

**Vision Council
SUD Workgroup Meeting
May 25, 2022**

Attendees:

Greg Bellville
Linda Dettmann
Michele Tilotta
Kathy Thompson

Tachelle Dowell
Marlo Nash
Kristie Oliver

[Link to the slide deck for the SUD Workgroup Meeting](#)

Context: This is a continuation of an action planning process that began at the end of March. [Results Action Plan](#).

- This is the last meeting of the SUD workgroup before the full Vision Council meeting on Friday, June 17th. What work the SUD workgroup want to take to the full Vision Council?

Purpose: Finalize planning the action steps to implement the 2022 priorities and identify additional partners.

Meeting Results:

The Substance Use Disorder Work Group (SUDWG) will:

1. Complete the Results Action Plan Worksheet for its 2022 priority(ies)
2. Shape the plan document so it is in a useful, usable form
3. Determine the SUDWG's contribution to the June Vision Council meeting
4. Make Action Commitments that advance the work

Meeting Materials:

- [DRAFT VC Action Plan May 2022](#)
- [VC Worksheet with Notes](#)
- [4-22-22 SUD Workgroup Notes](#)

Spheres of Influence and Action

- HHS Alignment
- Judicial Branch
- Children's BH Board
- Adult BH with MCOs

Action Commitments:

- Greg/Andrew: Discussed getting the Vision Council on the agenda for the July Children's BH System State Board. What we need to do to get prepared is have a brief overview of what the Vision Council is doing and also come with an ask or two prepared on what the Vision Council feels like they can help with. We don't want just a presentation and then to leave. If we are going to be on the July calendar, we have to get the ask to them relatively quickly.

- The Children's System State Board does not have a subgroup focused on substance use disorders. Is that an ask? How do substance use disorders affect Children's mental health in the state?
- Is there another ask from our action steps that we want the Children's System State Board to focus on?
- Who do we want to present? Acknowledge Andrew is a member of the Vision Council, but don't have him be the presented at this meeting.
- Andrew set the table. There is a good cross-section of people who serve on the Children's System State Board. If we don't have something to ask for than it is wasted time. They are primed and ready to be respective.
- Greg/Kristie: Created draft one-pager/talking points. Instead of having an SUD workgroup and we looked at full Vision Council. Older Youth Workgroup is looking at a presentation to the Community-Based Services workgroup of the juvenile justice taskforce. Andrea is working on changes based on the draft that Greg and Kristie created. If 5 different people gave the presentation - there would be 5 different presentations. We are working on keeping things more consistent.
 - If we don't do the Children's BH System State Board in July- the next meeting would be in September.

Agenda Item: June 17th: How do we want the Vision Council to present our work? We need to provide something for the full Vision Council to react to.

- Kristie: Talk with Pat Garcia about the Drug Endangered Children's Task Force.
- Kathy: Invite Dr. Chasnoff to meet with the Vision Council. Kathy has talked with Dr. Chasnoff - he is willing to assist in any way possible. He presented at Prevent Child Abuse's conference and the Drug Endangered Children's group. He is meeting with Dr. Garcia in October. She is interested in some of the work that Children's Justice has been doing with Dr. Chasnoff.
 - Children's Justice is also looking at submitting another federal grant to further their efforts with Dr. Chasnoff. The application is not due until the beginning part of July, so they are in the beginning stages of those discussions.
 - Not sure if DHS has the capacity with the HHS Alignment and revisions to Iowa Code 232.

The National Center for State Courts is embarking on a new adventure. It is related to the adult mental health summits that they are having in states. There is not a limit of attendance in the three virtual sessions on June 2nd, 9th, and 17th. They will be noon-2:00 pm on each day.

- Iowa has officially been invited as a state to participate. There are only two states that have done this so far. Used to be called Blueprint for Strengthening Families. It is now called Upstream.
 - Kathy presented it to the Children's Justice Advisory Committee
 - Upstream Flyer: https://www.ncsc.org/_data/assets/pdf_file/0034/75868/Upstream-Flyer-Final.pdf
 - Mirror the format of the Family First Summit where they would use district teams. They would go through a mapping process using an intercept model looking for opportunities. They would be looking at prevention, supporting the families, and strengthening them.

- There is no cost to the state to participate in consortium. Asking for a commitment to participate in the facilitation work and be a part of measuring the work to help build the knowledge base.
- Facilitators would be trained on the SIM model. The goal would do a train the trainer model so we can be self-reliant.

How does this relate to the SUD Workgroup/Vision Council?

- It overlaps really nicely on what we are trying to do and focus on. They are also looking at similar data points - the importance of housing and secure from a needs perspective and providing programming and voluntary services to families at risk.
- Is there an opportunity to crosswalk the Vision Council's work into it? Can we bring the Vision Council to the community-level? The Vision Council presence could be rolled out quickly across the state through the upstream model. Children's Justice is going to move forward with Upstream- they would like to combine this with the Vision Council's work because they see it as a fit.
 - It also fits with the Alia project.
- They will provide technical assistance, consolidation and training of facilitators and support moving forward. Family is the hub of all of it. NCSC is looking at family centered justice.
 - District teams are there, but it has to be multi-disciplinary and collaborative. The facilitators need to represent all the stakeholders in the system. The courts are one of the partners, but it is going to take everyone.
- Children's Justice has given NCSC an initial thumbs up, but there are a lot of discussions that need to happen on what this is going to look like in Iowa.
 - The states that are involved are going to have a general meeting in July. It will be an orientation/virtual meeting. There is time to ponder and consider it further.

Should this be brought into the full Vision Council meeting on June 17th?

- Yes - it is relevant to the full Vision Council's work.
- Is Child Welfare on board? Does it fit into the HHS Alignment?
 - There are going to be pilot projects - how does DHS fit into the HHS Alignment?
 - Kathy plans on talking with DHS Dawn and Janee prior to June 17th.
 - Kristie can also provide information to the Child Welfare Partner's Committee

Technical Assistance: Knowing the Vision Council's history Marlo sees the Upstream project as an excellent fit. Here is what the Vision Council brings - very often these types of efforts fail around culture - the Vision Council is doing the culture shift work so brings that as a very important part. In the from to shift - the Vision Council wanted to shift from Geographical orientation to goal alignment. Imbedded into the Upstream work - it will go to the districts - a role for the Vision Council would be to knit the Upstream project together with goals and not geography. The framework of having targets is something else that the Vision Council brings. The Vision Council laid the groundwork for vertical alignment (community to state) and horizontal alignment (e.g. work with Children's BH System State Board and other groups at the state level). There are several things the Vision Council brings that would help the Upstream project be successful. As the SUD Workgroup considers it - there is a compliment, and the Vision Council could have a big role to play in making it all be aligned.

- The Upstream project may help with the fund development to continue the Vision Council's work. There is also a crosswalk with the Vision Council's results and targets with the Upstream framework.
 - The Upstream project might give the Vision Council structure to what they are committed to moving forward.

Previous Action Commitment: Kathy was going to connect with Michelle on if there was value in someone coming from Connecticut or Georgia come and discuss how they moved the family-centered, recovery-oriented approach.

- This needs to stay on the list.
 - When you have seen one state you have seen one state. Every state has a different framework that they adopted. Connecticut is a great model for recovery peer-oriented services, but not sure what they are doing for prevention and treatment.
 - What do we want another state to talk about? There needs to be more research done. Every state is different - Michelle does not know of a state that has a comprehensive approach. **Michelle has a national meeting the 2nd week of June with the different state representatives. There is a lot of information at the national meeting and Michelle can ask around.**

Previous Action Commitment: Kathy gathering data from ICJ assessment and AFSCAR.

- Kathy is still tracking down the data because what she is finding is old.

4.1.1 Advocate for SAMHSA framework for family-centered, recovery-oriented approach during HHS Alignment Process

- The only SAMHSA framework is on the prevention side. There is common language of the goals they want - treatment prevention and recovery.
- Not sure where the language came from specifically, but at an early meeting, there is a concept/guiding principle/framework - don't get tripped up if it is the SAMHSA framework, the Vision Council can call it what they want. The more important thing is that over time agreement was fostered the family-centered, recovery-oriented system of care approach to addressing substance abuse disorder.
 - We don't want to ditch the language, but we need to stop calling it the SAMHSA framework.

We are looking to adopt the core beliefs of the Vision Council. We are trying to connect source documents, so the core beliefs don't look like things that the Vision Council plucked out of thin air. As, HHS is going through the Alignment - the goal is to have them adopt the core values moving forward. What we want is to get those core beliefs shared - whether they are SAMHSA is does not matter - we are looking for the core beliefs...recovery is possible, children do better in families, treat the whole family, etc.

- **The National Center on Substance Abuse and Child Welfare** (<https://ncsacw.acf.hhs.gov/>) **has a lot of great resources.**
 - **Family Centered Approach Module:** <https://ncsacw.acf.hhs.gov/topics/family-centered-approach/fca-modules.aspx>
 - The Vision Council used their Family First Implementation Toolkit early on.

- Let's get the core beliefs hammered down and start getting those out with broad strokes.
 - We can build presentations around the core beliefs that lays out the framework.

If this is how the work is represented for 4.1.1 is that sufficient? Success would be that we can pinpoint in the new alignment where the idea is coming forth. For the performance measure the Vision Council will see somewhere that services are family-centered, and recovery is possible, etc. in the HHS final language.

- We want to see the Vision Council's one-sheeter to come out the HHS values document.

HHS Implementation Guiding Principles:

https://hhsalignment.iowa.gov/sites/default/files/resources/2022-03/Alignment_Work_Guiding_Principles.pdf

[Final Change Package - March 2022](#)

HHS Alignment: Prioritized Change Initiatives are organized into five major impact areas:

1. Integrated organizational structure
2. Shared vision, frameworks, and connection with the "big picture" (Slides 36-39)
3. Welcoming and efficient "front door"
4. Closed loops and facilitate "warm handoffs"
5. Improve use of data

**HHS is going to have pilot projects over the next year.

- DHS Update (Janee Harvey): Iowa Children's Justice State Council 4-15-22
 - DHS is internally having conversations around how to strengthen some of the substance abuse and recovery opportunities that we have in the state. Some of the realignment between DHS and IDPH will allow for some deepening of those collaborative efforts. She is excited about that.
 - DHS is maybe identifying some opportunities to build some substance abuse specific programming especially in the parts of the state where there are family drug treatment courts or the fusion sites. There are some interesting evidence-based substance abuse child welfare models in other states that Dawn Kekstadt and Janee are doing some deeper learning about and are seeing if there will be some opportunities in Iowa to build some substance abuse services to further enhance recovery.

Greg has a meeting with Dawn Kekstadt and will connect with this opportunity. Greg will take the Vision Council's core beliefs to the meeting with Dawn.

**Administrative Rules are going to have to be updated.

**HHS is working on the actual organizational chart (where the staff all sit) - due by July 1, 2022.

**Values and Mission Statement are currently being developed.

4.1.1.b After the Vision Council's core beliefs are in the plan - to make sure that it is implemented.

- Continuously acknowledge that something that gets written on paper can get lost if it is not lived with all the actions.

4.1.2 Conduct statewide education of adult behavioral Health providers on new opportunities to serve families, e.g., FFPSA (Not in 2022)

4.1.3 Shift the mental model among judicial district team members to "SUD is a disease that can be treated" (Not in 2022)

4.1.4 Increase Family Treatment Courts to statewide coverage. (2022?)

Role: Supporter or Networker.

Measurement: Achieve Statewide Coverage = at least one in every judicial district from their Iowa Children's Justice would identify areas of need.

- Capacity issue
- Iowa Children's Justice is developing a model of infusing family treatment court concepts into ongoing child in need of assistance cases. Where they cannot stand up a Family Treatment Court or the data does not show a need for family treatment court - we know we have families with substance use issues that are contributing to their involvement in the child welfare system, so they are trying to come up with a model or process that would support these families to help them get on their feet, instead of traditional services. Four Pilot sights (Fayette County, Wapello County, Polk County, & Emmet County) that are testing out what this might look like- if they identify they do have success then they will replicate it across the state.
 - This is a grant and Iowa Children's Justice just got their budget approved by DOJ - Kathy will see if there is something more intentional the Vision Council can do.
 - **Measurement:** A location implementing Family Treatment Courts or the new model of services would be available in each of the judicial districts and DHS service areas.
 - A Family Treatment Court is being considered in Clinton County - because their data suggests that it would be helpful for them. SAM, Judges and SWA in support, but there also many others that need to be in support of it for it to be successful.

4.1.5 Achieve family-centered behavioral health substance use services and other supports that wrap around a family through a continuum of care.

- family-based residential treatment centers for SUD that treat mothers, fathers and children together (Not in 2022)

4.1.6 Ensure there are community-based mental and behavioral health options, including a focus on the distinct needs of the VC's Focus Populations, esp Black, Indigenous, children and youth of Color (Not in 2022).

Result 4: Families and Children in the Focus Populations Receive Family-Centered, Recovery-Oriented Substance Use Disorder Treatment, when needed.

Target: Safely increase the number of families who remain intact while in recovery by 10% each year.

Progress Indicator: TBD

Name	Action	How/With Who?	By When?
Greg & Kristie	<p>Prepare 1-2 asks for Children’s Board (1 ask - have you thought about a SUD Committee; pls adopt VC beliefs into guiding principles)</p> <p>What considerations does the Children’s System State Board through about behavioral health including substance use?</p> <p>Have they thought about this in regard to the alignment process and the work that is going to be done together on the behavioral health substance use side?</p> <p>8 minute presentation (3 slides) with a 10-15 minute conversation</p> <p>Membership List: https://dhs.iowa.gov/sites/default/files/Board-Membership-List-2021.pdf?052520222107</p> <p>The Children’s Behavioral Health System State Board (Children’s Board) is the single point of responsibility in the implementation and management of a Children’s Mental Health System (Children’s System) that is committed to improving children’s well-being, building healthy and resilient children, providing for educational growth, and coordinating medical and mental health care for those in need.</p>	SUDWG members email Greg ideas	September
Greg & Kristie & Tachelle	Prepare presentation of VC for Children’s Board (10-3 July 12 or Sept)	See Marisa Eyanson beforehand	September

Greg & Kristie & Andrea	VC coalesces around the "story of the VC" for cohesiveness	Marlo	
Kathy	Invite Dr. Chasnoff to ??		open-ended
Kathy	Nat'l Center for State Courts' "Upstream" - get with DHS	Dawn (maybe Janee)	Before June 2
Kristie	Take "Upstream" to CW Partners Comm		After Kathy talks to DHS
Marlo Kristie/Greg	Remove reference to "SAMHSA framework" and use "VC's Core Beliefs" "family-centered, recovery-oriented, integrated system of care approach to SUDs"	(resource: National Center for Substance Use and Child Welfare)	
Kathy	Tracking down recent AFCARS data (Carrington helping with this)	Get to Kristie/Greg	
Michele	Seeking another state as a potential exemplar for IA (NASADAD mtg; 2nd week in June)		By mid- to late-June
Greg	Checking in on VC's core beliefs, esp for SUDs, in HHS alignment	Mtg with Dawn Kekstadt	
Kathy	Thinking of ways VC can support ICJ's work to create a model that is different from Family Treatment Courts (4.1.4.a), incl a performance measure		