

LIVINGSTON WASHTENAW SUBSTANCE ABUSE ADVISORY COUNCIL

Monday, April 23, 2007
555 Towner, Ypsilanti, MI 48197

Put minutes on the web site -

MEMBERS PRESENT: Sally Amos, Glynis Anderson, Teresa Beadlescomb, Therese Doud, Suzanne Gondek, Lacy Horne, Anne Savickas, Marci Scalera, Sharon Sheldon

MEMBERS ABSENT: Jenna Bacolor, Terri Beadlescomb, Peggy Comstock, Jane George, Anne King-Hudson, Cassandra McCallister, Beth Glover Reed, Mark Robinson, Ted Westmeier, Paul Wojewuczki, , ,

G. Anderson called the meeting to order at 9:05 a.m.

I. Review of agenda

II. Review of 03-26-07 minutes

Without a quorum the minutes were accepted and a request approval will take place at the June SAAC meeting

III. State Update – Marci

- a. Recovery Management – Marci has been going through trainings the past several months and looking at model shifting from acute model to a chronic long term model. One way to do is change the licensing through the state. Bill White, an advocate for recovery and key note speaker at the conference in September will be part of a state group that will get together to share training techniques and transfer information needed throughout the state. A training technician will be on CA site in each area. Marci went through training with GLATTC (Great Lakes Area Technology Transfer Center).
- b. A new license procedure is being review. Marci passed out a handout with the information needing to be the main body of the official licenser on new applicants. Now we need to get back into commentary for the new license. We will start getting applications for a new licensure. With input from the agency it will be helpful to have a form letter put together to cover areas of question and concern. The issue of a background check was discussed and having a statement for applicant to give permission then sheriff office can process the background check. The council agreed to the licensing form procedure, but the background check should not be part of it.
- c. SB 220, 221 – COBO Hall Funds
The cutting of the PA-2 funds by the budget bill would cut 50% of the county and 50% of the coordinating agency. That would amount to a cut that would cost us to loose the treatment programs and all prevention programs. Many are working at the state level reaching out to legislators and lobbying against this bill. Mark met with Joe Hune and he stated that he voted against this bill and he will continue to do so, but does not know how others will vote. Marci emailed Bob Guenzel and asked if he would contact legislators too. The substance abuse advisory council agrees to send out a letter to all counties. There has been no increase is substance abuse in at past 15 years. We did have a reduction in Supplemental Disability Assistance funding a few years ago, as well as reduction in early intervention and aids trainings. There is some

representation that will be going to Lansing this week. This bill has been passed in the house and is now going to the committee. The adopted senate bill with changes will be made and then it will go to the full house. The dollars of focus are this year, which we have budgeted, so this would affect 2008 contract year. There are areas of the bill showing Medicaid and other areas increases, but the language can make it difficult for legislators to be aware of the funding implications. It is always helpful to have consumer's individual stories of the programs that have helped them. There will be meeting at the state level with a substance abuse group to focus on keeping senators informed.

d. Certificates

The state has added a web page where the licensing application can be downloaded. It is one application with a section to checkmark what you need and there are four new categories to choose from.

IV. Prevention update – Therese/Marci/Jane

a. SPF/SIG RFI

Two weeks ago Marci received the guideline and timeline from the state for the preliminary strategic plan is due April 30th and the final plan due by August 31st. In this short timeframe we will have to show how the programs are being put together and the money that will be needed. In the three months we need to do a community needs assessment, pull groups in the community together, indicate where the 'hot spots' are and make recommendations to the state. A strategic collaborative group will put together the plan of what the strategy and outcomes would be. The main focus is to get the data, identify the gaps and strategize a plan of action. If the state approves our plan, we will receive funds to implement the new program. We will need to look at the stats, data, location or areas of concern and what strategies we can implement to alleviate the problem. We need to focus on the evidence of underage drinking problems, how that relates to alcohol related traffic fatalities in our area. There is an extension that can be requested if we are having difficulty reaching the August 31st deadline. On May 9th we'll launch a meeting for community stakeholders and lay out the process. Jane George, will be the project manager and Adreanne Waller, the epidemiologist, will guide us through. She has experience with the Health Improvement initiatives.

V. County Committee Updates

a. Livingston – Anne, Ted

Anne and Ted were had a conflicting meeting and could not be here.

Marci reported that small group met and identified priorities to work on. One was to develop a program similar to RAC up in Livingston County.

b. Washtenaw – Marci

1. Therese passed out a handout reaching out to Saline parents to help curb teen drinking with acknowledgement that it is everyone's problem. Work is being done with the coalition to look at substance abuse issues and educate the community. Parents are being urged to check on kids where there is an overnight stay, make sure there is proper adult supervision.
2. Chelsea hospital has initiated a group on substance abuse prevention. Tomorrow there is a presentation on 'rock drugs'. This is a good opportunity for the community to get started and organize small groups so we are all on the same page.

3. The Communities Mobilizing for Change (CMCA) presentation is great and the LESA is pushing forward to increase community awareness. There is an updated fresh look to the <http://myrealitycheck.org> web site.
4. Therese was interviewed on W4 Country radio station.
5. The Recovery Access Center (RAC) work concept is on community needs assessment. There has been an identified need for front door treatment if they want it and transitional housing with peers and mentoring at the centers. The goal is to prevent repetitive visits to the emergency rooms. The clinical group has created a flow chart and the business development group looked at the cost and came up with an estimate cost for a million dollars a year. An RFI will be set up to determine detailed amount of how much it will actually cost to run the center and the business development plan will be shared with the hospitals with a request for funding. The site being looked at is the community corrections center next to sheriffs department which offers security, easy access, bus stop and lots of parking space. This is a three year project with a significant need for continuous support.

VI. Committee Updates

1. Council reviewed and agreed to present certificates to Jack and Beth.
 2. Workgroup descriptions are in the retreat summary.
 3. There are concerns with these committees not moving forward. There needs to be regular meetings scheduled and goals to focus on for the year.
- a. **Evaluation and Data** – Ted
Do not have status of this group, but it will be part of the Community Epidemiological Workgroup (CEW)
 - b. **Visibility** – Anne
The group met and has presentations that will be reviewed with changes with focus on the community. Impact of substance abuse jail survey is finished and there looks to be a shift from cocaine to first choice opium. Parents will be speaking and are creating an information packet to hand out at presentations and throughout the community.
 - c. **Workforce Development**
Not started yet.
 - d. **Systems** – Mark, Marci
The focus is the budget impact with MPRI, licenses and the system change and shift of acute care model.

VII. Other Items:

May 28th meeting cancelled and council will work on committees.
THE NEXT MEETING IS JUNE 25TH AT THE WCHO.