

Meeting Minutes of the Governor's Council on Substance Abuse Prevention and Treatment Recovery Community Subcommittee Wednesday, December 3, 2025, Approved

Attendees:

Subcommittee Members Attending: Amber Blankenship (co-chair), Ardella Cottrill, Elly Donahue, Dan McCawley (co-chair), Phil Shimer

Subcommittee Members Not Attending: Brandy Blatt, Trenton Clem, Joe Deegan, Raj Masih

Guests Attending: Stephanie Frazier, Jessica Whitmore

Office of Drug Control Policy (ODCP) Staff Attending: Olivia Fox

State Opioid Response (SOR) Staff Attending: Mark Lanyon

State Opioid Response (SOR) Regional Coordinators Attending: Christina Adkins

Marshall University Staff Attending: Bradley McCoy

Opening:

Dan McCawley (co-chair) provided welcome and opening remarks of this meeting of the Governor's Council on Substance Abuse Prevention and Treatment, Recovery Community Subcommittee. The meeting was called to order on Wednesday, December 3, 2025, and was conducted by Google Meet conference. Dan McCawley approved the November 5, 2025 meeting minutes. There was no further discussion. The purpose of this meeting was to discuss 2025 key performance indicator (KPI) progress and the 2026 State Plan.

Agenda Items:

Finalize 2025 Quarter 4 Progress Report and Key Performance Indicator (KPI) Updates

- **Goal 1, Strategy 1, KPI 1:** 100%, A final draft of the informed consent document with edits to the language has been received from Jessica Whitmore.
- **Goal 1, Strategy 1, KPI 2:** 25%, Provider education will be included in the 2026 State Plan so the need for a memorandum of understanding (MOU) has shifted.
- **Goal 1, Strategy 1, KPI 3:** 100%, Meetings have occurred between this Subcommittee, the Office of Drug Control Policy and the Office of Health Facility Licensure & Certification (OHFLAC).
- **Goal 1, Strategy 1, KPI 4:** 50%, Meetings have occurred to understand policies, but no written report was created.
- **Goal 1, Strategy 1, KPI 5:** 0%, This KPI hinged upon the completion of other KPIs in this Strategy.
- **Goal 2, Strategy 1, KPI 1:** 100%, This was completed in Quarter 2.
- **Goal 2, Strategy 1, KPI 2:** 100%, With the certification board's adoption of the national certification standards, legislation was not needed.
- **Goal 2, Strategy 1, KPI 3:** 100%, There was no longer a need for family champions for successful legislation, but members noted that they need to promote champion Family Peer Recovery Support Specialists in the future as success stories.
- **Goal 3, Strategy 1, KPI 1:** 100%, This was completed in Quarter 2.
- **Goal 3, Strategy 1, KPI 2:** 100%, A written letter of support for reentry funds is no longer necessary after the West Virginia First Foundation identified reentry as a funding target area. This Subcommittee will identify awardees after they are announced later in December.

- **Goal 3, Strategy 2, KPI 1:** 100%, This was completed in Quarter 2.
- **Goal 3, Strategy 2, KPI 2:** 100%, This was completed in Quarter 2.
- **Goal 3, Strategy 2, KPI 3:** 25%, The 2026 State Plan will address documenting reentry services based on awardees from the First Foundation.
- **Goal 3, Strategy 2, KPI 4:** 0%, The 2026 State Plan will address documenting reentry services based on awardees from the First Foundation.

2026 State Plan

- Amber Blankenship provided an overview of the final draft of the 2026 State Plan. A copy is included below.

December 4, 2025 Subcommittee Chair Meeting

- There will be an in-person meeting of Subcommittee Chairs on December 4, 2025 in Charleston, West Virginia where they will present their sections of the 2026 State Plan to the Office of Drug Control Policy and one another.

2026 Meeting Schedule

- The chairs will continue to meet on the first Wednesday of each month but would like to shift the meeting time to 1:00 PM.

Additional Discussion

- The chairs would like to recruit additional members to the Subcommittee in the new year. They will need people responsible for Peer Recovery Support Specialist (PRSS) training and would like to revitalize the Subcommittee. Members were encouraged to recruit within their organizations.

Adjournment

Amber closed the meeting by thanking all Subcommittee members for their attendance and participation. The full Subcommittee will meet again on January 7, 2025, at 1:00 PM.

2026 State Plan

Goal 1: Strengthen recovery continuums and long-term stability of individuals in recovery.

Strategy 1: Create a statewide recovery ecosystem that sustains individuals beyond treatment through certified recovery residences, strong peer recovery workforce retention, manageable caseloads, and consistent engagement in the recovery continuum of care.

KPI 1: By December 31, 2026, partner with the Housing Workgroup for quarterly updates on the use of Behave Health and track the promotion, uptake, and effectiveness of a live database of recovery residence availability, aiming for a 20% increase in certified residence referrals statewide.

KPI 2: By June 30, 2026, work with the West Virginia Certification Board for Addiction & Prevention Professionals (WVCBAPP) to maintain the peer workforce by providing at least three targeted continuing education sessions on peer supervision, emotional support, professionalism, boundaries, and self-care, with 85% of attendees reporting improved skills in post-session evaluations.

KPI 3: By March 31, 2026, improve the quality of peer workforce training by surveying at least 75% of active peers on best learning experiences and launch a pilot Training of Trainers (ToT) program with no fewer than 15 participants, reporting outcomes at year-end meetings.

Goal 2: Expand equitable access to treatment and integrated care for substance use disorder.

Strategy 1: By December 31, 2026, identify and address the top three barriers to recovery support access for West Virginians of all geographies and ages, using data from recovery service reports and stakeholder input, with progress reviewed at quarterly meetings.

KPI 1: By September 30, 2026, collaborate with the Youth Subcommittee to identify at least three gaps and two barriers in youth recovery support availability; submit an action plan addressing each barrier, with progress reviewed quarterly.

KPI 2: By July 31, 2026, coordinate with local health organizations to catalog all available co-occurring disorder recovery support programs, aiming for a 10% annual increase in referrals to these services as measured by biannual data reports.

Goal 3: Standardize healthcare provider training and foster client empowerment through informed consent.

Strategy 1: Create and implement a curriculum for statewide provider training on the revised informed consent document to ensure correct use, measurable knowledge gain, and greater client comprehension across all SUD recovery providers.

KPI 1: By May 31, 2026, develop and launch an Informed Consent Training module for SUD recovery and mental health providers, with at least 80% of participants showing a 20% gain in knowledge on post-training assessments.

KPI 2: By November 30, 2026, cohost at least six statewide continuing education events with the Office of Drug Control Policy—such as Project ECHO and state conferences—reaching at least 1,500 provider attendees and achieving a 90% compliance rate in using the informed consent tool as documented by post-training audits.

KPI 3: By October 31, 2026, publish an annual summary to the Council specifying the total number of providers trained, overall compliance rates, and client feedback on informed consent comprehension, using standardized evaluation tools from participating agencies.