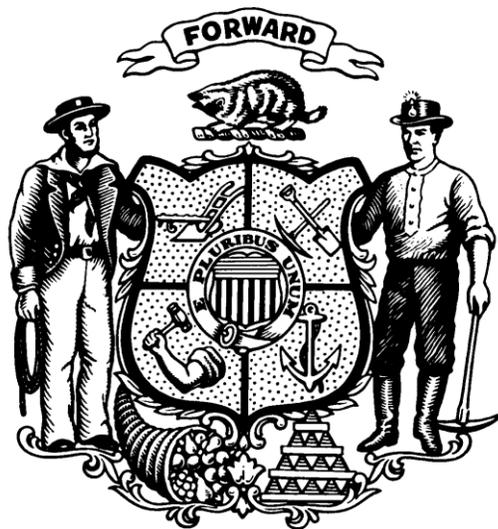


WISCONSIN STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE



September 9, 2016
MEETING

Duncan ShROUT
Chairperson

SCOTT WALKER
Governor

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. Inform Wisconsin citizens on the negative fiscal, individual, and societal impacts of substance abuse.
4. Advocate for adequate funding, capacity, and infrastructure to implement effective outreach, prevention, treatment, and recovery services for all in need.
5. Remedy historical, racial /ethnic, gender, and other bias in substance use disorder systems, policies, and practices.

SCAODA PRIORITIES for 2015-16

1. Expand substance use disorder workforce capacity
2. Address population-specific needs
3. Reduce harmful alcohol consumption
4. Inform the public about substance use disorder-related consequences
5. Increase the use of evidence-based practices in prevention, treatment, and recovery
6. Address emerging substance use disorder trends

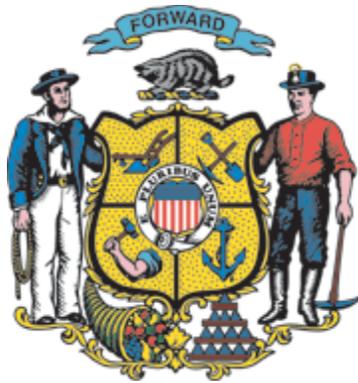


Tobacco-Free Environment

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!



SCAODA 2016 Meeting Dates

March 4, 2016

June 3, 2016

September 9, 2016

December 9, 2016

**American Family Insurance Conference Center
6000 American Parkway
Madison, WI
Building A, Room 3141**

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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

September 9, 2016

MEETING AGENDA

9:30 a.m.

American Family Insurance Conference Center

6000 American Parkway, Madison, WI 53783

Building A, Room 3141

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

Please call (608) 267-9446 or email paul.krupski@wisconsin.gov if you or your designee will not attend the meeting.

9:30 a.m. Welcome and introductions – Duncan ShROUT

9:35 a.m. Election of officers – Joyce O’Donnell

9:40 a.m. Approval of June 3, 2016, meeting minutes – Chairperson....pp. 8

9:45 a.m. Public input (maximum five minutes per person) – Chairperson

9:55 a.m. Committee reports

- Diversity Committee – Tina Virgil....pp. 13
 - Annual report....pp. 22
- Intervention and Treatment Committee – Norm Briggs and Roger Frings...pp. 25
 - Budget proposal....pp. 33
 - Annual report....pp. 34
- Planning and Funding Committee – Joyce O’Donnell....pp. 38
 - Budget proposal....pp. 44
 - Annual report....pp. 45
- Prevention Committee – Scott Stokes....pp. 47
 - Budget proposal....pp. 53
 - Annual report....pp. 57

- 10:45 a.m. Wisconsin Council on Mental Health Criminal Justice Committee update – Norman Briggs
- 11:00 a.m. Secretary’s Council and Child Welfare update – Norman Briggs
- 11:15 a.m. Budget/legislation update – DHS staff
- 11:30 a.m. Agency reports
- Department of Revenue – Matthew Sweeney....pp. 60
 - Department of Health Services – Tom Engels
 - Department of Public Instruction – Steven Fernan
 - Department of Veterans Affairs - Mike Ayers
 - UW Systems – Anne Hoffmann
 - WTC – Katie Roberts
 - Mahala’s Hope – Sandy Hardie
- 12 p.m. LUNCH
- 1 p.m. Scope of the Opioid Harm in Wisconsin - Lisa Bullard-Cawthorne and Crystal Gibson, Department of Health Services, Division of Public Health
- 2:15 p.m. Agenda items for next meeting – Chairperson
- 2:20 p.m. Announcements – Joyce Allen
- 2:30 p.m. Adjourn – Chairperson

Next meeting: December 9, 2016



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

June 3, 2016

9:30 a.m.

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

Members present: Sen. Janet Bewley, Rep. Jill Billings, Norman Briggs, Tom Engels, Douglas Englebert, Steven Fernan (Brian Dean), Roger Frings, Susan Hackworthy, Sandy Hardie, Craig Harper (Jennifer Fyock), Patrick Hughes, Sen. Devin LeMahieu (Luke Petrovich), Rep. John Nygren (Jenny Malcore), Joyce O'Donnell, Mary Rasmussen, Sue Shemanski, Duncan ShROUT, Scott Stokes, Kristi Sullivan, Michael Waupoose

Members excused: Tina Virgil

Ex-officio members present: Mike Ayers, Jamie Elder, Elizabeth Hizmi, Anne Hoffman, David Galbis-Reig, Matt Sweeney

Ex-officio members excused: Randall Glysch, Mishelle O'Shasky, Linda Preysz, Katie Roberts

Staff: Joyce Allen, Beth Collier, Lee Ann Cooper, A.J. Ernst, Raina Haralamopolous, Andrea Jacobson, Bernestine Jeffers, Rose Kleman, Paul Krupski, Kris Moelter, Lucas Moore, Dustin Mullett, Christy Niemuth, Mai Zong Vue, Alex Wright

Guests: Paula Brown, Todd Campbell, Brenda Jennings, Denise Johnson, Sara Johnson, David MacMaster, Michael Miller, Joe Muschka, Mary Rismeyer, Tera Cater Vorpahl, Chris Wardlow, Michelle Wick, Jim Wrich

Duncan ShROUT called the meeting to order at 9:35 a.m.

Introductions – Meeting attendees introduced themselves.

Approval of March 4, 2016, minutes – Scott Stokes moved (Michael Waupoose second) to approve the March 4, 2016, meeting minutes. The motion passed unanimously.

Public input – See the “nicotine resolution” agenda item.

Marijuana ad hoc Committee report – Mr. Stokes (Mr. Waupoose second) made the following motion: **Review comments and adopt the Marijuana Ad-hoc Committee's report; Marijuana in Wisconsin; Research-Based Review and Recommendations for Reducing the Public Health Impact of Marijuana.**

The Council discussed the motion. Tom Engels said no changes were made to the report since the Council voted to not accept the report at the December, 2015 meeting. Mr. Stokes said the Prevention Committee decided to bring the same report before the Council because the feedback it received was that people did not have enough time to review the report before voting in December. Joyce O'Donnell said the Planning and Funding Committee wanted recommendations 7, 8, and 9 removed and if those were removed it would support the report.

Ms. O'Donnell (Susan Hackworthy second) moved to remove recommendations 7, 8, and 9 from the report. The Council discussed the motion. Mr. Engels said the issue of decriminalization is for the legislature, not the Council. David Galbis-Reig responded that most medical societies in the country support decriminalization. Some counties in Wisconsin have effectively decriminalized marijuana possession and he considers recommendations 7, 8, and 9 within SCAODA's purview because they are part of a broader treatment plan. Norman Briggs reported that the Intervention and Treatment Committee supports the report if recommendation 7 were removed because the committee thought the specificity of the recommendation was beyond the scope of SCAODA. Sandy Hardie said that the recommendations are part of larger picture. Sometimes people in recovery are hindered because of a criminal record related to marijuana possession. The recommendations speak to the treatment issue, and that is within SCAODA's scope.

THE MOTION PASSED: 10 yes (Bewley, Engels, Frings, Fyock, Hackworthy, Hughes, Malcore, O'Donnell, Petrovich, Sullivan), 9 no (Billings, Briggs, Dean, Hardie, Rasmussen, Shemanski, Shrout, Stokes, Waupoose), 1 abstention (Englebert)

Mr. Stokes (Ms. O'Donnell second) moved to approve the report with recommendations 7, 8, and 9 removed.

THE MOTION PASSED: 13 yes (Bewley, Briggs, Dean, Engels, Fyock, Hackworthy, Hughes, Malcore, O'Donnell, Petrovich, Rasmussen, Stokes, Sullivan), 5 no (Billings, Hardie, Shemanski, Shrout, Waupoose) 2 abstentions (Englebert and Frings)

Mary Rasmussen (Mr. Waupoose second) moved to add recommendations 8 and 9 back into the report.

THE MOTION FAILED: 9 yes ((Billings, Briggs, Dean, Hardie, Rasmussen, Shemanski, Shrout, Stokes, Waupoose), 10 no (Bewley, Engels, Frings, Fyock, Hackworthy, Hughes, Malcore, O'Donnell, Petrovich, Sullivan), 1 abstention (Englebert)

Nicotine resolution presentation - David MacMaster, Jim Wrich, and Dr. Michael Miller gave a presentation on amending Wis. Admin. Code ch. DHS 75 to include tobacco use disorder within the definition of substance use disorder, thereby giving people seeking treatment for nicotine dependence access to the same range of treatment services as those offered for the treatment of other substance use disorders. The documents are in the SCAODA book.

Sen. Janet Bewley (Mr. Stokes second) made the following motion: **In order for the State of Wisconsin to be consistent with its own law pertaining to the treatment of substance use disorders in ch. 51 (51.001), SCAODA strongly urges the removal of the words "...excluding nicotine dependence" from the definition of "substance use disorder ..." as contained in Wisconsin Administrative Code DHS 75.02 (86), and thereby afford Wisconsin residents seeking treatment for a primary Tobacco Use Disorder the same access to an evidence based range of treatment services such as those offered for the treatment of other mental health and substance use disorders.**

Mary Rismeyer spoke in support of the resolution.

Mr. Waupoose questioned whether the treatment provider system is ready to provide a full range of services for nicotine addiction and whether insurance would cover such treatment. Mr. Wrich said that the under the resolution treating nicotine dependence is not mandated, it's just not excluded anymore in Wis. Admin. Code ch. DHS 75. Dr. Miller said that in the future the parity law may require treating nicotine dependence the same as other drug dependence. Mr. Engels said this will impact the Medicaid program and there will be increased costs. He said there are a limited number of counselors and there are other drug issues that need to be addressed, such as opioid addiction. Ms. Hardie said she does not think there will be a large number of people who will seek treatment solely for nicotine addiction. Mr. Galbis-Reig agreed there will not be large numbers of people seeking treatment solely for nicotine addiction and treating nicotine addiction, even if it is the only addiction, will reduce Medicaid spending long-term.

THE MOTION PASSED: 11 yes (Billings, Briggs, Dean, Hackworthy, Hardie, O'Donnell, Rasmussen, Shemanski, Shrout, Stokes, Waupoose), 7 no (Engels, Englebert, Frings, Fyock, Hughes, Malcore, Petrovich), 2 abstentions (Shemanski, Sullivan)

AODA funding report – Todd Campbell presented the AODA funding report. The Planning and Funding Committee formed an ad hoc committee to look at funding for AODA prevention, treatment, and recovery in Wisconsin. The report is in the SCAODA book. The report is a snapshot in time and will need to be updated because funding changes during each budget cycle. It is a report to be built on over time. The intent is for SCAODA's committees to advance the recommendations in the report.

Ms. O'Donnell (Ms. Hardie second) made the following motion: **Adopt the report on substance use disorder funding in Wisconsin.**

Mr. Briggs asked about recommendation 1 and what the national average taxation of all states would be. Mr. Campbell said that analysis would need to be done.

THE MOTION PASSED: 12 yes (Billings, Briggs, Dean, Hardie, Fyock, O'Donnell, Rasmussen, Shemanski, Sullivan, Shrout, Stokes, Waupoose), 2 no (Malcore, Petrovich), 5 abstentions (Engels, Englebert, Frings, Hackworthy, Hughes)

Committee reports

- **Executive Committee** – Mr. Shrout reported that the Department of Transportation OWI work group is seeking a SCAODA representative to serve on the committee. Ms. Hackworthy explained that the group has a number of traffic safety-related initiatives. The group is seeking representatives with a medical background. Mr. Shrout also asked for volunteers to serve on the nominating committee for the election of officers that will occur at the September meeting. Ms. O'Donnell and Ms. Hardie will co-chair the Nominating Committee. He reminded the committees that their annual reports are due at the September meeting and they should prepare any budget initiative requests at their July meetings so the Executive Committee can take action on them before the agency budgets are due. Finally, he reported on proposed changes to Family Care/IRIS. The Wisconsin Long-term Care Coalition is seeking input on the proposed changes.
- **Diversity Committee** – Ms. Hardie reported that the committee is analyzing data on client services for underserved populations. They are also working on a presentation for the state conference on diversity. The committee is continuing to work on the CLAS standards and helping agencies assess how they are integrating cultural competence into their programming.

- **Intervention and Treatment Committee** – Mr. Frings reported that the committee had a presentation from the Department of Corrections regarding the DOC vivitrol project that is offering vivitrol to inmates before release. The committee has established a small group to look at the draft workforce report more in depth. They had a presentation on the Prescription Drug Monitoring Program changes and a presentation on sober recovery homes.
- **Planning and Funding Committee** – Ms. O’Donnell reported that Brian Dean is the new Department of Public Instruction representative on the committee. Irene Secora is also a committee member and she represents the Waukesha community coalition.
- **Prevention Committee** – Mr. Stokes reported that the committee is looking at forming an ad hoc committee on the prevention workforce. The committee is also looking at membership issues to see who is interesting in continuing to serve and then recruiting new members. The Parents Who Host Lose the Most campaign is underway.

State agency reports

- **Department of Revenue** – Matt Sweeney reported on the excise tax collections for the fiscal year through April 2016. Excise taxes are up \$6.1 million from 2015, a 1.2 percent increase. The cigarette taxes are up .7 percent, the tobacco tax up 5.3 percent, the liquor/wine tax up 2.1 percent, and the beer tax up 1.7 percent.
- **Department of Health Services** – Mr. Engels reported that DHS is continuing to implement the HOPE legislation. DHS has a steering committee with representatives from each division that meets monthly to ensure the divisions are working together on same goals around opioid issues. DHS has applied for several grants, including a SAMHSA grant to prevent opioid-related deaths and a CDC grant to support a staff position for collecting and analyzing alcohol outcome data. DHS is undergoing a reorganization. There will be a new division of Medicaid Services in which all Medicaid programs will be consolidated and replace the Division of Healthcare Access. The Division of Long-term Care will become part of another division. The DHS institutions will be in one division instead of two divisions. The Aging and Disability Resource Centers will be moved to the Division of Public Health. This will all be done by the end of 2016.
- **Department of Public Instruction** – Mr. Dean reported that DPI will do the Youth Risk Behavior Survey in the winter/spring of 2017. They will also be providing AODA grants to school districts in the winter/spring of 2017. In the fall of 2016 DPI will be awarding \$1,000 mini grants for student groups. In December 2016 DPI will host its annual conference.
- **Wisconsin Medical Society** – Mr. Galbis-Reig reported the Wisconsin Medical Society has convened an opiate task force to address the physician’s role in opioid addiction. They are working with the PDMP to make it more user friendly for physicians. They are developing practice improvement modules around opiate prescribing and chronic pain and assessing for addiction. There will be suboxone training at the September conference, hoping to increase the number of suboxone prescribers. He said there is pending federal legislation to increase the number of patients per prescriber.

Wisconsin Council on Mental Health Criminal Justice Committee update – Mr. Briggs reported that SCAODA needs to reach out to the WCMH to find a person to attend the SCAODA meetings.

Secretary's Council on Child Welfare update – No report.

Agenda items for the September 9, 2016, meeting

- Committee annual reports
- Election of officers
- SCAODA budget initiatives report

Announcements – Joyce Allen reported that Bernestine Jeffers has been named a 2016 Champion in Women's Health by the Wisconsin Women's Health Foundation. She also reported that SAMHSA will be doing a federal review of the block grants in August. SAMHSA may ask for representatives from SCAODA to attend some of the meetings. A.J. Ernst reported on the legislative briefing. It is available on Wisconsin Eye. The Alliance for Wisconsin Youth released the RFP for coalitions to apply for funding. Wisconsin is part of an assessment pilot for Intoxicated Driver Programs. Statwide training is planned for ASAM and the Matrix Model.

Adjourn –The meeting adjourned at 1:29 p.m.

DRAFT



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

April 22, 2016

10 a.m. – 2 p.m.

Health Education Center Room 117

Note: Park on lot P10, enter the building at door #5, room HEC 117
Eau Claire, WI 53703; Phone: 715-833-6482

Members present: Gail Kinney

Members attended by phone: Cathy Scheier, Tina Virgil, Anthony Harris, Denise Johnson, and Sandy Hardie,

Guests/Staff: one student and Mai Zong Vue

Excused: Danise Doudna

Call Meeting to Order: Gail called the meeting to order at 10:10 a.m. and welcomed everyone. A brief self-introduction was done by all members.

Public Comment: None

Approval of Meeting Minutes: A motion was made by Sandy to approve the February meeting minutes as submitted and seconded by Tina.

Website Updates: Do we and can we add the logo to Council page? Gail raised a question: Do we need a subgroup to discuss a list of things to be added to the Diversity page? Tina agreed. After much discussion, the Committee agreed to the following:

- Tina will review the SCAODA and Diversity pages and provide feedback at the May 20 meeting.
- Need an outline list of criteria and bring back to full committee for discussion.
- Come up with 3-5 things and send to Committee for feedback.
- Criteria—specific information related to the underserved populations that helps the public understand more about the issue or resources to help the underserved agency staff.
- First thing in the page should be objective, not meeting minutes. Again, let Mai Zong know of any suggestions.

Website Page Update: A revised copy of the Diversity Guidelines and Goals/Mission with the Diversity logo was handed out to everyone. If there are any logo placement preferences on the letterhead, please let DMHSAS staff know. Staff have updated documents on the Diversity Committee page on SCAODA website to include the Diversity logo.

A good conversation took place about what resources should be posted on the Diversity page. Questions about the roles of Diversity Committee and who is who within SCAODA were raised. Should the Diversity Committee page be a diversity “machine” that hosts resources, be a voice, and be a recruitment tool for more diverse faces for all committee within DHS? It was suggested that the Diversity Committee page be used to represent more diversity issues within the state in order to bring more visibility to the diversity issue, including identifying diversity gaps.

DMHSAS Updates: Request For Proposal (RFP) - There are three RFPs being developed from DMHSAS. Stay tuned for more information.

The Funding Committee would like to attend the Diversity Committee meeting on May 20 to discuss its proposed budget.

Annual Mental Health and Substance Abuse Conference:

Diversity Reception/Event:

A lengthy discussion took place on what the event should be. It was discussed that the event needs to have a captive audience. Can we do something at the noon hour instead of evening because participants are tired by end of the day? As for a topic, a video discussion took place and everyone agreed that a short (5-10 minutes) video highlighting four groups (LGBT, deaf and hard of hearing, Hmong and Spanish) be produced and showed at lunch time. Personal stories will highlight struggles in accessing services. We will need clients who can speak to his/her personal struggles. What type of services they wish they could have received? Be sure to indicate that the video only highlights just a few people, not an exhausted list of people. Gail indicated that she has potential students who can help with the video. The Committee agreed to write a formal request and send it to the Planning Committee. Sandy will draft the letter to request for lunch time slot for showing the video and send to everyone for comments.

Diversity Workshop Feedback:

A brief discussion was held on the upcoming Diversity workshop. Discussions included:

- What topics and who are the presenters for this year?
- Please change the workshop name
- Focus on 1-2 underserved groups
- Highlight the issues of the selected groups.
- Gail will draft a workshop outline for the May 20 meeting. Please send any thoughts to Gail as she works on it.

Diversity Application Package: Gail shared that she did some research online but did not find much. After a brief discussion, the Committee would like to know if the other three committees

have a process and application package they currently use. Mai Zong will look into it and share with the Committee at the May 20 meeting. Mai Zong will ask Bernestine to see if there are any application packages on file for the Diversity Committee.

CLAS Standard Implementation Discussion: A brief discussion was held on accountability from DMHSAS. The Committee felt that it is the responsibility of DMHSAS to hold its providers accountable. Therefore, resources to monitor CLAS Standard implementation should be from DMHSAS. The Committee would like to invite DMHSAS or DHS staff to come to future meetings and update them on CLAS Standard implementation, including training needs. It was agreed that Tina will write a letter to DHS/DMHSAS regarding this matter.

Data Discussion: There is a great need to have data as the Committee is trying to understand the gaps in services. The Committee needs to work on reviewing existing reports, include the 2014 DMHSAS Annual Report and the Race and Equity Report from the Wisconsin Children Council. Gail asked if Mai Zong can resend the email with a bunch of attachments to the Committee.

Other:

Ad hoc Workforce Committee Report -- Gail shared that there is a response from SCAODA regarding the Workforce Report in the SCAODA December 11, 2015 meeting minutes. Anyone interested can read the report in the SCAODA website under the December 11, 2015 meeting minutes.

Gail also pointed out that DSPS barriers continue to increase. This is an important discussion to have if we want people of color to be employed in the field.

Next Agenda Items

- Diversity Workshop
- Diversity reception
- Website updates
- Committee Member Application
- Funding Committee Discussion
- Faith—peer specialist discussion
- Other—DSPS issue

Meeting adjourned at 12:30 p.m.

Notes by Mai Zong Vue, 608-266-9218, April 22, 2016

Scott Walker
Governor



Duncan ShROUT
Chairperson

Scott Stokes
Vice Chairperson

Mary Rasmussen
Secretary

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

July 22, 2016

Diverse & Resilient

2439 N. Holton Street, Milwaukee, WI

Present: Denise Johnson, Thai Vue and Anthony Harris

Phone Attendance: Kathy Scheier, Sandy Hardie, Gail Kinney

Staff & Guests: Mai Zong Vue, Amy and Nicole

Website Updates: Protocol for Cultural Responsive to be discussed and approved.

DMHSAS Updates: There is a reorganization of DMHSAS, which a new name is being sought from all levels. There federal will be conducting a site visit to DMHSAS on the week of August 15. More information will be shared as it becomes available. There are a few Request for Proposals in the process. The Crisis Conference and Mental Health and Substance Abuse Annual Conference registration information is out.

CLAS Standards Implementation - postponed

Diversity Application Package: Gail shared that a draft package has been prepared but not quite ready to go. The package includes: mission and goal, uses the form Mai Zong developed, and added a couple of questions on contributions. We added a few things to clarify the required participation.

Thai shared his thoughts on the recruitment process--if we recruit individuals who are willing and eager to do it, this individual is already in the line, sometimes for a while, and there is no fresh perspective. On the other hand, if we recruited new volunteers, the benefits are that this person brings a new-fresh perspective and may not be too busy. Also, it may sound insulting to use the word "educate" and instead use the word "share" which is more positive and inviting to the ears in the recruitment process. The basic approach should be to recruit new blood with the desirable skills and lay out the required commitments.

There seems to be a lack of personal responsibilities from members for not letting staff know that you can't attend meetings. Sandy wondered if there are ways to reach cultural diversity consumers to get their feedbacks.

Diversity Workshop: A brief discussion was held on the workshop presentation format and presenters. It was agreed that the presenter size should be 1-3, background on the Diversity Committee could be stronger, make sure there is adequate time for Q/A, the title of the workshop will be “What Can I Do?”, and the presenters are: Gail, Cathy and Denise.

The workshop description will be: The Diversity Committee is a Committee of SCAODA. It works year round to increase effectiveness in responding to our diverse communities in Wisconsin. As a result, the Committee wants to share their experience and dialogue ideas to increase your effectiveness. From policy makers to daily clinical staff you will be challenged to do something about your blind spots.

The learning objectives are:

- Be able to access SCAODA committees as resources
- Assess your cultural quotient
- Identify something specific you will improve in your cultural responsiveness when you return to your office

Mai Zong will type workshop contact sheet and send out today to Denise, Gail and Cathy to review. Please send final version to Mai Zong by 12 noon on Monday, July 25, 2016.

Diversity Video

The Committee went over the draft Gail sent. Video discussions include: need to explain the project purpose to the interviewees; be sure you give the interviewee a consent form to sign and leave with you; send a list of the questions (six questions) ahead of the time; and allow the interviewee to talk naturally throughout the interview. Six questions included: 1. Tell us who you are? 2. What you identity means to you. 3. How do you define yourself? 4. How do you find services? 5. What is the biggest access and challenge? 6. What has gone well?

Thai suggested that the interviewer need to break down the questions in details as well. Tips for the video include: using cue cards during the interview and speak slow so captions are readable.

Timetable for the Video include:

Activity	Due Date
Identify interviewee	
Finish interviewing	August
Send raw materials to Gail	August 15
Editing	September
Final review	September
Approve video	October 1

Mai Zong will work on a draft consent form for the video. Denise does some editing.

Next Agenda Item:

1. Protocol for Cultural Responsive – to be posted on the website?
2. Workshop

3. Video
4. Clas Standard
5. Data Discussion
6. Application package approval, if not done.

Motion to adjourn by Cathy Scheier and second by Denise Johnson

Notes by Mai Zong Vue, 608-266-9218, July 15, 2016

Scott Walker
Governor



Duncan ShROUT
Chairperson

Scott Stokes
Vice Chairperson

Mary Rasmussen
Secretary

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

May 20, 2016; 10 a.m. – 2 p.m.

Kajsiab House

3518 Memorial Dr. #4 (Mendota Mental Health Institute)—see attached map

Madison, WI 53704; Phone: 608-469-4370 (mai zong work cell)

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

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

- | | |
|------------|---|
| 10 a.m. | Call to Order & Introduction – Thai Vue
Public Comments
Approval of April meeting minutes |
| 10:15 a.m. | Funding Committee – Todd Campbell
Website updates
DMHSAS updates
MH/SA Conf—Diversity Workshop & Video
Diversity draft application package - Gail/Sandy/Denise? |
| 12 noon | Lunch |
| 1:00 p.m. | CLAS Standard Implementation Discussion
Data Discussion |
| 1:50 p.m. | Agenda items for next meeting |
| 2:00 p.m. | Adjourn |

**NOTE: Next SCAODA meeting is June 3, 2016; American Family Insurance, Madison
Next Diversity Meeting: July 22, 2016, Milwaukee**

Diversity Mission Statement:

To enhance and honor the lives of Diverse Populations of Wisconsin by providing access to culturally intelligent substance use related services.

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.

Scott Walker
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Secretary

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

July 22, 2016; 10 a.m. – 2 p.m.

Diverse & Resilient
2439 N. Holton Street, Milwaukee, Wisconsin
Phone 414-390-0444

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

Call in telephone number: 1-877-820-7831
Participant Passcode is 554523

- | | |
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Public Comments
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CLAS Standard Implementation Discussion
Data Discussion |
| 1:50 p.m. | Agenda items for next meeting |
| 2:00 p.m. | Adjourn |

NOTE: Next SCAODA meeting is September 9, 2016; American Family Insurance, Madison
Next Diversity Meeting: August 19, 2016, Eden (Sandy's office)

Diversity Mission Statement:

To enhance and honor the lives of Diverse Populations of Wisconsin by providing access to culturally intelligent substance use related services.

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.

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Secretary

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

August 19, 2016; 10 a.m. – 2 p.m.

Mahala's Hope – 920-904-6445 (Sandy's office)

N4590 Hwy 45

Eden, Wisconsin

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

Call in telephone number: 1-877-820-7831
Participant Passcode is 554523

- | | |
|------------|--|
| 10 a.m. | Call to Order & Introduction – Thai Vue
Public Comments
Approval of July meeting minutes |
| 10:15 a.m. | Website updates
DMHSAS updates
Diversity draft application package - Gail/Sandy/Denise?
MH/SA Conf—Diversity Workshop & Video |
| 12 noon | Lunch |
| 12:30 p.m. | Diversity Annual Reports
Diversity Budget Initiatives |
| 1:50 p.m. | Agenda items for next meeting |
| 2:00 p.m. | Adjourn |

NOTE: Next SCAODA meeting is September 9, 2016; American Family Insurance, Madison
Next Diversity Meeting: October 25, 2016, Kalahari, WI Dells

Diversity Mission Statement:

To enhance and honor the lives of Diverse Populations of Wisconsin by providing access to culturally intelligent substance use related services.

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.

Diversity Committee Annual Report – July 1, 2015 to June 30, 2016

Committee	Plan to address goal/priority	SCAODA Goal	SCAODA Priority	Progress
Diversity	Develop a logo	5	2	completed
	Develop a process to identify unmet needs of underserved populations	5	2	<ul style="list-style-type: none"> • Recruited two new Diversity members • Increased diversity members—bringing different voices to the table • Rotating the Diversity meeting between different underserved agencies to learn of their local needs • Reviewed existing state and federal disparities data reports • Committee continues to work and get data updates from Mike Quirke
	Promote CLAS protocols for identifying culturally-intelligent (CI) best practices and advocate for CI training for AODA counselors	5	2	<p>Diversity Committee works closely with Evelyn Cruz to promote the CLAS Standard. Specific progress include:</p> <ul style="list-style-type: none"> • Diversity Committee made a motion to SCAODA regarding CLAS implementation recommendations for DMHSAS • Diversity Committee learn about Division of Public Health CLAS Standard initiative • SCAODA made a motion to ask DMHSAS implement the CLAS Standards in its future grants and contracts • Diversity member has advocated for the adoption of CLAS Standards at WI Public Health Council
	Advocate for training and retention of minority AODA counselors	4	2	<ul style="list-style-type: none"> • Ongoing advocacy for minority trainings: Leadership & Culture: a community empowerment institute, etc. • Diversity Committee advocated for more underserved workshops at the MH Annual Conference • Diversity Committee’s letter sent to SCAODA regarding licensing issues (DSPS) & continued follow up • Ongoing Diversity Committee is working on getting a

				<p>DSPS staff to present at Diversity meeting</p> <ul style="list-style-type: none"> • Met with SCAODA chair to define how the Diversity Committee can help support SCAODA's mission
	Have a presence at the annual mental health and substance abuse conference and make annual presentations to SCAODA	5	2,5	<ol style="list-style-type: none"> 1. 2015 – underserved topics (LGBT, veteran, Latino, Native American, African and Hmong) were included in the MH Annual conference 2. Scheduled Diversity workshop for the MH/SA Annual Conference on October 27, 2016 3. Producing a set of videos for the MH Annual Conf.
	Maintain the diversity portion of the SCAODA website	4	2	<ol style="list-style-type: none"> 1. Ongoing reviews of culturally appropriate resources for posting on Diversity Page. 2. put Diversity logo and CLAS Standards on Diversity Page

SCAODA work plan

SCAODA goals for 2014-18
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. Inform Wisconsin citizens on the negative fiscal, individual, and societal impacts of substance abuse.
4. Advocate for adequate funding, capacity, and infrastructure to implement effective outreach, prevention, treatment, and recovery services for all in need.
5. Remedy historical, racial /ethnic, gender, and other bias in substance use disorder systems, policies, and practices.

SCAODA priorities for 2014-15
1. Expand substance use disorder workforce capacity
2. Address population-specific needs
3. Reduce harmful alcohol consumption
4. Inform the public about substance use disorder-related consequences
5. Increase the use of evidence-based practices in prevention, treatment, and recovery
6. Address emerging substance use disorder trends



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

July 12th, 2016

10 a.m. – 2:30 pm

Department of Corrections

3099 E. Washington Ave.

Room 1M-M

Madison, WI

MINUTES

Present: Norman Briggs, Roger Frings, Elizabeth Gilbert, David MacMaster, Alan Frank, Joe Muchka, and Andrea Jacobson (DHS staff).

Absent: Tamara Feest, Lori Cross Schotten, Caroline Miller, Bill Lauer, Lucas Moore, Beth Collier, and Steve Dakai.

Welcome, introductions, and public comment – The meeting was called to order at 10:07 am. No public comments.

Review of minutes – May 2016 minutes will be reviewed in the August ITC meeting.

Review of the June SCAODA meeting – Reviewed the motions which passed including the Marijuana report with the exceptions of recommendations 7, 8 and 9 and the Nicotine resolution.

Update on the Workforce Report – Due to scheduling conflicts, Mr. Muchka will replace Ms. Feest in coordinating the workforce workgroup in scheduling time to coordinate report revisions. Ms. Jacobson will summarize the salient points and send out to the workgroup. Mr. Muchka brought up the DSPS workforce survey from 2013 and in Waukesha County they are planning to use a similar survey. Mr. Muchka wonders about any available funding to support the committee to research in greater depth the workforce concerns. Discussion occurred in regards to the fact that workforce development recommendations may require DHS 75 administrative rule revisions to implement. The committee reviewed the ways in which administrative rule revisions can be addressed. The workgroup may expand membership to include some of the former workforce sub-committee members, with the understanding that DHS staffing is not currently available for this sub-committee. Mr. MacMaster and Mr. Frings reiterated the importance of including relevant stakeholders including agency administrative staff to ensure recommendations are realistic for agencies.

This work group plans to consult with Ms. Jeffers, former staff person to the committee, for additional information about materials that were reviewed for the initial draft report.

Presentation on Recovery Communities in Wisconsin - Ms. Miller was unable to attend today's meeting and Mr. MacMaster who is the secretary of the Wisconsin Recovery Community Organization (WIRCO) offered to provide information on this organization and recovery communities in Wisconsin. WIRCO expanded from a different committee that was looking at decreasing stigma and increasing Recovery Oriented Systems of Care (ROSC). This was during the period of time in which the concepts of prevention and treatment were expanded to include recovery as an equally important aspect of substance abuse services. This committee was specifically looking at ongoing long term support to deal with the chronic nature of addiction. The Comprehensive Recovery Program in Connecticut provided technical assistance and training on their systems of care.

WI Voices for Recovery was developed by Flo Hilliard received \$63,000 from the WI state and employed Caroline Miller (ITC member). Developed a website to offer state-wide information, coordinate Recovery month activities and is still in existence without funding including a Board of Director's. Goals have included stigma reduction and recovery support service development. A few of the associated recovery support programs and services include; Young People in Recovery, Big Tent Recovery, sober homes, pre-release programs for incarcerated individuals, outreach telephone support to individuals leaving treatment, recovery communication services including resource lists, retreats, advocacy ambassador program, and Dry Hootch (providing Veteran's specific support). WIRCO is also supportive of Narcan or Naloxone trainings in communities and recovery coaching.

Mr. Briggs wondered about WIRCO's efforts to reach out to the treatment providers. Mr. Macmaster noted that due to lack of financial support and staffing, this has not occurred yet, but is hoped to occur in the future. There are other recovery communities being developed in the state. Mr. Briggs highlighted the need for added support for individuals when their treatment needs necessitate transitioning to a new agency. Mr. Lauer expressed concerns with the focus on Heroin/Opioids leading to less attention to other substances, noting recent federal funding increases for Medication Assisted Treatment (MAT) and Naloxone.

Presentation by DSPS – delayed for a future meeting. Mr. Frings did note that DSPS is hosting a listening session regarding the revisions to the PDMP.

Section updates:

Children, Youth, and Families (Lucas Moore) – On behalf of Mr. Moore, Ms. Jacobson shared that the Children, Youth and Family sub-committee has not met since the last ITC meeting. No update to be presented.

Treatment for Women and their Children (Norman Briggs) – No update at this time.

Heroin/Opiate Update (Elizabeth "Beth" Collier) - Ms. Jacobson provided a brief update on behalf of Ms. Collier the State Opioid Treatment Authority. DMHSAS is offering a MAT prescriber training and ASAM training. The release of the new curriculum and testing for certification of Integrated Peer Specialist's is scheduled for the end of this year with the first exam expected to occur in March 2017. DHS has multiple committees looking at reducing opioid and prescription drug use and coordinating data collection across divisions.

Annual Report - ITC members reviewed the goals and accomplishments of the committee over the past year. The following items were mentioned to include in the annual report:

- Mr. Briggs has been added as a member of the DCF council, however shared that he has made requests to get on the agenda to discuss the need for universal screening for

substance use disorders by child protection services. WI typically ranks above national averages for alcohol use and yet shows as lower than national average in CPS identified substance use disorder concerns. Despite lack of movement, this goal is deemed as very important and will remain a goal.

- Adolescent sub-committee has been renewed and is actively meeting.
- Mr. Macmaster shared a draft of nicotine specific accomplishments
- Motions were made to:
 - Accept workforce report – plan to revise the report.
 - Add an addictionologist to SCAODA – passed and Dr. David Galbis-Reig has been added as a new member.
 - Revise DHS 75 language indicating an exclusion otherwise known as the nicotine resolution – passed.
- Successful recruitment of specific stakeholders which included expert in Opioid services in lieu of a workgroup (due to lack of staffing).

Recommended Budget Initiatives for 2017-2019 - The committee determined that it would be helpful to review the ITC work plan goals and objectives in order to prompt relevant budget initiative ideas. Also, in light of new membership, a decision was made to use the August meeting to review the SCAODA 4 year plan, the ITC 4 year plan, the ITC 2015-2016 goals in order to develop a 2016-2017 ITC work plan and objectives. Mr. Frank brought up the importance of reviewing the work plan regularly during ITC meetings and the goal of being an action oriented committee.

A few suggestions were offered to consider for budget initiatives:

- Mr. Macmaster would like to propose that 6 regional training programs be offered in Wisconsin on tobacco integration treatment services (he will submit a formal proposal for ITC to review).
- To increase reimbursement rates for MA covered SUD services to be in-line with the rates of reimbursement for our surrounding states.
- For funding to be gathered in order to provide for an environmental scan looking at workforce capacity.
- To seek funding to support the work force report recommendations including staffing to support persons seeking certification.
- To increase taxation on alcohol in order to fund additional treatment services as a funding source.

A few suggestions for 2015-2016 goals include:

- Workforce related:
 - Revise workforce report by 12/31/16.
 - Obtain data on utilization of MA paid for substance use specific services
- For ITC to provide a presentation to DCF regarding substance use treatment needs (screening, referral and intervention/treatment).
- To continue to address opioid specific treatment issues
 - Invite Representative Nygren and/or his representative to join the ITC committee and/or to obtain an update on potential new legislation.
- Regarding nicotine cessation – for an on-line training system to be launched by fall 2016 and ITC to receive a report on deployment.
- Mr. Frings expressed a need to add a goal specific to Nicotine cessation to the list of goals for 2016-2017.

Announcement and future agenda items - Mr. Briggs shared information on the DHS Reorganization which includes the Division of Long Term Care (DLTC) moving under the Division of Health Care Access and Accountability which manages Medicaid issues. One exception is that the DLTC institutions

will be moving to DMHSAS so that all of the DHS institutions are together from an administrative perspective.

Adjourn: A motion was made to adjourn at 2:43 pm by Mr. Muchka and seconded by Mr. Macmaster, with no opposition.

Future Agenda:

- Review the: full SCAODA and ITC 2014-2018 strategic plan, the ITC 2015 goals in order to develop the ITC 2016-2017 goals and objectives.
- Finalize any budget initiatives to be developed for SCAODA's executive committee to review.
- Presentation from DSPS re: the certification process and the work they are doing to address workforce issues including credentialing policy changes.

Scott Walker
Governor



Duncan Shrout
Chairperson

Scott Stokes
Vice-Chairperson

Mary Rasmussen
Secretary

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

July 12th, 2016

10 a.m. – 2:30 pm

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

AGENDA

- | | | |
|-------|---|------------|
| I. | Welcome, introductions, and public comment | 10:00 a.m. |
| II. | Review the minutes from May 2016 | 10:10 a.m. |
| III. | Review of the June 2016 SCAODA meeting | 10:15 a.m. |
| IV. | Update on the Workforce Report | 10:30 a.m. |
| V. | Presentation from Caroline Miller on Recovery Communities in Wisconsin | 11:00 a.m. |
| VI. | Lunch | 11:45 a.m. |
| VII. | Possible Presentation from DSPS | 12:30 p.m. |
| VIII. | Section updates | 1:00 p.m. |
| | <ul style="list-style-type: none">▪ Children, Youth, and Families (Lucas Moore)▪ Heroin/Opiate Update (Elizabeth “Beth” Collier) | |
| IX. | Annual Report and Recommended Budget Initiatives | 1:30 p.m. |
| X. | Announcements and/or additional information | 2:00 p.m. |
| XI. | Future agenda items | 2:15 p.m. |
| XII. | Adjourn | 2:30 p.m. |

Call-in Information:

Phone Number: 1-877-820-7831
Passcode: 793544

www.scaoda.state.wi.us

Upcoming meetings:

ITC

August 9th, 2016, 10:00 a.m. – 2:30 p.m. DOC in Madison.

October 11th, 2016, 10:00 a.m. – 2:30 p.m. DOC in Madison.

November 8th, 2016, 10:00 a.m. – 2:30 p.m. DOC in Madison.

SCAODA

September 9, 2016, 9:30 a.m. – 3:30 p.m. American Family Insurance Conf. Center, Madison.

December 9, 2016, 9:30 a.m. – 3:30 p.m. American Family Insurance Conf. Center, Madison.

Scott Walker
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INTERVENTION AND TREATMENT COMMITTEE (ITC) MEETING

Tuesday

August 9th, 2016

10 a.m. – 2:30 pm

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

AGENDA

- | | | |
|-------|--|------------|
| I. | Welcome, Introductions, and Public Comment | 10:00 a.m. |
| II. | Review the Minutes from May and July 2016 | 10:10 a.m. |
| III. | ITC Goal Setting & Annual Report | 10:15 a.m. |
| IV. | 2017- 2019 Budget Initiative | 11:15 a.m. |
| V. | Lunch | 11:30 a.m. |
| VI. | Presentation from DSPS | 12:30 p.m. |
| VII. | Section Updates | 1:00 p.m. |
| | <ul style="list-style-type: none">▪ Children, Youth, and Families (Lucas Moore)▪ Treatment for Women and their Children (Norman Briggs)▪ Heroin/Opiate Update (Elizabeth “Beth” Collier) | |
| VIII. | Work Force Report Update | 1:30 p.m. |
| IX. | Announcements and/or Additional Information | 2:00 p.m. |
| X. | Future Agenda Items | 2:15 p.m. |
| XI. | Adjourn | 2:30 p.m. |

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STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE
Budget proposal for 2017 – 2019 biennium

Committee: Intervention and Treatment

Proposal: Intervention and Treatment proposes that it, in conjunction with the Planning and Funding Committee, review and analyze the Medicaid reimbursement rates to providers and collaborate with the department to improve rates.

Reason for proposal: Current Medicaid rates are not sufficient to adequately support substance use disorder treatment services. Wisconsin reimburses providers at a rate significantly lower than surrounding states resulting in decreased access and workforce recruitment and retention problems.

Estimated cost: Unknown.



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Intervention and Treatment Committee

Goals and Accomplishments

From 2014 – 2018 Strategic Plan

July 2015 - June 2016

Goal #1	Plan to Achieve Goal	Efforts Accomplished to Achieve Goal
<p>Women’s Treatment: to increase the number of mothers identified with Substance Use Disorders (SUDs) and given referrals for treatment.</p> <p>SCAODA Goal: 4.b. Wisconsin has adequate, sustainable infrastructure and fiscal systems and human resources and capacity...b) for effective outreach and effective, accessible treatment and recovery services for all in need.</p>	<p>Seek collaboration between Department of Health Services (DHS) and Department of Children and Families (DCF) to endorse this goal and form a workgroup.</p>	<p>SCAODA adopted the motion to formally seek collaboration between DHS and DCF in order to improve outcomes for families with SUDs involved in the child welfare system. DCF invited SCAODA to provide a member to the DCF council and Norman Briggs began to serve in this capacity.</p>
	<p>Identify a tool for agencies to assess mothers for SUD’s.</p>	<p>This area was put on hold pending the results of further collaboration.</p>
	<p>Provide a presentation on SUD universal screening, intervention and treatment for families involved in DCF services.</p>	<p>Mr. Briggs made a request to provide a presentation and is waiting to be added to the agenda.</p>

Goal #2	Plan to Achieve Goal	Efforts Accomplished to Achieve Goal
<p>Adolescent Treatment: to increase specific adolescent treatment services.</p>	<p>Create a survey to determine the number of adolescent specific treatment program currently available in WI.</p>	<p>First task accomplished was the renewal of the Children, Youth and Family sub-committee; including recruitment of members.</p>

<p>SCAODA Goal: 4.b. Wisconsin has adequate, sustainable infrastructure and fiscal systems and human resources and capacity...b) for effective outreach and effective, accessible treatment and recovery services for all in need.</p>	<p>Determine the usage of the Adolescent Treatment Framework.</p>	<p>The CYF committee is currently exploring the treatment programs available in Wisconsin.</p>
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Goal #3	Plan to Achieve Goal	Efforts Accomplished to Achieve Goal
<p>Heroin/Opioid Treatment: to improve access to treatment for opioid use disorders including medication-assisted treatment</p> <p>SCAODA Goal: 4.b. Wisconsin has adequate, sustainable infrastructure and fiscal systems and human resources and capacity...b) for effective outreach and effective, accessible treatment and recovery services for all in need.</p>	<p>Will create a workgroup including relevant stakeholders.</p>	<p>ITC members obtained increased knowledge of the strengths, concerns and barriers associated with medication-assisted treatment with a presentation by Dr. Matt Felgus, addictionologist.</p>
	<p>Will review certification guidelines for OTPs</p>	<p>Data was gathered regarding Suboxone providers in WI.</p>
	<p>Will explore ways to strengthen services by increased use of evidence-based treatment and inclusion of case management services.</p>	<p>Identified need to increase ease of locating prescribers and need to increase the workforce. Identified barriers for prescribers, which need to be addressed in order to increase the workforce. DHS provided two trainings for physicians during the past year.</p>
		<p>Funding was approved for 3 new OTPs in Wisconsin and these programs were implemented in 2015-16.</p> <p>ITC membership was expanded to include a Methadone provider expert.</p>

Goal #4	Plan to Achieve Goal	Efforts Accomplished to Achieve Goal
<p>To advance Tobacco Integration (TI) in Wisconsin AODA treatment programs.</p> <p>SCAODA Goal: 4.b. Wisconsin has adequate, sustainable infrastructure and fiscal systems and human resources and capacity...b) for effective outreach and effective, accessible treatment and recovery services for all in need.</p>	<p>Will utilize University of Wisconsin –Center for Tobacco Research and Intervention (UW-CTRI) resources.</p> <p>Will remove barriers that limit access to AODA services.</p> <p>Will increase the number of Wisconsin AODA programs implementing Tobacco Integration services.</p>	<p>Began improved access to AODA treatment for those with primary/sole tobacco use disorders. ITC Tobacco Equity Resolution passed at the June 2016 SCAODA meeting.</p> <p>DOC worked collaboratively with UW Center for Tobacco, Research and Intervention to incorporate the “Stay Quit” program at Chippewa Valley Correctional Treatment Facility.</p>

Goal #5	Plan to Achieve Goal	Efforts Accomplished to Achieve Goal
<p>To recommend initiatives to insure Wisconsin has a robust and competent workforce to meet treatment demands.</p> <p>SCAODA Goal: 4.b. Wisconsin has adequate, sustainable infrastructure and fiscal systems and human resources and capacity...b) for effective outreach and effective, accessible treatment and recovery services for all in need.</p>	<p>Will create an ad hoc committee to study the workforce issues in Wisconsin and make recommendations to increase workforce.</p>	<p>Ad hoc committee on workforce capacity submitted a report to SCAODA. The council referred the report back to ITC for review and revision. A workgroup was formed and assigned the task.</p>

Goal #6	Plan to Achieve Goal	Efforts Accomplished to Achieve Goal
<p>To increase the knowledge base of the council</p> <p>SCAODA Goal: SCAODA, with its committees,...b) are 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.</p>	<p>Will work to add an addictionologist to SCAODA as an ex officio member.</p>	<p>Motion to add an addictionologist as ex officio member passed in June 2016.</p> <p>The Wisconsin chapter of the American Society of Addiction Medicine made the appointment.</p>



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**PLANNING AND FUNDING COMMITTEE MEETING MINUTES
May 19, 2016**

Members present: Todd Campbell, Brian Dean, Karen Kinsey, Joyce O'Donnell, Irene Secora

Members excused: Emanuel Scarbrough, Duncan Shrout, Sally Tess

Staff: Kris Moelter

Call to Order – Joyce O'Donnell the meeting to order at 9:39 a.m.

Review of April 14, 2016, meeting minutes – Irene Secora moved (Todd Campbell second). The motion passed unanimously.

Public comment – None.

Marijuana ad hoc Committee report – Ms. O'Donnell reported that the Prevention Committee is bringing the motion to approve the report as originally drafted at the June meeting. Ms. Secora reported that at the last Prevention Committee meeting the committee agreed that it would remove and/or change recommendations on depenalization if it came to that. Mr. Campbell said that the data in the report does not seem to support that legalization or decriminalization will have an impact on disparities in arrests, although the number of arrests does go down. He is not sure this is good alcohol/drug policy to decriminalize marijuana. It may be too experimental for the benefit that might be reaped. Ms. O'Donnell wants to know how the legislature would handle the recommendations around decriminalization. Karen Kinsey said if the science is behind it then SCAODA should recommend it. SCAODA should recommend good policy and science and it can take a position different from the criminal justice system. The committee agreed that the report should be accepted with the exception of Recommendations 7, 8, and 9.

Funding ad hoc committee – Mr. Campbell reported that he met with the Prevention Committee and the Intervention and Treatment Committee. He will attend the Diversity Committee on May 20. The Prevention Committee had comments on Recommendation #3. The feedback was that block grant funds for school-based prevention efforts has been done before and there was little oversight. They think block grant funds should be used for community-based prevention efforts. The Planning and Funding Committee discussed the use of block grant funds for prevention, Ms. Kinsey suggested saying "increasing funding" and not refer to the block grant. The committee agreed to change the recommendation to "Wisconsin should devote additional funds." The Prevention Committee suggested adding a recommendation about funding from the state and earmarks. The Planning and Funding Committee agreed to not suggest the legislature revisit the statutory mandates. Instead, Ms. Moelter will provide an analysis of the legislative earmarks and other funding sources. The Legislative Fiscal Bureau

used to put out a report on substance use disorder prevention funding across all departments. The committee decided not to make it a recommendation at this time. The Prevention Committee thought there should be more emphasis on recovery—Recovery-Oriented Systems of Care and peer supports and naloxone distribution. The committee thought that the peer support issue was already addressed in Recommendation #2 and then decided to add it to the narrative instead of making a new recommendation. The committee then discussed the SBIRT recommendation and left it mainly intact with some wording changes.

Committee and agency reports – Ms. Kinsey reported that the federal overtime change will affect the providers, especially in residential. New Department of Labor guidelines for hourly and salaried employees will take effect November 1, 2016, and affect agencies. Fostering Futures is a state initiative around trauma-informed care. Mr. Dean reported that the Department of Public Instruction is awarding second-year renewal grants. There will be another grant cycle in the winter/spring of 2017. The annual DPI conference will include trauma-informed care. Mr. Campbell reported that Dane County will be opening a collaborative project with Madison on housing. The most chronically homeless will be provided housing and supportive case management and access to services. A second location will be opened later. Dane County is considering a restoration center as an alternative to incarceration and arrest for people with mental health and/or AODA issues.

Agenda items for next meeting

- Annual report
- Budget initiatives
- SCAODA coalition presentation
- SCAODA June meeting report
- Current DHS AODA contracts/grants

The meeting adjourned at 11:50 a.m.

Next meeting: July 14, 2016



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PLANNING AND FUNDING COMMITTEE MINUTES

July 14, 2016

Members present: Joyce O'Donnell (chair), Todd Campbell, Brian Dean, Karen Kinsey, Irene Secora (10:10 a.m.-12:10 p.m. by telephone conference), Duncan ShROUT (9:50 a.m. – 11:05 a.m. by telephone conference)

Members excused: Sally Tess, Emanuel Scarbrough

Staff: LeeAnn Cooper

Call to Order – Ms. O'Donnell called the meeting to order at 9:50 a.m.

Review of May 19, 2016, meeting minutes – Correction to May 2016 minutes: under committee reports, new Dept. of Labor guidelines for hourly and salaried employees will take affect November 1, 2016, and affect agencies. Fostering Futures is a state initiative, not federal. Under DPI report, winter/spring of 2017, not 2016. Ms. Kinsey moved (Mr. Campbell second). Passed unanimously as amended.

Public comment – None.

Report on June SCAODA meeting

Ms. O'Donnell reported on the Marijuana report at the June SCAODA meeting. She reported that the Planning & Funding Committee (P&F) moved to delete recommendations #7, #8 and #9 from the report. All were deleted on that motion but then there was a second motion to reinsert #8 and #9 which passed so only #7 was removed. Ms. Kinsey stated that there is a new study that big pharma is fighting legalization of marijuana because it was found to have a dramatic drop in the use of opiate medication. She will send the article. Mr. Dean commented that seniors are one of the largest populations to increase marijuana use while decreasing opiate use so pharma is concerned about marijuana replacing opiates and are lobbying against legalization that could result in the loss of a lot of money.

Mr. Dean reported that the Colorado version of YRBS showed a slight drop in teen marijuana usage.

Mr. ShROUT commented that the marijuana report is advisory and for educational purposes so is happy it will go forward and give additional information to legislators.

The approved report will be available, with #7 removed, containing the remaining 21 recommendations. Mr. Shrout stated he does not know whether the Prevention Committee will take any other actions regarding recommendation #7.

Sandy Hardie and Ms. O'Donnell have volunteered to lead the nominating committee. Ms. O'Donnell reported that Mr. Shrout is interested in remaining chair of SCAODA.

Members appreciate the agency reports at SCAODA and asked that the Department of Revenue provide a hard-copy of their annual report at the September meeting giving a full summary of alcohol and tobacco excise taxes collected.

Mr. Shrout said he inquired to DHS about the nicotine report and received a response from Tom Engel who said the department will look into the recommendations.

Next SCAODA meeting is September 9, 2016.

Ad Hoc Funding Committee report

Mr. Campbell reported to SCAODA on the funding report at their June meeting and summarized recommendations from the report. He reported there were two objections to the report, most likely due to the recommended increase in the excise tax. There were no other specific questions that stood out. Mr. Shrout stated he thought the report was well-received and that SCAODA now has a report outlining its position. The recently-enacted CARA legislation was discussed. Mr. Shrout stated he felt it was good to have P&F input on any future funding and thanked the ad hoc committee for their work on this report.

Planning and Funding Committee annual report

Goal #1: Create steady revenue funds – Mr. Campbell suggested that after treatment efforts, remove “by creating ad hoc;” and to change ‘study’ to ‘studying.’

Goal #2: no change.

Goal #3: no change.

Goal #4: no change.

Add Goal #5: Increase the ability of SCAODA to advise the state on AODA-related spending by collaborating with various state agencies.

Motion: adopt annual report to submit for September 2016 meeting: Mr. Campbell (second: Mr. Dean) passed unanimously.

In September, each committee will make 2 reports: an annual report and funding recommendations. In August, P&F will be asked to create 3-4 funding initiatives for the future.

Planning and Funding Committee proposed budget initiatives - Joyce O'Donnell

Agenda item moved to August 2016 meeting.

Ideas discussed:

1. To obtain contract information identifying statutorily required activities vs discretionary activities.
2. To focus on gathering information on how Medicaid rates are set (reimbursement rates are too low). Ms. O'Donnell suggested that SCAODA could appoint an ad hoc committee to discuss this.
3. To learn more about how badgercare+ managed care contracts actually work; possibility that some agencies are not going to be serving straight Medicaid clients vs those on an HMO.

SCAODA coalitions presentation - Duncan Shrout

Mr. Shrout asked Ms. Secora how the committee could help the coalitions. Ms. Secora reported that the Substance Abuse and Mental Health Administration (SAMHSA) denied their request to transfer fiscal agents. The co-chair of her coalition has appealed to SAMHSA to reverse that decision so it looks like this is being reconsidered and they may get the funds back. Ms. O'Donnell asked for a request from their coalition so that the Planning and Funding Committee could take it to SCAODA. Ms. Secora said she will put a recommendation together that the Planning and Funding Committee could support. Mr. Campbell suggested a joint motion with the Prevention Committee. Ms. O'Donnell requested something be sent to the prevention committee about this motion.

Preliminary discussion of public forum at the Substance Abuse and Mental Health Conference on October 26- 27, 2016

Ms. O'Donnell stated that she is not available so Mr. Campbell will chair the forum. AJ Ernst from DHS will staff. Ms. O'Donnell will talk to Mr. Scarbrough to see if he is available to assist. The forum is scheduled for October 26 from 4:45 – 5:45 p.m. Ms. Secora and Mr. Dean are tentative, Ms. Kinsey is unlikely. The SCAODA information brochure could be updated and passed out at the forum.

Committee and agency reports – Committee members

Ms. Kinsey – The RFP for women’s projects are coming out very soon. She reported that there are no longer prepayments available so it’s difficult for smaller providers to participate in the process.

Mr. Dean – Department of Public Instruction (DPI) has been working with Scott Caldwell to promote Screening, Brief Intervention and Referral to Treatment (SBIRT) in schools. The group is currently working on slowing down the process so it’s implemented with fidelity. DPI is working with Mr. Caldwell to come up with stronger administrative buy-in, using grants to do professional learning communities, and working on collection of data on SBIRT to determine effectiveness in reducing risky behaviors. They are using the GAIN, which looks at social problems, violence, criminal behavior, depression, and AODA. This helps to get a baseline and hit on other issues and data collection over time. They are training schools on SBIRT, using CESA staff as trainers to train counselors, social workers, and nurses. Training is free, supported by Mr. Caldwell’s position, DPI contracts with WISH centers; school districts can get AODA grants to pay for staff to be part of professional learning communities. Grants are coming out in December for a 2-year period. Ms. O’Donnell asked if they will be doing a presentation at the school board convention in January 2017. Mr. Dean said he will look into it.

Mr. Campbell – Dane County is applying for a TAD grant through DOJ for their drug court or their pretrial diversion program. There are currently 32 TAD sites, \$6 million is available, and the application closes next week. The grants will help expand options available to those caught up in the criminal justice and AODA systems. Dane County is continuing to look at alternatives to jail/incarceration; looking at current jail facilities and their old cell-block

Agenda items for next meeting

1. CARA – invite AJ to meeting for update and plans if the state receives funds
2. Develop funding recommendations for Sept SCAODA meeting
3. Block grant spending – percentages of how it’s distributed
4. Discuss forum needs
5. PFS II – What criteria was used to select the counties? written information

Adjourned at 12:10 p.m.

Mr. Campbell moved (Mr. Dean second)

Next meeting August 11, 2016



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

July 14, 2016

9:30 a.m.

1409 Emil St., MADISON

Please call LeeAnn Cooper at (608) 266-2453 or e-mail leeann.cooper@wisconsin.gov if you will not attend.

- 9:30 a.m. Call to Order – Joyce O'Donnell
- 9:35 a.m. Review of May 19, 2016, meeting minutes – Joyce O'Donnell
- 9:40 a.m. Public comment – Joyce O'Donnell
- 9:45 a.m. Report on June SCAODA meeting – Joyce O'Donnell
- 10:00 a.m. Report on Ad Hoc Funding Committee – Todd Campbell
- 10:15 a.m. Planning and Funding Committee annual report – Joyce O'Donnell, LeeAnn Cooper
- 10:45 a.m. Planning and Funding Committee proposed budget initiatives - Joyce O'Donnell
- 11:45 a.m. SCAODA coalitions presentation - Duncan Shrout
- 12:00 p.m. Preliminary discussion of public forum at the SA&MH conference October 26-27, 2016
- 12:15 p.m. Committee and agency reports – Committee members
- 12:30 p.m. Agenda items for next meeting
- 12:45 p.m. Adjourn

Scott Walker
Governor



Duncan ShROUT
Chairperson

Scott Stokes
Vice Chairperson

Mary Rasmussen
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

August 11, 2016

9:30 a.m.

1409 Emil St., MADISON

Please call LeeAnn Cooper at (608) 266-2453 or e-mail leeann.cooper@wisconsin.gov if you will not attend.

- 9:30 a.m. Call to Order – Joyce O’Donnell
- 9:35 a.m. Review of July 14, 2016, meeting minutes – Joyce O’Donnell
- 9:40 a.m. Public comment – Joyce O’Donnell
- 9:45 a.m. Review Annual Report and accomplishments – Joyce O’Donnell
- 10:30 a.m. Planning and Funding Committee proposed budget initiatives - Joyce O’Donnell
- 11:00 a.m. Review of Block Grant Spending – all
- 11:30 p.m. PFS II grant - review of criteria
- 11:45 p.m. Discussion of public forum at the SA&MH conference October 26-27, 2016
- 12:15 p.m. Committee and agency reports – Committee members
- 12:30 p.m. Agenda items for next meeting
- 12:45 p.m. Adjourn

STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE
Budget proposal for 2017 – 2019 biennium

Committee: Planning and Funding

Proposal: Planning and Funding proposes to identify specific areas that have needs that are not being met and recommend that DHS use discretionary funds to address these areas. Areas identified are underserved populations including youth, prevention & treatment services, OWI, Heroin/opioids prevention & treatment, and workforce shortage (treatment providers and prevention specialists).

Reason for proposal: to ensure discretionary funds target local needs.

Estimated cost: none, the level and focus of funding may shift from one program to another.

2015-2016 Planning and Funding Annual Report

	<u>Goal</u>	<u>SCAODA Goal</u>	<u>SCAODA Priority</u>	<u>Activities Accomplished</u>
1.	Create steady revenue streams to fund AODA prevention and treatment efforts studying possible funding structures and supporting adequate Medicaid reimbursement for AODA services.	4	1, 3, 5	1. The committee completed the <i>Funding Ad Hoc Committee Report</i> on the current state of AODA funding and made recommendations that were adopted by SCAODA.
2.	Develop a clear and consistent SCAODA message that the public and legislators will support.	1, 2, 3	3, 4	1. The committee updated informational materials around SCAODA and will update those for the newly-elected legislators.
3.	Increase the capacity of SCAODA to effectively advocate on AODA matters.	1, 4	3, 4	1. SCAODA may use the <i>Funding Ad Hoc Committee Report</i> to advocate on substance use matters. 2. Hosted a public forum in October to gather key stakeholder input on substance use disorder issues. 3. Tracked legislation and forwarded to the executive committee bills that may be of interest to SCAODA.
4.	Advise the department on how various grants should be spent.	1, 4	3, 4	1. SCAODA and the Planning and Funding committee may use the

				<i>Funding Ad Hoc Committee Report</i> to advocate on AODA matters.
5.	Increase the ability of SCAODA to advise the state on AODA-related spending by collaborating with various state agencies.	1, 4	3, 4	1. SCAODA may use the <i>Funding Ad Hoc Committee Report</i> to advocate on AODA matters.



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

Thursday, April 21, 2016

9:30 a.m. – 1:30 p.m.

State Bar of Wisconsin - Wingra Room

5302 Eastpark Blvd.

Madison, WI 53718

Members Present: Sarah Linnan, Emanuel Scarbrough, Louis Oppor, Julia Sherman, Sarah Johnson, Scott Stokes, Irene Secora, Judie Hermann

Members Absent: Kari Lerch, Ronda Kopelke, Chris Wardlow, Annie Short, Jacob Melson, Dorothy Chaney, Lashawnda Maulson, Sue Wolfe, Carol Wright, Mary Rasmussen, Laura Moore

Guests & Staff: Paul Krupski, Raina Haralampopoulos, A.J. Ernst, & Todd Campbell

Welcome and Introduction: Scott Stokes welcomed members and asked everyone to introduce themselves.

Public Comment: No public comment was made.

Approve Meeting Minutes from January 21, 2016 Meeting: Scott recognized that we do not have a quorum and asked Members present to review the meeting minutes from the January 21, 2016 meeting. If there are any edits and changes to please let Paul Krupski and Raina Haralampopoulos know and they'll make the changes. The meeting minutes will be approved at the next meeting on July 21, 2016.

Planning and Funding: AODA Funding Report Review: Todd Campbell

Todd Campbell is a member of the Planning and Funding Committee of SCAODA and is joining the meeting to request input into the Planning and Funding Committee's Alcohol and Other Drug Abuse (AODA) Funding Report. The Report provides a snapshot of the current state of funding for prevention, treatment and recovery resources and services in Wisconsin.

Discussion items and feedback included:

- It was hard to gather AODA treatment information from private insurance companies since there is no depository of information so the Report only describes public funding that was used for treatment services.

- Prevention funding is estimated around 11 million dollars throughout the state in school-based prevention which has declined in the last four years.
- A recommendation is to adjust the excise tax and this could help with the burden we experience from individuals using and misusing alcohol and illicit drugs.
- Strong opposition to the use of Federal Substance Abuse Prevention and Treatment Block Grant funds to replenish the decreased prevention funds that used to go to the Department of Public Instruction (DPI). The Block Grant funding is already not adequate and it would hinder the current and future prevention efforts that are taking place in communities throughout Wisconsin. In the past we used prevention funding to help a child individually, now we work within communities and we are finally seeing decreases in alcohol, tobacco and illicit drug use.
 - Paul Krupski will work with Kris Moelter to change that language in the Report to include the DHS funding that goes specifically to prevention resources and services.
- A suggested sixth recommendation that the Planning and Funding Committee may consider is to identify the different pieces of legislation that direct prevention, treatment and recovery funding and re-examine the statutory areas on how funding is determined. It is possible that some of these earmarked dollars could be removed and redirected to keep up with current trends, research, evidence-based practices that have been shown to work.
- At one time the Planning and Funding Committee received reports from the different state departments and SCAODA would offer suggestions on how to use and spend the dollars. A recommendation is to have the Legislative Fiscal Bureau issue a report on how state departments use dollars for the prevention, treatment and recovery of substance use disorders.
- A recommendation is to add more information to the section on “Recovery”. There is a need to increase recovery resources and services in Wisconsin. Included in this section should be, integrated peer specialists and the “recovery oriented systems of care” (ROSC).
- A minor change on page 6, in recommendation #2, instead of saying “...everyone who needs treatment” it could say “...everyone who seeks treatment”.

Todd will take these suggestions and recommendations back to the Planning and Funding Committee. The Report will be presented at the June SCAODA meeting.

Marijuana Ad-Hoc Committee (MAC) Report

Paul Krupski reviewed the motion that was made at the last SCAODA meeting regarding the MAC Report. He said the motion will be read at the upcoming SCAODA meeting in June. The Prevention Committee gave Scott the directive that if it looks like the motion won't pass again, that it is more important to get the Report passed in some sort of revised version. In the case that SCAODA wants recommendations #6, #7, and #8 removed then we would ask for a new motion to be made with this revision. Paul said he will have Duncan Shroul, the Chair of SCAODA send out an email to SCAODA Members reminding them to review the draft MAC report so they are familiar with it and be prepared to vote on the motion.

Prevention Workforce Development – Ad hoc Committee

Julia Sherman put together a charge that was reviewed by the Members present (document titled “Charge to the Employee-Workplace Substance Abuse Prevention Workgroup” was handed out). This is not an Ad-hoc committee looking at increasing the Prevention Specialist workforce instead it is on how prevention can take place within the workplace.

Julia shared that there are a lot of case studies on this topic and the UW Extension is willing to studying how alcohol and drug misuse costs businesses in Wisconsin. One of the reasons this topic needs attention is that the hospitality, timber, and manufacturing industries have the highest incidence of alcohol and substance use. This directly affects Wisconsin’s workforce, workplaces and communities. A challenge to the Workgroup is working on common ground with employers, employees, organized labor unions, healthcare, insurance companies all with political tensions. The ad-hoc group should be focused on moving forward with recommendations that are evidence based policies and practices. This will help improve the workplace and in turn the prevention practices can be moved into the larger community for sustainability.

Julia will share the articles and bibliography of the research that she has gathered with interested individuals. Discussion included:

- Providing more than prevention education to employees - create recommendations that could conceivably be specific policies and programs that would improve occupational health, and the health of the community.
- To understand that not only does work productivity decrease with individuals who misuse alcohol and illicit drugs but it can also affect family members and loved ones’ work productivity.
- Offer recommendations to assist people who are in recovery get jobs, such as including information on the “ban the box” campaign.
- Consult with Wisconsin Manufacturing and Commerce
- Encourage employers to hire individuals with lived experiences, educate them on this population.
- Organizational self-assessments to ensure these are supportive and safe workplaces (trauma informed). Judie Herman will send examples to Julia on this topic.

PFS II/PFS15 Update

PFS II funding is ending this year and counties are working on finishing up their reporting. There were some technical difficulties with the final evaluation reporting and once that gets figured out the UW Population Health Institute will start working on the final evaluation report.

PFS 2015 - The Regional Prevention Centers (RPCs) have been meeting monthly to create an infrastructure to fund, provide technical assistance and train community coalitions in 14 high need counties. Population Health Institute is working to assist RPCs and coalitions with the evaluation of PFS15. The cooperative agreement request for proposals will be released on June 1st and will be due on July 15, 2016 and PFS15 coalition grantees will receive funding on October 1, 2016. The funded grantees will have their first meeting with each other, the RPCs and Evaluation team in November 2016.

SEOW Meeting – A portion of the PFS15 funding goes to support this effort. The SEOW has a new chairperson – Sarah Lindberg, who is the Director of evaluation at the UW Population Health Institute. This year the bi-annual epidemiological report is being put together by a smaller group of the SEOW Members. After this year, SEOW will become the advisory group to the epi report and future data projects. DHS/DMHSAS recently submitted a grant proposal to CDC that would fund an epidemiologist that would work on the collection and reporting of alcohol consumption and consequence data. If this funding is awarded to Wisconsin it would also help fund a public facing data dashboard which would allow access to epi data on a local level more frequently than every two years.

GLITC/Tribal Update: No Members present from the GLITC/Tribal PFS15 to report on their projects.

Agency/Member Updates

- AWY RPCs are hosting prevention trainings this year (and every even year moving forward). Handouts on the two prevention trainings are available for Members to take and share with colleagues and their networks.
 - Partners in Prevention – Please forward the training information onto others as the registration deadline will end next Wednesday and the hotel room block's deadline is this coming Saturday.
 - The Northwoods Coalition Annual Meeting and Training's (AMAT) registration is not open and will be available in the coming weeks. The hotel room blocks are open and there will be shuttles available for registrants to get to the training facility.
- DHS/DMHSAS is working on submitting two grants to SAMHSA. They include:
 - SPF Rx – which would be an award for about \$377,000 per year with a focus on the PMDP data and how to effectively disseminate it.
 - Prevention of Prescription Drug Overdose (PDO), \$1 million would focus on the purchase naloxone and providing training on how to use of it for high risk populations, family members and responders.
- Wisconsin Behavioral Health Association (WBHA) is active and working towards a membership drive. In the next month, a statewide survey will be going out to behavioral health professionals asking about recovery oriented systems of care (ROSC) and workforce development. They will conduct focus groups to gain input, share survey results and ask people how WBHA can best serve their needs. WBHA will then identify five goals and prioritize them to best assist behavioral health professionals in Wisconsin.
- Judie Hermann shared information about the Department of Children and Families (DCF) trauma project. It was kicked off with a training in Green Bay and is a yearlong collaborative with 80 clinicians. They are adding two more sites, Sawyer County and the southeastern part of the state. A RFA will come out this fall and will be open to all counties in Wisconsin with the hope of expanding the trauma project statewide. Another grant is providing funding to train clinicians in Racine and Milwaukee on evidence-based treatment and providing trauma informed care and services.
- WI Alcohol Policy Project - a place of last drink (POLD) pilot is taking place in Dane county. Dane county is compiling the POLD data from operating while intoxicated (OWI) arrests to see what areas have a higher likelihood of over-serving and driving

while impaired. Also, the WAHLDAB project is in its last 6 months and Julia hopes the AWY RPCs can provide the public health departments with technical assistance in sustainability planning so their alcohol policy work doesn't end.

Future Agenda Items

Prevention Committee's membership & attendance will be on the agenda for the next meeting. We have a robust membership rooster yet we continue to struggle with Members not attending meetings. This is a volunteer membership and everyone's time is appreciated. If you have any future agenda items you would like added please email them to Christy Niemuth at Christine.niemuth@wisconsin.gov.

2016 Prevention Committee Meeting Dates:

July 21, 2016

October, 2016 - TBD



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

Thursday, July 21, 2016

9:30 a.m. – 1:30 p.m.

Department of Health Services Area Administration

Southeastern Regional Office – West Building

141 NW Barstow, Conference Room 151

Waukesha, Wisconsin 53188

Agenda

- Welcome and Introductions
- Public Comment
- Approve Minutes from April 21, 2016 Meeting
- PFS II/PFS15 Update
 - SEOW Update
 - GLITC/Tribal update
- Marijuana Ad-hoc Committee Report
- YRBS questions - DPI
- Prevention Workforce
- Workplan Progress
- Budget Initiatives
 - SCAODA Funding Report
- Prevention Committee Membership
- Agency/Member Updates
- Future Agenda Items

2016 Prevention Committee Meeting Dates:

October, 2016 - TBD

STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE
Budget Proposal for 2018-2019 Biennium
Committee Name: Prevention Committee

Proposal #1: Initiatives to Prevent Underage Drinking

Early alcohol initiation (age 14 or younger) increases a child's lifetime risk of alcohol or drug abuse from approximately 10% (population level risk) to over 40%. Underage drinking in Wisconsin has decreased over the past decade but alcohol remains a significant factor in acute causes of death among youth age 24 or younger. Recent research indicates that underage drinking is the most frequent precursor to prescription drug and opiate abuse. Preventing and reducing underage drinking has the potential to reduce immediate medical and law enforcement costs while also reducing the likelihood of long-term care for alcohol or drug dependency.

Request #1: Provide state funding for the sworn officer overtime needed to conduct twice yearly alcohol age compliance checks at licensed establishments. Alcohol age compliance checks are not "stings", they test a retailer's compliance with their license related to upholding the minimum legal drinking age (MLDA), in most situations with advance notification to retailers.

Since 2012 when Federal funding ended, the full cost of enforcing the minimum legal drinking age has fallen on property tax payers. Failure to enforce retailer compliance has been linked to reduced retailer compliance with the MLDA and increases in underage drinking with resulting increases in both the financial and social cost.

Request: \$150,000 to support officer overtime for the purpose of conducting alcohol age compliance checks. NOTE: Other sources of revenue are available for planning and training.

Request #2: Narrow the existing exception for parents serving alcohol to underage youth.

While most states allow a parent or spouse to serve alcohol to their underage offspring or spouse in their residence, Wisconsin is one of very few states that allows licensed establishments (bars, taverns and restaurants) to serve alcohol to individuals under the age of 21 if a legal aged parent, guardian or spouse is present. All states allow alcohol use as part of a religious ceremony.

This exception increases youth access to alcohol and conflicts with local, federal and state efforts to prevent and reduce underage drinking.

Request: Delete the language from state statute that allows parents, guardians or spouses to purchase alcohol for their children and consume it at bars and restaurants while allowing the exception in a person's residence or as part of a religious service to remain.

Estimated Cost: Unable to estimate, but minimal.

Request #3: Updating the Burden of Alcohol Use Report

In 2013, The Wisconsin Population Health Institute issued a report The Burden of Excessive Alcohol Use in Wisconsin using a methodology created and endorsed by the U.S. Centers for Disease Control and Prevention. This report was based on Wisconsin specific statistics, not a portion of national estimates based on Wisconsin's proportion of the population.

The individual county estimates have been a useful tool for prevention and treatment advocates and local elected officials with responsibility for issuing alcohol sales licenses and enforcing alcohol-related laws. The calculations do not reflect legal, adult, moderate drinking, only drinking termed excessive by the CDC including binge drinking, underage drinking and drinking by pregnant women.

Request: Provide funding to the University of Wisconsin Population Health Institute to update the Burden of Excessive Alcohol Use in Wisconsin and the individual county reports.

Estimated cost: Unable to estimate

Proposal #2: Improving Substance Abuse Prevention Infrastructure

Request #1: Increase Funding for Regional Prevention Resource Centers

Wisconsin's reliance on local government supports a locally led approach to substance abuse prevention but it also allowed gaps in substance abuse prevention to develop over time. As health and medical systems become more connected, regional priorities identified through the Community Health Improvement Process/Plan (CHIP) are targeted.

More than half of all Wisconsin CHIPS list substance abuse as either the first or second priority making Wisconsin's substance abuse prevention infrastructure an issue of statewide concern. The Department of Health Services, Division of Mental Health and Substance Abuse Services, administers the Alliance for Wisconsin Youth (AWY).

The AWY was developed to provide technical support to local community coalitions with an emphasis on preventing alcohol and other drug abuse. Over 90 local AWY coalitions receive technical support and training from one of the five contracted regional resource centers. Coalitions are the bridge between identified local priorities and implementing the policies or practices that prevent and reduce substance abuse.

The five regional Prevention Resource Centers supporting these coalitions do not receive any GPR, the \$65,000 budget for each region is Federal funding (\$325,000 annually FED). Additional funding would all pass through the regional centers, going directly to community coalitions involved in substance abuse prevention. Funds would be limited to the implementation of evidence-based policies or programs within the community, allowing local

coalitions to take responsibility for addressing the problems and priorities that the community has identified.

Request: \$500,000 (\$100,000 per region) annually in direct funding that will be passed through AWY Regional Prevention Centers to member Coalitions.

Request #2: Improve the Prevention Infrastructure through Improved Training Opportunities

Although Wisconsin Administrative Rule, DHS 75 requires that certified prevention programs employ a Certified Prevention Specialist, the availability of training to become certified does not exist in Wisconsin. Limiting the ability of programs to meet state requirements and the ability of prevention professionals to meet changing needs.

Existing training sessions exist, however, funding for required sessions and topics has been eliminated. The need for the following sessions has reached a critical level:

- Creation of a statewide, primary prevention of substance abuse conference
- Training on trauma informed care, services and therapies for prevention professionals

Estimated Cost: Unable to Estimate

Proposal #3: Prevention of Operating While Intoxicated

Why should this be included in the budget?

Although the number of vehicular deaths as a result of an intoxicated driver has dropped, the percentage of vehicular deaths involving a drunk driver has remained remarkably consistent (32.5%).

Proposal #1: Additional funding for High Visibility Task Forces provided by the Wisconsin Department of Transportation (DOT).

Unlike 38 other states, Wisconsin does not conduct sobriety checks points. Law enforcement must have probable cause to stop a vehicle at which point the officer may assess possible driver impairment. To create a deterrent effort, Wisconsin DOT funds High Visibility Enforcement Task Forces (HVE), also called Saturation Patrols, to capture and deter impaired drivers. Operating on days and in areas that are widely publicized, HVE's appear to have the desired deterrent effect, calls to local taxi companies are noticeably higher on HVE evenings. Often, multiple law enforcement agencies participate as a single Task Force in an HVE operation.

Estimated Cost: Unable to estimate.

Proposal #2: Change in statutory language to allow, but not require, sobriety check points.

Sobriety checkpoints are legal in 38 states; they are an economical and effective approach to both capturing and deterring impaired drivers. Sobriety checkpoints draw support from such agencies and organizations as the Centers for Disease Control and Prevention, the Insurance Institute for Highway Safety and the National Highway Traffic Safety Administration. Research proves that they significantly reduce drinking-related crashes, and surveys show widespread public acceptance of them. Permissive changes in statutes simply allow local law enforcement to adopt this tool locally, it does not create a statewide program or mandate sobriety check points.

Estimated Cost: No Cost: implementation would take place at the discretion of local law enforcement agencies.

SCAODA work plan

SCAODA goals for 2014-18
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. Inform Wisconsin citizens on the negative fiscal, individual, and societal impacts of substance abuse.
4. Advocate for adequate funding, capacity, and infrastructure to implement effective outreach, prevention, treatment, and recovery services for all in need.
5. Remedy historical, racial /ethnic, gender, and other bias in substance use disorder systems, policies, and practices.

SCAODA priorities for 2014-15
1. Expand substance use disorder workforce capacity
2. Address population-specific needs
3. Reduce harmful alcohol consumption
4. Inform the public about substance use disorder-related consequences
5. Increase the use of evidence-based practices in prevention, treatment, and recovery
6. Address emerging substance use disorder trends

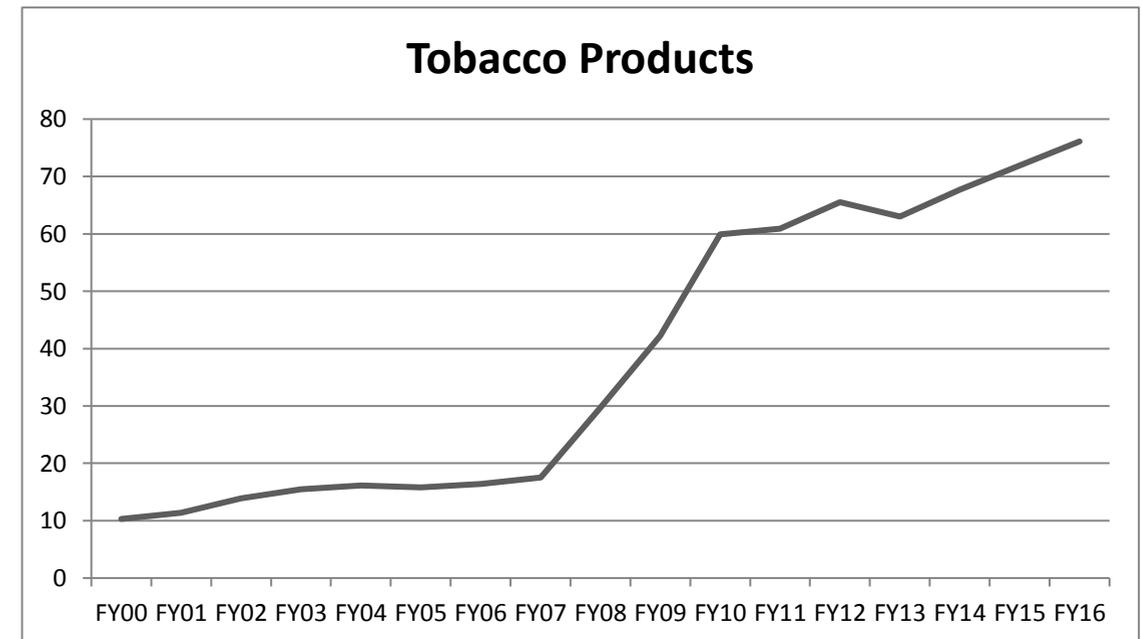
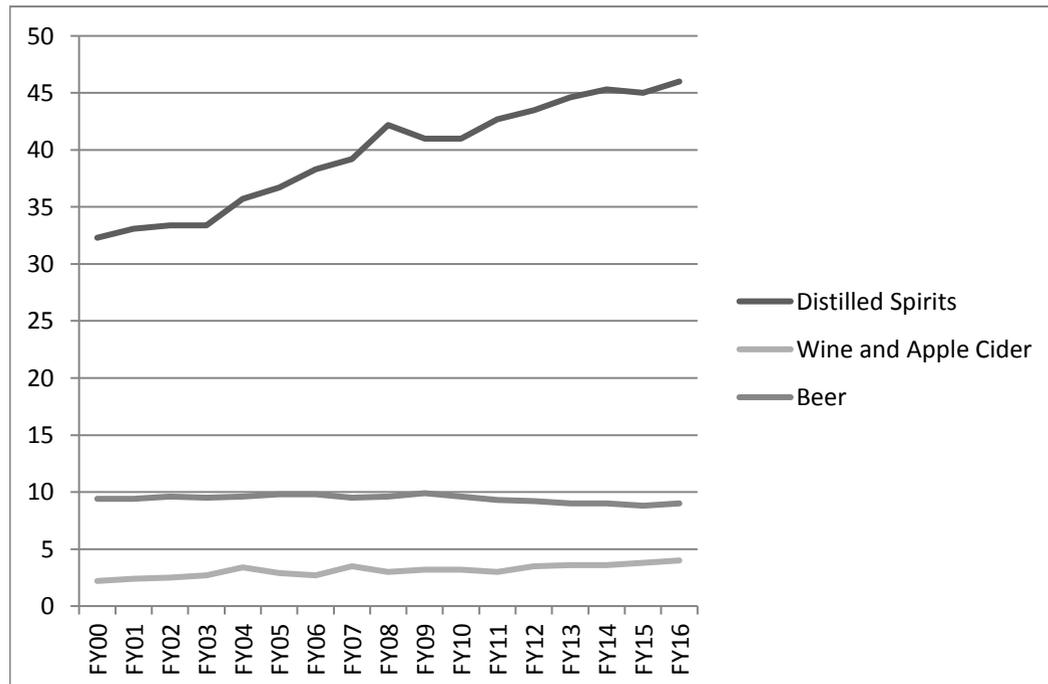
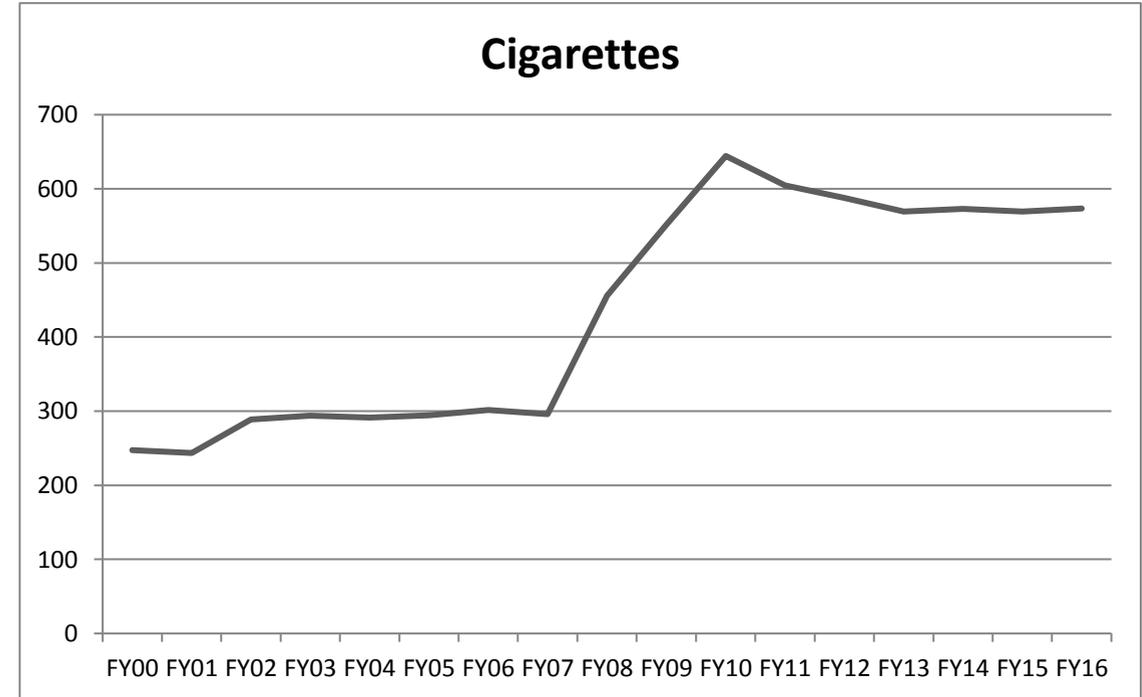
Committee	Plan to address goal/priority	SCAODA Goal	SCAODA Priority	Progress
Prevention	Promote trauma-informed care within substance use disorder systems	5	2,5	<ul style="list-style-type: none"> • Trauma informed care was included in recommendations in the Marijuana Committee Report. • Scott Webb provided one-day trainings sponsored by the AWY Regional Prevention Centers and at their Regional trainings. • Three groups specifically providing AODA use treatment & services were trained in ACE in 2016 to date: Northwoods Coalition Northwest Region, Northwoods Coalition Western Region, & St. Croix Co. Drug Court participants (modified version of ACE). • Several ACE trainers report that these AODA professionals and paraprofessionals tend to be present in most of the ACE groups trained.
	Inform credentialing rules related to professional prevention specialist certification	4	1	<ul style="list-style-type: none"> • Monitored legislation on removing Prevention Specialist In-Training designation. • Requested DSPS attend a Prevention Committee meeting to discuss certification expectations • Prevention Specialist Certification for prevention professionals recommended in the Marijuana Committee Report.
	Explore convening a study group to research how to integrate AODA prevention and public health policies in the workplace	1,3,5	1,2,3,4,5,6	<ul style="list-style-type: none"> • Initial research on workplace policies conducted. • Ad-hoc committee to review best

				<p>practices and promote workplace recommendations approved.</p> <ul style="list-style-type: none"> • Charge and mission for workgroup developed.
	Create an ad hoc committee to study policies related to marijuana	1,3,5	2,4,6	<ul style="list-style-type: none"> • Marijuana Ad-hoc Committee report completed Oct. 2015 and approved by SCAODA June 2016. • Report has been posted to the SCAODA website and hard copies distributed.

Historical Excise Tax Collections FY00 - FY16

Excise Tax Collections And Percent Change FY00 - FY16
(\$ Millions)

FY	Cigarettes	Tobacco Products	Distilled Spirits	Wine and Apple Cider	Beer	Total Excise Tax
FY00	247.6	10.3	32.3	2.2	9.4	301.9
FY01	243.5	11.4	33.1	2.4	9.4	299.8
FY02	288.8	13.9	33.4	2.5	9.6	348.3
FY03	293.7	15.5	33.4	2.7	9.5	354.8
FY04	291.3	16.1	35.7	3.4	9.6	356.1
FY05	294.3	15.8	36.7	2.9	9.8	359.4
FY06	301.5	16.4	38.3	2.7	9.8	368.7
FY07	296.1	17.5	39.2	3.5	9.5	365.8
FY08	455.7	29.7	42.2	3	9.6	540.3
FY09	551.3	42.2	41	3.2	9.9	647.6
FY10	644.3	59.9	41	3.2	9.6	757.9
FY11	604.6	60.9	42.7	3	9.3	720.6
FY12	587.8	65.5	43.5	3.5	9.2	709.5
FY13	569.2	63	44.6	3.6	9	689.5
FY14	573	67.7	45.3	3.6	9	698.6
FY15	569.5	71.9	45	3.8	8.8	699.1
FY16	573.4	76.1	46	4	9	708.5
Cumulative % Change	231.58%	738.83%	142.41%	181.82%	-4.25%	234.68%



What is the tax rate on cigarettes?

Period	Per Single Cigarette	Per 20-Pack
Prior to January 1, 2008	3.85¢	77¢
January 1, 2008 to August 31, 2009	8.85¢	\$1.77
September 1, 2009 and thereafter	12.6¢	\$2.52



What is the tax rate on tobacco products?

Tax Type	Prior to January 1, 2008	January 1, 2008 to August 31, 2009	September 1, 2009 and thereafter
Tobacco Products	25% of manufacturer's established list price to distributors	50% of manufacturer's established list price to distributors	71% of manufacturer's established list price to distributors
Moist Snuff		\$1.31 per ounce	100% of manufacturer's established list price to distributors
Cigars		Lesser of 50% of manufacturer's established list price to distributors or \$0.50 per cigar	Lesser of 71% of manufacturer's established list price to distributors or \$0.50 per cigar

Tobacco products - Wisconsin law defines tobacco products as cigars, cheroots, granulated, plug cuts, snuff, chewing tobacco, clippings, and other forms of tobacco prepared in such a manner as to be suitable for chewing or smoking in a pipe or otherwise. The definition includes tobacco that can be used for "roll your own" cigarettes, but it does not include cigarettes [sec. 139.75(12), Wis. Stats.].

Moist snuff- Any finely cut, ground, or powdered smokeless tobacco that is intended to be placed or dipped in the mouth.

What is the tax rate on fermented malt beverage?

There is a \$2.00 occupational tax on every 31 gallon barrel. [sec. 139.02(1), Wis. Stats.]

Eligible producer tax credit - If you are a brewer who produces less than 300,000 barrels of fermented malt beverage per year, you are eligible for a tax credit of \$1.00 on every barrel for the first 50,000 barrels subject to Wisconsin fermented malt beverage tax [sec.139.02(2), Wis. Stats.]. To determine a brewer's total production, you must combine all the brands and labels from all production facilities regardless of where the facilities are located.

What is the tax rate on liquor?

Tax Type	Statute	Occupational tax per liter	Administrative fee per liter
Intoxicating Liquor	secs. 139.03(2m) 139.06(1)(a), Wis. Stats.	85.86¢	2.906¢
Wine (includes cider containing more than 7% alcohol by volume)	sec. 139.03(2n)	6.605¢	
≤14% alcohol by volume >14% alcohol by volume but ≤21%		11.89¢	
Cider ≤7% alcohol by volume (Note: if >7%, see Wine above)	Apple cider sec. 139.03(2n), effective July 1, 1998 Pear cider* sec. 139.01(2m), effective January 1, 2016	1.71¢	

*Prior to January 1, 2016 Pear cider is taxed at the same rate as Wine.

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

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

ARTICLE I

Purpose and Responsibilities

Section 1. Authority

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

Section 2. Purpose

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

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

Section 3. Responsibilities

The state council on alcohol and other drug abuse shall:

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

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

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

ARTICLE II

Membership

Section 1. Authority

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

Section 2. Members

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

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

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

2.3 Selection of Members

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

2.4 Ex-Officio Members

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

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

2.5 Selection of Officers

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

2.6 Terms of Voting Members

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

2.7 Code of Ethics

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

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

2.8 Nondiscrimination

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

2.9 Nomination Process for Appointed Members and Officers

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

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

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

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

2.10 Removal from Office

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

Section 3. Officers

3.1 Chairperson

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

3.2 Vice-Chairperson

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

3.3 Secretary

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

3.4 Vacancies

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

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

ARTICLE III

Council Meetings

Section 1. Council Year

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

Section 2. Meetings

2.1 Regular and special meetings

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

2.3 Notice of meetings

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

2.3 Quorum

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

Section 3. Public Participation

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

Section 4. Conduct of Meetings

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

Section 5. Agendas

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

Section 6. Attendance Requirements

- 6.1 All council members and committee members are expected to attend all meetings of the council or the respective committees. Attendance means presence in the room for more than half of the meeting.
- 6.2 Council or committee members who are sick, hospitalized or who have some other important reason for not attending should notify the secretary or the secretary's designee or committee staff person or chairperson at least a week before the meeting. If that is not possible, notice should be given as soon as possible.
- 6.3 Any statutory members or designees of the council or committee who has two unexcused absences from meetings within any twelve month period will be contacted by the secretary of the council or committee chair to discuss the reasons for absence and whether the member will be able to continue serving. Appointed members who do not believe that they can continue should tender their resignation in writing to the secretary of the council or committee chair. Any council member resignations will be announced by the chairperson and forwarded by written notice to the Governor of the need for a new appointment. The replacement member would fulfill he resigned member's term.

Section 7. Staff Services

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

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

Section 8. Reimbursement of Council and Committee Members

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

ARTICLE IV

Committees

Section 1. Committee Structure

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

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

It is the intent of this section that:

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

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

Section 2. Composition of Committees

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

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

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

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

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

Section 3. Requirements for all Committees

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

Section 4. Requirements for Committee Chairpersons

The chairperson of each committee is responsible for:

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

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

Section 5. Executive Committee

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

5.2 The executive committee will have the following responsibilities:

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

5.3 Rapid Response

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

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

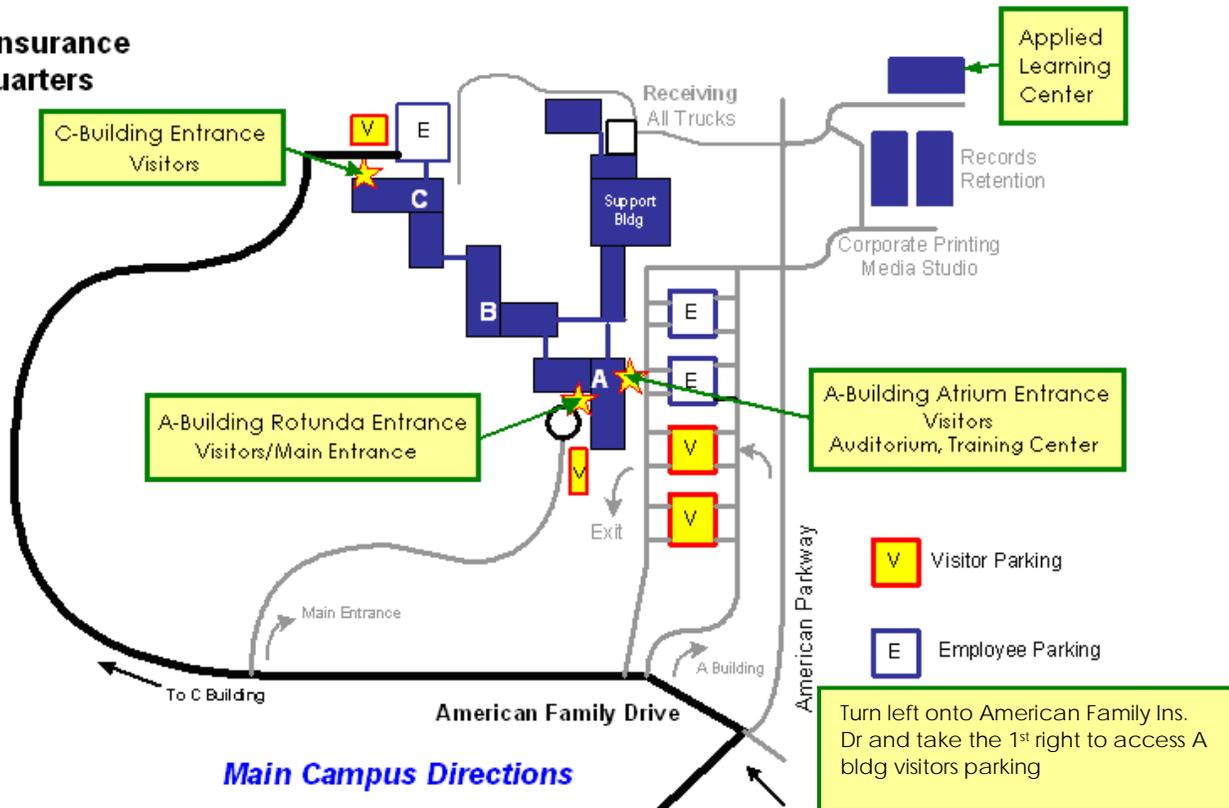
necessary before a council meeting may reasonably be convened.

ARTICLE V

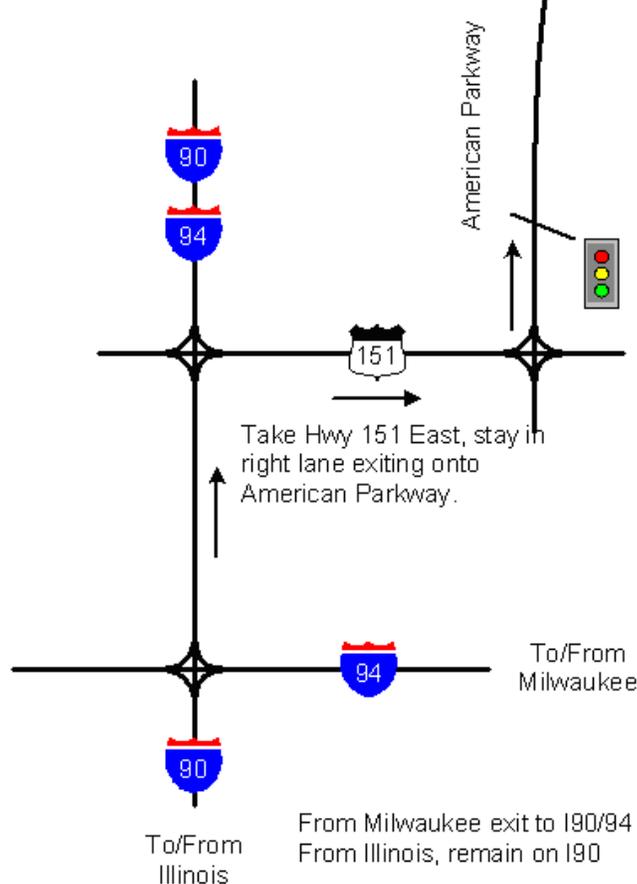
Amendments

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

Directions
**American Family Insurance
 National Headquarters**



Main Campus Directions



Turn left onto American Family Drive
 Stay in LEFT lane and go straight.
 The road will loop around to the C Building.

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

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

Highway Directions to AF-NHQ Campus

