**Substance Use Workgroup (SUDWG)**

**January 10, 2023**

**Attendees:**

Greg Bellville

Devon McClurken

Kristie Oliver

Linda Dettmann

Tachelle Dowell

Kristina Seier

**Meeting Purpose:** To continue momentum toward creating a system where “Families & Children in Iowa are safe & secure, healthy & well in their communities.

**Meeting Results:** Ensure momentum between work sessions. Create space to problem solve barriers to progress. Make action commitments that sustain the work.

**Result:** Group shares work since the last meeting and creates shared accountability.

Updates to 4.1.2 & 4.1.3 were shared to show the change to including [NCSACW trainings](https://ncsacw.acf.hhs.gov/training/default.aspx) in our overall goal and finding areas to uplift uses: Governor’s Conference, Child Welfare Provider Training Academy (CWPTA) trainings, Child Welfare Conference, potentially Prevent Child Abuse (Iowa) conference, and Kathy’s group. This also included a shift to finding ways to utilize the Collaborative Values Inventory (CVI) Survey. Group agreed to remove 4.1.2a: Offer a call to action webinar for adult behavioral health providers, in partnership with MCOs. Greg asked to add back community concierge to results 4.

Insights shared from 12/9/2023 Cross Collaborative Training Committee to include multi-disciplinary trainings for child welfare, providers, and judicial system along with substance use disorder trainers. Ideally, workers within different fields/systems are in the same room receiving the same training to discuss how things are implemented and effected in their particular field for others to collaborate and understand. And to then follow up with job/system-specific meetings after training to go more in-depth regarding their field/system implementation and changes with the training.

The CVI survey will be utilized before substance use intermediate training (HHS), within 6 months of hiring, but what is it used for? The provider's system is awaiting HHS approval of questions in CVI to then replicate on their side, which will be finalized next week (end of 1/20/23). How do we get the survey to be used if not taking the training? Ideally, it is an onboarding tool to understand mental models. Would we be able to institute a grading scale or system for ideal vs concerning answers? What are the preferred answers? Could we implement a pre-and post-test to track changes either within the system or with VC help? Is there a facilitation guide to help with conversation once results are analyzed? Where is the best place that can be feasibly used- supervisor insight on team? We have HHS committed, but how to get providers to utilize- CWPTA? NAMI has no provider push for CVI survey – is DMU pre-and post-test (start of school v graduated and start working) a potential point and how would we go about it if it is?

HHS is working on implementing a new pilot program with the Sobriety Treatment and Recovery Team (START) model caregivers with children 0-5 years old through an exploratory contract. Workgroup discussions begin 2/1/2023, which Linda is part of, and will share out. Is this supplemental to programs like Parent Partners or new? What will consolidation look like? Would it expand to include a larger age range? Are there evidence-based practices that incorporate our full target population: families with children prenatal-10. How small/large will pilot study be, and how long? If utilizing Parent Partners, what will that model look like within their current workings? Will Parent Partners be brought into discussion?

What’s happening in the communities: [Rosecrance](https://rosecrance.org/locations/rosecrance-jackson-centers/) eliminating crisis services (where?) due to workforce. YSS eliminating substance use residential treatment in Mason City, IA due to workforce.

Kristie and Chris Koepplin are traveling to explore [Project Harmony](https://projectharmony.com/) in Omaha, NE, could this be utilized in Iowa?

**Result:** Identify measurable actions to make progress forward.

Action Commitments (AC): Linda will share updates on START model exploratory contract workgroups.

AC: Kristie will follow up with Deann Decker in preparation for Governor’s conference as well as Karen Hyatt (mentioning Devon) regarding stakeholders coaching training and potential CVI survey utilization.

AC: Tachelle will report out from Condition of the Judiciary (conference) tomorrow, 1/11/23 as she was invited as a Parent Partner representative! She will also reach out to First Resources (formerly Hope House) regarding bed holds for dad’s with children in need of substance use residential/inpatient treatment.

AC: Greg will follow up with HSS regarding tracking baseline of: # of beds & waiting lists; avg length of stay per facility; resource flows, (potentially how often they track?)

AC: EVERYONE will spend time learning about [START model](https://www.cffutures.org/files/START/START_Chapt%201_092118_FINAL.pdf) (pdf, 19pgs) &/or [START model video](https://www.cffutures.org/start-home/discipline_materials-2-2/) (8m), or utilizing research avenues or conversations to be ready to discuss at next meeting.

AC: Kristina will make updates to RAP to eliminate 4.1.2a and work with Kristie to add community concierge point on previous RAP slides. She will also follow up with Kathy regarding CVI survey – what facilitation/conversations looked like after judiciary members took survey, whether there is a toolkit to assemble and share, ideas/thoughts around grading/preferred answers, and the pre-and post-test model.

**Result:** Share reflections and insights to create alignment.

SUDWG feels confident in standing after the meeting and is looking to start discussing and tackling other points in results 4 of results action plan.

*“Never doubt that a small group of thoughtful, committed, citizens can change the world. Indeed, it is the only thing that ever has.”*  
― Margaret Mead