



HSC 2020
SBIRT - Screening, Brief Intervention, and Referral to Treatment
Mental Health & Substance Abuse [MHSA] Community Health Committee
MINUTES

DATE:	Wednesday, October 21, 2015 @ 8:05am	LOCATION:	Christopher Room @ St. Nicholas Hospital
PRESIDING:	Kristin Blanchard		
PRESENT:	Kate Baer, Kristin Blanchard Jean Beinemann, , Connie Frank, Susan Hein, Libby Holte, Mary Paluchniak, Sue Thiel, Dharmesh Murthy, Karlyn Raddatz, Cindy Vander Weele, Ann Bachach, Kari Keller, Mary Martin, Shelby Kuhn, Vicky Schneider, Jonathon Tyler, Jon Doll		
ABSENT/EXCUSED:			
GUESTS:	Leslie Patterson- Medical College of Wisconsin		
RECORDER:	Sue Thiel		
NEXT MEETING:	8:05am - 9am on Wednesday, November 18, 2015, HHS Room 372		

ITEM	DISCUSSION/CONCLUSION/RECOMMENDATIONS
Welcome and Introductions	We welcomed our guest from the Medical College of Wisconsin,, Leslie Patterson, and new members- Public Health Nurses, Cindy VanderWeele, Kari Keller, Vicky Schneider
Change Maker Grant - Leslie Patterson	<p>Leslie described the Change Maker Grant. The grant is to help communities shift or change their health systems way of doing business. She has worked with grants in a rural community that addressed alcohol binge drinking screenings, Veterans Health, and one on Activity and Health Eating which looked at use of Farmer's Markets. She felt our goal of SBIRT implementation into health care or in a school setting would be a fit for the grant. The grant has three stages. No set money is being looked at when starting, the applicant coalition set up how and when and what amount of money will be needed in the final stage.</p> <p>1st stage- letter of intent, answer 4 questions and is due January. Leslie would be able to review and make suggestions.</p> <p>2nd stage- Pitch Presentation done in March at the Medical College which lasts 20 minutes, and a panel asks questions of the applicants about their proposal. One week later you will know if you move on to Stage 3.</p> <p>Stage 3- Narrative of the project and budget need to be fleshed out. 6-8 week process. Leslie would be able to review the narrative. She would work with us to increase the chances of success by inserting community and academic language. The Medical College of Wisconsin biostatisticians would be available to help with data storages and biostatics. Due date is early May 2016.</p> <p>MCW Change Maker Grant information: Please review the questions for the grant. http://www.mcw.edu/FileLibrary/Groups/PublicCommunityHealth/HWPP/Responsive-Funding-Component1/HWPPResponsiveCohort3RFP.pdf</p>

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	<p>Discussions took place and those in attendance voted to start the application process. Kristin would like to get the Letter of Intent done by mid-December 2015. Ann, Kate, Karlyn, Libby, and Mary P. volunteered to help Kristin with the writing of the Change Maker Grant. Leslie would be available to help and review the grant' letter of intent application efforts.</p>
<p>Reporting on Action Steps from September Meeting – All Committee Members</p>	<p>Kate described another Medical College of Wisconsin Grant that is an eight year grant and is based on mental/ behavior health. Leslie stated that, that grant is different than the Change Maker grant as the academic partner is assigned after the grant is awarded. Kate stated that WISE maybe looking into the grant for funding. Kate will email Libby the information about this grant to get out to SBIRT committee members.</p> <p>Kate talked about SBIRT in the schools. Through the Bureau of Prevention Treatment and Recover, Scott Caldwell, may be able to teleconference with us about SBIRT in the School setting. A SASD Social Worker contacted Kate as he is SBIRT trained through his education and will be coming to our next meeting. This is another avenue to look at for SBIRT implementation. Mary Martin stated that in her hospital system SBIRT is at the table and being looked at. Kristin stated that Lakeshore CHC is interested in fully implementing SBIRT. Kristin talked to Bellin Healthcare about SBIRT at their clinics. They are doing it and the cost benefit is seen in the referral to treatment appointments.</p> <p>EAP uses the Audit tool and an implementation of a plan. Discussion took part on employers based health care clinics using SBIRT. The training part for the SBIRT, Brief Interventions, could be funded for clinics to be able to use it on every patient seen yearly.</p> <p>Vicky discussed the SBIRT process in the State run "Baby and Me" program for pregnant woman.</p>
<p>Review Updated Action Plan</p>	<p>The updated action plan was handed out and reviewed. A decision was made to look at 4 organizations using SBIRT by 2017. The plan use reviewed and approved as presented.</p>
<p>Report Out for Full Committee</p> <ul style="list-style-type: none"> • <i>Summary</i> • <i>Barriers</i> • <i>Celebrations</i> • <i>Asks</i> 	<p>Members voted to start the application process for the Change Maker Grant. Kristin, Mary P., Kate, Karlyn and Libby will be working on the letter for application.</p>
<p>Don't forget these items as part of action plan: <i>Education/Prevention</i> <i>Access to Service</i> <i>Coordination/Continuity of Care</i> <i>Health Literacy</i></p>	
<p>Other- Brief round table and updates on organizations/community events. Operation Gratitude, Halloween candy collection for the troops, was discussed by Mary P. Candy collection sites are some area dentist's offices and St. Nicholas Hospital.</p>	