MEMBERS PRESENT: Al Bliss, Jill Gustafson, Sandy Brekke, Regina Siegel, Troy Harcey, Vicki Burke, Jen Rombalski, Emily Whitney, Chris Eberlein, Don Dominic, Bob Ritger, and Joe Chilsen

MEMBERS NOT PRESENT: Todd Bjerke, Steve Helgeson, Monica Kruse, Laura Runchey, Dean Whiteway, Tom Tornstrom, Ted Thompson, Tom Johnson, Scott Mihalovic, Tim Candahl, Jennifer Kleven, Mandy Hess, and Cheryl Hancock

OTHERS PRESENT: Jeremy Fejfar, Lindsay Purl, Marya Decker, Agnes Smith, Ge Vang, Dean Peterson, Dan Morgan, Brian Wittenberg, Emma Goldbeck, Jean Lunde, Bethany Matsick, Carrie Rose-Duerst, Kimberly Gutierrez, Judi Zabel, Bill Haviland, Jamie Lee, Rita Von Haden, Jessica Schaler, Kevin Schaler, Averylle Decker, Sara Weinberger, and Carrie Bailey

CALL TO ORDER: Joe Chilsen, Committee Co-Chair, called the meeting to order at 1:03pm

CHAIRPERSON’S REPORT
The above meeting minutes have been approved.

PUBLIC COMMENT: None.

Dashboard Measures: Al Bliss provided an overview of activity update on current measures (pounds of sharps collected, drug hospitalizations, overdose deaths, etc. He provided a handout that lists all the measures and will email them to the task force. Quarterly updates will be provided at both the meetings and by email. There were several changes to the measures, including some new activities.

Screening Tools for Substance Abuse: Jamie Lee, health department intern provided an update on the various screening tools that are available to assess substance abuse/mental health related issues. One of the new dashboard measures includes: Activity 5: Primary healthcare providers/family medicine departments utilize substance abuse screening tools in La Crosse County. Please note this is a draft measure and the feasibility with healthcare needs to be explored.

There are four commonly used substance abuse screening tools used nationally;

- Opioid Risk Tool (ORT)
- Screener and Opioid Assessment for Patients with Pain-Revised (SOAPP-R)
- Brief Risk Questionnaire (BRQ)
- Brief Risk Interview (BRI)

Both the BRQ and BRI were preferred by healthcare providers. Jamie also completed al literature review of the screening tools utilized in the two healthcare systems in La Crosse. She found that Mayo does utilize the Opioid Risk Assessment (ORT) for those prescribed opioids for chronic pain, but it is not used by all providers. Mayo does not use a substance abuse screening tool for primary providers or in family medicine or other departments, but they do ask about alcohol and tobacco use.

Gundersen uses the AUDIT (Alcohol Use Disorders Identification Test) screening tool administered by RNs in Ortho/neuro, Surgical Digestive, Oncology, Rehab, Critical Care, and Cardiopulmonary units. However, Gundersen does not use substance abuse screening tools with primary providers/family medicine in other departments. Gundersen has a health educator in Trauma Services who administers the SBIRT tool or Screening, Brief intervention, and Referral to Treatment. SBIRT is an evidence-based practice used to identify, reduce, and prevent problematic use, abuse, and dependency on alcohol and illicit drugs.
**Prevention strategy discussion**

Jen Rombalski continued discussion on the new measure to “Decrease the percentage of high school students who report low perception of harm from drugs (increased perception of harm).” The summary of activities included:

1. Focusing on middle school students who participate in evidence-based educational programming
2. Host at least one community meeting each year to educate parents and community about the dangers of drugs (i.e.- WI Eye video)
3. Media/social media campaign to increase understanding of drug related harm
4. Evaluate the reasons for the decreased perception of harm among high school youth and parents (conduct focus groups of students and parents – how do young people define harm? Why is the perception decreasing?)

Potential partners included: Schools, media, Neighborhood Resource Officers, Community Organizations (Provide evidence-based programming – i.e.: Coulee Council on Addictions Too Good for Drugs)

The “result” would be “decrease the percentage of high school students who report low perception of harm from drugs.” The indicator would be the “percent of high school students identifying alcohol, marijuana, Rx drugs, or tobacco as moderate or great risk (perception of harm).as reported by the Youth Risk Behavior Survey (YRBS)

Jen also provided a Power Point summary of the activities and Al will email the presentation to the task force for review.

**REGULAR UPDATES:**

**Improperly Disposed Needles workgroup:** 68lbs of sharps were collected in the past month. Workgroup meets in 2 weeks to work on messaging and media. May do a “spring clean-up day.” Onalaska Fire Dept. Chief Don Dominick mentioned they have had some needle pick-ups in the single digits.

**Governor’s Opioid Task Force:** President Trump declared that the opioid epidemic as a public health emergency. The declaration will waive some federal regulations, give the states more flexibility on how they use federal funds, and expand treatment. Staff from PEW Trust interviewed some of the community stakeholders thoughts on treatment to report back to the Governor’s Opioid Task Force.

**Other Updates:**

- Rita Von Haden provided a brief update on Too Good for Drugs programming that is currently provided at G>E>T., Holmen, and West Salem Elem Schools.
- Troy Harcey mentioned “Toxic Stress Video” and that we need to address trauma issues. Curriculum is good, but it can become unraveled at home.
- Ryan Leaf, former NFL player is presenting through an event offered by the YMCA in October.
- Ge Vang mentioned ha the Lybert Family is presenting Nov 6 at WTC in the Lunda Center.

The next meeting is scheduled for **Thursday, November 16 from 1-2:30pm at Onalaska City Hall.**

**TRAVEL REQUESTS (INFORMATIONAL) AND TRAVEL REPORTS**
None presented.

**ADJOURNMENT**
There being no further business, the meeting adjourned at 2:30pm. The above minutes have been approved. (2 pages)
Al Bliss, Recorder