

Governor's Council on Substance Abuse Prevention and Treatment Recovery Community Subcommittee

April 20, 2021 at 3 p.m.

Attendees: Matt Boggs, Jonathan Dower, Raj Masih, Joe Deegan, Greg Perry, Kevin Knowles, Marc Jackson, Rachel Thaxton

Meeting called to order at 3:07 p.m.

Meeting minutes for March to be approved at the May meeting.

Review of strategic planning process by Matt Boggs – Deb Koester sent a draft over for review by the subcommittee – send any redlines or comments to her to pull together by Thursday – final should be ready after 2 more sessions – one whole group – one with just Matt and Rachel to make it timebound and measurable.

Matt shared draft from Deb.

Goal 1, Strategy 2, KPI 1 – significant lift – is there something else we can put in here to articulate our intent besides just “explore models” – goal is to empower consumers to make informed decisions about pathways to recovery available. Balanced approach to informed consent – patient directed pathway, not physician driven – remove KPI 1 – development of an informed consent document? – let’s look at the development of an informed consent model (not so much worrying about models from other states).

Goal 3, Strategy 1, KPI 3 – recovery capital training – use William White document – training about the assessment and the key components – get clarification from Joanna – relates to Recovery Community Organizations (RCOs) and could be a great assessment tool.

Goal 4, Strategy 1, KPI2 – Clinical Healthcare Workers (CHW) and PRSS delineate the difference between Family Peer Recovery Support Specialist – Division of Labor grant – WV School of Osteopathic Medicine is training CHW to help with lifestyle, fitness, nutrition – Jon shared the Center for Disease Control’s CHW guide for more information – is CHW a reimbursable service – Joe mentioned that Proact uses CHWs – rethink this goal.

Goal 5, Strategy 2, KPI 1 – wording assistance needed – work with regulatory agencies to establish conversation created by current landscape to better translate data into actionable best practices – we want to be more informed on the data and how it helps providers implement best practices.

Goal 5, Strategy 3, KPI 1 – work with people in recovery, etc. but defer to Bureau for Public Health – might be a good project for Statewide Epidemiological Outcomes Workgroup (SEOW) – Nikki Tennis.

Goal 7 Strategy 2, KPI 1 – Recovery High School – support development of 1 pilot – separate into comprehensive youth services and add Key Performance Indicator about treatment and recovery program access – no one on the call knew of any treatment and recovery programs for adolescents – some of the most knowledgeable resource brokers in the state are on the call and could not identify resources.

Legislative Updates: Joe gave a rundown of HB 2427, and SB 334 was discussed.

Motion to adjourn at 4:02 p.m.