

Meeting Minutes of the Governor's Council on Substance Abuse Prevention and Treatment Courts and Justice-Involved Populations Subcommittee Tuesday, December 9, 2025, Approved

Attendees:

Subcommittee Members Attending: Amber Blankenship, Stephanie Bond, Candace Facemyer, Judge Jim Rowe, Stephanie Thornton (Chair)

Subcommittee Members Not Attending: Sam Hess, Cindy Hill, Lori Lynch, Tom Plymale

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

State Opioid Response (SOR) Staff Attending: Gwyn McGee

State Opioid Response (SOR) Regional Coordinators Attending: Jill Poe

Marshall University Staff Attending: Bradley McCoy

Opening:

Stephanie Thornton (Chair) provided welcome and opening remarks of this meeting of the Governor's Council on Substance Abuse Prevention and Treatment, Courts and Justice-Involved Populations Subcommittee. The meeting was called to order on Tuesday, December 9, 2025, and was conducted by Google Meet conference. Stephanie Thornton approved the November 12, 2025 meeting minutes. The purpose of this meeting was to discuss 2025 key performance indicator (KPI) completion.

Agenda Items:

Finalized 2025 4th Quarter Progress Report and Key Performance Indicators (KPI) Updates

- **Goal 1, Strategy 1, KPI 1:** 100%, This was completed in Quarter 2.
- **Goal 1, Strategy 1, KPI 2:** 100%, This was completed in Quarter 2.
- **Goal 1, Strategy 2, KPI 1:** 100%, This was completed in Quarter 2.
- **Goal 1, Strategy 2, KPI 2:** 100%, Academy programs do exist, but they are not treatment programs and often require youth to be justice-involved. The Attorney General's Substance Use Disorder Program Liaison, Josh Barker, is publishing a report on January 14, 2026 discussing quality of care and the existing gaps in services. AETNA is meeting with ODCP about further training for staff regarding youth substance use disorder.
- **Goal 1, Strategy 3, KPI 1:** 100%, The resource guide spreadsheet has been distributed and will continue being updated with only Medicaid accepted facilities. The guide will not include sober living facilities due to certification requirements and continuous fluctuation.
- **Goal 1, Strategy 3, KPI 2:** 100%, The West Virginia Alliance of Recovery Residences (WVARR) will continue updating their website with recovery residences and residential facilities.
- **Goal 1, Strategy 3, KPI 3:** 100%, They have met with Amber Blankenship from the Recovery Subcommittee about the Social Determinants of Health (SDoH) Assessment. There is an ability to implement this tool statewide, but funding is required for peer navigators.

- **Goal 1, Strategy 3, KPI 4:** 75%, REACH documents these SDoH through their peer navigators. Pretera is offering a packet for their “Restart Program.” Jobs & Hope have a re-entry programming for participants who participate in their employment placements.
- **Goal 1, Strategy 4, KPI 1:** 100%, The Subcommittee has met with different levels of navigators. The reports are with Dr. Deb Koester for further feedback.
- **Goal 1, Strategy 4, KPI 2:** 15%, Community Connections’ Quick Response Team (QRT) are making family contact for increased chances of treatment referrals in two counties. This continues to be a gap for substance use disorder. In Lincoln and Logan counties, Family Strong is offering eight-week programs.
- **Goal 1, Strategy 5, KPI 1:** 100%, The Subcommittee understands the funding is reliant on the upcoming legislative sessions.
- **Goal 1, Strategy 5, KPI 2:** 0%, The partnerships already exist and there are no new treatments courts beginning in 2025.
- **Goal 1, Strategy 6, KPI 1:** 100%, The Subcommittee has partnered with Youth Subcommittee several times as well as attending co-chair meetings throughout the year.
- **Goal 1, Strategy 6, KPI 2:** 100%, The Subcommittee has partnered with the Pregnant and Parenting Subcommittee and shared information about probation.
- **Goal 1, Strategy 6, KPI 3:** 100%, The Subcommittee reached out to West Virginia Behavioral Health Providers Association and completed this KPI.
- **Goal 1, Strategy 6, KPI 4:** 90%, The specialized population is Pregnant and Parenting Women as they are number one area for treatment need following the youth population. Women with children and women are also the number one housing need.
Goal 1, Strategy 7, KPI 1: 100%, Dr. Stephen Loyd is interested in an educational program surrounding cannabinoid use in the 2026 State Plan as a barrier and stigma issue involving Pregnant and Parenting Women.
- **Goal 1, Strategy 7, KPI 2:** 100%, The Subcommittee has contacted Dr. Lyn O’Connell with the Public Education Subcommittee. There is possibility for Substance Abuse and Mental Health Services Administration (SAMHSA) and State Opioid Response (SOR) funding for stigma reduction campaigns as well as funding through ODCP.
Goal 1, Strategy 7, KPI 3: 100%, The Subcommittee has met with the WV Perinatal Partnership and have shared resources with Wexford.
- **Goal 2, Strategy 1, KPI 1 and KPI 2:** 50% and KPI 2 is 25% Dr. Deb Koester is reviewing the Social Determinants of Health Guides.
Goal 2, Strategy 2, KPI 1: 100%, The Subcommittee met with Deb Harris from Jobs & Hope in February 2025 where they shared available resources about criminal and civil legal involvement.
- **Goal 2, Strategy 2, KPI 2:** 100%, The Subcommittee met with Ashley Payne in July 2025 about employment and second chance hiring.

State Plan 2026

- Stephanie Thornton provided an overview of the final version of the 2026 State Plan. A copy is included below.

Additional Discussion

- None.

Adjournment:

Stephanne closed the meeting by thanking all Subcommittee members for their attendance and participation. The Subcommittee will meet on Tuesday, January 13, 2025 at 10:00 AM.

Courts and Justice-Involved Populations

Untreated substance use disorders have long-fueled an increase in West Virginia's incarceration rates, creating a surge in the criminal justice- and child abuse and neglect-involved populations. The Court Systems and Justice-Involved Populations Subcommittee emerges as a catalyst for change. The Subcommittee identifies the elevated risk of overdose and/or recidivism among justice-involved individuals with substance use disorders, highlighting the urgent need for targeted interventions. Leveraging the justice system as a platform, the Subcommittee has explored strategies for linkage to treatment, employment, transportation, family reunification, and criminal record expungement related to substance use disorders and child abuse and neglect filings across diverse jurisdictions statewide.

Goal 1: Provide criminal justice-involved and civil child abuse and neglect-involved persons access to evaluation and effective treatment for substance use disorder (SUD).

Strategy 1: Develop recommendations to expand diversion/deflection to SUD treatment opportunities across West Virginia based on effective practice.

- KPI 1: By April 30, 2026, identify operational diversion programs that exist in West Virginia as defined by statute or function.
- KPI 2: Through December 31, 2026, partner with the Law Enforcement Subcommittee quarterly to review processes and protocols for operational Police and Peers programs towards effective program replication.
- KPI 3: By March 31, 2026, create and implement interviews with select law enforcement officers and peers working in Police and Peers programs to enhance understanding of these roles in Police and Peers programs and document emerging/promising practices.
- KPI 4: By June 30, 2026, identify a set of metrics that represent program outcomes, and collect data from Police and Peers Programs operating in select West Virginia jurisdictions, related to measuring incidents of diversion and overall program effectiveness.
- KPI 5: By August 30, 2026, based on findings from KPI 2 and KPI 3, establish recommendations for replication of effective Police and Peers programs for expansion to other West Virginia jurisdictions and delineate existing barriers to review with the Law Enforcement Subcommittee.

Strategy 2: Using available evidence and tools, develop metrics for Adverse Childhood Experiences (ACEs) and resilience measured in justice-involved populations.

- KPI 1: By April 30, 2026, Partner with the Pregnant and Parenting Women Subcommittee to discuss implementation of the Adverse Childhood Experiences (ACEs) and resilience questionnaires of justice-involved women through the Perinatal Partnership.
- KPI 2: By April 30, 2026, partner with the Recovery Subcommittee and at least one Day Report Program and/or Behavioral Health Center to determine if the ACEs

questionnaire is being utilized in recovery programs across West Virginia and determine if the resilience questionnaire can be added.

- KPI 3: By April 30, 2026, partner with the Adverse Childhood Experiences (ACEs) Coalition of West Virginia to discuss any existing measures being utilized to assess ACEs in adults who are justice-involved.
- KPI 4: By June 30, 2026, partner with REACH to pilot use of selected ACEs and resilience tools among individuals receiving comprehensive reentry services to inform broader implementation.
- KPI 5: By October 31, 2026, collect aggregate reports (scores) from organizations collecting ACEs and resilience questionnaires from select populations in West Virginia.
- KPI 6: By November 30, 2026, make recommendations to the Division of Corrections and Rehabilitation based on findings from ACEs and resilience questionnaires to inform medical, training, and case management needs of incarcerated populations.
- KPI 7: By December 31, 2026, partner with the Prevention Subcommittee to discuss recommendations for prevention of ACEs correlated with substance use disorder and justice-involvement in adults.

Strategy 3: Provide continuity of care related to medical, treatment, or social needs to effectuate treatment and referrals for persons leaving carceral settings with medications for opioid disorder (MOUD), behavioral health treatment needs, and/or unmet social needs.

- KPI 1: By May 31, 2026, identify gaps that prevent incarcerated persons from leaving carceral settings with an adequate supply of medication for substance use disorder treatment for continuation in the community.
- KPI 2: By July 31, 2026, identify resources for care coordination in instances when returning citizens cannot receive an adequate supply of medication or access to healthcare/behavioral health services upon release and make recommendations for linkage to treatment services for ongoing care.
- KPI 3: By September 30, 2026, determine reentry resources that support care coordination and linkage for persons released from carceral settings with medication and treatment needs, or unmet social needs.

Goal 2: Construct pathways to employment, housing, transportation, secure food, health care resources, and behavioral health services for justice-involved individuals with substance use disorders.

Strategy 1: Determine the scope and sustainability of the current reentry landscape in West Virginia.

- KPI 1: By June 30, 2026, identify organizations providing reentry services across the state.
- KPI 2: By August 31, 2026, document the types of reentry services offered and service area for each organization, if services are sustainable or project-specific, the capacity/staffing/billing model required to provide the services, and number of individuals served in 2025.

KPI 3: By October 31, 2026, create written summary of findings above and map the reentry landscape to determine if there are service related, geographic, grant-specific, or demographic gaps through existing reentry initiatives.

Strategy 2: Increase opportunities for returning citizens to receive their State Identification and enrollment in Medicaid for access to healthcare/behavioral health services prior to, or upon, release from carceral settings.

KPI 1: By March 31, 2026, determine what gaps exist that prevent incarcerated persons leaving carceral settings without their State Identification and/or access to health-related services.

KPI 2: By June 30, 2026, make recommendations to close gaps for issuance of State Identification and access to care gaps prior to release through alternative recommendations.