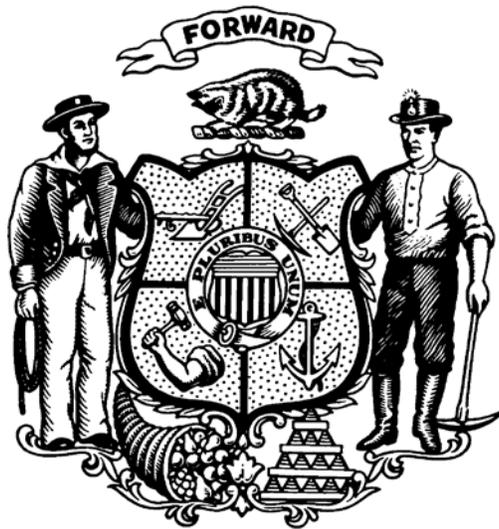


WISCONSIN STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE



March 7, 2014
MEETING

Michael Waupoose
Chairperson

SCOTT WALKER
Governor

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State Council on Alcohol and Other Drug Abuse (SCAODA) Strategic Plan Goals: July 2010 – June 2014

PRIMARY OUTCOME GOAL AND MEASURE:

The immediate primary outcome goal is to have Wisconsin no longer ranked in the top ten states for Alcohol and Other Drug Abuse (AODA) and problems related to AODA.

SCAODA's primary outcome goal is in accord with the Wisconsin Department of Health Services' "Healthiest Wisconsin 2020 Plan" regarding unhealthy drinking and drug use that results in negative consequences. Its goals are also consistent with the HW2020 lifespan and equity objectives and the data-driven priorities established through the current "Wisconsin Epidemiological Profile on Alcohol and Other Drug Use, 2008.

SCAODA GOALS:

1. SCAODA with its committees
 - a. Effectively fulfill the statutory dictate to provide leadership and direction on AODA issues in Wisconsin
 - b. Is a highly recognized and respected body that serves as the voice to whom the Governor, legislators, local coalitions, and media turn for guidance on AODA issues
 - c. Develop and exhibit broad collaborative leadership and aligned action across multiple sectors to advance progress on SCAODA goals.
2. Wisconsin cultural norms change to people vehemently rejecting social acceptance of the AODA status quo and demand and support methods to transform the state's AODA problems into healthy behavioral outcomes.
3. There will be educated Wisconsin citizens regarding the negative fiscal, human and societal impacts of AODA in WI (e.g., risk and addiction, prevention, stigma, treatment and recovery, including the racial and gender disparities and inequities relative to these issues).
4. Wisconsin will have adequate, sustainable infrastructure and fiscal, systems, and human resources and capacity:
 - a. For effective prevention efforts across multiple target groups including the disproportionately affected
 - b. For effective outreach, and effective, accessible treatment and recovery services for all in need¹.
5. SCAODA with its committees provide leadership to the Governor and Legislature and other public policy leaders to create equity by remedying historical, racial / ethnic and other systems bias in AODA systems, policies and practices that generate disparities and inequities toward any group of people.

¹ Effective prevention, treatment and recovery services include: using science and research based knowledge, trauma informed, culturally competent, and use of practices that have promise to work.

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Tobacco-Free Environment

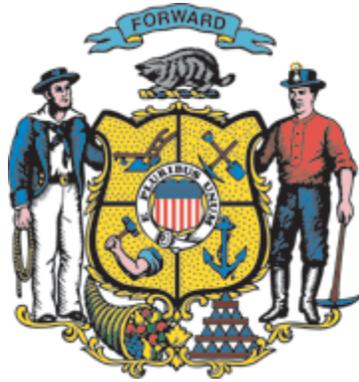
American Family Insurance is a tobacco-free environment. We prohibit the use of tobacco products everywhere, by anyone, at all times.

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

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

Meeting Coordinator – Please make sure the meeting participants are aware American Family is a Tobacco-Free Environment.

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SCAODA 2014 Meeting Dates

**American Family Insurance Conference Center
6000 American Parkway
Madison, WI 53783**

**The March meeting will be from 9:30am to 3:30pm
and will be in Room A3151.**

**The June, September and December meetings
will be held in room CL3300A&B.**

The meeting dates are:

March 7, 2014

June 6, 2014

September 12, 2014

December 12, 2014

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State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

March 7, 2014

MEETING AGENDA

9:30 a.m. – 2:00 p.m.

American Family Insurance Conference Center
6000 American Parkway, Madison, WI 53783
Building A, Room A3151

American Family General Information: (608) 242-4100 ext. 31555 or ext. 30300

Please call Kris Moelter at (608) 267-7704 or email Kristina.Moelter@Wisconsin.gov if you or your designee will not attend the meeting.

- 9:30 a.m. I. Introductions / Welcome / Pledge of Allegiance / Announcement Noise Level / Agenda – Michael Waupoose
 - Meeting being recorded
- 9:35 a.m. II. Review / Approval of December 13, 2013 minutes – Michael Waupoose....pp. 10 – 17
- 9:40 a.m. III. Public input (maximum five minutes per person) – Michael Waupoose

9:50 a.m. IV. Committee reports

SCAODA goals				
Provide Leadership	Change the Culture	Educate Citizens	Sustain Infrastructure	Address Disparities

- Executive Committee – Michael Waupoose....pp. 25 – 35
 - Status of motions from December meeting....pp. 27
 - Letters to Governor Walker and the party caucuses re: the OWI surcharge....pp. 27
 - Conference planning
 - Interim Executive Committee action....pp. 28 – 35
 - Letter re: OWI Study Legislation....pp. 28 – 29
 - Letter re: SCAODA supports SB 350, 351, 352, and 353—bills that responsibly address Wisconsin’s opioid abuse problem....pp. 30
 - Letter re: SCAODA expressing its support for SB 510—tribal treatment facility participation in the intoxicated driver program....pp. 31
 - Letter re: SCAODA support for AB 642—the bill prohibiting the sale of intoxicating liquor containing 95 percent or more of

- alcohol by volume....pp. 32
 - Letter re: SCAODA supports returning 17-year-olds to the jurisdiction of the juvenile court. SCAODA supported the return during the last legislative session and it now reaffirms its position by supporting AB 387 and SB 308—the Second Chance Act....pp. 33 – 34
 - Article: CVS calls it quits: No more tobacco products....pp. 35
- Diversity Committee – Tina Virgil....pp. 36 – 45
- Intervention and Treatment Committee – Norm Briggs and Roger Frings....pp. 46 – 57
 - Substance Abuse Workforce ad hoc committee
 - Motion: The Intervention and Treatment Committee (ITC) makes a motion that SCAODA supports AB701 and requests the executive committee to provide written or oral testimony. AB 701 (companion to SB 541) requires the Department of Health Services (DHS) to create two or three regional comprehensive opioid treatment programs to provide treatment for opiate addiction in rural and underserved, high-need areas. In creating the program, DHS must obtain and review proposals for opioid treatment programs in its request-for-proposal procedures. These programs may not offer methadone treatment. An opioid treatment program, under the bill, must offer an assessment to individuals in need of service to determine what type of treatment is needed. The opioid treatment program must provide counseling, medication-assisted treatment, and abstinence-based treatment. If a licensed residential program is necessary for an individual, the opioid treatment program must transition the individual there. The opioid treatment program must transition individuals who have completed treatment to county-based or private post-treatment care. The bill also requires DHS to submit annually, beginning approximately two years after the bill's effective date, a progress report on the outcomes of the opioid treatment program to the Joint Committee on Finance and appropriate standing committees of the legislature....pp. 57
- Planning and Funding Committee – Joyce O'Donnell pp. 58 – 64
 - Possible Motion: SCAODA support the funding and development of a new *Burden of Excessive Alcohol Use in Wisconsin* report....pp. 64
- Prevention Committee – Scott Stokes....pp. 65 – 71
 - Heroin ad hoc committee
 - Underage Drinking Prevention DVD viewing/endorsement
 - Motion: To endorse the SAMHSA funded Wisconsin Underage Drinking Prevention video (with appropriate edits) and to present

this video to the State Council on Alcohol and Other Drug Abuse at their March 7, 2014 meeting for full Council endorsement and dissemination....pp. 71

- 10:45 a.m. V. • Four-year plan update – Michael Waupoose....pp. 72
- 11:15 a.m. VI. • Peer Run Respite Initiative – Sue Shemanski
- 11:30 p.m. VII. • Department of Justice/Office of Justice Assistance merger – Lindsey Draper and Matt Raymer
- 12:00 p.m. VIII. • LUNCH
- 12:30 p.m. IX. • State agency reports
 - Department of Revenue – Matthew Sweeney
 - Department of Health Services and ACA update – Kevin Moore
 - UW System – Anne Hoffmann
- 1:30 p.m. X. • Agenda items for next meeting
- 1:45 p.m. XI. • Announcements – Joyce Allen and Lou Oppor
 - Speaker’s Task Force mental health bills
 - 2014 Substance Abuse Block Grant allocation
- 2:00 p.m. XII. Adjourn – Michael Waupoose

<p style="text-align: center;">2014 Meeting Dates March 7, 2014 June 6, 2014 September 12, 2014 December 12, 2014</p>
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Presentations from the State Council on Alcohol and Other Drug Abuse meetings are recorded and can be found online at: <http://scaoda.state.wi.us/presentations.htm> .



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE
MEETING MINUTES

December 13, 2013

9:30 a.m. – 3:30 p.m.

American Family Insurance Conference Center
6000 American Parkway, Madison, WI 53783
Building A, Room A3151

Members present: Colette Brown, Norman Briggs, Douglas Englebert, Cheryl Eplett, Steve Fernan, Roger Frings, Katie Gruber (for Craig Harper), Sandy Hardie, Kevin Moore, Joyce O'Donnell, Charlotte Rasmussen, Mary Rasmussen, Sue Shemanski, Duncan Shrout, Scott Stokes, Tina Virgil, Michael Waupoose

Members absent: Garey Bies, Tim Carpenter, Sandy Pasch

Ex-officio members present: Randall Glysch, Katie Paff, Matthew Sweeney

Ex-officio members excused: Anne Hoffman

Ex-officio members absent: Thomas Heffron, Raymond Perez, Linda Preysz, Robert Williams

Staff: Joyce Allen, Ashleah Bennett, Faith Boersma, LeeAnn Cooper, Pat Cork, Tanya Hiser, Kris Moelter, Christy Niemuth, Lou Oppor, Donna Riemer, Mai Zong Vue, Raina Zwadzich

Guests: Bruce Christiansen, Bill McCulley, Emma Sturm, Paul Krupski, Dave Macmaster, Todd Campbell, Christie Ulstrup

Michael Waupoose called the meeting to order at 9:30 a.m.

I. Introductions – Michael Waupoose introduced Cheryl Eplett as the new Department of Corrections representative and Katie Paff as the new Department of Safety and Professional Services representative. He also introduced Mai Zong Vue from the Department of Health Services. Ms. Vue will staff the Diversity Committee.

He announced that the SCAODA meetings in 2014 will be recorded and available via live webcast.

II. Approval of September 13, 2013 minutes – Joyce O’Donnell moved (Duncan ShROUT second) to approve the September 13, 2013 meeting minutes. **Motion passed unanimously.**

III. Public input – None

IV. Committee reports

- **Executive Committee** – Mr. Waupoose reported that the Executive Committee met two times during the quarter.
 - Legislative comment process – Mr. Waupoose explained the legislative comment process. The Department of Health Services (DHS) staff will review legislation and send a list of AODA-related bills to the Executive Committee and the Four Chairs Committee weekly. The committee chairs will send the updates to their respective committees. If any of the committee chairs or Executive Committee members thinks SCAODA should comment on a bill, s/he will contact DHS staff and an executive committee meeting will be scheduled to discuss the recommendation and decide if SCAODA should comment. If any committee chair or Executive Committee member wants a bill followed, DHS staff will follow that bill. The Executive Committee will decide if the comment will be written or in person testimony and decide which SCAODA member should provide the testimony. The testimony form template will be posted on the SCAODA website. The purpose is to enable SCAODA to keep abreast of AODA-related legislation and respond quickly.
 - Four-year strategic plan – Mr. Waupoose announced that the strategic planning sessions will be on January 14 and February 18, 2014. A preliminary report will be provided at the March SCAODA meeting.
 - Status of September motions – Mr. Waupoose reported that letters were sent to DHS regarding contract provider compensation and the Minority Training Project. SCAODA is awaiting a response. A letter was sent to the Department of Safety and Professional Services regarding creating a counselor education requirements workgroup. SCAODA is awaiting a response. SCAODA sent a letter to Senator Carpenter asking he request a legislative study on Wisconsin’s OWI laws. Senator Carpenter’s office contacted DHS asking for clarification.
 - UW letter of support – SCAODA sent a letter of support for the UW flexible option AODA certification program. UW will soon offer this program.
 - Wisconsin Council on Mental Health/SCAODA relationship –Sandy Hardie, Charlotte Rasmussen, and Norman Briggs have volunteered to serve on some of the Wisconsin Council on Mental Health committees.
- **Diversity Committee** – Tina Virgil reported the committee is establishing goals that are consistent with SCAODA’s goals and has set a meeting schedule. The internal website

for committee members is operating and the goal is to launch the external website by the end of 2014. She also reported that Mai Zong Vue is the committee's new staff person.

- **Intervention and Treatment Committee** – Mr. Briggs reported that Sarah Norberg resigned and has taken a job in Minnesota. Tanya Hiser will staff the committee until Ms. Norberg's replacement is hired.

Mr. Briggs (Mr. Shroul second) made the following motion: SCAODA shall create an ad hoc committee on the Substance Use Disorder Treatment Workforce comprised of representatives of the stakeholder groups to make recommendations related to effective treatment availability statewide now and into the future. Mr.

Briggs stated that the workforce issue is the topic at many public forums, is a priority for the Intervention and Treatment Committee and the Diversity Committee, and is a concern for people working in the field. Wisconsin's the substance abuse workforce is declining because people are retiring, fewer young people are coming into the workforce, and the uncertainty of educational requirements/billing. Mr. Shroul said that the Intervention and Treatment Committee can create an ad hoc committee to address this issue. **Mr. Shroul (Ms. Virgil second) moved to amend the motion to read "The Intervention and Treatment Committee shall create an ad hoc committee on the Substance Use Disorder Treatment and Prevention Workforce comprised of representatives of the stakeholder groups to make recommendations related to effective prevention and treatment availability statewide now and into the future." The motion to amend passed unanimously. The motion as amended passed unanimously.**

Tobacco policy presentation: David Macmaster and Bruce Christiansen presented the proposed *Policies and Procedures for Tobacco-free Facilities and Services in Wisconsin's Substance Abuse & Mental Health Treatment Programs*. Mr. Macmaster said 80 percent of those in substance abuse treatment use tobacco, but until recently nicotine dependence has not been treated in this population. He said research shows nicotine dependence can be treated simultaneously with treating other substance abuse dependence. Mr. Christiansen explained the guidelines are for substance abuse and mental health treatment providers and apply to both inpatient and outpatient. They include guidance on tobacco-free policies and practices for the institutions, for those in treatment, and for employees. The guidelines and a video on the guidelines' implementation in Wisconsin are located at www.helpusquit.org and http://www.ctri.wisc.edu/HC.Providers/healthcare_mental.health_2013hl.htm

Mr. Briggs (Scott Stokes second) made the following motion: The Intervention and Treatment Committee requests that SCAODA endorse the *Policies and Procedures for Tobacco-Free Facilities and Services in Wisconsin's Substance Abuse and Mental Health Treatment Programs* and recommends all agencies consider adopting this or similar policies and procedures based on their specific program needs. Steve Fernan asked for clarification regarding whether patient noncompliance with the tobacco could result in a sanction of discharge or transfer to another facility. Mr. Macmaster said the guidelines use the same approach for tobacco that is used for other substances and

violations of policies. Relapse is dealt with therapeutically rather than in a disciplinary fashion and focuses on progressive consequences. In some cases patients may be referred to another level of service. Mr. Christiansen clarified that the policies only apply to facility grounds and not to what patients choose to do offsite. **Motion passed—15 yes, 0 no, 2 abstentions (DHS and Department of Transportation (DOT)).**

- **Planning and Funding Committee** – Ms. O’Donnell reported that DHS gave a presentation at the November committee meeting regarding the contracting process. The committee was encouraged that DHS is looking more closely at the process. She said the committee hosted a public forum at the annual Mental Health/Substance Abuse Conference held in October in Wisconsin Dells. It was well-attended. Mr. Waupoose asked that the Four Chairs discuss how to best use the information gathered at the public forums at their next meeting.

Ms. O’Donnell (Mr. Shroul second) made the following motion: The Planning and Funding Committee requests that SCAODA pass a motion asking conference planners to schedule public forums at a more convenient time to encourage participant attendance and so as not to conflict with other public forums. Conference planners should also provide incentives to encourage attendance, such as providing food and/or CEUs. Motion passed— 16 yes, 0 no, 1 abstention (DOT).

Ms. O’Donnell withdrew the following motion because committees do not need SCAODA approval to appoint members:

The Planning and Funding Committee requests that SCAODA approve Nina Emerson as a member of the Planning and Funding Committee.

Ms. O’Donnell (Mr. Shroul second) made the following motion: SCAODA send letters to Governor Walker and the chairpersons of the Republican and Democratic caucuses expressing its concern that as part of the budget bill (1) the driver improvement surcharge was increased, and (2) the state portion of the surcharge distribution was increased considerably and this appears to have been done with no notice to interested parties nor consideration of the adverse consequences. Ms. O’Donnell said the committee is concerned that the surcharge was increased and the state is keeping a larger portion than in the past. It is also concerned that much of the increase will go to the Safe Ride Program. Mr. Shroul reminded the council that about two years ago it approved the IDP subcommittee recommendations, and one of those was to change the funding formula so counties could keep more of surcharge. The new surcharge formula ignores the local treatment part of the program and will ultimately result in fewer funds at county level to treat intoxicated drivers. He said the surcharge has grown from \$365 to \$435. That is a significant additional burden on intoxicated drivers and there is no evidence that it will change their ways. Even though this is now the law, he said SCAODA should tell the Governor and Legislature that this was a bad idea and they should have talked to others who are knowledgeable in this area before enacting such a law. **Motion passed—10 yes, 0 no, 7 abstentions (Controlled Substances Board,**

DHS, Department of Justice (DOJ), Department of Public Instruction, DOT, Office of the Commissioner of Insurance, Pharmacy Examining Board).

- **Prevention Committee** – Mr. Stokes reported the committee has two new members. The Drug-Free Communities Coalitions will host town hall meetings in 2014, and Wisconsin will continue to participate in the *Parents Who Host Lose the Most* campaign. DHS provided training to prevention specialists, one of which targeted Native Americans.

The 911 Good Samaritan Report has been published. One of the recommendations was to form a heroin ad hoc committee, which the Prevention Committee has done. The ad hoc committee had its first meeting in November and has 25 members. It will focus on five areas—prevention, treatment, harm reduction, law enforcement, and business. The goal is to create a heroin prevention/reduction template that communities throughout Wisconsin can use to address the heroin problem.

V. Youth Risk Behavior Survey results – Mr. Fernan presented the results of the 2013 Youth Risk Behavior Survey. The powerpoint is on the website at: http://sspwi.dpi.wi.gov/sspwi_yrbsindx. The survey looked at AODA use, tobacco use, sexual activity, violence, depression, dietary patterns, and physical activity among Wisconsin's high school students. Fifty-three high schools participated and the response rate was sufficient so Wisconsin qualified for weighted data, meaning the results can be said to reflect Wisconsin students as a whole.

Some of the highlights included: AODA and tobacco use is trending down for the most part.

- 33 percent smoked at least once, down from 64 percent in 2001
- 12 percent smoked in the last 30 days, down from 38 percent in 1999
- 21 percent had ridden in the last 30 days with a driver who had been drinking, down from 39 percent in 1993
- 66 percent had at least one drink in their life, down from 78 percent in 2007 (the earliest year of the comparison question)
- 33 percent had one drink in the last 30 days, down from 48 percent in 1993 and a high of 54 percent in 2001
- 18 percent reported binge drinking, down from 29 percent in 1993 and a high of 34 percent in 2001
- 31 percent have used marijuana at least once, up from 23 percent in 1993, but down from 43 percent in 2001
- 17 percent have used marijuana in the last 30 days, up from 11 percent in 1993, but down from 25 percent in 2001
- 4 percent have used cocaine, which remains flat since 1993 except for a jump to 10 percent in 2003
- 6 percent have used inhalants, down from 16 percent in 1997
- 15 percent have taken a prescription drug without a prescription, down from 18 in 2011, which is the first time the question was asked

VI. Bylaws modification – Mr. Stokes led a discussion of the proposed bylaws changes. There are three proposed changes: (1) eliminate the interdepartmental coordinating committee, (2) eliminate the reference to the Office of Justice Assistance, and (3) change the name of the Department of Regulation and Licensing to the Department of Safety and Professional Services. **Mr. Stokes (Ms. O'Donnell second) moved to approve the bylaws changes. Motion passed unanimously.**

VII. Peer Run Respite Initiative – Sue Shemanski reported on the Peer Run Respite Initiative. The advisory committee has met three times. Peer Run Respite facilities are operating in other states and Wisconsin is looking at starting one. The facilities are run by peers, not governmental agencies. Wisconsin is looking at homes that will serve mental health and substance abuse needs. Other states mostly operate mental health facilities. Wisconsin will need to develop rules on who can use the homes and methods to measure outcomes. The DHS will release an RFP in early 2014.

VIII. Attorney General's heroin prevention efforts – Kevin Jones and Christina McNichol presented on the Attorney General's Heroin Prevention Campaign. Mr. Jones is the director of the crime laboratory at DOJ. He said the amount of heroin sent to the lab has doubled since last year. The heroin is becoming purer and the Green Bay, Madison, and Milwaukee areas are seeing large increases in the amount of heroin.

Ms. McNichol is the special agent in charge of the heroin initiative. She presented on the heroin campaign, *The Fly Effect*. The campaign's goal is to discourage young people from trying heroin. There is an interactive website (theflyeffect.com) as well as radio, television, and movie theater ads. DOJ recently awarded grants to Green Bay, Dane County Sheboygan, and Wausau to combat heroin use.

IX. State agency reports

- **Department of Revenue** – Matt Sweeney reported on the excise tax collections. Excise tax revenue through November is up five percent over last year. The cigarette tax collections increased 4.31 percent, while the liquor tax collections increased over three percent from last year and the beer tax collections are down 2.5 percent.
- **Pharmacy Examining Board** – Charlotte Rasmussen reported the board met on Wednesday and finished clean up on prescription drug monitoring program. The program is going smoothly. There are many queries from physicians and pharmacists.
- **Department of Corrections** – Cheryl Eplett distributed a report on the substance abuse prevention and treatment activities at the Department of Corrections (DOC) community corrections. She also reported that DOC is using a risk assessment tool to help decide to whom it offers treatment. The focus is on providing services to medium and high risk offenders, consistent with best practice. DOC is looking at program standards and making sure all programs, including AODA programs, meet best practice standards.

- **Department of Health Services** – Kevin Moore reported that there will be a three-month delay in moving people whose income is above the poverty line to the healthcare marketplace and opening Medicaid to childless adults living below the poverty line. To date about 5,400 people have gone through the marketplace for insurance but there are no data on how many have paid the premium. He also reported that the DHS and DOC are partnering to help offenders reintegrate into the community. Many released offenders will qualify for Medicaid.

X. Affordable Care Act presentation (ACA) – Shel Gross and Jon Peacock presented on the Affordable Care Act. The powerpoint and handouts can be found at <http://www.scaoda.state.wi.us/presentations.htm>. Mr. Gross reported that parity will be required for individual plans, not just group health plans, through the essential health benefits feature of the ACA. Some challenges for parity may be prior authorization to limit services; sometimes commercial insurers are not familiar with transitional treatment services; limited medication coverage; and workforce issues around substance abuse providers—with a larger eligible population and declining workforce, who will serve them? Under the ACA prevention services are provided at no cost, including AODA screening. While the ACA eliminates pre-existing condition exclusions and provides that all policies provide essential health benefits, insurance companies can adjust premiums for smokers by adding a 50 percent surcharge. There have been problems with the federal website and some private insurance policies are being cancelled. As of April 1 Wisconsin will not have a gap in coverage for adults below the poverty level. However, some people may not be able to afford marketplace coverage and not qualify for Medicaid. Mr. Gross said plans can decide what is medically necessary, but they must use the same procedure as they use for other services under the parity rules. He also said the ACA will not change the eligibility for residential care or the requirement of assessments being provided by people with master's degrees. Another part of the parity issue is whether AODA providers are being paid the same as those who provide other services. Mr. Moore said that only insurance agents can provide advice on which plan may be best for an individual under the marketplace so DHS and the Office of the Commissioner of Insurance have trained insurance agents on Medicaid and other plans so they can offer sound advice to consumers.

XI. Synar Report – Nancy Michaud reported on the 2013 Synar Report. This report details Wisconsin's progress on enforcing youth tobacco access laws. A copy of the report is on the DHS website at <http://www.dhs.wisconsin.gov/substabuse/docs/Synar2014.pdf>. States are required to keep the retailer violation rate below 20 percent or lose 40 percent of their Substance Abuse Block Grant funds. The Synar Report is based on an annual survey of random, unannounced inspections of retailers. Teams of minors and adults try to buy tobacco and that is how the violation rate is determined. The 2013 rate was 7.3 percent. The last four years the rate has been around 5 percent. For the last 10 years the rate has been below 10 percent, while prior to 2001 the retailer violation rate was over 30 percent.

XII. Substance Abuse Block Grant annual report – Joyce Allen reported that DHS has filed its Substance Abuse Block Grant annual report. Wisconsin met four of its six goals. It is working on the improving data collection and reducing underage drinking goals. See the reports provided in the meeting materials.

XIII. Agenda items for the March 7, 2013 meeting

- Affordable Care Act update
- Peer Run Respite update
- Impact of Department of Justice/Office of Justice Assistance merger
- Planning process and interim report

XIV. Announcements – Ms. Allen reported that DHS and the Department of Public Instruction have partnered on a SAMHSA grant to improve access to mental health and AODA services in the Beloit, Racine, and Menominee School Districts. Mr. ShROUT reported that the University of Wisconsin Medical School has submitted two proposals for funding for school-based SBIRT programs. He will let the SCAODA know if either is funded.

XV. Adjourn –The meeting adjourned at 3:01 p.m.

2014 SCAODA meeting dates:

March 7, 2014

June 6, 2014

September 12, 2014

December 12, 2014

Scott Walker
Governor



Michael Waupoose
Chairperson

Duncan Shrout
Vice-Chairperson

Scott Stokes
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE
MEETING MINUTES

September 13, 2013

9:30 a.m. – 3:30 p.m.

American Family Insurance Conference Center
6000 American Parkway, Madison, WI 53783
Building A, Room A3151

Members present: Colette Brown, Tim Carpenter, Douglas Englebert, Steve Fernan, Roger Frings, Sandie Hardie, Katie Morrow (for Craig Harper), Pat Cork (for Kevin Moore), Joyce O'Donnell, Mary Rasmussen, Sue Shemanski, Duncun Shrout, Tina Virgil, Michael Waupoose

Members excused: Norman Briggs, Scott Stokes

Members absent: Garey Bies, Ed Wall, Charlotte Rasmussen, Sandy Pasch

Ex-officio members present: Anne Hoffman, Raymond Perez, Matt Sweeney, Ray Luick

Ex-officio members excused: Randall Glysch

Ex-officio members absent: Colleen Baird, Thomas Heffron, Don Pirozzoli, Linda Preysz, Robert Williams

Staff: Joyce Allen, Arlene Baker, Ashleah Bennett, Faith Boersma, LeeAnn Cooper, Tanya Hiser, Bernestine Jeffers, Kris Moelter, Sarah Norberg, Lou Oppor

Guests: Todd Campbell, Nina Emerson, Sue Gudenkauf, Kristine Hayden, Denise Johnson, Paul Krupski, Bill Lauer, David Macmaster, Tera Cater Vorpahl

Michael Waupoose called the meeting to order at 9:33 a.m.

I. Officer elections – Joyce O'Donnell presented the slate of candidates—Michael Waupoose (chairperson), Duncan Shrout (vice chairperson), and Scott Stokes (secretary). There were no nominations from the floor. The candidates were elected unanimously.

II. Recognitions – SCAODA recognized the following people for their contributions to the substance abuse field:

- Arlene Baker
- Nina Emerson
- Rebecca Wigg-Ninham
- Montana Connell

III. Approval of June 7, 2013 minutes – Duncan Shroul (Ms. O’Donnell second) moved to approve the June 7, 2013 meeting minutes. **Motion passed—14 yes, 0 no, 0 abstentions**

IV. Public input – David Macmaster reported that the new policies and procedures for tobacco integration guidelines to establish tobacco-free programs will be released next week. He thanked SCAODA for supporting those efforts. He also reported that the Wisconsin Recovery Community Organization opened its first recovery community center in Madison. The center is open two days a week but will eventually expand its hours. This is a project that could be replicated throughout the state.

Bill Lauer from the Oxford House reported that it is listed on the national registry of evidence-based care. They are looking to address needs in the Milwaukee area.

V. Department of Justice (DOJ) report – Ray Luick provided an update on the Department of Justice/Office of Justice Assistance merger. As of July 1, 2013 the Office of Justice Assistance is part of DOJ and no longer exists as a separate office. DOJ is now administering the Treatment Alternatives and Diversion (TAD) program. It has funding available for new TAD and drug court programs and will be hosting several grant-writing seminars around Wisconsin next week.

VI. Committee reports

- **Executive Committee** – Mr. Waupoose reported on the August Executive Committee meeting. The committee has asked the Department of Health Services (DHS) staff to come up with ideas on how to improve turnout at the public forums and present a plan to the committee at its October 9 meeting. Two ideas the committee is considering are holding the forums during lunch instead of at the end of the day and providing continuing education credits for attending the forums.

The committee also discussed SCAODA’s involvement with the legislature and proposed legislation. Mr. Shroul, Lou Oppor, and Kris Moelter met on August 28 and drafted a proposal the committee will consider at its October meeting. A plan will be presented to SCAODA at the December meeting. The committee also sent letters to SCAODA’s legislative members asking how SCAODA could encourage their attendance at meetings. Mr. Shroul asked SCAODA members to contact the Executive Committee if they knew any Republican senator who might be interested in serving on SCAODA.

- Governor's Office appointments – Joyce O'Donnell, Mary Rasmussen, and Scott Stokes were reappointed to SCAODA. Their terms expire July 1, 2017.
- Four-year strategic plan – Mr. Waupoose explained that the 2014-2018 plan is due by June 30, 2014. It will cover the fiscal year, so it will begin on July 1, 2014. The Executive Committee members and the chairs of each standing committee are required to be part of the planning process. Other SCAODA members may volunteer to be part of the process. The SCAODA strategic planning group will develop the goals for the next four years and the committees will develop work plans that support SCAODA's goals. Historically the committees have prepared annual reports detailing accomplishments during the previous year. In September 2014 the committees' reports will need to detail the accomplishments covering the entire 2010-2014 plan period.
- Reports – Mr. Waupoose reported that letters were sent to stakeholders regarding the 911 Good Samaritan Report, the SBIRT Report, and the Burden of Excessive Alcohol Use Report.
- **Diversity Committee** - Raymond Perez presented the committee's annual report. He said the committee is focusing on future activities, including diversity training, increasing committee membership, and working with higher education institutions on educational requirements for substance abuse counselors. There is a Warrior Summit in November—a workshop designed to bring together veterans, military, and outside participants that provide services to the veteran's community so they can all collaborate.

The committee has developed a website that includes an internal site for committee members and an external, public site. It demonstrated the site at the SCAODA meeting.

Tina Virgil (Mr. ShROUT second) made the following motion: SCAODA initiate an executive review of current council membership as established under Wis. Stats. section 14.017(2) and propose appropriate revisions to assure that all state departments with an interest in substance abuse prevention, treatment or recovery services are represented as voting members of the council. Ms. Virgil explained that new state agencies have been created since the statute creating SCAODA and its members was enacted. She said the new agencies need to be reviewed and given an opportunity to participate in SCAODA as voting members. Mr. ShROUT explained that SCAODA previously passed a motion seeking to expand citizen membership, and that the Planning & Funding Committee was bringing forth a similar motion. These two motions are not competing motions but both need legislative support. **Motion passed—14 yes, 0 no, 0 abstentions.**

Ms. Virgil (Mr. ShROUT second) made the following motion: SCAODA requests the Department of Health Services consider options to implement the Minority Training Project. Motion passed—13 yes, 0 no, 1 abstention (Pat Cork, DHS)

- **Intervention and Treatment Committee** – Roger Frings reported that 10-15 stakeholders attended the Rural Institute public forum at UW-Stout. The most significant concern is substance abuse counselor education requirements and the certification process for recovery coaches and if they will need bachelor’s degrees for reimbursement. The committee had a presentation on the education and certification requirements from the Department of Safety and Professional Services (DSPS). DSPS sets the educational standards and currently counselors do not need bachelor’s degrees before certification.

Mr. Frings announced that Dave Macmaster won the 2013 William F. “Bill” Callahan Award. This is a national award for advocacy to help patients with addiction issues to quit smoking.

Mr. Frings also reviewed the committee’s annual report.

Mr. Frings (Mr. Shroul second) made the following motion: SCAODA send a letter to the Department of Safety and Professional Services (DSPS) requesting a workgroup be convened to explore the implications of changes in the educational levels for substance abuse counselors. This is a pressing issue as DSPS has already reached out to ITC, and it is vital we have a voice in any potential changes. We further recommend there be representation from the following stakeholders included in the work group: credential holders, consumers, representatives from each SCOADA standing committee, and tribal nations. The discussion centered around the need for administrative rules and how this process has not started, so now is the time to have input. **Motion passed—14 yes, 0 no, 0 abstentions**

- **Planning & Funding Committee** - Ms. O’Donnell reviewed the committee’s annual report.

The committee’s first motion, to recognize Nina Emerson, was not made because she was formally recognized earlier in the meeting for her work on substance abuse issues.

Ms. O’Donnell (Mr. Shroul second) made the following motion: SCAODA support a legislative study to do a comprehensive review of the OWI laws, penalties and treatment services in Wisconsin. Ms. O’Donnell explained that several bills have been introduced into the legislature this session and they focus on enforcement and increasing penalties. Mr. Shroul explained that the committee is suggesting that before additional legislation is introduced, SCAODA needs to give the legislature advice on treatment and how to reduce problems initially and that requires an analysis of current laws by the Legislative Council. The request for the study needs to come from a legislator. Senator Carpenter will submit a letter to the Legislative Council requesting a study. Ms. O’Donnell requested SCAODA send a letter as well. **Motion passed—14 yes, 0 no, 0 abstentions**

Ms. O’Donnell (Mr. Shroul second) made the following motion: SCAODA send a letter to the Secretary of the Department of Health Services recommending that the Department budget for increased costs to continue for the re-applications of

provider agencies with contracts with the Department. The amount of the increase should be based on the Consumer Price Index or other standard, recognized measure. Ms. O'Donnell explained that the DHS contract providers have had no funding increase in many years and the committee wants DHS to consider giving the current contract providers more money when they submit reapplications for funding. Joyce Allen reported that the federal Substance Abuse Block Grant, which provides funding for the contract providers, was cut \$1.4 million in 2013 due to the sequester and DHS expects it to be cut another \$2.5 million in 2014. Ms. O'Donnell said the committee understands there could be consequences for others receiving grants if this motion passes. Mr. Shrout explained that some programs are exceptional and some are not as effective so the committee wants DHS to look more closely at all the contracts. As money becomes tighter, DHS should be more proactive in approaching contracts. He said this is an advisory motion meant to make a suggestion to DHS. **Motion passed—12 yes, 0 no, 2 abstentions (Mr. Cork, DHS and Colette Brown, Department of Transportation (DOT))**

Ms. O'Donnell (Mr. Shrout second) made the following motion: SCAODA recommend to the Department of Health Services that any organization performing at a high level vis a vis the contract deliverables should be additionally rewarded up to 5% of the current contract. This motion was withdrawn by Ms. O'Donnell and Mr. Shrout.

Ms. O'Donnell (Mr. Shrout second) made the following motion: SCAODA's executive committee work with the Governor's Office, legislature, and the Department of Health Services Secretary's Office to pursue implementation of the position SCAODA took in 2008 requesting its legislative members introduce legislation increasing the number of statutory members from 22 to 27. Mr. Shrout explained that this motion was to increase the number of citizen members. **Motion passed—12 yes, 0 no, 2 abstentions (Mr. Cork, DHS and Ms. Brown, DOT)**

Ms. O'Donnell continued the committee report saying the committee continues to be concerned about the alcohol/beer tax, adequate funding for women's issues, the implementation of SBIRT, and the Affordable Care Act. It is working on how SCAODA and the Wisconsin Council on Mental Health can work together and will report to SCAODA at the December meeting.

Ms. O'Donnell thanked LeeAnn Cooper and the DHS staff for their work with the committee and SCAODA over the past year.

- **Prevention Committee** – Mr. Oppor presented the committee's annual report. He explained that this committee takes an approach to develop ad hoc committees to study certain issues. For example, its alcohol culture environment committee created the ACE report. Another report that came out of the Prevention Committee was the Prescription Drug Abuse Prevention Report. The committee recently released the 911 Good Samaritan report that called for limited immunity for people who call 911 to save the life of another

person. The committee is currently forming an ad hoc committee to study heroin abuse and develop recommendations for local communities and legislation.

VII. Bylaws review – Mr. ShROUT reminded members that the bylaws need to be reviewed and any proposed changes will be voted on at the December meeting. The bylaws can be found on the SCAODA website or in the meeting materials packet. Mr. ShROUT asked that anyone with a proposed change contact Scott Stokes. Any proposed changes need to be given to Mr. Oppor or Ms. Moelter at least 30 days before the December 13 meeting.

VIII. State agency reports

- **Department of Revenue** – Matt Sweeney reported on excise tax collections. The FY13 total collections were down 2.3 percent. The beer tax collections were down 2.6 percent while liquor collections increased 2.66 percent. Collections on cigarettes were also down.
- **Department of Health Services** – Kevin Moore presented on the Affordable Care Act. The most recent news is on the DHS website. DHS and the Office of the Commissioner of Insurance have been going around state to meet with op-ed boards and hold town hall meetings.

The healthcare marketplace goes live on October 1, 2013. Most information can be found on the healthcare.gov website. Some populations in Wisconsin will transition from Medicaid to the marketplace. DHS will send them letters and has set up a telephone center to help them transition. For the first year people have until March 31, 2014 to enroll in the marketplace.

- **Department of Public Instruction** - Steve Fernan reported that Wisconsin was one of 11 states to receive a Safe and Supportive Schools grant that focused on improving the conditions of learning in high schools. It is in the fourth and final year of the grant. The department worked with 52 high schools in 19 school districts throughout Wisconsin and good outcomes are being reported. One-half of the schools report a lower rate of bullying behavior over the three-year period. Thirty-nine of the 52 schools have a lower 30-day alcohol use; 44 of 52 schools report reduced out-of-school and expulsion rates over 3 years. Most of the schools also have improved school safety scores. Mr. Fernan also reported that DPI is about to launch a dropout early warning system. If students meet a threshold of certain indicators by 6th grade, the early warning system can help schools intervene early with students who are at risk for dropping out.

IX. Wisconsin Voices for Recovery – Flo Hillard presented on Wisconsin Voices for Recovery. This is a newly formed recovery organization based on a national model, Faces and Voices of Recovery (<http://www.facesandvoicesofrecovery.org/>). It is in its infancy and is in the process of creating an advisory board. The organization's Facebook page is <https://www.facebook.com/WISVFR>.

X. Beyond the Numbers: One Man's Story presentation - Nina Emerson showed a video, "Beyond the Numbers: One Man's Story". It details the story of a man who caused a fatal car crash while he was driving while intoxicated and how it affected his life.

XI. Agenda items for the December 13, 2013 meeting

- Youth Risk Behavior survey
- Affordable Care Act update
- New tobacco guidelines for mental health/substance abuse providers
- Peer Run Respite advisory committee
- DOJ crime lab end of year controlled substances report and Attorney General's heroin media campaign

XII. Announcements

- **Substance Abuse Block Grant (SABG) update** – Mr. Oppor reported that the 2014-15 SABG application was submitted. DHS received the FFY2013 SABG allocation, and it was \$1.4 million less than in 2012. Because there was underspending at the local level there were no cuts in 2013. DHS is projecting an additional \$2.5 million SABG cut in 2014. Some programs will be cut or receive less money in 2014.
- **Planning & Funding Committee public forum** – The Planning & Funding Committee will host a public forum at the Mental Health and Substance Abuse Prevention Conference on October 22, 2013.

XIV. Adjourn – Mr. ShROUT moved to adjourn the meeting. Sue Shemanski seconded the motion. The motion passed unanimously. The meeting adjourned at 2:23 p.m.

2013 SCAODA meeting dates:

~~March 1, 2013~~
~~June 7, 2013~~
September 13, 2013
December 13, 2013

2014 SCAODA meeting dates:

March 7, 2014
June 6, 2014
September 12, 2014
December 12, 2014



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

SCAODA Executive Committee Meeting

January 27, 2014

9 a.m.

Members present: Duncan Shrout, Scott Stokes, Michael Waupoose

DHS staff present: Kris Moelter, Lou Oppor

Chairperson Waupoose called the meeting to order at 9:03 a.m.

The purpose of the meeting was to act on legislation requiring immediate SCAODA attention, pursuant to the authority given to the Executive Committee in the bylaws.

AB 642 – Prohibiting the sale of high-proof alcohol

Duncan Shrout moved to support AB 642, prohibiting the sale of intoxicating liquor containing 95 percent or more of alcohol by volume (190 proof or higher) and convey that support by sending letters to the bill's sponsor, the chair of the Assembly committee hearing the bill, and the leadership of both the senate and assembly. The motion passed unanimously.

AB 387/SB 308 – Second Chance Act

Mr. Shrout moved (Scott Stokes second) to support the Second Chance Act that would return first-time, non-violent 17-year-old offenders to the jurisdiction of the juvenile court and convey that support by sending letters to the bills' sponsors and the senate and assembly leadership. The motion passed unanimously.

Mr. Shrout moved (Mr. Stokes second) to recommend the legislature provide adequate support to counties in a sum sufficient to serve 17-year-olds subject to juvenile court jurisdiction by sending letters to the bills' sponsors and the senate and assembly leadership. The motion passed unanimously.

AB 445, 446, 447, 448/SB 350, 351, 352, 353 – "Heroin" bills

The Planning and Funding Committee requested the Executive Committee provide testimony supporting these bills as the earliest possible opportunity. The bills have passed the assembly and are scheduled for a hearing in the senate on January 29, 2014. The committee agreed that SCAODA did not need to provide in-person or written testimony, but would send letters indicating its support. Mr. Waupoose was concerned that SB 353 (AB 445) prohibit dispensing a Schedule II or III controlled substance unless the person picking up the drug shows an identification card. The only acceptable forms of identification are a driver's license, a state identification card, a U.S. uniformed service card, or a U.S. passport. This could have the unintended consequence of someone not getting a drug to which s/he is medically entitled because not everyone may have one of the required forms of identification.

Mr. Shrout moved (Mr. Stokes second) that the committee send two letters: one supporting the bills and one expressing concerns about the identification requirement to the senate leadership, the chair of the senate committee hearing the bill, and the bill's sponsor. In addition, the matter

of looking into the identification issue and its consequences should be referred to the chairs of the Intervention and Treatment Committee and the Diversity Committee. The motion passed unanimously.

LRB-2306/2 – Criminal Justice Coordinating Council and OWI laws/programs study

Mr. Shrout moved (Mr. Stokes second) to send a letter to Representative Hebl, the drafter of the proposed bill, providing information about SCAODA and asking that a representative from SCAODA be included on the statewide CJCC or have input into the OWI study. The motion passed unanimously.

AB 32/SB 510 – Tribal facilities and driver safety plans

Mr. Shrout moved (Mr. Stokes second) to support this bill by sending a letter to the bills' sponsors, chairs of the committees hearing the bills, and the assembly and senate leadership. The motion passed unanimously.

The meeting adjourned at 9:45 a.m.

Scott Walker
Governor



Michael Waupoose
Chairperson

Duncan Shrout
Vice-Chairperson

Scott Stokes
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

January 8, 2014

The Honorable Scott Walker
Governor of Wisconsin
115 East Capitol
Madison, WI 53702

Dear Governor Walker:

The State Council on Alcohol and Other Drug Abuse (SCAODA) recently learned that the new budget bill, 2013 Act 20, increased the driver improvement surcharge for OWI offenders and changed the manner in which the funds are distributed. I am writing to express SCAODA's concern about those changes.

Wisconsin law establishes SCAODA as the body that reviews pending legislation relating to AODA policies, programs or services, and provides the Governor and Legislature with an opinion of the effect and desirability of that legislation. It also authorizes SCAODA to review the biennial budget bill and make recommendations to the Governor, Legislature, and state agencies regarding the plans, budgets, and operations of all state AODA programs. In this case the budget bill was passed without input from SCAODA and the AODA experts that comprise this council.

SCAODA is concerned that the driver improvement surcharge was increased and the state portion of the surcharge distribution was increased considerably and this appears to have been done with no notice to interested parties or consideration of the adverse consequences. SCAODA is an appropriate public forum to examine AODA issues and related public policies. Please do not hesitate to request our assistance in the future.

Please contact me if you have any questions at (608) 287-5701.

Respectfully,

A handwritten signature in cursive script that reads "Michael Waupoose".

Michael Waupoose, chairperson
SCAODA

Scott Walker
Governor



Michael Waupoose
Chairperson

Duncan Shrout
Vice-Chairperson

Scott Stokes
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

January 28, 2014

Representative Gary Hebl
Room 120 North
State Capitol
P.O. Box 8952
Madison, WI 53708

Dear Representative Hebl:

I am the chairperson of the State Council on Alcohol and Other Drug Abuse (SCAODA). Wisconsin law establishes SCAODA as the body that reviews pending legislation relating to AODA policies, programs or services, and provides the chairperson of the legislative committee and others with an opinion of the effect and desirability of the legislation.

I understand you are circulating a bill for co-sponsorship that would codify the state's criminal justice coordinating council and require it, among other things, to study and make recommendations regarding Wisconsin's OWI laws and programs.

SCAODA has reviewed the proposed legislation and supports it. However, we ask that a representative from SCAODA be included as a statutory member of the criminal justice coordinating council. Many SCAODA members have expertise in the substance abuse issues faced by many of Wisconsin's citizens who find themselves in the criminal justice system. That knowledge will be invaluable to the council as it moves forward and performs its statutory duties.

SCAODA commends your including an OWI study in the proposed legislation. For several years SCAODA has been concerned that Wisconsin's OWI laws focus solely on punishment and do not address the treatment needs of the offenders. Punishment and fines alone will not solve Wisconsin's OWI problem. Much more support is needed for treatment if we are going to reduce recidivism and protect the public. This past fall SCAODA worked with Senator Carpenter's office to request a legislative study to do a comprehensive review of the OWI laws, penalties, and treatment services in Wisconsin.

Given SCAODA's expertise in AODA and OWI matters, perhaps SCAODA is the appropriate body to either conduct the study and issue recommendations or to jointly conduct the study with the criminal justice coordinating council. SCAODA has a long history of conducting studies on relevant AODA and related system issues. For example, in August 2013 SCAODA released the *911 Good Samaritan Recommendations: Analysis and Recommendations for Reducing Drug-Related Overdoses in Wisconsin*. That report represented the year-long work of a SCAODA ad hoc committee that looked at how to best address Wisconsin's opioid abuse problem. Many of the report's recommendations were included in the Assembly Bills 445, 446, 447, and 448 that recently passed the Assembly.

At the very least, please ensure SCAODA has a voice in the OWI study so the state can benefit from our expertise in this area.

If you would like to discuss this matter further please contact me at (608) 287-5701. Thank you.

Respectfully,

A handwritten signature in cursive script that reads "Michael Waupoose".

Michael Waupoose, chairperson
SCAODA

c: Sen. Tim Carpenter, SCAODA member
Kevin Moore, Department of Health Services Deputy Secretary

Scott Walker
Governor



Michael Waupoose
Chairperson

Duncan Shrout
Vice-Chairperson

Scott Stokes
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

January 28, 2014

Senator Kathleen Vinehout
Room 22 South
State Capitol
P.O. Box 7882
Madison, WI 53707-7882

Dear Senator Vinehout:

Please accept this letter from the State Council on Alcohol and Other Drug Abuse (SCAODA) expressing its support for SB 510—tribal treatment facility participation in the intoxicated driver program.

Wisconsin law establishes SCAODA as the body that reviews pending legislation relating to AODA policies, programs or services, and provides the chairperson of the legislative committee and others with an opinion of the effect and desirability of the legislation. SCAODA has reviewed the legislation and supports it.

I have informed the sponsors of the Assembly companion bill, the committee chairs, Senator Fitzgerald, and Representative Vos of SCAODA's position.

Please let me know if SCAODA can be of further assistance in helping advance this legislation. I can be reached at (608) 287-5701.

Respectfully,

A handwritten signature in cursive script that reads "Michael Waupoose".

Michael Waupoose, chairperson
SCAODA

c: Sen. Tim Carpenter, SCAODA member
Rep. Garey Bies, SCAODA member
Rep. Sandy Pasch, SCAODA member
Kevin Moore, Department of Health Services Deputy Secretary

Scott Walker
Governor



Michael Waupoose
Chairperson

Duncan Shrout
Vice-Chairperson

Scott Stokes
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

January 28, 2014

Representative John Nygren
Room 309 East
State Capitol
P.O. Box 8953
Madison, WI 53708

Dear Representative Nygren:

The State Council on Alcohol and Other Drug Abuse (SCAODA) supports SB 350, 351, 352, and 353—bills that responsibly address Wisconsin's opioid abuse problem.

SCAODA recently authored two reports that address the issues the proposed legislation seeks to remedy. The *Reducing Wisconsin's Prescription Drug Abuse: A Call to Action (January 2012)* and the *911 Good Samaritan Recommendations: Analysis and Recommendations for Reducing Drug-Related Overdoses in Wisconsin (August 2103)* reports discuss the extent of Wisconsin's opioid abuse problem in detail. Many of the reports' recommendations are contained in SB 350, 351, 352, and 353.

I have informed Senators Fitzgerald and Grothman of SCAODA's position on these bills.

Please let me know if SCAODA can be of further assistance in helping advance this legislation. I can be reached at (608) 287-5701.

Respectfully,

A handwritten signature in cursive script that reads "Michael Waupoose".

Michael Waupoose, chairperson
SCAODA

c: Sen. Tim Carpenter, SCAODA member
Rep. Garey Bies, SCAODA member
Rep. Sandy Pasch, SCAODA member
Kevin Moore, Department of Health Services Deputy Secretary

Scott Walker
Governor



Michael Waupoose
Chairperson

Duncan Shrout
Vice-Chairperson

Scott Stokes
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

January 28, 2014

Senator Scott Fitzgerald
Senate Majority Leader
Room 211 South
State Capitol
P.O. Box 7882
Madison, WI 53707-7882

Dear Senator Fitzgerald:

I write to convey the State Council on Alcohol and Other Drug Abuse's (SCAODA) support for AB 642—the bill prohibiting the sale of intoxicating liquor containing 95 percent or more of alcohol by volume. In September 2011 SCAODA called for a ban on high-proof alcohol sales, and it has reaffirmed that position by supporting AB 642.

Wisconsin law establishes SCAODA as the body that reviews pending legislation relating to AODA policies, programs or services, and provides the chairperson of the legislative committee and others with an opinion of the effect and desirability of the legislation. SCAODA examined AB 642 in detail and after considering the practical and policy implications of the legislation, is of the opinion that banning the sale of 190-proof intoxicating liquor promotes the health, safety, and well-being of Wisconsin's citizens.

I have informed the bill's sponsor, Representative Jacque, and the chairperson of the Assembly State Affairs and Government Operations Committee, Representative Weininger, of SCAODA's position, as well as Assembly Speaker Vos.

Please let me know if SCAODA can be of further assistance in helping advance this legislation. I can be reached at (608) 287-5701.

Respectfully,

A handwritten signature in cursive script that reads "Michael Waupoose".

Michael Waupoose, chairperson
SCAODA

c: Sen. Tim Carpenter, SCAODA member
Rep. Garey Bies, SCAODA member
Rep. Sandy Pasch, SCAODA member
Kevin Moore, Department of Health Services Deputy Secretary

Scott Walker
Governor



Michael Waupoose
Chairperson

Duncan Shrout
Vice-Chairperson

Scott Stokes
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

January 28, 2014

Representative Garey Bies
Room 216 North
State Capitol
P.O. Box 8952
Madison, WI 53708

Dear Representative Bies:

The State Council on Alcohol and Other Drug Abuse (SCAODA) supports returning 17-year-olds to the jurisdiction of the juvenile court. SCAODA supported the return during the last legislative session and it now reaffirms its position by supporting AB 387 and SB 308—the Second Chance Act.

Wisconsin law establishes SCAODA as the body that reviews pending legislation relating to AODA policies, programs or services, and provides the chairperson of the legislative committee and others with an opinion of the effect and desirability of the legislation. The Second Chance Act promotes public safety and holds offenders accountable while at the same time promoting the welfare of the citizens of Wisconsin. I have conveyed SCAODA's support for this legislation to Senators Petrowski and Fitzgerald, as well as Representative Vos.

SCAODA also recommends the legislature provide adequate financial support to the counties so they can effectively serve the 17-year-olds who will be subject to juvenile court jurisdiction.

Seventeen-year-olds often have their educations interrupted or ended when beginning criminal proceedings in adult court. They may be incarcerated while awaiting trial or after conviction and sentencing, and have difficulty completing high school graduation requirements. While services are provided to 17-year-olds in jail, they are often not sufficient to earn the credits needed to access post-secondary education options or to master the skills necessary to be successful in the workforce. In addition, they are more likely to receive needed AODA treatment under juvenile court jurisdiction. Under the current system 17-year-olds are adults for criminal prosecution purposes so cannot

receive the services of the juvenile court, but AODA providers consider them juveniles, so they cannot receive adult services. Youth who remain in the juvenile justice system have better outcomes in terms of reduced recidivism, increased education, and better life outcomes. The courts would still have the ability to waive juveniles into the adult system if appropriate.

Please let me know if SCAODA can be of further assistance in helping advance this legislation. I can be reached at (608) 287-5701.

Respectfully,

A handwritten signature in cursive script that reads "Michael Waupoose".

Michael Waupoose, chairperson
SCAODA

c: Sen. Tim Carpenter, SCAODA member
Rep. Sandy Pasch, SCAODA member
Kevin Moore, Department of Health Services Deputy Secretary

CVS calls it quits: No more tobacco products

[Kelly Kennedy, USA TODAY](#) 7:43 a.m. EST February 5, 2014

WASHINGTON — Drug store giant CVS Caremark announced Wednesday it will no longer sell tobacco products at its 7,600 pharmacies by Oct. 1.

CVS sells \$1.5 billion in tobacco a year, but CVS officials said selling cigarettes while promoting wellness doesn't make sense.

"Selling tobacco is very inconsistent with being in that business," said Helena Foulkes, CVS's president. "We really thought about this decision as it relates to the future as a health company — it's good for customers and our company, in the long run."

Foulkes told USA TODAY that CVS sees its future as an alternative to the doctor's office, with 26,000 pharmacists and nurse practitioners counseling customers about how to control their high cholesterol, diabetes and high blood pressure.

"Any form of tobacco use makes those chronic conditions more difficult to deal with," she said. "This is good for business and the right thing to do."

CVS officials met with tobacco company executives Tuesday to explain the decision, understanding that eliminating tobacco products from the pharmacies would likely affect the tobacco industry's bottom line, as well.

Other pharmacies are expected to eventually follow suit, and some cities in California and Massachusetts have banned tobacco sales at all pharmacies. The American Pharmacists Association asked for a ban on sales in 2010 at pharmacies, including at grocery stores that have pharmacies, according to an article published in the *Journal of the American Medical Association* (JAMA) Wednesday.

As the Affordable Care Act is implemented, it's important to help people stay healthy, said Troy Brennan, the company's chief medical officer.

"It's expensive to provide health care for all the people through the ACA," Brennan said. The company will announce a "very large" smoking cessation program in the spring.

Foulkes said seven out of 10 smokers would like to stop, and half have tried to in the past year.

Ezekiel Emanuel, a University of Pennsylvania bio-ethicist and one of the architects of the health care law, said he sees smoking as one of the top health issues facing the United States. He agrees that reducing smoking-related costs is important as more people become insured so others don't have to take on the burden of those costs and called working to reduce smoking "kind of a no-brainer."

CVS expects to lose about \$2 billion in sales annually, Foulkes said, but the company hopes to recoup its losses in other ways, including an increased focus on its pharmacy management benefit program to help insurers save money on employees' health.

More than 480,000 people die from smoking-related ailments a year, according to the JAMA article by Brennan and Steven Schroeder, director of the Smoking Cessation Leadership Center at the University of California.

Smoking has gone down significantly, from 42% of adults in 1965 to 18% today. This comes after increases in taxes, and public areas — such as airports, bars and federal buildings — where smoking is prohibited. Advertising also diminished the appeal of smoking. Just this week, the American Cancer Society launched an advertising campaign aimed at how teenagers would look in the future if they begin smoking now. Still, 42 million people smoke and 16 million are sick, according to JAMA.

The Rhode Island-headquartered company maintained that its exit from the tobacco category will not affect its 2014 operating profit guidance. Its shares are down about 1% pre-market trading.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

Cultural Diversity Committee

October 17, 2013

Department of Veteran Affairs

201 E. Washington Ave.

Madison, WI

Minutes

Present: Tina Virgil, Rebecca Weise, Raymond Perez,

Phone: Arlene Baker

Staff: Bernestine Jeffers, Mai Zong Vue,

Guest: Bob Curry and Pat Curry

Welcome, Introductions

Tina welcomed everyone. Self-introductions were made by everyone.

Presentation

Mr. Bob Curry, a Vietnam veteran gave a powerful presentation. Below are some highlights:

Mr. Curry grew up in Milwaukee. At 18 years old, he enlisted in the Vietnam War and served as a helicopter pilot at forward operating base. His role was to find out where the enemies were. Together, he flew 250 missions in North Vietnam. In 1971, he mostly flew alone in the CIA's operation in Laos, supporting the Hmong in the Secret Army. Drugs were a huge problem toward the end of the war as everyone knew Americans were pulling back. Also, by this time, if you got shut down, no one comes to get you.

Upon arrival at the Seattle airport, he was assaulted by a group of people—people threw eggs at them, etc. To avoid such assault, Mr. Curry went to the bathroom immediately and threw uniform in the trash. He walked out and denied that his Vietnam War experience never happened. He went to school, got trained, and went to work with AT&T, which he and his wife raised a family of two daughters.

Life was normal until the Gulf War. The trigger of PTSD happened as he was watching CNN covering the Gulf War. This was the start of binge drinking. His life felt apart as a result of his drinking. Mr. Curry decided to write about his experience in Vietnam, which he wrote a book called "Whispering Death." The PTSD worsened—he ate late at night as he could not sleep due to flash backs of his rejection at Seattle airport and in Vietnam.

He was diagnosed with ADD after he got OWI tickets. However, due to his good grades and eye sights, the doctor could not believe that he has ADD.

In the 1990's, Mr. Curry knew he was going crazy but did not know how to tell his family. His wife, June, encouraged him to call VA but he thought that the VA was only for people with physical disability.

The drinking and PTSD led to more troubles—late rents and jail time. Mr. Curry hit and killed a man driving a motorcycle (he did not remember the incident) and was put in jail. He tried to commit suicide in jail. His wife lost their home. He called the VA but no one was there to help. He called the county and got an appointment. With county support, he was able to stay in the halfway house for 1.5 year which he went through trial and received treatments.

Mr. Curry's trial was not an easy one as the frontpage news reported that he did not go to Laos as a Vietnam veteran but on temporary duties. After much research, a package arrived by mail which included the order that sent him to Laos. During the trial Hmong veterans—without his request or knowledge—came to support him throughout the trial...Hmong veteran came to testify that he was in Laos. Mr. Curry's verdict of "not guilty" became a high profile case for setting new precedent for drunk driving. His lawyer filed for a transfer to Winnebago Institute under the AODA program as Mendota Institute denied him AODA services.

In 2008, Mr. Curry formed Dry Hootch, a nonprofit to provide support—peer-to- peer service--for the current veterans so they don't have to repeat his experience. Dry Hootch is based in Milwaukee with chapters in Madison, Appleton and will soon open one in Chicago. Mr. Curry was honored by the White House last June for his Dry Hootch program.

Many questions were discussed about how to better serve the veteran and the family as a whole as this is a "new disease." What do we do?

A few recommendations were discussed:

Develop public school prevention through programs such as Brighter Future. DHS needs to attach a number of provisions to our future contracts. These provisions should include training, prevention program activities to address PTSD and special populations who experience trauma, AODA. These provisions should be incorporated in all grants that come out from DHS.

Develop an Ad Hoc Committee and get folks together to discuss the delivery of the AODA messages and recommend a partnership.

Unmet Needs and Issues:

There are gaps between clients and Mendota Mental Health Institute.

For the underserved population, how much prevention dollars should be assigned to it?

Policy—should ask a simple question: "Are you a veteran?" in most of the local services such as police, women shelter (by asking the victims, do you know of someone who is a veteran?), hospital, clinic, health, etc.

Draft to motion for these areas:

1. public education
2. put specific criteria in CST program

Our homework include:

The need to develop data;

How to get Mr. Curry to speak to the big committee?

By March 7--larger meeting—must get data, craft motion, and help Mr. Curry craft a to 30-minute speech.

Minority training motion follow-up—the letter was drafted, forwarded to Michael for his signature, and sent letter to the Secretary's office.

Updates

Tina highlighted the attorney general's office new heroin use campaign and grants.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

DIVERSITY COMMITTEE MEETING Minutes
Tuesday, November 19, 2013, 1:00pm - 3:00p.m.
Department of Health Services
1 W. Wilson St. Room 850B
Madison, WI

I. Call to Order

The meeting was called to order by Chair Virgil at 1:04 p.m.

II. Review of October Minutes

The October minutes were approved.

III. SCAODA update

An update for SCAODA was given.

IV. Ad hoc committee

A training ad-hoc committee tasked with developing recommendations of optional methodologies for required education, training and certifications hours for state providers with a final report presented at the October 2014 meeting.

V. Diversity Web Link Update

Format for reviewing prior meeting minutes and other documents.

VI. Subcommittee Reports

A discussion on committee structure, American with Disability Act regulations, cultural competency and other businesses was held. Future discussion is needed on these areas.

VII. Agenda Items for Next Meeting

None at this time

XIII. Adjourn

Meeting was adjourned.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

DIVERSITY COMMITTEE MEETING

Friday, January 24, 2013

9:30 A.M. – 2:30 P.M.

Hmong HMAA

WAUSAU, WI

MINUTES

MEMBERS PRESENT: Jesse Heffernan, Catherine Scheier, Tina Virgil, Sandy Hardie, Tish Minor, Carrie McGhee

Excused: Gail Kinney, Sterling White, Denise Johnson, & Raymond Perez, Arlene Baker

ABSENT: Thai Vue, Dr. Steve Dakai, and Rebecca Weise

STAFF: Mai Zong Vue

I. Welcome & Introductions

Tina welcomed everyone! Everyone introduced themselves to the new members, Jesse and Cathy. Jesse currently serves LGBT youth and adult clients with high AODA risk and needs at the Harmony Café Program Team. His interest is: How are we addressing these needs? By serving on the Diversity Committee, perhaps it may help him spread out the needs and identify best practices as he works with 5 or 6 agencies in Wisconsin who are working on LGBT issue. Cathy has been with Department of Corrections for the past 8 years. She currently is working with the incarcerated male populations. Cathy said she is happy to be in this committee, her first committee. Cathy has been in the AODA field for three years.

II. Review of Previous Meeting Minutes

November and December meeting minutes were tabled until the next meeting. Approval can be done by electronic votes if needed.

III. Ad hoc committee

A need to define the term ad hoc committee was discussed. Arlene Baker was appointed to chair this ad hoc definition committee.

IV. Diversity Web Link Update

Members are encouraged to use this resource (web link) to list all training events and meeting dates to ensure Diversity activities concur with SCAODA's.

V. Subcommittee Reports

A discussion on committee structure, American with Disability Act regulations, cultural competency and other businesses was held. Future discussion is needed on these areas.

VI. Workshops at the Annual MH/SA Conference

Discussion about the Annual Mental Health and Substance Abuse Conference included:

1. Note—the Midwest Sexual Abuse Conference will be held at the same time as the annual MH/SA Conference in October at the Kalahari. Sandy will be attending the Midwest SA Conference and will not be at the MH/SA Conference.
2. The workshop on veterans should focus on treating trauma, not just drinking. Bob Curry from Dryhootch will be the presenter for the veteran's workshop.
3. Carrie will send recommendations for native presenters to Tina and Mai Zong.
4. It was also suggested that the Diversity Committee host a reception the night before the conference. More discussion to come.
5. It was suggested that underserved providers be added to the provider directory developed by Abrahamson's office. Tish will send the directory to Mai Zong so Mai Zong can explore the addition of underserved providers.
6. Should Diversity Committee have a booth at the MH/SA Conference in October?
7. Is there a forum to address women's issues? If so, potential presenters could be from the warrior summit.

VII. 2014 Trainings

Topics and questions discussed regarding trainings for the Diversity Committee in 2014 included:

1. Jesse shared about the diversity position created at Goodwill. Jesse will contact and get someone to present at future Diversity meetings.
2. Carrie will explore trainings on Native Americans and alcohol and report to the committee.

3. Cathy will work on two potential presenters on Latinos and diversity and ask them to present to the Diversity Committee.
4. A question was asked about reimbursement for committee members. Answer: yes, mileage, meal and lodging expenses are reimbursable for committee expenses.
5. Discrimination and marijuana—there is a need to look at the national conversation on this issue. How does it impact the underserved community, especially African American, and how do we educate ourselves regarding how to best serve our community and what treatment we need to advocate?
6. How do we become more involved on legislative issues and recommend to the full Council programs for underserved populations?
7. How can we serve underserved populations effectively and how to shape standardized tools for providers to use in serving underserved populations?
8. Must put all identified trainings on web link and use webinars.
9. Revisit our current and previous mission statement, 2014 goals, and vote on it at February meeting.
10. Will need a facilitator for February meeting. Mai Zong will work on getting a facilitator.
11. Data on underserved population is needed—how do we address this issue?
12. Committee will review and finalize the draft Diversity Committee Guidelines at the February meeting. Mai Zong will send out the draft to everyone prior to the February meeting.
13. Does DHS pay for any training and/or webinar fees? Mai Zong will explore and let the committee know.

VIII. Legislative Updates

Kris updated the committee on the following bills and discussion was held on each bill:

Intoxicated Driver program – AB 32/SB510 – Allowing a tribal facility to conduct assessments under the Intoxicated Driver Program.

Heroin – These are a series of bills collectively referred to as the “heroin bills”. They provide limited immunity from prosecution for someone who seeks emergency assistance in an overdose situation and allow certain first responders and law enforcement to carry and administer naloxone in an overdose situation, among other things. This bill passed the assembly and is on the house side. The Council has not taken a position yet and the executive committee will decide whether to support or not when they meet next Monday.

Wine tours – This bill would allow minors to be in a hospitality room of a winery without being accompanied by a parent or guardian for the purpose of attending a winery tour. A concern was raised about the need to review this bill in order to hold winery factories accountable--not sending conflicting messages to children in substance programs. Tina will see if her staff can find the bill name and circulate to everyone for review at the February meeting. Perhaps a motion can be made and sent to the Council.

Social workers – adding social workers to the list of public safety workers for whom committing a violent act against is a crime. This was a memo being circulated for co-sponsorship. It was introduced in the Senate yesterday (SB 600).

Intervention and Treatment Committee—the work of this committee needs to be cross-communicated and engaged between the Diversity and ITC committees. Mai Zong will find out who staffs ITC and coordinate with ITC staff.

IX. Lunch (on your own)

X. Minority Training Project

Tish shared about the need to keep the mental health and substance abuse fields vital by having minority trainers available and asked about the Minority Training Project. Bernestine will give an update later. Another question discussed was “How do we leverage other funders and supporters to fund this training (minority training) for underserved populations?” This should include evidence-based community investment groups from local businesses in order to reduce the dependency on government grants.

Background on Minority Training Program — Tish explained that an AODA counselor certification pilot program was created to help tribal and Spanish counselors in Milwaukee gain treatment skills. The minority training program paid for training expenses (lodging, trainers, etc.) and gave opportunities for minority counselors like Tish to become certified counselors and receive a master’s degree. Tish was the first minority AODA counselor under this program.

XI. Agenda Items for Next Meeting

1. Mission Statement
2. Reports
3. 2014 Committee Goals
4. Committee Guidelines

XIII. Adjourn

Meeting was adjourned.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

DIVERSITY COMMITTEE MEETING

February 14, 2014

9:30 a.m. – 2:30 p.m.

Harmony Cafe

Justice Room

1660 W. Mason, Green Bay

920-680-5991

Please call Mai Zong Vue at (608) 266-9218 or e-mail maizong2.vue@wisconsin.gov if you will not attend.

Call in telephone number: 1-720-279-0026 or 1-877-820-7831
Participant Passcode is 408162

- | | |
|------------|---|
| 9:30 a.m. | Call to Order –
Welcome & introduction of new Committee members
--Mette Brodgen, DCF

Public Comments |
| 10:00 a.m. | Legislative Update – Kris
Review of November 2013 & January 24 meeting minutes |
| 10:15 a.m. | Updates: Workshops at annual MH/SA Conference |
| 10:25 a.m. | Updates on 2014 meeting locations |
| 10:30 a.m. | Mission Statement & 2014 Goals – C.J., WCADV |
| 12:00 p.m. | Lunch |
| 1:00 p.m. | Recruitment Application Package Review
& Diversity Committee Guidelines -- C.J., WCADV |
| 2:15 p.m. | Summary & Next Steps (2014 goals, guidelines & mission statement)
Agenda items for next meeting |
| 2:30 p.m. | Adjourn |

NOTE: Next SCAODA meeting is March 7, 2014; American Family, Madison

SCAODA Mission Statement:

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.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

INTERVENTION AND TREATMENT COMMITTEE (ITC) MEETING

Tuesday, November 12th, 2013

10:00am – 2:30pm

Department of Corrections

3099 E. Washington Ave.

Room 1M-M

Madison, WI

MINUTES

Present: Norm Briggs, Roger Frings, Dave Macmaster, Dan Nowak, Jill Gamez, Sheila Weix, Sheri Graber, Steve Dakai (Phone), Sarah Norberg (staff)

Absent: Kevin Moore, Shel Gross, Sinikka Santala

Guests: None

Welcome, Introductions, and Review of Minutes – Norm Briggs/Roger Frings

Roger brought the meeting to order at 10:15am with introductions. The October meeting minutes were reviewed and approved with a correction to change Sheri to Sheila as the volunteer for the Heroin ad hoc group. Motion to approve by Sheila and seconded by Jill.

WiNTiP Updates – Dave Macmaster

The breakout session with Tony Klein at the October Mental Health and Substance Abuse Annual Conference went well. Attendance was good, and the presentation was able to be recorded for anyone who was not able to attend. It is now available online. Tony also facilitated an evening session which introduced an organization which supports the integration of tobacco recovery into treatment settings. The emphasis in doing this is on finding out what the client's connection is to the use of tobacco as opposed to attempting to motivate a person to quit. Research shows this neutral method is effective.

The members of the ITC would like to present the tobacco integration guidelines from WiNTiP to the State Council. A motion was drafted requesting that council endorse the policies and procedures and recommend that agencies adopt them or something similar based on their program needs.

Video interviews were done on several of the tobacco integration projects. These grants will be presented on December 9th at the American Family Insurance Center in Madison, and the videos will be made available online to be used as a resource for other programs interested in integrating tobacco treatment into their programs.

Children, Youth, and Family Treatment Subcommittee Report – Jill Gamez

The subcommittee met in Milwaukee on November 6th. The group reviewed their annual work plan.

Public outreach and creating awareness was part of the 2013 work plan, and to achieve this objective, Jill and Kimeko Hagen presented at the Annual Mental Health and Substance Abuse Conference in October as well as the NASW Wisconsin Chapter Conference. The topics included early identification and why adolescent treatment is important. There were approximately 60 attendees between the two sessions, and contact information was gathered for future communication.

The members also looked at the results of the provider survey and began discussing recommendations they would like to see developed based on the information as well as members' experiences as providers. Issues brought to the subcommittee's attention by the consumer voice, a new component of the meetings this year, were also incorporated into the potential recommendations. Recommendations span the entire continuum of services and the treatment process. Members also identified key stakeholders that might be important in addressing concerns. In order to further develop the recommendations and engage members in the group, individuals will be given one recommendation of interest to explore more thoroughly. The goal is to have a final report with recommendations to ITC by the May meeting, and then move it forward to SCAODA in September.

Future meeting dates for the subcommittee were chosen. Similarly to last year, the subcommittee will be meeting in person four times throughout 2014. However, one-hour teleconferences will also be incorporated between the meetings for the upcoming year. Although the dates of the teleconferences have already been selected, the members will determine at each meeting whether or not they feel the following teleconference is necessary.

Establishment of Ad Hoc Committee to Address Workforce – Norm Briggs

At the last meeting, Lou Oppor suggested that perhaps the most feasible way to address workforce issues within the field might be to put together a group for the purpose of exploring and some of the issues in more detail. There are several representatives that should be considered to be a part of the ad hoc group:

1. RAP-WI
2. Tribes
3. IC&RC
4. Tech Colleges/4-year Schools
5. UW Extension
6. Providers (including minority as well as geographic representation)
7. County Association
8. DOC
9. DHS
10. DSPS
11. DWD
12. SCAODA Committees (Prevention, P&F, Diversity)

Issues that might be looked at by this group include:

1. Perceived shortage of qualified providers
2. Aging workforce
3. Limited education/continuing education opportunities in the field
4. Financial and/or geographical barriers to education
5. Grandfathering/graduated implementation
6. Recruitment/impacts of salary on recruitment
7. Impact of workforce issues on consumers
8. Health/financial
9. Co-occurring competency
10. Accurate compilation of data representing ratio of needs to available resources

The goal of this ad hoc group would be convene to appropriate people to look in depth at these issues and develop recommendations for possible solutions to address them. Dan volunteered to be a co-chair for the group. Another co-chair is still needed.

SCAODA and ITC Strategic Planning

Section Updates:

A. Older Populations – Sheila Weix

The closing of the Marshfield services has left a gap in resources for older individuals seeking treatment. Co-occurring issues are common for this population; however, there is now almost nothing available to address them in the area. There are also a number of barriers for this population, including challenges with being admitted into a CBRF or nursing home with an Alcohol Dependence diagnosis. This should continue to be a topic on the strategic plan of the committee.

B. Affordable Care Act Implementation Update – Roger Frings

Over the last few months, OCI has been working on credentialing certified application counselors. There have been a number of classes held at OCI where individuals can receive training to get certification. Medicaid County workers and health agents have comprised the majority of attendees in these classes. After being certified, they can then help individuals who are coming off Badgercare with the enrollment process. Throughout the state, roughly 500 individuals have been certified. A list is being compiled of all the certified application counselors and is available through DHS.

C. Intoxicated Driver's Program – Steve Dakai

No Report.

Legislation/Miscellaneous Updates – Norm Briggs/Roger Frings

No Update.

Future Agenda Items – Committee Members

Ad Hoc committee development

ITC membership

Adjourn

The meeting was adjourned by Roger.

Next meetings and dates:

1. *ITC*

January 21st, 2013; 10:00 am – 2:30 pm. Department of Corrections, Madison

2. *Children, Youth and Families Treatment Sub-committee*

February 6th, 2013; 10:30pm – 3:00pm. Madison

(Phone Conference: January 9th, 12:00pm – 1:00pm)

3. *SCAODA*

December 13th, 2013; 9:30 am – 3:30 pm; American Family Insurance Conference Center, Madison. For more information, visit the SCAODA web site at:

<http://www.scaoda.state.wi.us/meetings/index.htm>



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

INTERVENTION AND TREATMENT COMMITTEE (ITC) MEETING

Tuesday, January 21, 2014

10:00am – 2:30pm

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

MINUTES

Present: Norm Briggs, Roger Frings, Dave Macmaster, Dan Nowak, Alan Frank, Tanya Hiser (staff), Kris Moelter (staff)

Absent: Jill Gamez, Sheila Weix, Sheri Graber, Steve Dakai, Shel Gross, Sinikka Santala

Guests: None

Welcome, Introductions, and Review of Minutes – Norm Briggs/Roger Frings

Roger brought the meeting to order at 10:12 am with introductions. The November meeting minutes were reviewed and approved. Motion to approve by Dan Nowak; Dave Macmaster seconded.

SCAODA Update – Roger Frings stated that SCAODA members unanimously passed the creation of an ad hoc committee on substance use disorders. Scott Stokes noted that there should be a prevention focus to this group; this passed unanimously. Also had a presentation by Mac requesting state council support for guidelines for tobacco-free ADOA facilities; this passed unanimously.

Other motions by other committees: Planning and Funding asked that public forums be held at a more suitable time. Planning and Funding recommended that letters to Governor Walker and Chairs of Democratic Caucus with concerns about financial increases for the state and not counties or others. Roger Frings indicated to contact the Joint Finance Committee to understand the justification of this decision. Dave Macmaster stated that he would like the Planning and Funding Committee to see if there is a way to address this issue.

The rise of opiates/heroin use continues to be discussed at SCAODA. There is a heroin ad hoc committee that was formed and Sheila Weix is on this committee. There was a discussion about peer run respite as there is a bill going through legislature to provide funding so DHS can pilot three peer run respite centers in the state. Dave Macmaster stated his concern that there wasn't a

model to review. Kris Moelter stated that DHS had a committee that worked on this and used other models from different states.

SCAODA put out a call for members to “cross pollinate” with council on mental health. Norm stated that he will be sitting on the Criminal Justice committee of the Mental Health Council.

SCAODA clarified their input into legislative matters. The process is that if you have concern of legislation and want SCAODA to testify in favor or opposition, the concerns goes to committee chairs (Roger and Norm). They determine if it is ready to move forward to the Executive Committee of SCAODA. If it is approved by the Executive Committee a member of that committee or designee will testify on behalf of SCAODA on legislative pieces. The testimony would have to be approved by the State Council at the subsequent council meeting. Dave Macmaster shared that legislators sitting on the council is inefficient because they do not typically come to the SCAODA meetings. Roger Frings stated that the ITC (or any other) committee can make recommendations to legislature through the SCAODA annual report or another method. It is up to the legislature whether they take on these recommendations, but any citizen can speak to their legislator about their concerns. Alan Frank added that it is important that there is documentation that “we have asked the decision makers to make the decisions and whether it was considered, rejected, utilized etc.” Norm indicated that there is significant documentation at the committee level and SCAODA. The only request made to the legislature was done some years ago regarding adding citizen members to SCAODA. Dave Macmaster would like to have specific recommendations for legislation based on deliberations that have been done in committees. Norm Briggs stated that at the February ITC meeting we will be developing the next four year plan for SCAODA and based on what has been discussed; perhaps this should be elevated to SCAODA.

SCAODA and ITC Strategic Planning – Norm Briggs/Roger Frings

Norm Briggs outlined the four year plan process as identifying areas of interest as outlined in the section update. Each section update is correlated with the strategic plan of ITC. In the past, ITC tried to take a number of treatment issues and focus on items where something could be accomplished over a four year period. Dave Macmaster pointed out that there has not been a corrections focus for a long time and Alan Frank may help in that area. Norm Briggs state that he is very pleased that Sinikka Santala joined the committee as her interest has been to improve access to and treatment of parents in the Child Protective Service (CPS) system. Wisconsin CPS identifies lower percentage needing substance use treatment than national average and Dane County is significantly below Wisconsin average. Norm Briggs stated his goal for the four year plan within his section is focused on the family (mom/dad) universal screening for substance use disorders for parents entering the CPS system.

Section Updates

- a. Children Youth and Family Treatment –phone conference in January. Minutes were reviewed.
- b. Older Population - Shelia has a concern with AODA services in elderly. Norm put her in touch with Faith Lerner from Journey Mental Health.
- c. Intoxicated Drivers – Steve D – No Report.

- d. Treatment for Women and Children – Norm Briggs – Nothing new being proposed.
- e. Affordable Care Act – Roger reported that enrollment numbers are in line with other states but enrollment numbers in Wisconsin are higher than those states that are running their own exchanges. There continues to be a lot of questions and complaints regarding online access, long waits, and privacy concerns. It has just been recently that there are starting issues for those who have signed up and are now not paying premiums on time. There are deadlines that need to be met and penalties are significant for individuals, providers, industry and there are not a lot of answers. It will be like this for a while, as roll outs tend to be. OIC will continue to put out information on their website -www.oci.wi.gov.
- f. WiNTiP – Dave Macmaster handed out an update report. WIRCO is still in existence and board directed program due to lack of funds. Asbury Church has two rooms dedicated to recovery and Flo Hilliard can help fund open house. This will be a pilot and the hope is that it may be a model for future activity in other parts of the state. Two issues next year for WiNTiP – marketing the SCAODA approved guidelines. They want ASAM to endorse the policies. That is plan for 2014 so that people have map to establish tobacco free programs. Equity resolution that was submitted to counsel – a video is in production regarding this. Later on this year, there will be a short video that successfully integrated nicotine as a primary diagnosis only into a residential program. Videos for all programs available will be linked and sent out – all free about 12 available throughout the year. Dave Macmaster will be providing technical assistance (TA) at Blooming Grove to get support for nicotine services integrated into other treatment programs. Blooming Grove is not directly funding anything. Dave Macmaster will be working with NADAC to adopt a tobacco program similar to Mayo Clinic programming. Kris Hayden is helping put on a northern training in 2014 around May. His contract is renewed for next year as an independent contractor with UW. Norm Briggs commented that WADTPA consists of a bank account only. The treasurer retired and moved to Iowa and nobody knows where checkbook is and he is the only signatory on the account. Emailing to their list is not available. WAAODA – as an organization is no longer in existence.

Task Assignment -Bring recommendations for the SCAODA four year plan to the February 11 ITC meeting for input into the state council four year plans.

Ad Hoc Workforce Committee Phone Call - (Duncan Shroul and Bernestine Jeffers via phone)

Dan Nowak provided background regarding the initiation of this committee. Dan met with Duncan Shroul and Bernestine Jeffers as they wanted to make sure that this ad hoc committee wasn't duplicating work already done. As well, they wanted to be able to make recommendations to DSPS or work with them to address this issue. For several years, the state of Wisconsin Department of Safety and Professional Services (DSPS) has allowed people with a high school education or GED to work as a CSAC in the substance abuse field. A few years ago, SAMHSA came out with scopes of practice career ladder and recommendations for states that don't have licensure practice. A lot of people

around the country interpreted this as a federal requirement. This scope limited assessments to certain educational levels and a master's degree would be required to provide treatment. The more complex services needed a higher level of education. Regarding the career ladder, no one knew what would happen if it went into effect. At the time, DSPS stated that the career ladder was a recommendation and they weren't going to do anything with it at that time.

In preliminary conversation between Dan, Duncan and Bernestine, they agreed to focus on the creation of opportunities for current certified counselors who are seeking Bachelors or additional degrees. This seems to be the primary issue, but understands that there are several ancillary issues such as the grandfathering process, working with IC&RC who doesn't recognize certified people without a degree, and an aging workforce. In the state of Wisconsin, out of the 2000 certified counselors there are a significant amount that meet certification requirements but are not degreed. This committee wants to make sure that they are still a viable part of the workforce. Duncan went on to state that the committee will arrive at a series of steps that will allow for the counsel to affirm that the current practicing counselors that are certified but do not have the degrees will be able to continue to practice. The purpose is to encourage as many people as possible to continue with academic attainment, but understand that there are certain age groups that will not wish to get education. They can hopefully be grandfathered in. For others that are temporarily grandfathered, the committee's goal is to help them be as qualified as they need to be to practice and receive reimbursement. It is important that insurances are involved in the process as well to provide information and perspective to avoid possible roadblocks as we move forward on this. It was suggested that a Prevention Specialist be added to this group as well. The group discussed other people who would be requested to join this committee. The committee will meet in March.

Legislation/Miscellaneous Updates – Norm Briggs/Roger Frings

Kris Moelter was thanked for sending legislative updates out to the committee members.

Future Agenda Items – Committee Members

Bring recommendations for the SCAODA four year plan to the February 11, 2014 ITC meeting for input into the state counsel four year plans.

Adjourn

Motion to adjourn by Dan Nowak; second by Alan Frank.

Next meetings and dates:

1. *ITC*

February 11, 2014; 10:00 am – 2:30 pm. Department of Corrections, Madison

2. *Children, Youth and Families Treatment Sub-committee*

April 3, 2014; Phone Conference

May 1, 2014 Meeting 10:00am-2:00pm, Appleton, WI

3. *SCAODA*

March 7, 2014; 9:30 am – 3:30 pm; American Family Insurance Conference Center, Madison. For more information, visit the SCAODA web site at:

<http://www.scaoda.state.wi.us/meetings/index.htm>



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

INTERVENTION AND TREATMENT COMMITTEE (ITC) MEETING

Tuesday, February 11, 2014

10:00am – 2:30pm

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

AGENDA

- | | | |
|------|---|-------------------|
| I. | Welcome, Introductions and Review of January Minutes–
Norm Briggs/Roger Frings | 10:00am – 10:10am |
| II. | Public Comment | 10:10am – 10:20am |
| III. | SCAODA Update – Norm Briggs/Roger Frings
• Support/Opposition to legislation | 10:20am-10:30am |
| IV. | SCAODA and ITC Strategic Planning – Norm Briggs/Roger Frings | 10:30am – 11:45am |
| V. | Lunch on your own | 11:45am – 12:30pm |
| VI. | Section Updates
○ Children, Youth and Family Treatment (Jill Gamez)
○ Older Population (Sheila Weix)
○ Intoxicated Drivers (Steve Dakai)
○ Treatment for Women and Their Children (Norman Briggs/Sinikka Santala)
○ Affordable Care Act Implementation Update (Shel Gross/Roger Frings)
○ WiNTiP (Dave Macmaster)
○ Ad Hoc Committee on Workforce (Dan Nowak)
○ Mental Health Council Criminal Justice Committee (Norman Briggs)
• Task Assignment | 12:30pm- 2:00pm |
| VII. | Legislation/Miscellaneous Updates – Norm Briggs/Roger Frings
• Other | 2:00pm – 2:20pm |

VIII. Future Agenda Items

2:20pm – 2:30pm

IX. Adjourn

Next meetings:

1. ITC
April 8, 2014: 10:00 am. – 2:30 pm. Department of Corrections, Madison
2. Children, Youth and Families Treatment Subcommittee
April 3, 2014 – teleconference
May 1, 2014 – Appleton, WI
3. SCAODA
March 7, 2014; 9:30 am – 3:30 pm. American Family Insurance Conference Center, Madison.
For more information, visit the SCAODA web site
at: <http://www.scaoda.state.wi.us/meetings/index.htm>

SCAODA Motion Introduction

<p>Committee Introducing Motion: Intervention and Treatment (ITC)</p>
<p>Motion: The Intervention and Treatment Committee (ITC) makes a motion that SCAODA supports AB701 and requests the executive committee to provide written or oral testimony. AB 701 (companion to SB 541) requires the Department of Health Services (DHS) to create two or three regional comprehensive opioid treatment programs to provide treatment for opiate addiction in rural and underserved, high-need areas. In creating the program, DHS must obtain and review proposals for opioid treatment programs in its request-for-proposal procedures. These programs may not offer methadone treatment. An opioid treatment program, under the bill, must offer an assessment to individuals in need of service to determine what type of treatment is needed. The opioid treatment program must provide counseling, medication-assisted treatment, and abstinence-based treatment. If a licensed residential program is necessary for an individual, the opioid treatment program must transition the individual there. The opioid treatment program must transition individuals who have completed treatment to county-based or private post-treatment care. The bill also requires DHS to submit annually, beginning approximately two years after the bill's effective date, a progress report on the outcomes of the opioid treatment program to the Joint Committee on Finance and appropriate standing committees of the legislature.</p>
<p>Related SCAODA Goal: Goal # 4 Wisconsin will have adequate, sustainable infrastructure and fiscal, systems, and human resources and capacity:</p> <ol style="list-style-type: none">For effective prevention efforts across multiple target groups including the disproportionately affectedFor effective outreach, and effective, accessible treatment and recovery services for all in need.
<p>Background: The dramatic rise in opiate addiction, primarily heroin, has not been limited to urban areas. The most effective treatment for opiate addiction has been counseling in concert with medication, specifically methadone or buprenorphine. While there are 15 narcotic treatment services programs offering methadone and buprenorphine in the state, access in the most rural areas has been limited. This bill, which will provide for the use of buprenorphine in addition to counseling, provides a comprehensive, evidence-based treatment service to an underserved population.</p> <ul style="list-style-type: none">Positive impact: Up to 240 individuals addicted to opiates will have access to treatment that is currently unavailable to them.Potential Opposition: None known.
<p>Rationale for Supporting Motion: This bill expands treatment accessibility with no net increase in the DHS budget.</p>



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

**PLANNING AND FUNDING COMMITTEE MEETING MINUTES
November 22, 2013**

Members present: Norman Briggs, Todd Campbell, Nina Emerson, Steven Fernan, Karen Kinsey, Joyce O'Donnell, Emanuel Scarbrough, Duncan ShROUT, Sally Tess

Members excused: Pamela Bean, William McCulley

Members absent: Tom Fuchs

Guests: Cheryl Elkinton

Staff: Kris Moelter

Call to Order – Joyce O'Donnell called the meeting to order at 9:40 a.m. The committee agreed to amend the agenda to add a public comment section so Cheryl Elkinton could speak.

Review of October 18, 2013 minutes – Two corrections were noted: the spelling of Sheila Weix and Lou Oppor. With the changes, Norman Briggs moved (Duncan ShROUT second) to approve the minutes. The motion passed unanimously.

Update on substance abuse-related legislation/SCAODA legislation comment process – Mr. ShROUT reported on the SCAODA legislation comment process the Executive Committee approved. SCAODA has not had a consistent process for testifying or providing comments on legislation. The process adopted by the Executive Committee is that DHS staff will notify the four committee chairs and the Executive Committee of any AODA-related legislation. If any of the committee chairs or Executive Committee members wants SCAODA to comment on the legislation, they will notify DHS staff and the Executive Committee will meet to decide a course of action and decide who, if anyone, would testify on behalf of SCAODA. The bylaws allow this procedure and the procedure will be piloted through the end of the current legislative session. It is also consistent with SCAODA's statutory obligation to give advice on AODA matters.

Mr. ShROUT then spoke about Nina Emerson's blog piece on the OWI surcharge changes that were included in the budget bill. There was an increase in the OWI surcharge but more of the money will go to the state. Few stakeholders seemed to be aware that this was put into the budget bill. Todd Campbell made some calculations and found that

based on the new formula the state will receive \$6.4 million instead of \$4.3 million. The Safe Ride Program would get \$626,000 under the new formula instead of \$423,000. The effect on the counties is minimal because the amount of the surcharge has increased. Another problem with the surcharge increase is that it will put an additional burden on the offender. Mr. Briggs said a significant number of OWI offenders already do not pay the surcharge so raising the amount may mean even fewer will pay. Emanuel Scarbrough pointed out that if offenders do not pay they can be incarcerated, and that will cost the counties money and be another burden on counties that is not being addressed.

Mr. Shrout made the following motion (Mr. Briggs second):

SCAODA send letters to Governor Walker and the chairpersons of the Republican and Democratic caucuses expressing its concern that as part of the budget bill (1) the driver improvement surcharge was increased, and (2) the state portion of the surcharge distribution was increased considerably and this appears to have been done with no notice to interested parties nor consideration of the adverse consequences.

The motion carried with six in favor, none opposed, two abstentions (Steve Fernan and Sally Tess).

Public comment: Ms. Elkinton addressed the committee on AODA matters. She said Wisconsin should become a dry state and that would eliminate many of the problems caused by alcohol. She said Wisconsin spends too much money on AODA-related corrective actions and if alcohol were illegal the state could spend that money on programs that help people, such as providing transportation to jobs for those who lack access to transportation. She said drinking in Wisconsin is out of control and it can be and should be eliminated. Ms. O'Donnell thanked her for her comments.

Report on women's services – Mr. Briggs reported that reapplications were submitted.

Youth Risk Behavior Survey presentation – Mr. Fernan presented the results of the 2013 Youth Risk Behavior Survey. Most of the behaviors are moving in a positive direction, such as reduced alcohol and drug use, reduced sexual behavior, and reduced weapons use. One problem area is bullying. Mr. Fernan will present the information to SCAODA at its December 13, 2013 meeting.

DHS contracting process – Joyce Allen, director of the DHS Bureau of Prevention, Treatment and Recovery talked about the DHS contracting process and how DHS decides what it contracts for. She explained that the process starts with looking at the federal and state appropriations for substance abuse services and how existing state and federal laws affect how the funds might be used. DHS can try to influence that process through the department's budget requests to the Governor's Office. She explained that some of the funds are distributed per a formula set by state law. For example, counties receive about \$9.7 million of the federal Substance Abuse Block Grant funds per a state formula. State law requires counties to provide AODA services

but does not give the counties much money to do that, other than the block grant funds and some program-specific GPR money. There is a base state/county contract that all counties receive and then contract addendums for various sub programs. Counties must report how they spend the money and submit program reports. Counties also report data into the DHS Program Participation System (PPS).

The committee expressed concern that DHS had too many contracts and because of that it is unable to recognize exceptional performance. Ms. Allen explained that DHS is moving toward more performance-based contracting but it may require more staff and a different type of staff. It also might mean providing less technical assistance and training. Currently, if a contractor is not performing, the contract administrator works with the contractor to provide technical assistance and may even develop a corrective action plan. Ms. Allen also told the committee that DHS is improving and streamlining its contracting process. It is training staff on the new procedures, every contract will have specific performance measures based on the contract category, and the contracts will be housed in a central location. The committee asked to be kept informed as the new contracting process progresses. The committee agreed that the DHS contracting process should be addressed in the new SCAODA four-year plan.

SABG annual report – Ms. Allen and Kris Moelter presented the annual Substance Abuse Block Grant report. The report must be filed annually with SAMHSA. Wisconsin met four of its six goals. It is working on improving its performance on the data collection and reducing underage drinking goals. See the attached report.

Committee reports – Mr. Fernan reported that Wisconsin was one of seven states that received a SAMHSA grant to improve the school infrastructure to address mental health, AODA, and early childhood. DPI will work with the Beloit, Racine, and Menominee Indian School Districts.

Mr. Briggs reported that the Intervention and Treatment Committee (ITC) is concerned about the substance abuse counselor workforce issue. It will ask SCAODA to form an ad hoc committee to address the issue. He said the DHS Bureau of Prevention, Treatment and Recovery has data on the demographics of the workforce. There will be a variety of stakeholders represented, including one member from each of SCAODA's committees. One of the goals is to devise a mechanism for current substance abuse counselors to obtain a bachelor's degree. Another goal is to enhance recruitment of young people into the field. This will involve addressing salaries and reimbursement rates.

He also reported that ITC will bring a motion asking SCAODA to endorse policies and procedures for tobacco use in Wisconsin and asking all agencies consider adopting those policies and procedures. There was discussion about the part of the policies and procedures that says the consequences for failing to comply with nicotine abstinence should be consistent with the failure to keep abstinent from other substances. The committee was concerned that people would be removed from treatment for other substance use for using nicotine and not the substance for which they were being

treated. The committee agreed there needs to be clarification and that question should be raised during the discussion at the SCAODA meeting on December 13.

SCAODA membership – Ms. Moelter said that Lou Oppor would meet with the DHS Secretary’s Office regarding the committee’s motion to expand the non-state agency members of SCAODA. The Diversity Committee wants SCAODA expanded to include more state agency representatives because when the statute was enacted some state agencies did not exist, such as the Department of Children and Families and the Department of Veteran’s Affairs. The committee members said they want to have more counselors, providers, academics, and citizens in recovery represented on SCAODA.

Public forum comments discussion – The committee discussed the public forum comments. Mr. Scarbrough noted that several comments related to not separating mental health and substance abuse services and having more consolidation of those services. Mr. Briggs expressed concern about the comments on how it is important for counties to bill Medicaid and third party insurance companies. He said he sees this as an unfair practice because counties get public money so they can charge rates that are better than what private treatment providers can charge, thus getting more clients. It also allows counties to hire more master’s levels counselors and get reimbursed at higher rates. Counties billing in this manner can negatively affect private providers and small businesses.

Agenda Items for next meeting/2014 meeting dates

- ITC wants the Planning and Funding Committee to look at Medicaid reimbursement rates and the difference between counselors with bachelor’s and master’s degrees.
- Time for public comment

The 2014 meeting dates are:

- January 17 at 9:30 a.m.
- February 21 at 9:30 a.m.
- April 11 at 9:30 a.m.
- May 9 at 9:30 a.m.
- July 18 at 9:30 a.m.
- August 15 at 9:30 a.m.
- October 17 at 9:30 a.m.
- November 21 at 9:30 a.m.

All meetings will be held at the ARC offices on Emil Street.

Sally Tess moved (Mr. Briggs second) to adjourn. The meeting adjourned at 2:28 p.m.

Scott Walker
Governor



Michael Waupoose
Chairperson

Duncan Shrout
Vice-Chairperson

Scott Stokes
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

PLANNING AND FUNDING COMMITTEE MEETING

January 17, 2014

9:30 a.m.

ARC CENTER FOR WOMEN & CHILDREN
1409 EMIL STREET, MADISON
608/283-6426

Please call Kris Moelter at (608) 267-7704 or e-mail kristina.moelter@wisconsin.gov if you will not attend.

- | | |
|------------|---|
| 9:30 a.m. | Call to Order – Joyce O’Donnell |
| 9:35 a.m. | Legislation to return 17 year olds to the juvenile justice system – Jim Moeser, Deputy Director, Wisconsin Council on Children and Families |
| 10:05 a.m. | Review of November 22, 2013 minutes - Joyce O’Donnell |
| 10:10 a.m. | Public comment – Joyce O’Donnell |
| 10:20 a.m. | Report on women’s services - Norman Briggs |
| 10:30 a.m. | Substance Abuse Workforce ad hoc committee – Duncan Shrout |
| 10:45 a.m. | Committee reports |
| 11:15 a.m. | Commercial quadricycle law (a/k/a pedal bars) – Joyce O’Donnell |
| 11:25 a.m. | E-cigarettes bill – Joyce O’Donnell |
| 11:45 a.m. | Legislative update |
| 12:00 p.m. | Lunch |
| 12:30 p.m. | Medicaid reimbursement rates discussion – Norman Briggs |
| 1:00 p.m. | SCAODA four-year plan update – Joyce O’Donnell |
| 1:15 p.m. | Health First Wisconsin activities – Maureen Busalacchi |
| 1:45 p.m. | Agenda items for next meeting – Joyce O’Donnell |
| 2:00 p.m. | Adjourn |

www.scaoda.state.wi.us



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

PLANNING AND FUNDING COMMITTEE MEETING

February 21, 2014

9:30 a.m.

ARC CENTER FOR WOMEN & CHILDREN
1409 EMIL STREET, MADISON
608/283-6426

Please call Kris Moelter at (608) 267-7704 or e-mail kristina.moelter@wisconsin.gov if you will not attend.

- | | |
|------------|--|
| 9:30 a.m. | Call to Order – Joyce O'Donnell |
| 9:35 a.m. | Review of January 17, 2014 minutes - Joyce O'Donnell |
| 9:40 a.m. | Public comment – Joyce O'Donnell |
| 9:50 a.m. | Medicaid reimbursement discussion - Norman Briggs |
| 10:30 a.m. | Report on women's services – Norman Briggs |
| 10:35 a.m. | SCAODA four-year plan report – Joyce O'Donnell/Duncan Shrout |
| 11:00 a.m. | Committee reports |
| 11:30 a.m. | Substance abuse workforce ad hoc committee – Norman Briggs/Duncan Shrout |
| 11:45 a.m. | Commercial quadricycle law (a/k/a pedal bars) – Kris Moelter |
| 12:00 p.m. | Lunch |
| 12:30 p.m. | Legislative update |
| 12:45 p.m. | Burden of Alcohol Report—next steps - Maureen Busalacchi |
| 1:15 p.m. | E-cigarettes legislation |
| 1:30 p.m. | IDP update – Lee Ann Cooper |
| 2:00 p.m. | Agenda items for next meeting – Joyce O'Donnell |
| 2:15 p.m. | Adjourn |

Possible SCAODA Motion Introduction

Committee Introducing Motion: Planning and Funding
Motion: SCAODA support the funding and development of a new <i>Burden of Excessive Alcohol Use in Wisconsin</i> report.
Related SCAODA Goals: Goal #1 SCAODA with its committees a. effectively fulfill the statutory dictate to provide leadership and direction on AODA issues in Wisconsin b. is a highly recognized and respected body that serves as the voice to whom the Governor, legislators, local coalitions, and media turn for guidance on AODA issues c. develop and exhibit broad collaborative leadership and aligned action across multiple sectors to advance progress on SCAODA goals Goal #3 There will be educated Wisconsin citizens regarding the negative fiscal, human and societal impacts of AODA in WI (e.g., risk and addiction, prevention, stigma, treatment and recovery, including the racial and gender disparities and inequities relative to these issues).
Background: In 2013 the <i>Burden of Excessive Alcohol Use in Wisconsin</i> was published via a partnership among the University of Wisconsin Population Health Institute, Health First Wisconsin, and the Wisconsin Partnership Program. The report used 2011 data and was a highly useful report for educating key stakeholders on the economic cost of excessive alcohol consumption in Wisconsin and its impact on the state. <ul style="list-style-type: none">• Positive impact: Updating the report with more current data will help SCAODA achieve its goals and continue to educate the citizens of Wisconsin on the societal costs of excessive alcohol use.• Potential Opposition: None, depending on the cost of the report.
Rationale for Supporting Motion: The report was well-received and provided useful information on the cost of alcohol use in Wisconsin that has helped SCAODA work to achieve its goals.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

**Prevention Committee Meeting – Meeting Minutes
Friday, October 18, 2013
9:30 am – 1:30 pm**

CEA 6 Administrative Office
2935 Universal Court
Oshkosh, WI 54904

Members present: Scott Stokes, Dorothy Chaney, Julia Sherman, Paul Krupski, Monica Adams, Annie Short, Lee Wiphli, Mary Rasmussen, Jackie Schoening, Chris Wardlow, & Judy Hermann

Staff: Louis Oppor, Christy Niemuth & Raina Zwadzich

Welcome and Introduction

Chair Scott Stokes welcomed Prevention Committee members, guests and staff. Members, guests and staff introduced themselves.

Approve Minutes from August 14, 2013 Meeting

Members reviewed the meeting minutes from the 8/14/13 Prevention Committee meeting.

Sherman made a motion to approve the meeting minutes as drafted, seconded by Krupski. Minutes were approved.

PFS II SEOW Grant Supplement Funds

Christy Niemuth provided information about the recently funded PFS II SEOW grant (handout). The application was submitted in May 2013 and it was for a 2-year supplemental funding (\$198,000 for the first year and \$150,000 in the second year) to assist with the State Epidemiological Outcomes Workgroup (SEOW). Penny Black from the UW-Madison's Population Health Institute will Chair the Epi Workgroup.

The supplemental funds would assist in re-establishing the Workgroup, advise the PFS II grantees, other community prevention work, collect new data and data sources and provide information/guidance for local community coalitions. Funds will also go to the Great Lakes Inter-Tribal Council (GLITC) Epi Center to support the data collection and surveillance among the Tribes. PFS II grantees will be part of the SEOW in a consultation capacity. A new activity that will be part of the future work of the Epi Workgroup is to create and disseminate 'fact sheets' that present data in an easy to read manner. The fact sheets would be guidance documents to coalitions, Drug-Free Communities grantees and counties and show the substance use trends in 'real-time' and provide answers on how to decrease and prevent use.

Marijuana Conference – Annie Short

Annie Short provided a handout titled, “Marijuana – Is it the safer alternative” that was created from the 2013 National Marijuana Policy & Strategy Conference - hosted by Drug-Free California and Drug-Free American Foundation, Inc. She will be emailing more materials for dissemination to Prevention Committee Members. Annie stated the conference was interesting with almost all the states represented. There also students from Idaho present to show their support for not legalizing marijuana in their state. It was interesting to see the issue from the youth perspective.

Issues that were discussed at the Marijuana Conference included:

- Impaired driving and the limitations of field sobriety testing,
- Housing issues,
- Motives for to first legalizing marijuana for medical use then legislation for recreational use,
- Discussion comparing marijuana to tobacco, alcohol, etc. and assessing how well work has been done in these areas to prevent the use, advertising, access, etc.

The discussion continued with members contemplating how to prevent marijuana use and prevent the creation and passage of marijuana legislation. A statewide assessment of marijuana would be a great starting point and something that could be in the works prior to the creation of the Marijuana Ad-Hoc Committee. Also, hosting a statewide conference to discuss the marijuana issues and figure out tactics would be helpful. It would be interesting to know about how marijuana use is affecting students, their school work achievements, dropout rates due to marijuana use, and suspension/expulsion rates.

Updates from SCAODA

At the September State Council on Alcohol and Other Drug Abuse (SCAODA) meeting, Nina Emerson shared a video her department created. The video was about an individual who was a first time operating while intoxicated (OWI) offender that killed someone. The movie’s goal is to demonstrate the powerful message that even a one-time, driving under the influence event can have life-lasting consequences.

SCAODA will be developing their four-year plan in early 2014. The Executive Committee and the four Chairs will lead the planning process. The four-year plan is due in June 2014 and it will be presented to SCAODA with its preliminary progress in March 2014.

Prevention motions presented to SCAODA included:

- Letter to the Governor regarding support for the Burden of Excessive Alcohol Use report. This letter was sent but there has been no reply or follow-up from the Governor’s Office.
- The Diversity Committee requested a review of current SCAODA membership and proposed appropriate revisions such that all state departments’ representatives become active, voting members.
- The Planning & Funding Committee provided a motion to work with the Governor’s Office, Legislature, and the Department of Health Services Secretary’s Office to

introduce legislation increasing the number of statutory SCAODA members from 22 to 27.

- The Planning & Funding Committee requested SCAODA support a legislative study on current OWI laws, penalties and the effectiveness of the educational and treatment services.

Heroin Ad-hoc Committee Membership

Christy Niemuth reported that a letter of invitation was sent to possible Ad-hoc Committee members (2 handouts, invitation letter and list of possible Ad-hoc Members). The three Chairs of the Ad-hoc Committee will be Dorothy Chaney, Danielle Luther and Annie Short, representing the Alliance for Wisconsin Youth (AWY) Regional Centers. The first meeting will be held on November 12 and the final report's tentative deadline is May or June 2014.

Actions and work around the state regarding the prevention and treatment of heroin include; Rep. Nygren's proposed legislation, the Department of Justice's awareness campaign, and opiate treatment clinics. Rep. Nygren has proposed four separate bills (handouts). The four proposed legislative bills are:

- The Department of Justice (DOJ) may authorize a person to operate a drug disposal program.
- Grant immunity from certain criminal prosecution for offenses relating to a controlled substance or a controlled substance analog possession for persons who provide assistance in a life threatening situation.
- Training and agreements for administering the drug naloxone, requiring emergency medical technicians to carry naloxone, and immunity for certain individuals who administer naloxone.
- Identification card required for certain controlled substances or authorization from the individual who holds the prescription to have another individual pick up the prescription.

Rep. Nygren is working to develop another bill related to opiate treatment clinics throughout the state. The bill would propose creating three opiate treatment clinics designed as short-term, residential treatment facilities with the capacity to medically monitor individuals. The opiate treatment clinics would provide three treatment options and up to a 14 day stay for individuals in need of detox and stabilization.

The DOJ's campaign titled, "The Fly Effect" is a good starting point to raise awareness and education about heroin. The Committee's discussion thought the campaign was missing a prevention component and are using the DOJ campaign with other prevention materials. Some thought the campaign was not resonating well with local communities. In particular, the messaging on the posters was confusing. Annie Short and others have been working on the "Nobody plans to be an addict" and she is looking for feedback. The goal of the campaign is to expand regionally and eventually statewide.

Further discussion included:

- Is there research regarding early risk factors and initiation of heroin use that could be useful in developing prevention strategies/programs.

- Many coalitions have formed heroin task forces but they tend to be more reactive, working on preventing overdoses and/or deaths as opposed to preventing heroin use.
- The Four Pillars model is being used by many task forces and guiding the work of the Heroin Ad-hoc Committee. The Ad-hoc committee has added a fifth pillar, business sector.
- Annie Short is working on taking the research on heroin, the four A's, the seven strategies for community change (CADCA) and the Four Pillars to create a logic model that will give a framework for prevention professionals and others to make sense of how to effectively and efficiently plan prevention activities.

Prevention Training Plan

There have been discussions about the future of the Wisconsin Clearinghouse hosting the prevention conference and the possibility of folding the prevention conference into the Mental Health and Substance Abuse Conference. Since the preliminary discussions, it has been determined that this option is not feasible due to the size and scheduling issues. There will be some sessions on primary prevention at the Mental Health and Substance Abuse Conference but not specific prevention tracks.

Niemuth shared a handout titled, "Wisconsin substance abuse/mental health-related conferences/trainings". Please email Christy with any conference/training information that could be added to this database. Moving forward, Christy would like to have a discussion about coordinating future prevention conferences/trainings. Prevention professionals are starting to get certified as Prevention Specialist/Prevention Specialist In-Training and Christy wants to make sure there is an infrastructure to ensure continuing education that is useful and needed.

The Committee discussed building a training experience that focuses on the implementation of recommendations from the prevention reports (ACE, CSW, 911 Good Sam.), and the Strategic Prevention Framework (SPF). Some discussion points were:

- Rather than a 'sit-n-get' the training would be more demonstrating how to plan and implement these items.
- Do not lose the opportunity for prevention professionals to network and share ideas and information with each other.
- Define the workforce and figure out who the target audience is. There may be different target audiences from basic substance abuse prevention skills training to more advance training topics like building capacity, evaluation and sustainability.

AWY Update/Website Update

Website changes are underway. Currently the focus is on updating coalition membership lists. Please provide suggestions or resources to Raina Zwadzich at mary.zwadzich@wisconsin.gov for inclusion on the site.

Public Forum at the Prevention Conference

The public forum was held at the September Prevention Conference in the Wisconsin Dells. There were about 30 participants but limited participation in terms of discussion. Scott and Lou provided updates on happenings within SCAODA and at DHS. There will need to be a

discussion about where to hold next year's public forum and how to engage the public to make it mutually beneficial and meaningful.

Agency Updates

Judy Hermann shared that the Department of Children and Families (DCF) will be expanding and adding three new home visiting sites in high risk and high need communities. Home Visiting is a service provided in the homes of pregnant women, children from birth to eight years, and their families. Home Visiting has been found to improve parenting, school readiness, and health. It can help prevent child abuse and neglect.

Niemuth shared that the filming of the underage drinking prevention video went well and was completed during the Prevention conference in September, and thanked members for participating.

Future Meeting Dates/Agenda Items

The Prevention Committee has said they would like to have presentations done by each other to share what they are working on, and the resources and services. Judy agreed to present on the trauma project's findings conducted by the DCF in January 2014.

Adjourn

Scott Stokes adjourned the meeting at 1:20 p.m.

2014 SCAODA Prevention Committee Meeting Calendar – locations TBD

January 16, 2014

April 17, 2014

July 17, 2014

October 16, 2014



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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

**Prevention Committee Meeting
Tuesday February 11, 2014
9:30 a.m. – 1:30 p.m.**

**Ultratec Office Building
5901 Research Park Blvd.
Madison, WI 53703**

Agenda

- Welcome and Introductions
- Approve Minutes from October 18, 2013 Meeting
- Optimizing State Prevention Reports
- Underage Drinking Prevention Video Review and Discussion
- WI Trauma Project – Judy Hermann DCF
- Heroin Ad-hoc Committee Update and Hope Legislation
 - VT State of the State Address
- Smart Approaches to Marijuana
- SCAODA Workforce development committee
- Agency Updates
- Future Meeting Dates/Agenda Items

Thursday April 17, 2014

Thursday July 17, 2014

Thursday October 16, 2014

SCAODA Motion Introduction

Committee Introducing: Prevention Committee
Motion: Motion to endorse the SAMHSA funded Wisconsin Underage Drinking Prevention video (with appropriate edits) and to present this video to the State Council on Alcohol and Other Drug Abuse at their March 7, 2014 meeting for full Council endorsement and dissemination.
Related SCAODA Goal: Wisconsin cultural norms change to people vehemently rejecting social acceptance of the AODA status quo and demand and support methods to transform the state's AODA problems into healthy behavioral outcomes.
Background: The consequences of harmful drinking, including underage drinking, is still the number one substance abuse-related issue in the state. The Substance Abuse and Mental Health Services Administration has funded underage drinking prevention videos in most states. The Wisconsin video was filmed in the fall of 2013 and would benefit from the support of the Council.
Rational for Supporting: Wisconsin rates of harmful drinking still exceed national averages. Although underage drinking has declined in recent years, prevention efforts are needed to continue this downward trend and to inform communities on how to change the alcohol culture around drinking in Wisconsin.

State Council on Alcohol and Other Drug Abuse (SCAODA) Strategic Plan July 2014 – June 2018

SCAODA GOALS:

1. Provide leadership and direction on AODA issues in Wisconsin by serving as the voice to whom the Governor, legislators, local coalitions, and media turn for guidance on AODA issues and promote collaboration across multiple sectors to advance progress on SCAODA goals.
2. Change Wisconsin's cultural norms to transform the state's AODA problems into healthy behavioral outcomes.
3. Wisconsin citizens will understand the negative fiscal, individual, and societal impacts of substance abuse.
4. Wisconsin will have the capacity and infrastructure to implement effective outreach, prevention, treatment, and recovery services for all in need.
5. SCAODA will work to remedy historical, racial /ethnic, gender, and other bias in substance abuse systems, policies, and practices.

SCAODA PRIORITIES for 2014-15

1. Substance abuse workforce capacity
2. Population-specific needs
3. Harmful alcohol consumption
4. Substance abuse-related consequences
5. Evidence-based practices in prevention, treatment, and recovery
6. Emerging substance abuse trends

**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**

<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.
- 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.

- j. Issue reports to educate people about the dangers of alcohol, tobacco and other drug abuse.
- k. The council also recommends legislation, and provides input on state alcohol, tobacco and other drug abuse budget initiatives.
- l. 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 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. Ex-officio members will serve four-year terms.
- d. 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.
- e. An ex-officio member may not be elected as an officer of the council.
- f. 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. 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 Past Chairperson

The immediate past chairperson shall serve as a member of the council until expiration of their appointed term, and may serve as an ex-officio

member during the term of her or his successor if the term of office as member of the council has expired.

3.5 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 are expected to attend all meetings of the council. Attendance means presence in the room for more than half of the meeting.
- 6.2** Council members who are sick, hospitalized or who have some other important reason for not attending should notify the secretary or the secretary's designee at least a week before the meeting. If that is not possible, notice should be given as soon as possible.
- 6.3** Any member of the council who has two unexcused absences from meetings within any twelve month period will be contacted by the secretary of the council 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. Any resignations will be announced to the council and forwarded to the appointing authority.
- 6.4** At any time the secretary of the council, after consultation with the appointed member, believes that a member will not be able to fulfill the duties of membership, he or she should bring the matter to the chairperson. When the chairperson confirms that recommendation, he or she shall place the matter on the next council agenda. The

chairperson shall ensure that the member at issue is given notice that the council will consider a recommendation to the appointing authority regarding the membership. When the council, after the member at issue is given the opportunity to be heard, agrees with the recommendation, it shall recommend to the appointing authority that the member be removed from the council and a replacement appointed to fulfill the member's term.

- 6.5** If a statutory member or their designee are absent from two meetings within a year, they will be contacted by the secretary of the council to discuss the reasons for absence and whether the member will be able to continue serving. In the event that a statutory member believes they are unable to continue, the secretary of the council shall inform the council chairperson and upon confirmation the chairperson will provide written notice to the governor of the need for an alternate or replacement.

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 the Americans with Disabilities Act (ADA) for deaf, deafblind and hard of hearing and is a subcommittee of the cultural diversity 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. The immediate past chairperson of the council may also be invited by the council chairperson to be a member of the executive committee.
- 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

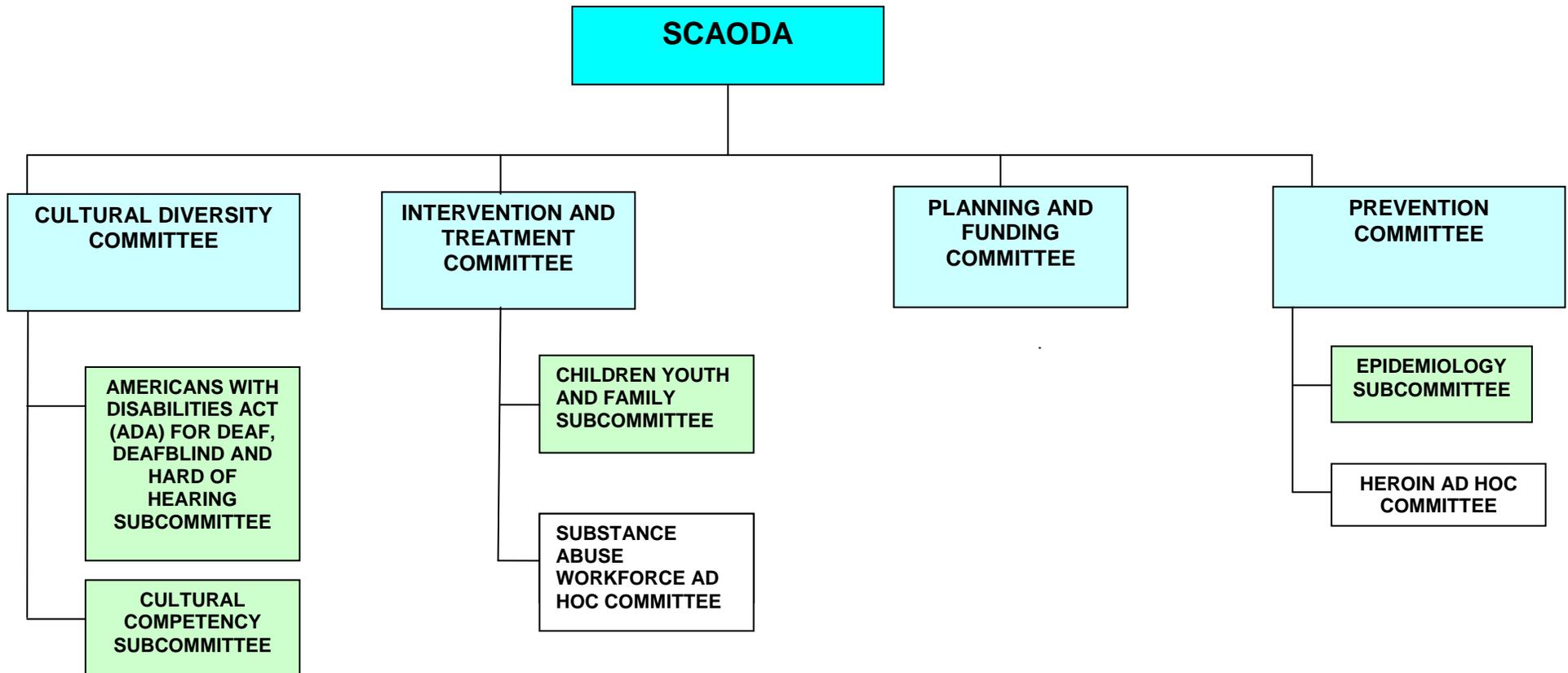
Amendments

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.

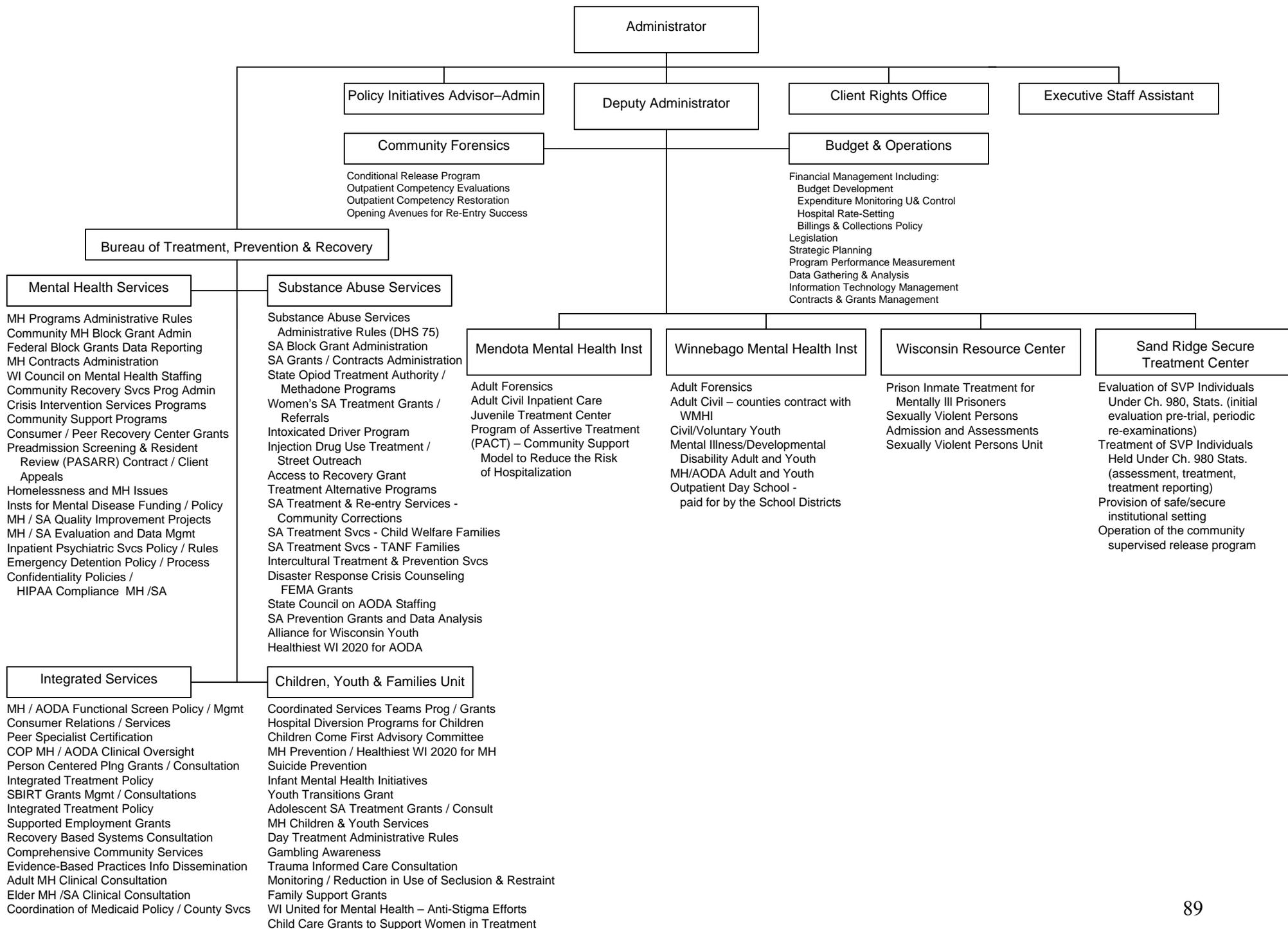
SCAODA Organization Chart

February 2014

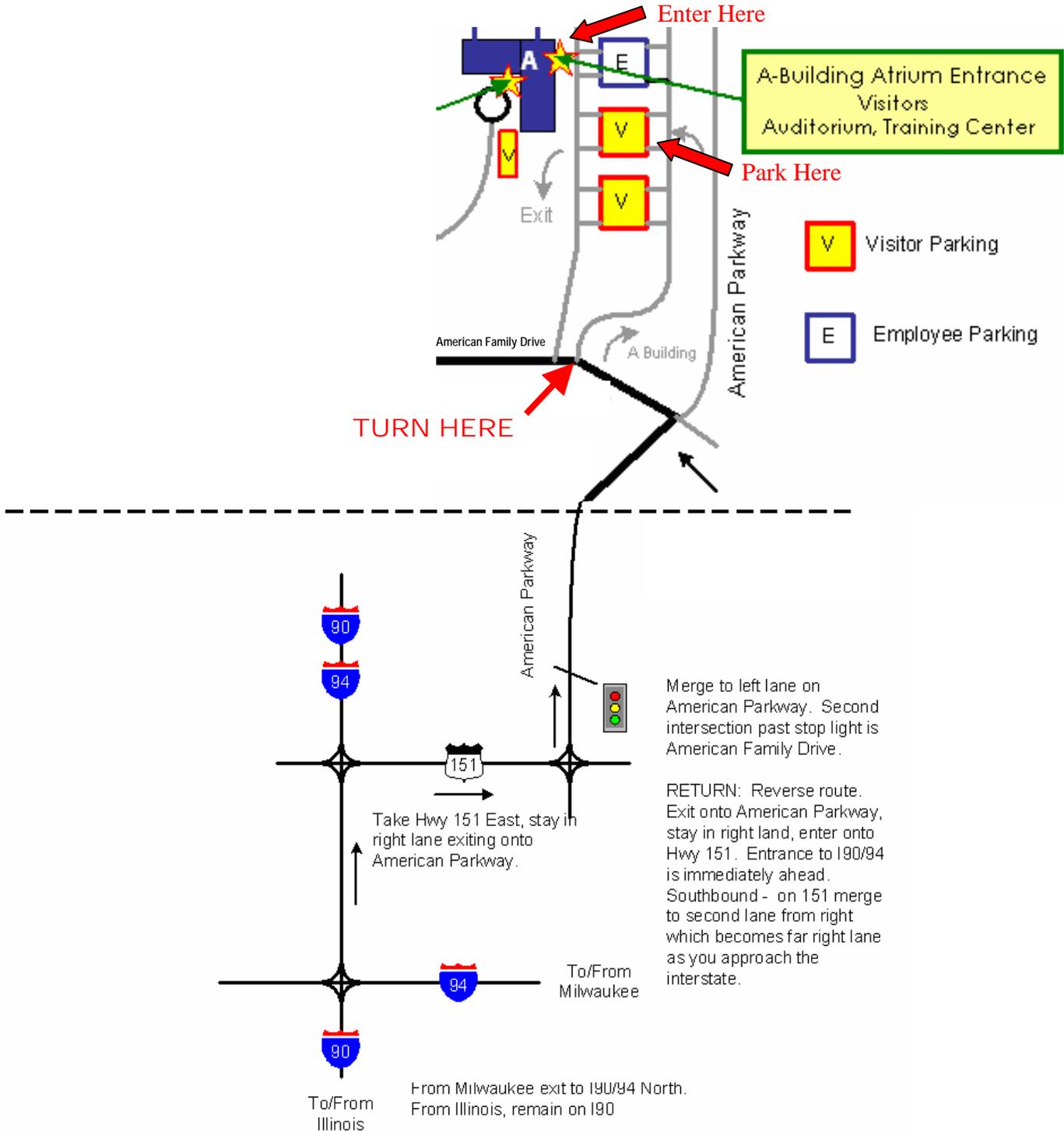
1. Cultural Diversity Committee
 - a. Americans with Disabilities Act (ADA) For Deaf, Deafblind and Hard of Hearing Subcommittee
 - b. Cultural Competency Subcommittee
2. Intervention and Treatment Committee
 - a. Children Youth and Family Subcommittee
3. Planning and Funding Committee
4. Prevention / SPF-SIG Advisory Committee
 - a. Epidemiology Subcommittee



Functions



Directions to American Family's Training Center and Auditorium



Highway Directions to AF-NHQ Campus

