SCAODA encourage legislation to raise legal age for selling tobacco in Wisconsin to 21

Kevin Florek moved to pass the motion.

Denise Johnson seconded the motion.

All in favor, none opposed. J. Grebel abstained.

Prevention Committee

C. Wardlow provided update that Committee is working on preventing youth access to hemp derivatives. The Committee continues to review their strategic plan and is preparing to present to the Council at the June 7th Meeting. The Committee is interested in providing recommendations for SCAODA to share with various agencies that receive budget recommendations. Felice Borisy-Rudin provided update that webinars are being held on the changes to alcohol licensing law.

6. Agency Reports

T. Steinmetz introduced Michelle Haese, Director of Substance Use Initiatives in the Office of the Secretary. M. Haese's predecessor, Paul Krumpksi will continue to attend SCAODA Council meetings and will provide DHS agency-level updates, while H. Haese will cover opioid-specific updates. M. Haese covered all updates today in P. Krumpski's absence. M. Haese's first update concerned Medicaid unwinding. Medicaid unwinding results from the fact that state agencies used temporary policies during pandemic to increase coverage but are now returning to normal (pre-pandemic) edibility criteria, by October 2024. The goal is to smoothly transition, and keep Wisconsinites covered. DHS remains committed to transparent data in this process and has an online [dashboard](#) reporting on changes in coverage.

Next, M. Haese provided additional updates on Recovery Vouchers. M. Haese explained that in 2022, Wisconsin received a settlement agreement totaling \$740 million, through 2038 in response to litigations. Act 57 – requires that 87 local government agencies receive 70% of the funding, with State of Wisconsin receiving the remaining 30%. The 30% allocated to the State is subject to an annual review process where materials are submitted by April 1 to the Joint Committee on Finance. This process does not apply to the 70% of funds issues locally. M. Haese shared that we anticipate additional settlement funds from Walgreens and Walmart to name a few. The settlement payments flux quite a bit and are subject to change. For example, one year may present \$30 million in funding, and the following year only \$8 million. This poses a challenge where services are needing to continuously be scaled up or down. This year we anticipate \$36 million in settlement funding. There is a focus to spend on ongoing investments that sustaining efforts, and to scale up investments that prove effective and beneficial. Decisions for how this funding is used is being largely driven by community feedback via listening sessions, surveys, and roundtables. Notably, Dose of Reality had an excellent turnout for a roundtable on how to spend settlement dollars. These roundtables were held in February 2024, in partnership with DOJ. The discussion generated ideas on ways to grow and overcome barriers. Individuals discussed what strategies are working and are saving lives – such as Public Health vending machines, syringe services, housing recovery vouchers, distribution of Narcan and fentanyl test strips, certified peer specialists and peer recovery coach trainings, and medication assisted treatment in jail. While these settlement dollars are funding important programs in community, M. Haese emphasized that there are no amount funds that mitigate the lives lost in the opioid epidemic.

Following M. Haese's updates, B. Collier asked how the \$2 million that was allocated for Medication Assisted Treatment (MAT) was awarded. M. Haese cannot yet speak to that because still in interagency agreement. T. Steinmetz clarified that funds did not go out for competitive bid, and also were not added to existing contract.

D. Johnson asked about establishing group meetings focused on underserved populations and wondered how the roundtables are reaching minority groups for their inputs. M. Haese responded that they've worked to advertise the roundtables widely and make opportunities accessible, however there are not certain groups or strategies that have been deployed.

T. Virgil commented that DOJ is happy to continue collaborating with strong partnership.

7. Updates from the Bureau of Prevention Treatment and Recovery

T. Steinmetz provided personnel updates: Kim Dawson (new Substance Use Planner, staffing SCAODA), Dan Bizjczak (stepped into Substance Use Section Supervisor), Amber Colby (new Opioid Response Unit Supervisor) Annie Vulvas (stepped into Substance Use Harm Reduction and Intervention Unit Supervisor). DCTS currently is hiring for Prevention Intervention and Recovery Services Section Supervisor.

T. Steinmetz reminded attendees about Act 222 – Public hearing at 1pm. T. Steinmetz clarified that Act 262 passed through legislation (allowing mental health clinicians to provide SUD support without any additional certifications). There were a few professions left out of that act. Act 222, building on Act 262, allowing advanced social works and independent social workers to provide SUD counseling. Please feel welcome to attend the public hearing or submit written feedback.

D. Johnson inquired about the purpose of the public hearing, given the act has already passed. T. Steinmetz explained that with Omnibus Rule, we are required to have a hearing, but also genuinely are interested to hear what the public think about this act. Once an act goes through legislation, we need to insert it into all administrative rule (in this case DHS 75). The Department needs to initiate once an act goes through.

Next, T. Steinmetz spoke about urgent care and observation centers, identifying that there is a gap in our crisis systems when we are not able to provide crisis support and urgent care all in one setting. A bill that addresses this has passed the Assembly and Senate. The next step is going to Governor's office for signature. With the rule making process, it will be some time before it goes into effect. Legally we cannot work on rules until a statement of scope is approved. There will be a period for public input.

Next, T. Steinmetz provided an update on Naloxone saturation planning. Wisconsin was chosen for naloxone policy academy at end of last year. This involved examining the existing naloxone saturation plan and gathering recommendations/improving plans for improving distribution. Wisconsin's plan support counties and tribes in creating their own Narcan distribution plans. In May, DHS will be hosting virtual sessions on these plans, open to all. After the virtual sessions, we'll host regional in-person events by invitation only with naloxone distribution agencies. These five regional events will have teams of 3-6 people, depending on location.

Next, K. Dawson provided updates on Substance Use Block Grant (SUBG). In September of 2023, the BPTR submitted the 2024-2025 combined plan and application for both the Mental Health Block Grant and Substance Use Block Grant, that document was provided to the SCAODA at that time and is available for continued review on the SCAODA website. On December 1, 2023, the BPTR submitted the annual report for both the MHBG and SABG. This coming September 1 the BPTR will be required to submit the annual application for the MHBG and SABG. This will be a shorter version of the application, often referred to as the mini-application, that states are required to complete the year alternate the larger application. BPTR will also provide this to SCAODA in the fall. Wisconsin is currently operating with a 2024 award of \$27,855,973 through the SABG and \$14,811,489 through the MHBG. K. Dawson asked for SCAODA's input on any additional information that DHS could bring to a future Council meeting. The Council had no further questions or requests.

8. Agenda items for June 7, 2024, Meeting

- Budget recommendations
- Committee presenting their strategic plans
- DOA to present on recovery voucher
- DSPS to present on SAC renewal limit

9. Meeting Adjournment

T. Virgil moved to adjourn.

C. Ullstrup seconded the motion.

All in favor. None opposed.

Meeting adjourned at 12:51 p.m.

Prepared by: Kim Dawson on 3/8/2024.

These minutes are in draft form. They will be presented for approval by the governmental body on: 6/7/2024

State Council on Alcohol and Other Drug Abuse (SCAODA)

Four-Year Strategic Plan: 2023-2027

SCAODA Mission Statement: Provide leadership and direction on substance use and misuse in Wisconsin by serving as the voice to whom the Governor, legislators, local coalitions, and media turn for guidance on substance use and prevention issues, and promote collaboration across multiple sectors to advance and monitor progress of SCAODA's goals.

SCAODA Primary Goals and Objectives for 2023-27

1. Change Wisconsin's cultural norms and policies to transform the state's substance use and misuse challenges into healthy outcomes.

Objectives:

- (a) Seek to reduce stigma associated with seeking and obtaining services for substance use and misuse.
- (b) Promote environmental policies to reduce substance use and create more support and understanding of those in recovery and those who need treatment.

2. Educate people of Wisconsin on the social, economic, and health impacts of substance use and misuse; as well as the benefits of effective prevention, harm-reduction, treatment, and recovery services.

Objectives:

- (a) The council will continue to fulfill its responsibility to provide leadership and coordination by promoting and advocating best-practices and policies for prevention, harm reduction, treatment, and recovery among all levels of government and in communities.

3. Advocate for policies, adequate funding, capacity, and infrastructure to implement effective outreach, prevention, harm reduction, treatment, and recovery services for all in need.

Objectives:

- (a) Expand prevention, treatment, and recovery interventions and supports across the lifespan.
- (b) Increase focus and resources for prevention, treatment, and recovery services for children, youth, transitional youth, and young adults
- (c) Continue revitalizing the Children, Youth and Family Treatment Sub-Committee.
- (d) Build awareness and capacity to identify and address the changing needs of older adults due to substance use and misuse.
- (e) Enhance and expand capacity within the substance use workforce to better understand and address the diverse needs of higher risk and underserved populations, including those with language and cultural barriers - as recommended in the CLAS.
- (f) Advocate for and support increased utilization of evidence-based interventions like SBIRT in schools, workplaces, health care, and communities.
- (g) Advocate for and support adoption of innovative policies and promising practices and programs in substance use and misuse prevention, treatment, harm reduction, and recovery.
- (h) Support and advocate for increasing the state excise tax on alcoholic beverages to the median tax level nationally, and increase the portion of tax revenue allocated for prevention, treatment, harm reduction, and recovery programs.

4. Reduce health disparities and inequities, recognize and rectify historical trauma, and address biases within systems, policies and practices.

Objectives:

- (a) Improve the effectiveness of substance use prevention, treatment, harm reduction, and recovery services in addressing the needs of higher risk and historically underserved populations.
- (b) Expand scope of prevention, treatment, harm reduction, and recovery services to be inclusive of populations most impacted by social drivers of health - including socioeconomic standing, zip code, legal status, and other health disparities.
- (c) Support research and identification of substance use and misuse risk and protective factors.
- (d) Advocate for and support the adoption of innovative and promising practices and programs across the continuum of care that fully integrate the National CLAS Standards.



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 of the State Council on Alcohol and Other Drug Abuse

February 20, 2024

1:00pm – 2:00pm

Meeting to be held via Zoom

Meeting URL: <https://dhs.wi.zoomgov.com/j/1611800455>

Meeting ID: 161 180 0455

Conference Call: 669-254-5252

AGENDA

- 1. Call to OrderKevin Florek
- 2. Review of November 7, 2023 Meeting Minutes.....Kevin Florek
- 3. Public Comment.....Kevin Florek
- 4. Discussion on social media for SCAODA Council and Committee engagement.....DHS Staff
- 5. Setting Agenda for March 8, 2024 Council Meeting.....Executive Committee
- 6. Adjournment.....Kevin Florek

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 Kim Dawson at Kimberly.Dawson@wisconsin.gov or 608-261-0658.

OPEN MEETING MINUTES

Name of Governmental Body: SCAODA Executive Committee			Attending: Kevin Florek, Jennifer Stegall, Christine Ullstrup, Ryan Stachowiak, Kim Dawson
Date: 2/20/2024	Time Started: 1:05 p.m.	Time Ended: 1:48 p.m.	
Location: Zoom			Presiding Officer: Kevin Florek, Committee Chair
Minutes			

1. Call to Order

K. Florek called the meeting to order at 1:05 p.m.

2. Review of November 7, 2023 Meeting Minutes

C. Ullstrup moved to approve the minutes.

J. Stegall seconded the motion.

Motion carried unanimously; minutes approved.

3. Public Comment

No public comment was made.

4. Discussion on social media for SCAODA Council and Committee engagement

K. Dawson discussed opportunities where DHS Communications can promote SCAODA Council and Committee business via social media, with one opportunity being to promote membership. DHS Communications often posts to promote open seats on boards and councils. If SCAODA has any membership openings, DHS social media can be used to promote applications. DHS Communications does not have a history of promoting meetings for boards and councils but is open to this for SCAODA Council meeting. Individual committee meeting promotion cannot be supported on account of being too frequent, and thus overloading social media channels. Boards and councils associated with DHS cannot have their own social media accounts. All content must be submitted to DHS to be posted on DHS social media. Committee members are however welcome to use personal social media to promote engagement on their own accounts. Members of the Committee discussed the potential for utilizing Gove Delivery newsletter for users to subscribe to receive regular SCAODA announcements, via existing channels as well as a newly created SCAODA listserv. K. Dawson will reach out to DHS Communications to further these plans.

Members of the Committee discussed possible updates to the SCAODA website, and the need for up-to-date information on the site as promotion efforts increase. Members also discussed using analytics to better understand foot-traffic on the website and most frequently visited SCAODA sub-pages.

C. Ullstrup inquired about tracking attendance at SCAODA Council meetings, to stay in compliance with by laws. DHS staff will track attendance of council members in coming meetings and will report to C. Ullstrup when a Council member has two absences without notices, within a 12 month period. This topic will further be discussed in the March Council Meeting.

5. Setting Agenda for March 8, 2024 Council Meeting

- Inquire regarding a presentation on Synar Report & Tobacco 21
- Present on Wisconsin Association of Sober Housing
- Provide notice that attendance will be monitored for compliance with by laws
- Receive updates on Medicaid unwinding, opiate listening sessions, and recovery housing voucher
- Receive updates on Block grant report

6. Adjournment

Committee adjourned at 1:48 p.m.

Prepared by: Kim Dawson on 2/20/2024.

These minutes are in draft form. They will be presented for approval by the governmental body on: 5/7/24

OPEN MEETING MINUTES

Name of Governmental Body: SCAODA Diversity Committee			Attending: Denise Johnson, Christina Malone, Felicia Behnke Shaw, Lakesha Jones, Lisa Purtue, Travis Landry, Amanda DeLeon, Maria Castillo, Lawanda Chambers. Interpreters: Leia and Tera
Date: 2/28/2024	Time Started: 1:00pm	Time Ended: 2:50pm	
Location: ZOOM			Presiding Officer: Denise Johnson and Christina Malone

Minutes

1. Welcome and Introductions.....Denise Johnson, Christina Malone, SCAODA Co-Chairs, Committee Members
2. Approval of January minutes..... Committee Members
 Motion L. Jones
 Second F. Behnke-Shaw
 Approved
3. Public Input.....Co-Chairs
 None
4. SCAODA Strategic Plan.....Committee Members
 D. Johnson began the discussion: read the SCAODA mission. Members took a few minutes to read the plan and the 4 goals. Denise would like to have SCAODA exec. team visit to answer questions and explain the plan. We can start by looking at it and discussing.
 Looked at old mission and objectives. Do we want to establish goals first and look at mission second?
 This mission statement from SCAODA via our committee: “The Cultural Diversity Committee focuses on enhancing and honoring the lives of the diverse populations of Wisconsin by providing access to culturally and linguistically appropriate prevention, treatment, and recovery services related to substance use disorders.”
5. Diversity Committee Strategic Plan and Priorities.....Committee Members
 D. Johnson looked at the 2nd mission statement above and talked about what the group wants to add-harm reduction, preferred language-SUD? The committee can make recommendations to the council on preferred language.
 Let’s put this aside and reflect, Allison will send the doc to all.
6. DHS updates..... Allison Weber, Multi-Cultural Coordinator, DHS Staff
 Lawanda shared she was on the Jennifer Hudson show for a Milwaukee non-profit board she serves on, Denise shared WTMJ 4 interviewed her. A 19-year-old was hit as a pedestrian who is deaf, was seriously injured. Denise shed light on MH services for deaf community in ASL-shed light on lack of services.
7. Future Agenda Items..... Committee Members
 DHS 75 revision
8. Meeting Adjournment..... Committee Members
 Motion L. Jones
 Second L. Purtue
 Approved

Prepared by: Allison Weber on 2/29/2024.

These minutes are in draft form. They will be presented for approval by the governmental body on: 3/27/2024

Tony Evers
Governor



Kevin Florek
Chairperson

Jennifer Stegall
Vice Chairperson

Christine Ullstrup
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

Meeting of the State Council on Alcohol and Other Drug Abuse (SCAODA)

Diversity Committee

March 27, 2024

1:00 PM-3:00PM

<https://dhswi.zoomgov.com/j/1617087444>

Meeting ID 161 708 7444

Meeting URL: <https://dhswi.zoomgov.com/j/1617087444>

One tap mobile: +1617087444#

MEETING AGENDA

1. Welcome and Introductions.....Denise Johnson, Christina Malone,
SCAODA Co-Chairs, Committee Members
2. Approval of February minutes..... Committee Members
3. Public Input.....Co-Chairs
4. Diversity Committee Mission and Vision.....Committee Members
5. SCAODA Strategic Plan.....Committee Members
6. Diversity Committee Strategic Plan and Priorities.....Committee Members
and Theresa Kuehl, DHS
7. DHS updates..... Allison Weber, Multi-Cultural Coordinator,
DHS
8. Future Agenda Items..... Committee Members
8. Meeting Adjournment..... Committee Members

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Council’s primary function is providing leadership in Wisconsin on substance use disorder (SUD) issues, advising Wisconsin state agencies on SUD prevention, treatment and recovery

Tony Evers
Governor



Kevin Florek
Chairperson

Jennifer Stegall
Vice Chairperson

Christine Ullstrup
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

activities, and coordinating SUD 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, need an interpreter or translator, or need this material in another language or format, you may request assistance to participate by contacting Allison Weber at allison.weber@dhs.wisconsin.gov or by phone at 608-266-5156

OPEN MEETING MINUTES

Name of Governmental Body: SCAODA Diversity Committee			Attending: D.Johnson, C. Malone, L.Purtue, T.Landry, F.Behnke-Shaw, L. Chambers, R. Livingston DeTienne, Interpreters: Kate Block and Amy Simonsen:
Date: 3/27/2024	Time Started: 1:15pm	Time Ended: 2:55pm	
Location: Zoom			Presiding Officer: D. Johnson and C. Malone

Minutes

1. Welcome and Introductions.....Denise Johnson, Christina Malone, SCAODA Co-Chairs, Committee Members
Attendance

Christina welcomed all with an ice breaker, unique thing about you to share.

2. Approval of February minutes..... Committee Members, Christina Motion F. Behnke-Shaw

Second T. Landry

Approved

3. Public Input.....Co-Chairs
No public input

4. Diversity Committee Mission and Vision..... Committee Members, Denise
The committee worked on a mission for the committee. After much discussion the following was drafted:

“To enhance and honor the lives of people from diverse populations in Wisconsin by providing access to culturally sensitive services for those who have used or are using substances. This includes offering harm reduction, wellness, peer support, and linguistically appropriate interventions, and related supportive services”.

Motion to accept mission statement as is above: R. Livingston-DeTienne

Second L. Purtue

Discussion: add ‘supportive’

Motion to accept insertion: C. Malone

Second: F. Behnke-Shaw

Approved

Next step is objectives:

Objectives:

1. To identify, coordinate, review, and promote the use of person-centered best practices and/or innovative and promising practices for programs providing substance use and co-occurring services for underserved populations, aligning with culturally appropriate approaches.

Everyone is satisfied with this objective.

Next meeting, we will focus on the rest of the objectives.

5. SCAODA Strategic Plan.....Committee Members, Denise
Review, exec comm invited but did not respond.

- 6. Diversity Committee Strategic Plan and Priorities.....Committee Members and Denise
 Objectives:
 Next meeting, we will focus on the rest of the objectives.
 - 2. To identify unmet needs of underserved populations, considering the impact of labels and language use, and incorporating person-first language.
 - 3. To develop action steps to bridge identified gaps in unmet services, ensuring alignment with culturally appropriate practices and preferences, as outlined by reputable sources such as the CDC and Harvard Gazette. [Link to CDC publication: "Improving Cultural Competence: A Quick Guide for Administrators" (Publication Date: 12/2014)]

- 7. DHS updates..... Allison Weber, Multi-Cultural Coordinator, DHS
 Updates on the DHS move to GEF, Emerging leaders were provided.

- 8. Future Agenda Items..... Committee Members
 Harm reduction education from members, CLAS standards implementation

- 8. Meeting Adjournment..... Committee Members
 Motion R. Livingston-DeTienne
 Second L. Purtue
 Approved

Prepared by: Allison Weber on 3/29/2024.

These minutes are in draft form. They will be presented for approval by the governmental body on: 4/24/2024

Tony Evers
Governor



Kevin Florek
Chairperson

Jennifer Stegall
Vice Chairperson

Christine Ullstrup
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
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OPEN MEETING NOTICE

Meeting of the State Council on Alcohol and Other Drug Abuse (SCAODA)

Diversity Committee

April 24, 2024

1:00 PM-3:00PM

<https://dhswi.zoomgov.com/j/1617087444>

Meeting ID 161 708 7444

Meeting URL: <https://dhswi.zoomgov.com/j/1617087444>

One tap mobile: +1617087444#

MEETING AGENDA

1. Welcome and Introductions.....Denise Johnson, Christina Malone,
SCAODA Co-Chairs, Committee Members
2. Approval of March minutes..... Committee Members
3. Public Input.....Co-Chairs
4. Diversity Committee Mission and Vision..... Committee Members
5. Diversity Committee Strategic Plan and Priorities..... Committee Members
6. DHS updates..... Allison Weber, Multi-Cultural Coordinator, DHS
7. Future Agenda Items..... Committee Members
8. Meeting Adjournment..... Committee Members

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Council’s primary function is providing leadership in Wisconsin on substance use disorder (SUD) issues, advising Wisconsin state agencies on SUD prevention, treatment and recovery activities, and coordinating SUD 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.

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State Council on Alcohol and Other Drug Abuse (SCAODA) 2023-2027 Strategic Plan
ITC Priority Objectives and Targeted Actions

DRAFT
4/22/2024

SCAODA 2023-2027 Goals	SCAODA 2023-2027 Objectives	ITC Priority Objective (✓)	Targeted Action	Time Frame
1. Change Wisconsin’s cultural norms and policies to transform the state’s substance use and misuse challenges into healthy outcomes.	1a: Seek to reduce stigma associated with seeking and obtaining services for substance use and misuse.	✓	Beginning with our own “State Council on Alcohol and other Drug Abuse” and its bylaws, advocate for replacing stigmatizing language at all levels of government with terms that promote health and wellness.	By 2027
	1b: Promote environmental policies to reduce substance use and create more support and understanding of those in recovery and those who need treatment.	✓	ITC will promote environmental policies to reduce substance use and create more support and understanding of those in recovery and those who need treatment including advocating for policies throughout the criminal justice system that balance accountability with treatment and recovery services and support during incarceration and upon reentry.	Ongoing
2. Educate people of Wisconsin on the social, economic, and health impacts of substance use and misuse; as well as the benefits of effective prevention, harm-reduction, treatment, and recovery services.	2a: The council will continue to fulfill its responsibility to provide leadership and coordination by promoting and advocating best-practices and policies for prevention, harm reduction, treatment, and recovery among all levels of government and in communities.	✓	ITC will continue to fulfill its responsibility of advocating for policies, programs, and practices that provide equitable and adequate access to effective services across the continuum of care for all Wisconsin residents.	Ongoing
3. Advocate for policies, adequate funding, capacity, and infrastructure to implement effective outreach, prevention, harm reduction,	3a: Expand prevention, treatment, and recovery interventions and supports across the lifespan.			
	3b: Increase focus and resources for prevention, treatment, and recovery services for children, youth, transitional youth, and young adults.	✓	ITC will make the revitalization of the Children, Youth and Family Treatment Sub-Committee a standing agenda item and develop a plan and timeframe for such action.	By Dec 2025

treatment, and recovery services for all in need.	3c: Continue revitalizing the Children, Youth and Family Treatment Sub-Committee.	✓	<i>See Objective 3b Targeted Action</i>	
	3d: Build awareness and capacity to identify and address the changing needs of older adults due to substance use and misuse.	✓	Utilize the 2019 SCAODA report At-Risk Substance Use in Older Adults and Exhibit E of the Opioid Settlement Agreement to develop and submit recommendations for future Opioid Settlement Funds to address the opioid-related intervention and treatment needs of older adults.	Ongoing
	3e: Enhance and expand capacity within the substance use workforce to better understand and address the diverse needs of higher risk and underserved populations, including those with language and cultural barriers - as recommended in the CLAS.	✓	ITC will support the expansion of the SUD workforce at all levels including medical providers (NPs, PAs, etc.). This includes support for removing barriers to access including restrictive requirements for performing assessments, staffing, and supervision.	Ongoing
	3f: Advocate for and support increased utilization of evidence-based interventions like SBIRT in schools, workplaces, health care, and communities.	✓	ITC will continue to promote investments in expanding the utilization of, and access to, evidence-based interventions like SBIRT and those recommended by the Wisconsin Nicotine Treatment Integration Project.	Ongoing
	3g: Advocate for and support adoption of innovative policies and promising practices and programs in substance use and misuse prevention, treatment, harm reduction, and recovery.	✓	<i>See Objective 3f Targeted Action</i>	
	3h: Support and advocate for increasing the state excise tax on alcoholic beverages to the median tax level nationally and increase the portion of tax revenue allocated for prevention, treatment, harm reduction, and recovery programs.	✓	ITC will collaborate with the other standing committees of SCAODA in advocating for increasing the state excise tax on alcoholic beverages to the median tax level nationally and increasing the portion of tax revenue allocated for prevention, treatment, harm reduction, and recovery programs.	As part of biannual budget recommendations

<p>4. Reduce health disparities and inequities, recognize and rectify historical trauma, and address biases within systems, policies and practices.</p>	<p>4a: Improve the effectiveness of substance use prevention, treatment, harm reduction, and recovery services in addressing the needs of higher risk and historically underserved populations.</p>	✓	<p>ITC will support efforts to recognize and respond to higher risk and historically underserved populations. [Ex: Older adults on Medicare having very limited to no access to treatment]</p>	
	<p>4b: Expand scope of prevention, treatment, harm reduction, and recovery services to be inclusive of populations most impacted by social drivers of health - including socioeconomic standing, zip code, legal status, and other health disparities. [and age]</p>	✓	<p>Support further education and awareness among service providers along the continuum of care on the impact of social drivers of health (SDOH) on use, misuse, treatment, and recovery.</p>	
	<p>4c: Support research and identification of substance use and misuse risk and protective factors.</p>			
	<p>4d: Advocate for and support the adoption of innovative and promising practices and programs across the continuum of care that fully integrate the National CLAS Standards.</p>	✓	<p>ITC will partner with the Diversity Committee and DHS to build and sustain statewide momentum in the adoption of CLAS standards in all substance use services.</p>	Ongoing

OPEN MEETING MINUTES

Name of Governmental Body: Intervention and Treatment Committee of SCAODA			Attending: Holly Stanelle, Amy Anderson, Michael Kemp, Jolee Buhr, Chris Wardlow, Karen Conner, Beth Collier, Njemeh Barrow, Paula Jolly DHS: Saima Chauhan, Leilani Nino Guests: Arena Hannah
Date: 2/13/2024	Time Started: 10:06 AM	Time Ended: 11:48 AM	
Location: virtual meeting occurred via Zoom platform			Presiding Officer: Roger Frings-Interim Chair & Sheila Weix-co-chair
Minutes			

1. Roger Frings called the meeting to order at 10:06 AM.

Comments or Announcements: Quorum confirmed by Saima Chauhan.

Introduction of Guests and ITC members.

Not in attendance: Laura Fabic, Jennifer Stegall, and Patrick Riley.

2. Review and approval of 2/13/2024 meeting minutes. (Roger Frings)

Holly Stanelle made a motion, moved to approve February 13, 2024, Meeting Minutes. Second provided by Jolee Buhr. No opposition. Approved unanimously.

3. Post-Public Health Emergency: The impact of the unwinding of Medicaid (Sheila Weix)

Sheila is observing layoffs in certain regions which is causing a much higher unemployment rate than what is reported for the state and because of that many people are facing major challenges.

4. Prescription Drug Monitoring Program (PDMP) (Sheila Weix)

No change from last ITC meeting. Sheila recapped the information she gave in the last ITC meeting about issues with the PDMP.

5. Update on state and federal bills and acts (Chris Wardlow, Michael Kemp)

National Legislation: Michael Kemp reported on the National Association for Alcoholism and Drug Abuse Counselors (NAADAC) committee is keeping a close eye on the Opioid Act in regard to a Bill on physicians being able to prescribe Methadone and the safeguards that are listed in the Bill. There has been no movement to this Bill, but Michael will keep ITC posted.

He also informed ITC that there is not a lot of discussion about making cuts to monies for treatment and recovery services regarding the Federal budget.

Michael reported that NAADAC is working with Health Resources and Services Administration (HRSA) in regard to workforce development and look for different ways that can boost the substance use workforce. HRSA has been working with the American Counseling Association in regard to developing a standardized interstate compact. HRSA indicated they are willing to include addiction counselors in the development of the mental health compact and see how States embrace this approach.

Sheila asked that HRSA consider that substance abuse counselors without the requirement of a Master's degree be considered as billable for clinical services such as counseling.

Sheila reported on a webinar she attended on the final rule from Health and Human Services (HHS) regarding 42CFR Part 2.

State Legislation: Chris Wardlow reported on the Kratom Bill and that it continues to move forward in legislation. The Marijuana Recreation Bill is still in both committees and receiving fiscal estimates. Another

Bill recently came out regarding adding smoking marijuana, vaping marijuana and vaping of Hemp derived products to the Clean Indoor Air Act.

6. Tobacco integration update:

Karen Conner added to Chris's information that the Bill was referred to the State Affairs Committee, and that adds two cigarettes in cannabis to the Clean End or Air Law. She is not sure that that's really going to go anywhere, but at least the fact that it was introduced and discussed is a good thing. Karen also reported that another Bill that was signed by the Governor in December was regarding e-cigarette retailer licensing. Previously a retailer selling only electronic vaping devices didn't need any retail license for those products so as of March 6th these retailers will need the same retail license that cigarette and tobacco product retailers currently hold.

Karen explained that the Wisconsin tobacco Quitline expanded availability of nicotine replacement therapy (NIT) available. Previously, only two weeks of NIT was available and as of January 1st they expanded that to eight weeks and that can be combination therapy. This expansion of NIT will go until the end of March and then beginning in April because of the potential Menthol Ban they expanded the Quitline benefit for only those who use Menthols.

7. ITC strategic planning and review

Chris Wardlow reviewed the document that he created for ITC to review SCAODA's primary goals and objectives for 2023-2027, ITC's priorities for 2020-2021, ITC's plan to address goals and objectives 2019-2020 and possible 2023-2027 SCAODA objectives to be targeted by ITC based on previous ITC priorities. ITC members gave suggestions on objectives and priorities.

Chris and Amy Anderson will convene ahead of the next ITC meeting to refine the draft of ITC's strategic Plan, subsequently presenting the polished version to the committee during the upcoming meeting.

Public comments

Saima Chauhan asked the committee about their perspectives on how the funds from the opioid settlement should be allocated/spent.

- Amy Anderson- an increase in medically managed withdrawal services. Also, funds for basic needs.
- Jolee Buhr agree that there is a great need for withdrawal management (WM) especially in the Northwest where a large WM program shut down.
- Paula Jolly recommended more funding for WM programs, recovery voucher program and sober living.
- Holly Stanelle recommended increase in funds for contingency management, mobile MAT units in more remote areas and WM.

8. Future meeting dates and future agenda topics

Next scheduled ITC meeting: April 9, 2024

Next scheduled SCAODA meeting: March 1, 2024

Roger Frings stated that the April agenda we will carryover PDMP, legislative updates, and strategic planning.

Amy Anderson asked if ITC could have someone on the substance use board, or controlled substance board regarding the over-prescribing of Gabapentin.

Saima Chauhan suggested the new Director of Substance Use Initiatives, Michelle R. Haese attends an ITC meeting.

9. Member announcements

Roger Frings announced that on September 23, 2024, the Recovery Foundation Board is having their 11th annual voices for recovery luncheon in Madison at the Edgewater Hotel. Roger is interested in putting

together a list of names, and maybe we could get enough to have a table for ITC. Roger will send Saima a flyer regarding this event to send out to the ITC members.

- 10. Adjourn-** Chris Wardlow moved to adjourn; Amy Anderson seconded. Unanimous approval to adjourn the meeting at 11:48 AM

Prepared by: Saima Chauhan on 3/7/2024.

Reviewed by Dan Bizjak on / /2024

These minutes were approved by the governmental body on / /2024: .

Tony Evers
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OPEN MEETING NOTICE
INTERVENTION AND TREATMENT COMMITTEE (ITC)

April 9, 2024, at 10:00am -1:00pm CST

This meeting will be held via Zoom

Meeting URL: <https://dhs.wi.zoomgov.com/j/16005851009?pwd=V21wRVpaYTB6RVpRZ0YvMms4d2g4UT09>

Meeting ID: 160 0585 1009

Passcode: 2024

AGENDA

1. Call to order and roll call
2. Review and approval of 2/13/2024 meeting minutes
3. Legislative Updates
4. Tobacco integration update
5. ITC Strategic Planning and review
6. Public comments
7. Future meeting dates and future agenda topics
 - Next scheduled ITC meeting: May 14, 2024
 - Next scheduled SCAODA meeting: June 7, 2024
8. Member announcements
9. Adjourn

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

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OPEN MEETING NOTICE
INTERVENTION AND TREATMENT COMMITTEE (ITC)

May 14, 2024, at 10:00am -1:00pm CST

This meeting will be held via Zoom

Meeting URL: <https://dhs.wi.zoomgov.com/j/16005851009?pwd=V21wRVpaYTB6RVpRZ0YvMms4d2g4UT09>

Meeting ID: 160 0585 1009

Passcode: 2024

AGENDA

1. Call to order and roll call
2. Review and approval of 2/13/2024 meeting minutes
3. Legislative Updates
4. Tobacco integration update
5. ITC Strategic Planning and review
6. Public comments
7. Future meeting dates and future agenda topics
 - Next scheduled ITC meeting: July 9, 2024
 - Next scheduled SCAODA meeting: June 7, 2024
8. Member announcements
9. Adjourn

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

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OPEN MEETING MINUTES

Name of Governmental Body: Intervention and Treatment Committee of SCAODA			Attending: Michael Kemp, Jolee Buhr, Chris Wardlow, Beth Collier, Jennifer Stegall, Paula Jolly, Saima Chauhan
Date: 5/14/2024	Time Started: 10:06 AM	Time Ended: 11:07 AM	DHS: Dan Bizjak, Micah Nickey Guests: Arena Hannah
Location: virtual meeting occurred via Zoom platform			Presiding Officer: Roger Frings-Interim Chair & Sheila Weix-co-chair

Minutes

1. Shelia Weix called the meeting to order at 10:06 AM

Quorum confirmed by Micah Nickey

Not in Attendance: Karen Conner, Laura Fabric, Amy Anderson, Holly Stanelle, Sandra Adams, Patrick Riley, Njemeh Barrow

2. Review and approval of 2/13/2024 meeting minutes. (Roger Frings)

Beth Collier made a motion, second to approve provided by Jennifer Stegall. No opposition. Approved unanimously.

3. Legislative Updates

Micheal Kemp notes at a federal level everything we support (block grants, etc.) are being funded at the same levels. Anxiety regarding what congress will do as they move forward with budget. Support Act expires in Sept. Encouraging Baldwin and Johnson to move this forward. In mid-October NAADAC Advocacy conference in DC - you have the opportunity and can get funding, open invitation to join.

Saima Chauhan provided updates on relevant Senate Bills, a link will be sent for summarizing statuses.

4. Tobacco integration update

Sarah Thompson highlights enhancements to services through Wisconsin Tobacco Quitline. Additional funding allows for 8 weeks of free NRT if participants sign up for coaching services. Menthol users eligible for up to 12 weeks.

5. ITC Strategic Planning and review

Chris Wardlow sent out most current copy of strategic plan. Document reviewed as a group. Motion made to adopt this document by Saima Chauhan. Jolee Buhr seconds. No opposition. Jennifer abstains. Motion approved.

6. Public comments

Micheal Kemp speaks as a member of public and asks members to contemplate National Certification for Addiction Professional Beta testing 2 certifications 1. national certification for nicotine tobacco treatment counselors 2. National certification adolescent treatment counsel.

Micah Nickey notes future meetings will be hosted via Teams.

7. Future meeting dates and future agenda topics

Next Scheduled ITC meeting: July 9th 2024

SCAODA meets June 7th @ 9:30am

8. Member announcements

None

9. Adjourn

Micheal Kemp moved to adjourn; Beth Collier seconded. Unanimous approval to adjourn meeting at

Prepared by: Micah Nickey on 5/28/2024.

Reviewed by Dan Bizjak on / /2024

These minutes were approved by the governmental body on / /2024: .

SCAODA Planning & Funding Committee Work Plan 2023 - 2024

<p>SCAODA Goal #3: <i>Advocate for policies, adequate funding, capacity, and infrastructure to implement effective outreach, prevention, harm reduction, treatment, and recovery services for all in need.</i></p>		
<p>Objective A: Analyze SUD and prevention needs in counties, tribes, and regions across the state, where public funds are distributed across the state, and recommend approaches to ensure that funds are meeting specific needs of counties, tribes and regions.</p>		
<p>Task #1: Review reports produced by SCAODA and other sources to gain information on possible funding needs across the state for the full continuum of treatment and prevention services, and make recommendations to DCTS.</p>	<p>Who: Committee Members</p>	<p>Status: Ongoing; reviewing ITC report; Arbor Place working on Perinatal harm reduction toolkit</p>
<p>Task #2: Review reports from DCTS on any Federal Block Grant dollars and other funds coming into the state and monitor GFOs.</p>	<p>Who: Committee members</p>	<p>Status: Ongoing; continue monitoring Tobacco 21 compliance; opioid spending; Kim to bring updates on Block Grant funding</p>
<p>Task #3: Support the use of federal and state funds to improve prevention strategies and access to comprehensive treatment (gender specific, parents, pregnant and post-partum women, harm reduction, etc.) for all substance use disorders.</p>	<p>Who: Committee Members</p>	<p>Status: Ongoing; continue monitoring for state-level funding opportunities to advocate DHS apply</p>
<p>Task #4: Advocating, monitoring, and coordinating recommendations for substance-related settlement dollars.</p>	<p>Who: Committee Members</p>	<p>Status: Ongoing</p> <p><i>Opioid:</i> Plan to invite Michelle H. to speak on opioid settlement dollars</p> <p><i>JUUL:</i> Liz Adams attended 5/15 meeting for presentation/ Q&A; Resources: You Spoke, We Listened: JUUL Settlement in Wisconsin, Listening Sessions</p>

Objective B: Review features and challenges of WI Medicaid, CMS and other system benefits and explore promising new practices related to payment systems by studying innovative funding strategies.

<p>Task #1: Advocate for increased Medicaid, Medicare, CMS reimbursement to ensure sustainability, expansion, and greater access to care, and explore supporting Evidence-Based Practices and promoting Value-Based Care.</p> <ul style="list-style-type: none"> a. https://www.chcs.org/resource/behavioral-health-provider-participation-in-medicaid-value-based-payment-models-an-environmental-scan-and-policy/ b. http://files.kff.org/attachment/INFOGRAPHIC-MEDICAIDS-ROLE-IN-ADDRESSING-THE-OPIOID-EPIDEMIC.pdf c. https://www.kff.org/womens-health-policy/issue-brief/expanding-postpartum-medicaid-coverage/ 	<p>Who: Committee Members/possible subgroup</p>	<p>Status: Ongoing. Invited Bill Hanna to 2/21 meeting; continuing discussions. Several new license codes not yet reimbursable via Medicaid – Pam Lano to attend July meeting. Looking at licensing requirements and ability to bill.</p>
<p>Task #2: Support the use of SUD residential treatment services when appropriate for consumers, particularly in areas of the state where residential treatment beds are available.</p> <ul style="list-style-type: none"> • <u>Solicit</u> feedback from providers on the RSUD benefit • <u>Identify</u> issues within residential treatment through smaller workgroup discussion, including review of CCS • <u>Advocate</u> to make Medicaid Residential SUD bed reimbursement competitive with accessible authorization processes. 	<p>Who: Committee Members</p>	<p>Status: Ongoing. Opioid settlement funds were distributed to counties to help support coverage of room and board. Committee included room and board support as a budget recommendation. Survey went out to providers but had poor response rate. Survey tabled at this time. Dr.Elizabeth Salisbury-Afshar, SCAODA DPH Designee to discuss other state examples.</p> <p>Had meeting 2/21 to clarify 1115 waiver is not an option for room & board. Gathered provider feedback at SUDMH conference Oct 2023. Gathering additional feedback from providers in P&F committee, to get to Bill Hanna.</p>

		Read report on 1115 waiver that made it possible to reimburse residential beds
Task # 3: Explore new Medicare benefits for SUD TX.	Who: Committee Members	Determine who we can reach out and find out if there are complaints about parity and lack of SU providers for Medicare patients and who can provide technical assistance to providers. Committee to look at ways to suggest how training and TA could be provided; reach out to Connect. ITC to be aware since ITC compiled SCAODA report about serving aging population.
Task #4: Explore using CCS amongst more levels of care.	Who: Committee Members	Status: invite state expert on CCS to obtain information. County interpretations vary.
Task #5: Explore Medicaid funding for 75.57.		Status: To ask Bill Hanna, and then decide whether to bring a motion to SCAODA Council at June meeting.
Objective C: Review and support legislation promoting SUD services that adopt evidence-based practices and promote prevention and recovery support as part of the full continuum of recovery.		
Task #1: Use updates from available sources to track and discuss legislative updates.	Who: Committee Members	Status: Ongoing
Objective D: Investigate mechanisms for agencies to expand and grow.		
Task #1: Review 5 percent allowable profit for treatment providers from the county.	Who: Committee Members and relevant DHS staff	Status: Ongoing. (Jill and Michelle to get us more info on this)
Task #2: Advocate for providers to have direct access to state opioid settlement funding and other funding via GFOs, RFAs, or other opportunities.	Who: Committee Members	Status: Ongoing
Objective E: Advocate for platform that would provide real-time tracking of treatment capacity and workforce.		

Task #1: Put forth a motion to full Council for DHS to develop system mechanism to collect system-level capacity for DHS 75 certified entities, including service level and workforce, across the state for planning and creation of a public facing system.	Who: Committee Members	Status: Completed. Amended motion passed at September 2022 meeting.
Task #2: Invite BPTR leadership to continue discussion around progress of real-time treatment tracking system.	Who: Committee Members	Status: Ongoing/pending response from BPTR leadership.
Task #3: Explore opportunities to utilize ATLAS to collect system-level capacity for DHS 75 certified entities.	Who: Committee Members	Status: Invite BPTR leadership to discuss opportunities within ATLAS contracting.
Task #4: Continue discussions with Division of Quality Assurance (DQA) around licensure process to enhance capacity tracking, including potential system updates and related funding.	Who: Committee Members and DQA Staff	Status: Ongoing.

OPEN MEETING MINUTES

Name of Governmental Body: State Council on Alcohol and Other Drug Abuse Planning & Funding Committee			Attending: Sheila Weix, Beth Collier, Christine Ullstrup, Jill Gamez, Linda Van Tol, Kevin Florek, Jennifer Stegall, Sarah Johnson, Hannah Huffman, Steve Lawrence, Ryan Stachoviak, Kim Dawson
Date: 4/17/2024	Time Started: 9:34 AM	Time Ended: 11:59 AM	
Location: Via Zoom			Presiding Officer: Beth Collier, Christine Ullstrup
Minutes			

Members of the Planning and Funding Committee in Attendance: Sheila Weix, Beth Collier, Christine Ullstrup, Jill Gamez, Linda Van Tol, Kevin Florek

Guests: Jennifer Stegall, Sarah Johnson, Hannah Huffman, Steve Lawrence

Department of Health Services Staff in Attendance: Ryan Stachoviak, Kim Dawson

1. Call to Order and Roll Call

B. Collier called the meeting to order at 9:34 a.m.

2. Review February 21, 2024, Meeting Minutes

K. Florek moved to approve the minutes.

L. Van Tol seconded the motion.

Motion carried unanimously; minutes approved.

3. Public Comment

No public comment was made.

4. Discussion of JUUL Settlement spending

The Committee reviewed the following materials provided on the Department of Health Services (DHS) website, regarding JUUL Settlement spending:

- 1) [Webpage](#) outlining purpose of JUUL settlement and annual workplans
- 2) [Webpage](#) outlining which entities have been awarded JUUL settlement funds from DHS

S. Weix asked if settlement dollars were intended solely for funding prevention and cessation efforts related to e-cigarette products, or nicotine products more generally. S. Weix also inquired about funding limited to population of youth and young adults up to age 24. Committee discussed that likely funds focus on e-cigarettes and youth populations that were subjected to targeted manipulative marketing practices. The Committee also acknowledges that there is a large population over the age of 24 who use e-cigarette products.

The Committee discussed the settlement funding being \$14.7 million over a five-to-ten-year period, and the organizations that have been funded. J. Gamez inquired how much funding has been received to date, and what programming has been done with the program from the 13 funded organizations. J. Stegall noted that the 2024-2025 likely is not public because plans for spending have not yet been determined. J. Stegall expressed interest in learning

about the settlement payment schedule. B. Collier noted that JUUL's potential bankruptcy could impact the amount of funding the state receives.

J. Gamez noted that there were several organizations that did not receive funding after DHS's initial Request for Applications (RFA) for JUUL settlement funding. J. Gamez wondered if more organizations would be funded if additional settlement dollars were received in the coming years. J. Gamez also expressed concern that tobacco prevention and control efforts have felt segregated from other substance use prevention. J. Gamez wonders if these settlement dollars can be used in a more comprehensive and collaborative approach. Similarly, S. Weix encouraged bridging across, and building on existing efforts, such as expanding the University of Wisconsin's Center for Tobacco Research and Intervention's (UW-CTRI) online training.

R. Stachowiak noted that the DHS staff coordinating JUUL settlement is Liz Adams, Elizabethm.Adams@dhs.wisconsin.gov. The Committee drafted the following questions for Liz, and intends to invite Liz to an upcoming Planning and Funding Committee meeting:

1. What is the current state of JUUL settlement? What does the future of JUUL settlement look like?
 - a. What funds have been/will be received from the settlement?
 - b. How have/will funds been distributed?
2. What is the payment schedule?
3. Could JUUL's potential bankruptcy impact the amount of funding the state receives? If so, how do we anticipate this impact how we are funding programs?
4. If additional funds were received in future years, would programming and the number of organizations funded expand?
5. With tobacco prevention historically being fairly segregated from other substance use prevention efforts, is there an opportunity to use settlement funds in a more comprehensive and collaborative approach?
6. Is this funding supporting UW-CTRI online training? Is there an opportunity for these efforts to align?

5. Discussion of Medicaid funding 75.57

C. Ullstrup reminded the Committee of the previous meeting's discussion with Bill Hanna, DHS Medicaid Director, and asked the Committee if there were any further questions for B. Hanna. The Committee discussed wanting to better understand DHS 75.57, Residential withdrawal management service, and any potential movement on Medicaid benefits for this service.

J. Gamez also brought up DHS 75.56, adult residential integrated behavioral health stabilization service. J. Gamez noted that when the DHS 75 revision came out, different programs and levels of care initially had no Medicaid benefit, with some continuing to lack this benefit. J. Gamez wonders how many service providers have been licensed? K. Florek shared that Tellurian is proving the service without Medicaid reimbursement. B. Collier noted that in addition to Tellurian, Rogers, Pathways to a Better Life, Matt Talbot, and Midwest Detox are also providing residential withdrawal management service. Tellurian Chief Financial Officer, S. Lawrence joined conversation to inform that Tellurian first needs to be licensed under 75.56 and have the credentialed mental health professionals. C. Ullstrup asked once licensed if Tellurian will have Medicaid reimbursement. C. Ullstrup additionally asked what in DHS 75.56 allows for dual treatment and billing of services for addiction and mental health. S. Weix added that there are many steps for a rollout. Currently agencies are unable to bill SAC and CSAC time because only a masters' level professional is reimbursable for screening. Some agencies were having Medical Directors sign off, but now facilities are not required to have medical directors. S. Lawrence explained that currently counties foot the bill for services such as residential withdrawal services,

and that it would be difficult to provide the same quality of services under Medicaid given the low reimbursement rate. S. Weix noted that Medicaid tends to be paired with county spending, with braided funding.

The Committee recalled a presentation on DHS 75 by Pam Lano to SCAODA on April 19, 2023, meeting. The presentation can be viewed as a meeting attachment on the Wisconsin Public Meeting Notices & Minutes [website](https://publicmeetings.wi.gov/view/e39f5702-e5a4-48b9-aef5-810214644a2f/1) (<https://publicmeetings.wi.gov/view/e39f5702-e5a4-48b9-aef5-810214644a2f/1>). The Committee brought up the slide deck and reviewed materials. The Committee is interested in receiving an update on the status of various service and Medicaid benefit roll outs. For example, SUD Intensive Outpatient (IOP) was slated to create a new level of care, falling between outpatient services and day treatment, by early 2024. Currently this service is licensed but an agency cannot bill Medicaid because there are no billable codes for IOP services.

The Committee discussed Office- Based Opioid Treatment (OBOT) being on hold since the Federal Government removed additional requirements (for examples, physicians needing to have a data waiver was removed). With removal of those federal requirements, it shifts what is in the state regulations. It exists in code but has not been implemented.

J. Gamez asked if there is a Medicaid benefit for case management. B. Collier responded, yes CCS, Hub and spoke, Target. S. Weix explained that all have their own benefits, and that agencies need to add on certifications most of the time to be able to bill. J. Gamez noted that case management is a core function of a SUD counselor, and asked - if a client comes in and meets with someone with the primary goal of case management needs, but counselor does have an SUD credential, is it fraudulent to bill? B. Collier responded that the service must be tied to treatment plan for it be an allowable and billable service.

The Committee concluded on this discussion wanting to talk with Pam Lano, or another Medicaid representative, to have an updated presentation similar to the presentation they were provided in April 2023. The Committee is hoping to have a better understanding of the current stats on billing ability for various levels of care.

Next, the Committee transitioned to discussing their workplan, namely "Task 3: Determine who we can reach out and find out if there are complaints about parity and lack of SU providers for Medicare patients and who can provide technical assistance to providers."

J. Stegall explained that given Medicaid is a Federal program, Wisconsin Office of the Commissioner of Insurance does not navigate consumers issues. Leading up to the Committee's meeting J. Stegall did ask if complaints had been received. While no complaints had been received, J. Stegall noted that consumers may not know how to file a complaint or are being directed to CMS. The Board on Aging and Long-Term Care is also forwarding complaints to CMS, so this may be the point where more clients are interacting.

S. Weix added that many clients may not be complaining because they are too preoccupied and in too desperate of a situation looking for care.

S. Weix raised that the SCAODA Intervention and Treatment Committee had written a [position paper](https://www.dhs.wisconsin.gov/scaoda/scaoda-workgroup-older-adults-report.pdf), titled, "At-Risk Substance Use in Older Adults Sounding the Alarm: Implications for SUD Treatment in Wisconsin" (<https://www.dhs.wisconsin.gov/scaoda/scaoda-workgroup-older-adults-report.pdf>). S. Weix noted that it would be good to have the SCAODA Planning and Funding Committee support the paper, as well as keep it on the Committee's radar/work plan. S. Weix also advocated that anywhere in the Committee Workplan where "Medicaid" is discussed, to also add "Medicare," to shed more light on an also underserved population. S. Weix and B. Collier to support in bridging efforts between Planning and Funding, and ITC, given their positions on both committees.

6. Discussion of Tobacco 21 Motion

The Committee discussed that the Tobacco 21 motion previously drafted in their February 21 meeting had been approved at the SCAODA Council meeting on March 8. While the motion has been approved, the Committee discussed the need for strategic planning for timing a letter sent to legislators. J. Stegall impressed upon the importance of when the letter is sent, to whom, and the advocacy surrounding the letter. J. Stegall inquired about DHS's strategy for supporting Tobacco 21, and how might the Committee aid in those efforts. R. Stachoviak offered to reach out to Teresa Steinmetz, DHS leadership, to share back on DHS's Tobacco 21 efforts at the next Committee meeting. The SCAODA Executive Committee plans to further discuss Tobacco 21 strategy at upcoming meeting on May 7.

7. Review of SCAODA Strategic Goals and Committee Workplan

C. Ullstrup suggested holding off on reviewing the workplan until the next Committee meeting on May 15. J. Gamez agrees. In the meantime, all committee members are asked to revisit the workplan and come to the future meeting prepared to discuss. Of note, the committee wants to revise the workplan to formalized process for providing input in the budget cycle. Also, the Committee will add "Medicare" after all mentions of "Medicaid" in the workplan – in order to provide more visibility to this often-overlooked population. The Committee decided to put "Workplan revisions" at the top of the agenda for the next meeting.

8. Department of Health Services (DHS) Updates

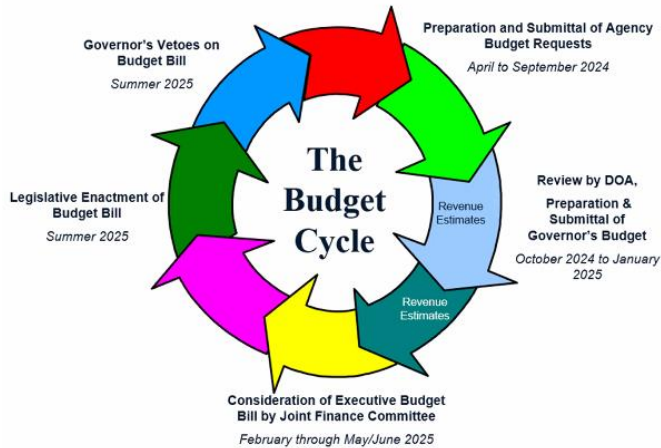
R. Stachoviak provided update that the State Opioid Treatment Authority, Mike York, has been hired as of one month ago.

R. Stachoviak also shared that DHS is in the last year of administering American Rescue Plan Act (ARPA) Supplemental funds to Counties and Tribes. These funds were introduced during the COVID-19 Pandemic and conclude in March 2025.

S. Johnson provided updated that the budget and plan for opioid settlement spending has been submitted to the Joint Committee on Finance. The plan is within the 14-day passive review period, ending this Friday (4/19). In anticipation of this review, Michelle Haese, DHS Director of Substance Use Initiatives, has been disseminating information about the plan and answering questions. See the link [here](#) for Fiscal Year 2025, \$31 million proposal: <https://www.dhs.wisconsin.gov/publications/p03288-2025.pdf>

S. Johnson also shared an RFA funding opportunity to apply for funds to purchase harm reduction vending machines and supplies. See the link [here](#) for the application: <https://www.dhs.wisconsin.gov/contracts/public-health-vending-machines-2024.htm>. K. Florek commented that Tellurian Behavioral Health has a harm reduction vending machine located at a detoxification center, and that the vending machine has served their agency well.

J. Stegall asked about the process for SCAODA to provide recommendations for the State budget. The Committee discussed Fall being the time to provide recommendations to the Governor (see Budget Cycle below.) C. Ullstrup outlined a process where the Planning and Funding Committee will bring recommendations to SCAODA Council, and the Council provides recommendations to DHS. C. Ullstrup encouraged committee members to think about priority funding areas and recommendations to bring to SCAODA Council. This item will also be added to the Executive Committee agenda for the May 7 meeting.



K. Dawson provided updates on SCAODA website and communications strategy. K. Dawson shared that currently there is not a Gov Delivery topic subscription solely focused on Substance Use. However, the DHS Communications is working to transition the “Dose of Reality” subscription over to a more general Substance Use Thread. The SCAODA Executive Committee will decide whether to promote SCAODA meetings and membership via “Dose of Reality” or wait until the thread becomes generalized to Substance Use topics.

The Planning and Funding Committee discussed further ways for advertising membership application. Some ideas brainstormed by Planning and Funding were, adding to the “Contact us” page, and tabling at a conference to promote membership. R. Stachoviak noted Substance Use Block Grant funds can be used for conference costs, such as reserving a table. S. Weix noted that previously listening session occurred across the state, not just state conference. We should continue looking for ways to raise the profile, particularly in areas where those interested may not be able to travel for a state conference.

9. Agenda for May

The following agenda items were noted by committee members:

- Revise workplan (note to prioritize this to top of agenda)
- Discuss JUUL settlement, inviting Liz Adams to attend
- Discuss status of services being rolled out funded by Medicaid, inviting Pam Lano to attend
- Receive updates from SCAODA Executive Committee
- Discuss CCS, and that OTP is being excluded at state level. Invite Teresa Steinmetz to attend, to provide update if counties joining CSS will be considered.

10. Adjournment

B. Collier moved to adjourn the meeting.

J. Gamez seconded the motion to adjourn.

Motion carried; meeting adjourned at 11:59 a.m.

Prepared by: Kim Dawson, on 2/21/2024.

Council reviewed and approved these minutes at its meeting on: 5/15/2024

OPEN MEETING MINUTES

Name of Governmental Body: State Council on Alcohol and Other Drug Abuse Planning & Funding Committee			Attending: Sheila Weix, Christine Ullstrup, Jill Gamez, Linda Van Tol, Michelle Devine Giese, Sarah Johnson, Hannah Huffman, Liz Adams, Ryan Stachoviak, Kim Dawson
Date: 5/15/2024	Time Started: 9:40 AM	Time Ended: 11:52 AM	
Location: Via Zoom			Presiding Officer: Christine Ullstrup
Minutes			

Members of the Planning and Funding Committee in Attendance: Sheila Weix, Christine Ullstrup, Jill Gamez, Linda Van Tol, Michelle Devine Giese

Guests: Sarah Johnson, Hannah Huffman

Department of Health Services Staff in Attendance: Liz Adams, Ryan Stachoviak, Kim Dawson

1. Call to Order and Roll Call

C. Ullstrup called the meeting to order at 9:40 a.m.

2. Review April 17, 2024, Meeting Minutes

C. Ullstrup noted a typo in April's meeting minutes on pg. 3 discussing CMS. Minutes should read "CMS" all capitalized, as opposed to current minutes stating "CMs." Additional request for spell check prior to publishing final version of minutes.

S. Weix moved to approve the minutes with the above amendment.

J. Gamez seconded the motion.

Motion carried unanimously; minutes approved.

3. Public Comment

No public comment was made. S. Weix noted that she appreciated C. Ullstrup emailing document titled "Allocation of Opioid Settlement Proceeds for 2024-2025." This document is included within the meeting documents on this site:

<https://publicmeetings.wi.gov/view/dc3a37b0-3e36-411c-925d-8d446800c8e0/1>

4. Review of SCAODA Strategic Goals and Committee Workplan

The committee reviewed and made updates to their workplan. This version of the workplan is included within the meeting documents on this site: <https://publicmeetings.wi.gov/view/dc3a37b0-3e36-411c-925d-8d446800c8e0/1>. The committee discussed that these goals were based off [SCAODA Council Strategic Plan](#). The committee plans to re-visit the workplan each time they meet, to keep the status of tasks up to date. The workplan is seen as a living, iterative document.

Per recommendation of S. Weix, the committee added "Medicare" alongside every mention of Medicaid in the workplan, where appropriate.

While reviewing the status of tasks, the committee recognized the need for all to review the ITC paper regarding risk to older adults, prior to their next July committee meeting. The paper and its related materials are listed below:

Report on At-Risk Substance Use in Older Adults

- [Cover letter from SCAODA Chairman Roger Frings](#) (PDF)
- [Report](#) (PDF)
- [Addendum to report](#) (PDF)

S. Weix noted that paper was originally published in December 2019. Since then, the need for older adults with substance use disorder is greater, and with less resources. Another change is that Masters-level providers are now covered under Medicare, but SAC can only work under the supervision of a physician to be covered by Medicare.

C. Ullstrup asked if committee members were aware of any other reports the committee should stay abreast on or re-familiarize themselves. K. Dawson shared link to SCAODA website where reports are stored, noting the last report published came from 2022.

<https://www.dhs.wisconsin.gov/scaoda/adhoccommitteereports.htm>

J. Gamez shared that Arbor Place is working on perinatal harm reduction tool kit for pregnant individuals who use substances. This toolkit will be shared and is a good candidate for posting on SCAODA website once available by the end of this year.

J. Gamez asked, with joint finance approving opioid spending, what is the anticipated timeline for getting GFOs out related to those dollars? S. Johnson responded that it will be a combination of direct funding to sustain current continuation of contracts, as well as competitive funding applications to be released in coming months.

Under Objective A, Task 3 of workplan, C. Ullstrup noted that SAMHSA and HERSA sometimes post GFOs geared towards the State. These opportunities tend to be structured as such that providers cannot directly apply, but could benefit if awarded sub-grantee dollars from the State. C. Ullstrup encouraged the committee to continue bringing funding opportunities forward to recommend DHS apply to.

Under Objective B, Task 1, S. Weix asked if “value-based care” was still happening. C. Ullstrup responded that this was something the committee discussed with Pam Lano last year. There are still several new license codes not yet reimbursable via Medicaid. The committee noted this as something they would like to discuss when Pam attends the committee’s July meeting. S. Weix would also like to discuss that now that DHS 75 does not require medical directors, there are SUD counselors limited in scope who previously relied on a medical director sign-off to be Medicaid reimbursable. However, without Medical Director sign-off only Masters-level and above professionals can conduct assessments. C. Ullstrup circulated update from Forward Health regard to QTTs: <https://www.forwardhealth.wi.gov/kw/pdf/2020-28.pdf>

J. Gamez shared news that Medicaid is seeking professionals to join the [Medicaid advisory committee](#)

C. Ullstrup asked if parity for SUD outpatient was in line with that of mental health outpatient services? J. Gamez responded that payment levels are the same, but that might be different than parity. For example, there is a code in mental health for work with a family when the client is not present, but that code does not exist for SUD. The committee identified this as another question for Pam when attending the July meeting.

Under Task 2, the committee notes needing to get listening session notes over to Bill Hana and Pam Lano. The committee would like these notes shared in tandem with coordinating Pam to attend July meeting. Kim to share notes with Pam in this process, including C. Ullstrup and B. Collier.

M. Devine Giese would like to add a question for asking Pam - about Medicaid covering the holding of a bed when a woman is giving birth, so that she may be able to come back to residential treatment.

The committee decided to look more into [Section 1115 waiver](#) prior to July meeting.

The committee ended their review of workplan at the bottom of page 2 and plans to pick up at this point for the next meeting.

5. Discussion of JUUL Settlement

The committee was joined by Liz Adams, Policy Analyst in the Commercial Tobacco Prevention and Treatment Program. Liz joined DHS 1.5 years ago working on analyzing state policy for tobacco and nicotine. She is the point person for the JUUL settlement, with team support. The committee gave a round of introductions before Liz began her presentation with the following notes:

Wisconsin was part of multistate settlement with JUUL labs. The settlement was meant to address harm caused by JUUL's marketing and sales practices of e-cigarette products. \$14.7 million will be dispersed in Wisconsin over 6-10 years. JUUL has options for two different payment plans, but we will not know their choice until year 6. The settlement includes making payment to Wisconsin to fund prevention and cessation efforts related to electronic nicotine delivery systems (ENDS) for people up to age 24. Many states were only able to negotiate a settlement covering programs up to 21 years of age; but in Wisconsin, the DOJ was able to negotiate up to age 24.

The settlement also restricts some advertising, marketing, and sales practices. JUUL is also required to maintain retail-compliance, verifying tobacco retailers' compliance with measures meant to limit underage access to JUUL products.

A copy of the settlement is made available via the Public Health Law Center at this link:

<https://www.publichealthlawcenter.org/resources/juul-settlement-state-map>

The settlement fund disbursement builds over time. In 2022, 1.3 million was awarded (to be implemented in calendar year 2023); \$1.8 awarded in 2023 for 2024 programming. \$1.3 will be awarded in years 4 and 5, and in year 6, \$6.38 million. The payment is made directly to WI DHS. L. Adams responded to a previous question from committee about what would be done if JUUL were to file for bankruptcy. L. Adams noted that a bankruptcy would impact the settlement, but DOJ would be involved to ensure as much funding is received as possible.

L. Adams previewed website containing description of how funds have been used to date. In the first year WI DHS released a simplified application for existing partners due to the needed to utilize funding quickly. In Year 2 there were 83 applications. This large volume made it difficult to fund the high degree of interest, as only 13 organizations were able to be funded. Most of these organizations focused on school-based prevention, parent education, and the connection between mental health and vaping. UW-CTRI was funded to research perceptions of e-cigarettes and behavior change. Media organizations have been funded for campaigns such as "Behind the Haze" and "Tobacco is Changing."

In coming years, it is likely that the number of organizations funded will expand, especially as funding expands. The DHS Commercial Tobacco Prevention and Treatment Program is intent on ensuring sustainability over the funding period,

while also making the most use of the funds. The program intends to continue utilizing community listening sessions to steer decision-making. Much consideration has been given to how best to bolster community partnerships and work intersectionally with mental health and tobacco prevention/treatment.

S. Weix appreciated that UW-CTRI is being funded for research, but asked why training has not been funded. L. Adams responded that this likely is due to UW-CTRI content potentially being broader scope than JUUL settlement allows. There must be a strong connection to vaping and ENDS use, as well as focus on younger populations (24 years of age and younger). S. Weix encouraged training with this focus to be developed, particularly considering that DHS 75 now requires providers to be considering tobacco use in substance use treatment plans.

J. Gamez encouraged bridging the language gap. For example, the word “cessation” is only used when referring to tobacco, but for every other substance we just call it “treatment.” These language gaps result in a segregated field – particularly in spaces where providers often view treatment of tobacco (as opposed to other drugs) as separate issues. J. Gamez also noted that at the recent Opioid Treatment Summit, the Small Talks campaign resources were comprehensive, and that it would be excellent seeing the same degree of collateral and awareness-raising for tobacco campaigns.

J. Gamez asked how JUUL compliance checks have been going. L. Adams responded that there have been challenges, particularly given how dissimilar the data received from JUUL compares to that of FDA and Wisconsin Wins. JUUL’s data has not integrated with nor expanded upon what is already being done.

C. Ullstrup asked if the JUUL settlement can fund Tobacco 21 efforts. L. Adams says they have not gotten a clear answer whether settlement funds can be used to influence legislation (including Tobacco 21), and it continues to be a grey area.

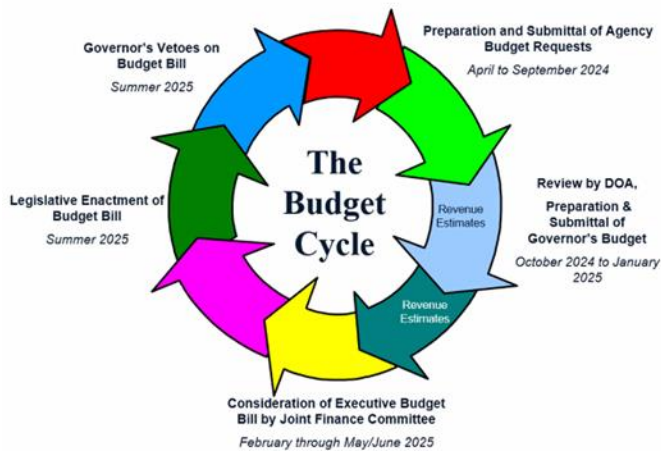
6. SCAODA Executive Committee Updates

K. Dawson shared updates from the Executive Committee’s recent May 7 meeting. Executive committee is asking all SCAODA committees to come to June 7 Council meeting prepared to discuss workplan. Committees are also encouraged to think about their priorities and budget recommendations (more information agenda item below). Lastly, committees are encouraged where possible to cross-collaborate, and attend each other’s meetings.

C. Ullstrup noted that it would be worthwhile to promote SCAODA via technical college SAC programs, and that a plan could be developed before getting the Exec Committee’s approval.

7. Discussion on providing recommendations for the State budget

K. Dawson shared update from SCAODA Executive Committee that this is the time of the year where they are preparing to share budget recommendations with DHS to include in the submittal of agency budget requests (see Budget Cycle below). Executive Committee would like each SCAODA committee to consider their priorities, and how they hope the State budget will support these priorities. Each Committee is asked to submit three budget recommendations to the Executive Committee by **July 15th**. At that time, Executive Committee will consider all recommendations before sending to DHS in August. This topic will be further discussed at the June 7th Council meeting.



The Planning and Funding Committee decided to create their priorities and budget recommendations in their next meeting on July 17, given there is some flexibility with the Executive Committees target deadline (July 15).

8. Department of Health Services (DHS) Updates

K. Dawson shared that Alex Cammilleri has transitioned to a new role in the Bureau of Prevention Treatment and Recovery's Children Youth and Families Section. She has filled the vacant adolescent treatment coordinator position. She previously served in a project role that focused on supporting efforts related to Coordinated Specialty Care, workforce development, and crisis services. Additionally, Sarah Johnson has joined as manager of the Prevention Intervention Recovery Services Section.

9. Agenda for July

The following agenda items were noted by committee members:

- Re-visit workplan (starting from where committee left off, top of pg. 3)
- Discussion about updates to Medicaid coverage with Pam Lano
- Discussion on CCS, and that OTP is being excluded at state level. Invite Teresa Steinmetz and Kenya Bright to attend, to provide update if counties joining CSS will be considered
- Promoting SCAODA via technical college SAC programs; develop plan to take share with SCAOD Exec Committee
- Develop budget recommendations for SCAODA Executive Committee to share with DHS

J. Gamez shared that she attended a Treatment Atlas advisory group and is curious if this committee would consider inviting the group to come to committee meeting. The planning and funding committee decided to see how Treatment Atlas's presentation to Council on June 7th meeting goes. From there they can see if they want a more targeted conversation with a Planning and Funding focus. S. Weix expressed frustrated with the organization running Treatment Atlas, Shatterproof. S. Weix and J. Gamez note gaps in data and difficulty registering all locations related to a particular treatment facility. This was further exacerbated by their previous process of non-continuous enrollment; however, they have improved, and enrollment is now open. S. Weix notes there is a missed opportunity by not cross-referencing with DQA about registered facilities.

10. Adjournment

S. Weix moved to adjourn the meeting.

L. Van Tol seconded the motion to adjourn.

Motion carried; meeting adjourned at 11:52 a.m.

Prepared by: Kim Dawson, on 2/21/2024.

These minutes are in draft form. They will be presented for approval by the governmental body on: 7/17/2024

State Council on Alcohol and Other Drug Abuse (SCAODA) 2023-2027 Strategic Plan

PREVENTION COMMITTEE: Priority Objectives and Work Plan

SCAODA 2023-2027 Goals	SCAODA 2023-2027 Objectives	Prevention Cmte Priority Objectives (✓)	Targeted Actions
<p>1. Change Wisconsin’s cultural norms and policies to transform the state’s substance use and misuse challenges into healthy outcomes.</p>	<p>1a: Seek to reduce stigma associated with seeking and obtaining services for substance use and misuse.</p>	✓	<p>Beginning with the Council’s own name and bylaws, the Prevention Committee will join in advocacy urging the state to set an example by replacing stigmatizing language in all state policies, titles, documents, and communication with terms that promote health and wellness.</p>
	<p>1b: Promote environmental policies to reduce substance use and create more support and understanding of those in recovery and those who need treatment.</p>	✓	<p>As recommended in the SCAODA <i>Moving Forward</i> report, the Prevention Committee will promote repealing language in state statute that allows alcohol licensees to sell to persons under the Minimum Legal Drinking Age in presence of a parent, guardian, or spouse. Prevention Committee will provide the state, municipalities, and coalitions with best-practice recommendations to protect those under age 21 from psychoactive hemp derivatives.</p>
<p>2. Educate people of Wisconsin on the social, economic, and health impacts of substance use and misuse; as well as the benefits of effective prevention, harm-reduction, treatment, and recovery services.</p>	<p>2a: The council will continue to fulfill its responsibility to provide leadership and coordination by promoting and advocating best-practices and policies for prevention, harm reduction, treatment, and recovery among all levels of government and in communities.</p>	✓	<p>Prevention Committee will: Continue to advocate for passage of Tobacco 21 legislation. Continue to promote and endorse previous versions of SCAODA Ad-Hoc reports as applicable to the mission of the SCAODA Committee (available at https://www.dhs.wisconsin.gov/scaoda/adhoccommitteereports.htm)</p>
<p>3. Advocate for policies, adequate funding, capacity, and infrastructure to implement effective outreach, prevention, harm reduction, treatment, and recovery services for all in need.</p>	<p>3a: Expand prevention, treatment, and recovery interventions and supports across the lifespan.</p>	✓	
	<p>3b: Increase focus and resources for prevention, treatment, and recovery services for children, youth, transitional youth, and young adults.</p>	✓	<p>Prevention Committee will advocate for increase investment of Opioid Settlement Funds in primary prevention strategies that have demonstrated</p>

State Council on Alcohol and Other Drug Abuse (SCAODA) 2023-2027 Strategic Plan

PREVENTION COMMITTEE: Priority Objectives and Work Plan

SCAODA 2023-2027 Goals	SCAODA 2023-2027 Objectives	Prevention Cmte Priority Objectives (✓)	Targeted Actions
			effectiveness in reducing rates of opioid misuse and opioid use disorders.
	<p>3c: Continue revitalizing the Children, Youth and Family Treatment Sub-Committee.</p>		
	<p>3d: Build awareness and capacity to identify and address the changing needs of older adults due to substance use and misuse.</p>	✓	Prevention Committee will advocate for and support increased utilization of evidence-based interventions like SBIRT in all health and senior care services for older adults.
	<p>3e: Enhance and expand capacity within the substance use workforce to better understand and address the diverse needs of higher risk and underserved populations, including those with language and cultural barriers - as recommended in the CLAS.</p>	✓	Prevention Committee will be a leader in advocating for the full integration of CLAS in all prevention efforts.
	<p>3f: Advocate for and support increased utilization of evidence-based interventions like SBIRT in schools, workplaces, health care, and communities.</p>	✓	As recommended in the SCAODA <i>Moving Forward</i> report, the Prevention Committee will advocate that SBIRT become standard practice within all health care settings, judicial system, schools, and employee health and wellness programs.
	<p>3g: Advocate for and support adoption of innovative policies and promising practices and programs in substance use and misuse prevention, treatment, harm reduction, and recovery.</p>	✓	Prevention Committee will provide the state, municipalities, and coalitions with best-practice recommendations to protect those under age 21 from psychoactive hemp derivatives. Prevention Committee members will participate in and research innovative policies, promising practices, and programs at a local or state level, and then report back to leadership on a quarterly basis.
	<p>3h: Support and advocate for increasing the state excise tax on alcoholic</p>	✓	Prevention Committee will request that SCAODA call for Wisconsin to increase the state levied tax on beer, wine,

State Council on Alcohol and Other Drug Abuse (SCAODA) 2023-2027 Strategic Plan

PREVENTION COMMITTEE: Priority Objectives and Work Plan

SCAODA 2023-2027 Goals	SCAODA 2023-2027 Objectives	Prevention Cmte Priority Objectives (✓)	Targeted Actions
	beverages to the median tax level nationally, and increase the portion of tax revenue allocated for prevention, treatment, harm reduction, and recovery programs.		and distilled spirits to the median tax level nationally and the tax be indexed to the consumer price index so that the tax increases at a rate commensurate with the increased cost of living.
4. Reduce health disparities and inequities, recognize, and rectify historical trauma, and address biases within systems, policies, and practices.	4a: Improve the effectiveness of substance use prevention, treatment, harm reduction, and recovery services in addressing the needs of higher risk and historically underserved populations.	✓	Prevention Committee will support the Tribal Overdose Prevention project (TOP) by joining with representatives from participating tribes to serve as the project’s Advisory Council.
	4b: Expand scope of prevention, treatment, harm reduction, and recovery services to be inclusive of populations most impacted by social drivers of health - including socioeconomic standing, zip code, legal status, and other health disparities.	✓	Prevention Committee will submit request for the next biennium budget to fund a statewide qualitative assessment of Health Equity, Diversity, and Inclusion needs to support substance misuse prevention efforts in Wisconsin.
	4c: Support research and identification of substance use and misuse risk and protective factors.	✓	Prevention Committee will request that the next biennium budget and/or future opioid settlement dollars include funding to enhance local capacity for timely access of Youth Risk Behavior Survey data - including access to raw data to perform data analysis at a school, community, or state level.
	4d: Advocate for and support the adoption of innovative and promising practices and programs across the continuum of care that fully integrate the National CLAS Standards.	✓	A representative of the Prevention Committee (PC) will serve on the Diversity Committee (DC) to support the work of the DC and to ensure that DC recommendations are fully integrated into the work of the PC.

OPEN MEETING MINUTES

Name of Governmental Body: SCAODA Prevention Committee			Attending: Chris Wardlow, Frank Buress, Maureen Busalacchi, Meagan Barnett, Emily Holder, Melissa Moore, Danielle Luther, Hannah Lepper, Jodie Sorenson, Kat Becker, Liz Adams Staff: Yolanda Candler, Janet Fleege
Date: 1/18/2024	Time Started: 9:03 AM	Time Ended: 11:17 AM	
Location: Virtual Zoom			Presiding Officer: Chris Wardlow, Stacy Stone
Minutes			

Call to Order:

Meeting called to order at 9:03 AM by Chris Wardlow. Quorum confirmed to conduct council business. Members introduced themselves.

Public Input:

Chris opened space for public comment, and there was no public input.

Approval of October 19, 2023 minutes:

Melissa Moore made a motion to approve the minutes of October 19, 2023.

Maureen Busalacchi seconded the motion to approve the minutes.

Emily and Maureen brought forth corrections of spelling and one for clarification. Changes were made.

Meeting minutes were approved unanimously.

Welcome BPTR Multi-Cultural Coordinator.

- Allison Weber is the Multi-Cultural Coordinator. Allison shared that her job duties now included SCAODA staff for Diversity Committee with leadership of Co-Chairs Denise Johnson and Christy Malone, and she is the program manager for the Emerging Leaders program. Allison also shared that she is the lead for the CLAS standards for DCTS-BPTR, and there was an email mandate sent to all grantees about CLAS and offered assistance with CLAS standards. Chris Wardlow requested a presentation training from Allison Weber on CLAS standards and its relevance to prevention.

State Health Improvement Plan / Alcohol Action Team Update.

- Maggie Northrop was not in attendance to provide an update.

WisAPP

- Maureen Busalacchi shared that WisAPP recently held a webinar on alcohol regulation changes with over 180 registrants and that the recording posted on website. Maureen also shared that the Alcohol Age Compliance (AAC) manual is available and that the Wisconsin Alcohol Inspector is coming soon after reviewing with legal disclosures.
- The Alcohol Policy Seminar is October 7-8 at UW-Oshkosh with events tentatively scheduled mid to late day on the 7th and all day on 8th. Maureen also shared that there is an opportunity to work the Mothers Against Drunk Driving organization with a Heroes Luncheon to award law enforcement.
- Maureen shared that Felice Borisy-Rudin is wrapping up reports on the Northern County project and looking at their policies and data in detail, and she offered that Felice could provide a short synopsis of project efforts.
- Maureen provided an update on the WisAPP logic model and is looking for feedback from stakeholder input. AWY and the WISAPP Advisory Committee reviewed and provided additional feedback for additional changes. Maureen outlined a summary of the logic model and shared that current priorities are educating partners on burden of excessive alcohol use, growing partnerships, providing technical assistance, and tracking policy changes. Maureen and the Committee also discussed other possible changes that included identifying types of sectors, community needs and gaps, providing ongoing one-on-one trainings and technical assistance, and building capacity for stakeholders to implement their funding. Maureen shared that the WisAPP Advisory Committee membership included John Mange,

Noelle LaConte, Will Funmaker, Jodie Sorenson, Emily Thompson, Ritu, Michael Shindau, Bernestine Jeffers, and UWPHI. Chris Wardlow encouraged connecting with Maggie Northrop and Jenny Halet regarding the WisAPP Advisory Committee and logic model.

Tobacco 21

- Liz Adams provided updates related to Tobacco 21. Liz shared that the SYNAR violation rate released in late December 2021 went up to 13.6% from 11.9% in 2022 and shared that this increase is still lower than 2021 rates. Liz stated that if Wisconsin surpasses 20% for the SYNAR violation rate, we risk losing funding from the block grant. Liz discussed the TPCP meetings in September and shared that at the September convening with local and state partners, TPCP gathered input on what partners have been hearing in their community and what tools they needed to address this issue with SYNAR violations. Liz also stated that TPCP has been working internally on creating an action plan that increases conversations and education related to Tobacco 21, but these efforts are not yet finalized. The Prevention Committee discussed possible concerns and solutions regarding Tobacco 21 in Wisconsin.

Hemp Ad-Hoc Workgroup Updates

- Meagan Barnett provided an update and shared that the group intends to gather a one-year report that mimics the Seven Strategies of Change from CADCA. Currently, the workgroup has been conducting research and developed annotated bibliographies focusing on youth and hemp-derivatives. Meagan shared that the group is hoping to create tangible tools and adding these templates tools into the report along with prioritizing user friendliness. Chris Wardlow shared that with the focus of youth, we can hopefully see state regulation limiting access to people 21 and older. Meagan shared that the report would be a state, regional and local approach but more focused on the local approach with hopes of longevity of the products. Melissa Moore indicated that she would like to participate in the workgroup as much as possible. If any volunteers would like to join this workgroup, please contact Chris Wardlow.

Tribes of Wisconsin (PDO) Updates

- Yolanda Candler provided an update on the PDO/Tribal Overdose Prevention project. Yolanda shared that the project is currently in the process of building infrastructure and capacity for grant initiatives and that more detailed information will be provided soon.

SCAODA 2023-2027 Strategic Plan: Select Committee Priorities

- Chris Wardlow shared that SCAODA approved the strategic plan from 2023 – 2027 at the December meeting, and he stated that it is not radically different from the prior plan. Chris shared that he created a worksheet grid to help us align with our new strategic priorities in the Integration Treatment Committee. Chris shared that if people are interested, he will share this document with the Prevention Committee.

State Biennium Budget Recommendations

- Chris Wardlow questioned when the new process started, and Janet Fleege shared that she will circle back with the SCAODA Prevention Committee. Chris shared that the Prevention Committee had time to provide their recommendations, and no further discussion was held.

2024 Opioid Settlement Expenditure Recommendations

- Chris Wardlow shared that the Opioid Settlement Expenditure recommendations can be shared with the Joint Committee of Finance and that the Prevention Committee can provide recommendations via email or current discussion. Maureen suggested that it would be helpful to have the ask with the TPCP program and other groups, so these recommendations are coming from multiple sectors. Chris stated that he would look into this option, but he believed that these dollars needed focus on the opioid epidemic in the state. Janet Fleege stated that the Opioid Settlement Funds must be focused on opioids and that staff from the Office of the Secretary recently held invite-only Round Table discussions about opioid settlement funds. Janet shared that they are currently working on a report summary on the input from the community and the stakeholder meetings. Janet stated that she would invite Paul and the new Substance Use Initiatives Directors to this group to further discuss the Opioid Settlement Funds. Chris Wardlow stated that if there is going to be a report of recommendations to joint finance,

there is still an opportunity to reach out to joint finance as a SCAODA committee. Meagan Barnett questioned whether this will be happening every single year that we are getting the settlement dollars and shared concerns that our requests will continue to be denied.

Member/Agency Updates

- Melissa Moore shared information about a few bills that have moved forward:
 - Proposal: SB177 AB188 – <https://docs.legis.wisconsin.gov/2023/proposals/sb177>
Relating to: fatality review teams and granting rule-making authority...Under the bill, a fatality review team is defined as a multidisciplinary and multiagency team reviewing one or more types of death among children or adults and developing recommendations to prevent future deaths of similar circumstances. The bill generally governs a team's responsibilities, ability to access certain records, confidentiality requirements, and disclosure of information.
 - Proposal: SB595 AB634 (-0728)
relating to: immunity for certain controlled substances offenses for aiders and aided persons...This would reinstate what expired in 2020 re: to probation, parole, etc. violations - <https://docs.legis.wisconsin.gov/2023/proposals/REG/SB595>
 - Bill at stand still for reinstate for Good Samaritan/lots of communities talked about and another advocacy opportunity as a part of harm reduction efforts.
 - Proposal: SB875 AB950 (-5378)
relating to: excepting xylazine testing materials from the definition of drug paraphernalia and civil and criminal liability exemptions for distributing and administering xylazine testing products. <https://docs.legis.wisconsin.gov/2023/proposals/REG/AB950>
 - Proposal: SB267 AB271 (-2917) View Bill History
relating to: a grant program for recovery high schools and making an appropriation.
 - ACT 72 – Signed on 12/7/2023
 - Proposal: SB527 AB566 (-4592) View Bill History
relating to: grants for suicide prevention programming. Note: This will create new funding opportunities on an annual basis, requiring at least 20% match for up to \$25000 in grants.
 - ACT 85 – Signed on 12/7/2023
 - Proposal: SB268 AB273 (-1973) View Bill History – Which Liz mentioned!
relating to: Department of Revenue enforcement and providing a penalty. Note: this bill requires those that sell 'electronic vaping device' to obtain licenses and provides a definition.
 - ACT 73 – Signed on 12/7/2023
- Emily Holder shared that student mini AODA grants were awarded with award letters being sent soon. Emily also discussed that staff has been hired for the Stronger Connections grants. Emily stated that grants were due November 15th.
- Danielle Luther shared that the family health center is celebrating 50th year of service. Recently, they launched a brand-new website, and she shared that programs available are primary care, dental centers, community partnership programs, and ATOD programs. Danielle stated that a new electronic health medical record was launched. Danielle shared that they have three steering committees, three perinatal workgroups, a harm reduction workgroup, and a safer housing workgroup, and the organization is/will be offering long doula training, parent peer specialist trainings along with working on parent training curriculum and neonatal abstinence work. Danielle shared that the Hope Consortium conference will be August 1-2 and held virtually.
- Meagan Barnett shared that she recognizes that Marshfield has been in the news lately with the furloughing of staff and that leadership has about a 10% reduction in salary. Meagan stated that our center is mainly grant funded and that our leadership is very strong and recognizes the importance of the work that we are doing. Meagan shared that it is a sad time and that the new financial officer had to make some difficult decisions but necessary decisions. Meagan shared that we are not giving up and we have never been more grateful for our community partnerships. The team has doubled over a course of the year, and we are getting into departments to increase our treatment services. Meagan also stated that Meagan Otto has been crushing it and providing trainings for Northwoods coalitions.
- Jodie Sorenson stated that they have a ribbon cutting on February 8th and shared that NEWAHEC has experience many staff changes. Jodie stated that all the regional prevention centers are working

together to hold a SOR grantee meeting next week, and Jodie shared that she will be meeting with Senator Johnson at CADCA Forum on Capitol Hill along with other legislative members.

- Kat Becker shared that another SUPST training will be held soon, and no further updates were discussed at this time.
- Janet Fleege shared continued transition and open staff positions.

Meeting Adjourned.

Meeting was adjourned at 11:17 AM.

Prepared by: Yolanda Candler on 04/10/2024.

These minutes were approved by the governmental body on: 4/18/2024



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

<https://dhs.wi.zoomgov.com/j/1609638265?pwd=YjY5cUludGhVRVhESXd2VHFrR3RtUT09>

Meeting ID: 160 963 8265 Passcode: 894169

Thursday, April 18, 2024

9:00 a.m. to 12:00 p.m.

MEETING AGENDA

- 1. Welcome and Introductions..... Stacy Stone, Chair / Chris Wardlow
- 2. Public Comment Stacy Stone, Chair / Chris Wardlow
The committee will accept comments from the public relating to any committee business
- 3. Approve Minutes from January 18, 2024 Meeting..... Stacy Stone, Chair / Chris Wardlow
- 4. Director of Substance Use Initiatives Introduction..... Michelle Haese
- 5. State Health Improvement Plan / Alcohol Action Team Update..... Maggie Northrop
- 6. WisAPP Updates and Logic Model Review..... Maureen Busalacchi and Felice Borisy-Rudin
 - o Northern County Project Presentation..... Felice Borisy-Rudin
- 7. Tobacco 21 Updates..... Liz Adams
 - o Planning and Funding Committee Tobacco-21 Motion..... Chris Wardlow
- 8. Hemp Ad-hoc Workgroup Updates..... Chris Wardlow
- 9. Tribal Overdose Prevention Project Update..... Yolanda Candler
- 10. SCAODA 23-27 Strategic Plan: Finalize Committee Priorities..... Stacy Stone, Chair / Chris Wardlow
- 11. State Biennium Budget Recommendations..... Chris Wardlow
- 12. 2026 (and Beyond) Opioid Settlement Expenditure Recommendations..... Chris Wardlow
- 13. CLAS Standards Presentation..... Allison Weber
- 14. Member Updates..... Committee Members
- 15. Agency Updates..... Committee Members
- 16. Future Agenda Items..... Committee Members

Next meeting is Thursday, July 18, 2024.

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 Yolanda Candler at yolanda.candler@dhs.wisconsin.gov or (608) 320-2805.

<https://scaoda.wisconsin.gov>



SCAODA 2024 Meeting Dates

March 8, 2024 (Via Zoom)

June 7, 2024 (Via Zoom)

September 6, 2024 (Via Zoom)

December 6, 2023 (Via Zoom)

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.