2025 Quarter 2 Progress Report

West Virginia Substance Use Response

WEST VIRGINIA OFFICE OF
DRUG CONTROL POLICY
West Virginia Department of Human Services

Office of Drug Control Policy
July 2025

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Introduction

The purpose of this report is to update the Governor's Council on Substance Abuse Prevention and Treatment, key stakeholders, and communities on the progress of the 2025 Substance Use Response Plan implementation (State Plan). This report serves as a tool and mechanism by which the Governor's Council can monitor progress in each of the Plan areas, including the status of each key performance indicator (KPI). The report is organized by the following nine strategic areas of the West Virginia 2025 Substance Use Response Plan.

- Prevention
- Community Engagement and Supports
- Treatment, Health Systems, and Research
- Courts and Justice-Involved Populations
- Law Enforcement
- Public Education
- Recovery Subcommittee
- Pregnant and Parenting Women
- Youth

This document is one means for the Governor's Council members and the West Virginia Department of Human Services (DoHS), Office of Drug Control Policy (ODCP) to demonstrate their commitment to continued accountability, sustainability, and willingness to assure this State Plan is advanced to systematically address the substance use disorder crisis in West Virginia and achieve the intended outcomes. True success in implementing this State Plan continues to require integrated efforts at every jurisdictional level and across sectors. This work in West Virginia will not be achieved by any one agency, entity, or jurisdiction alone. As such, the Council continues to offer the State Plan as a common framework to other sectors and organizations engaged in addressing West Virginia's substance use epidemic. The use of a common framework enhances the likelihood of aligning efforts, leveraging one another's work, minimizing gaps, and communicating collective progress. Addressing this epidemic in West Virginia clearly requires a "whole of community" effort with a shared commitment at the center of the relationship between the Council, State agencies, and local communities. The 2025 Action Plan in its entirety is available on the ODCP website.

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Executive Summary

Purpose

This 2025 Quarter 2 Progress Report was prepared to update the Governor's Council, key stakeholders, and communities on the progress being made towards achieving the goals set forth to address substance use in the State. In addition, this reporting process facilitates an opportunity for important dialogue about the initiatives and strategic direction being undertaken.

The 2025 Plan was designed such that each Subcommittee identified the highest priority Goals, Strategies, and KPIs to focus on this year. Progress towards completion for each key performance indicator (KPI) was measured as "Completed," "In Progress/On Target," "In Progress/Falling Behind," "In Progress/Far Behind," or "Not Started" with a percentage of the work complete documenting progress each quarter. This report presents the 2025 Quarter 2 status for each KPI as of June 30, 2025. Measurements demonstrate both transparency and a commitment to communicating progress. Subsequently, the State Plan continues to have a strong focus on the indicators and metrics established through the key performance indicators, which are time-framed and measurable.

Implementation of the 2025 Action Plan resulted in the following for the 142 KPIs being reported. Of note is that total KPIs may vary from quarter to quarter as Subcommittees add or remove KPIs during implementation. A summary of 2025 accomplishments each quarter is provided in Appendix A. NOTE: The percentage of KPIs reported is based on the unique total number of KPIs for each Subcommittee in their portion of the Plan

Subcommittee	KPIs Completed	KPIs In Progress	KPIs Not Started	KPI Progress Not Reported
Prevention	3 (19%)	10 (62%)	3 (19%)	0 (0%)
Community Engagement	6 (25%)	11 (46%)	7 (29%)	0 (0%)
Treatment/Health Systems	0 (0%)	0 (0%)	0 (0%)	26 (100%)
Courts & Justice-Involved Populations	9 (39%)	9 (39%)	5 (22%)	0 (0%)
Law Enforcement	1 (11%)	8 (89%)	0 (0%)	0 (0%)
Public Education	4 (36%)	3 (27%)	4 (36%)	0 (0%)
Recovery Community	4 (29%)	6 (42%)	4 (29%)	0 (0%)
Pregnant & Parenting Woman	3 (27%)	7 (50%)	1 (9%)	0 (0%)
Youth	0	6 (75%)	2 (25%)	0 (0%)
TOTAL	**30 (21%)**	**60 (42%)**	**26 (18%)**	**26 (18%)**

Quarterly Progress Reports

Prevention

Goal 1: Assess community-based readiness and capacity to address prevention issues.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Assist community coalitions in conducting baseline assessments to evaluate and enhance community readiness.**					
KPI 1	By April 30, 2025, train at least 20 prevention coalitions on the Community Readiness Model.	25%	100%			There have been at least 20 coalitions to date and all 55 counties will have CRA Scores by June 30. (Some counties do not have formal coalitions.)
KPI 2	By September 30, 2025, facilitate baseline assessments in at least 20 communities.	0%	75%			All regions are on track to complete the interviews of the Community Readiness Assessment by the end of June.

Vaping/THC were identified as the primary topic of choice, so |

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
		Gray	Green			communities are aware of this as a problem and ready to shift from awareness to intervention and policy.
KPI 3	By October 31, 2025, develop and provide resources to coalitions to develop community plans to increase readiness.	0%	25%			Follow up plan development based on the scores has started in many counties that have an established formal coalition.

Goal 2: Reduce youth access to alcohol, tobacco, and other substances to promote public health.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Advocate for the implementation of comprehensive vaping policies at the state level.**					
KPI 1	By March 31, 2025, collaborate with stakeholders and organizations to share draft policies from communities.	0%	100%			During the Prevention Day Pre-Event Sessions, participants reviewed the 2025 Bill tracking list on prevention-related topics including: substance use, student safety and violence, vaping, tobacco, alcohol, gambling, Laken's Law, adverse childhood

		 	 			experiences, school-based mental/behavioral health services, substance related tax.
KPI 2	By October 31, 2025, host education or advocacy events to raise awareness about policies.	25%	50%			• In collaboration with the WV Center on Budget and Policy (WVCBP) - three Prevention Day Pre-Event Sessions were hosted. Presenter: Seth Distefano, Senior Policy Outreach Director, WVCBP March 18 - Session 1: Legislative Basics (30 attendees) March 19 - Session 2: Understanding the Budget (25 attendees) March 20 - Session 3: Working with Your Legislators (26 attendees) Tobacco: • Tobacco Free Day (April2) in Charleston - RAZE youth raised awareness with lawmakers about the dangers of vaping. • Monthly community events are organized for the tobacco youth ambassadors to educate

						community members on the importance of developing ordinances in their cities and counties regarding vape shops.
KPI 3	By October 31, 2025, host education and sign on events to raise awareness about policies.	25%	75%			WVCIA hosted the 2025 Higher Educ Summit on March 28. WV Colleges and Universities signed the "Statement of Presidential Commitment to Support Evidence Informed Strategies for Preventing Substance Misuse, Promoting Recovery, and Fostering Health and Wellness among College Students" Prevention Day at the Legislature was hosted on April 2 (both in-person at the Capitol and virtual) on collaboration with Tobacco Free Day. • 368 total registrants • 53 exhibitors • 11 speakers • 11 interviews • 121 Livestream views

						• 14 prevention videos shared • Return on Investment for Evidence-based Program handouts were shared • 7 Coalition flyers developed and shared • 26 Prevention Specialists recognized <u>Tobacco</u>: Working on educating the communities with the Raze youth about the dangers of tobacco and giving information about the new Quitline services.
KPI 4	Through December 31, 2025, establish a baseline number of community members and coalitions engaged.	25%	50%			Event registrants are tracked online <u>Tobacco</u>: Monthly tobacco coalition calls discussing tobacco policies. Coalition is working on zoning for vape shops with local communities.

		🟩	🟩			Multiple coalitions throughout the state are working on vaping ordinances in their counties.
Strategy 2	**Train at least 30 coalitions on prevention advocacy and policy development to enhance their effectiveness in promoting evidence-based policies.**					
KPI 1	By April 30, 2025, develop a comprehensive training curriculum on advocacy strategies	10%	100%			In collaboration with the WV Center on Budget and Policy (WVCBP) - three Prevention Day Pre-Event Sessions were hosted. Seth Distefano, Senior Policy Outreach Director, of the WV Center on Budget and Policy presented. • March 18 - Session 1: Legislative Basics (30 attendees) • March 19 - Session 2: Understanding the Budget (25 attendees) • March 20 - Session 3: Working with Your Legislators (26 attendees)

						• Recordings for all trainings are available on the Prevention Day webpage. Several free online courses are available through the Prevention Technology Transfer Center Network. • "The Power of Policy change" - This course provides an overview of how policy change can be an effective strategy for prevention professionals to address community-level problems with alcohol, tobacco, and other drugs. https://www.healtheknowledge.org/course/view.php?id=562 • "The 10 Steps of Policy change" - This course provides an overview of a 10-step policy framework and provides information about how a local policy campaign can address alcohol, tobacco and other drug (A-TOD) issues in communities with a local policy campaign.

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						https://www.healtheknowledge.org/course/view.php?id=563
KPI 2	By December 31, 2025, conduct at least four training sessions with coalitions and prevention stakeholders.	10%	75%			In collaboration with the WV Center on Budget and Policy (WVCBP) - three Prevention Day Pre-Event Sessions were hosted. Seth Distefano, Senior Policy Outreach Director, of the WV Center on Budget and Policy presented. • March 18 - Session 1: Legislative Basics (30 attendees) • March 19 - Session 2: Understanding the Budget (25 attendees) • March 20 - Session 3: Working with Your Legislators (26 attendees) • Recordings for all trainings are available on the Prevention Day webpage.
KPI 3	By December 31, 2025, assess participants' understanding and skill	0%	0%			

improvement through a survey.					

Goal 3: Develop standard training on at least three prevention topics.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Identify current resources to develop a primary prevention toolkit for schools and communities.**					
KPI 1	By December 31, 2025, select three prevention topic areas.	10%	40%			The team has discussed three topic areas, also made a survey – in talks with other groups providing prevention surveys to deploy
KPI 2	By December 31, 2025, create training materials for each topic, ensuring alignment with best practices and current research.	10%	10%			Collecting information
KPI 3	By December 31, 2025, conduct at least three training sessions per topic area for coalition members	0%	0%			

	and community stakeholders.					
KPI 4	By December 31, 2025, assess participants' understanding of topic areas through surveys.	0%	0%			

Goal 4: Develop a youth pipeline into prevention related fields.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	Establish a new entry level prevention certification in West Virginia.					
KPI 1	By December 31, 2025, finalize and launch the certification process with the West Virginia Certification Board for Addiction and Prevention Professionals.	10%	80%			The Prevention Specialist Application and Recertification Application have been streamlined and are now available through an online portal. There is also an updated Prevention Specialist Manual.

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KPI 2	By December 31, 2025, design and implement the education criteria and resources for the certificate.	10%	50%			The Prevention Committee of the WV Credentialing Board for Addiction and Prevention Professionals has started to draft requirements, an application and a manual for prevention paraprofessional certification. MURC and the WV Bureau for Behavioral Health have been working with Central East PTTC to develop a Prevention Onboarding and Orientation Guide for new preventionists in the state. The Guide is completed and has received the approval of the Prev. Committee of the WV Credentialing Board for Addiction and Prevention Professionals. It is awaiting final approval from BBH prior to being made available to the public. MURC is offering a scholarship to cover the application and testing fees for anyone applying for the Prevention Specialist certification

						(Available through September 2025 with funds from WV HEPC and WV Dept. of Labor.) MURC is working to develop an eduction pathway that leads towards a paraprofessional certification for high school students.

Community Engagement and Supports

Goal 1: Increase capacity of recovery housing in West Virginia.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Advocate for long-term funding to help strengthen and grow all levels and types of recovery housing in West Virginia where it is needed.**					
KPI 1		30%	30%			We submitted a request through SAMHSA SPARK. They gave us a formula but we're still missing needed data. WVFF's needs

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	Through December 31, 2025, determine the capacity needs for all types of recovery housing.					assessment RFP announcement should be in 30-60 days. The Fletcher Group survey discussion is scheduled for 6/30. Hosting a listening session at WVAPP Conference 7/22-7/24.
KPI 2	Through December 31, 2025, collaborate with the Office of Drug Control Policy and Bureau for Behavioral Health to identify funding needed in FY 2025 for the development of new recovery housing residences to meet capacity needs in West Virginia as identified in KPI 1.	20%	20%			
KPI 3	By June 30, 2025, submit recommended strategies to the Governor's Council on sustainably funding certified recovery.	0%	0%			We have the financial landscape assessment with cost averages to use in recommendations.
KPI 4	By December 31, 2025, increase the number of	50%	-25%			Jan 1, 2025: 110 April 1, 2025: 119 June 26, 2025:

	certified recovery residences by 15%.					Decreased to 106 due to revocations and expirations. From Jan 1, it decreased by 3.6%. From the previous quarter, it decreased 11%.
KPI 5	By December 31, 2025, increase the number of certified recovery residence beds by 20%.	25%	-25%			Jan 1, 2025: 1,496 April 1, 2025: 1,572 June 26, 2025: Decreased to 1461 beds. From Jan 1, this is 2% decrease. From previous quarter, this is a 7% decrease.
Strategy 2	**Facilitate ongoing training and technical assistance for current and future recovery residence operators and staff.**					
KPI 1	By September 1, 2025, conduct the third annual conference for recovery residence operators and staff, in collaboration with the West Virginia Association of Recovery Residences, the Office of Drug Control Policy, and	0%	80%			Conference scheduled 9/9. Agenda complete and speakers confirmed. Save the date went out and registration will go live first week of July.

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	Bureau for Behavioral Health.					
KPI 2	By March 31, 2025, implement monthly promotion of the availability of technical assistance and resources (i.e., toolkits) for recovery residence operators and staff through multiple partners and outlets, including social media.	50%	80%			
KPI 3	By July 1, 2025, partner with the West Virginia Association of Recovery Residences and the Fletcher Group to assure development, implementation, and evaluation of a coaching/mentoring process for new and existing recovery residence operators and staff.	0%	0%			
KPI 4	Through December 31, 2025, report quarterly the number of current and future residence operators and staff that receive coaching/mentoring	0%	0%			

	and/or technical assistance.					
Strategy 3	**Facilitate the development and improvement of the utilization of recovery residences in a strong viable continuum of support for people in recovery.**					
KPI 1	By March 31, 2025, develop recommendations for strategies that promote comprehensive, uniform data collection processes among recovery housing residences.	100%	100%			We've been using this data collection platform, REC-CAP, for four years – so we have four years' worth of data. We are currently administering a pilot where we require REC-CAP to access RHP Voucher funds. 14 organizations are enrolled; 10 more are onboarded/ pending fund availability.
KPI 2	By July 1, 2025, conduct outreach and data collection among residential treatment providers and payers (i.e., managed care organizations), to identify barriers, perceptions, and opportunities to	0%	0%			We will be hosting a session at the WVAPP Conference 7/22-7/24 to get feedback from this sector of referral organizations. Meeting with Fletcher Group to discuss survey is scheduled for 6/30.

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	strengthen linkages with recovery residences.					
KPI 3	By October 1, 2025, develop a written report that summarizes the data collected and provides recommendations based on the findings.	0%	0%			

Goal 2: Increase availability of transportation in order to access prevention, early intervention, treatment, and recovery services.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Explore and secure funding opportunities to sustain and expand current transportation models.**					
KPI 1	By March 31, 2025, identify a list of at least three funding opportunities.	66%	100%			
KPI 2	By September 20, 2025, apply and secure funding to sustain and expand current transportation models.	33%	33%			

Goal 3: Improve the quality (experience of riders) and efficiency of transportation services in West Virginia.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Provide education on stigma to encourage expansion of community resources.**					
KPI 1	By March 31, 2025, identify groups to provide stigma education.	0%	100%			
KPI 2	By September 30, 2025, collaborate with the Public Education Subcommittee to identify stigma training resources.	10%	100%			
KPI 3	By December 31, 2025, have at least two education sessions for community groups such as faith leaders.	0%	0%			
Strategy 2	**Identify opportunities to improve efficiency of**					

	transportation from rider and provider perspective.					
KPI 1	By March 31, 2025, create a provider network for the purpose of discussing and identifying efficiency of resources.	100%	100%			
KPI 2	By June 30, 2025, identify regions and coverage areas for potential collaboration within provider networks.	100%	100%			

Goal 4: Improve the quality (experience of riders) and efficiency of transportation services in West Virginia.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Increase employment opportunities and job retention for individuals in recovery for substance use disorders through supported employment, apprenticeships, and**					

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	programs such as Jobs & Hope West Virginia.					
KPI 1	By June 30, 2025, continue to host virtual and in-person trainings with 25 employers across the state to increase the number of existing recovery friendly workplaces.	25%	50%			
KPI 2	By December 31, 2025, assess 15 of the 25 employers to determine recovery friendly workplace employability.	0%	0%			
KPI 3	By December 31, 2025, collaborate with stigma reduction initiatives to provide education and training to 20 employers to support recovery friendly workplaces.	10%	50%			
Strategy 2	**Sustain existing programs that assist individuals in recovery from substance use disorder to obtain employment, including Jobs & Hope, Creating Opportunities for Recovery Employment, and Restore,**					

	Empower & Attain Connections with Hope.					
KPI 1	By December 31, 2025, meet bi-annually to revise and review existing plan to increase collaboration and funding among workforce programs.	10%	50%			
KPI 2	By December 31, 2025, identify and secure two funding resources to ensure the continuation and expansion of existing workforce programs.	50%	50%			

Treatment, Health Systems, and Research

Goal 1: Reduce fatal and nonfatal overdoses by improving access, integration, and continuity of early intervention and treatment for substance use disorder in outpatient and residential facilities and in the community.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	Develop evidence-based recommendations for health care providers, state agency partners, and					

	leaders around the state to address barriers to integrated care.					
KPI 1	By March 31, 2025, collaborate with the Office of Drug Control Policy and its associated agencies (Bureau of Behavioral Health and Bureau for Public Health) to compile historical data over three years to identify service integration for Subcommittee review.	No Progress	Not Reported			
KPI 2	By March 31, 2025, in collaboration with the Law Enforcement and Courts Subcommittees, meet to discuss barriers to treatment experienced by primary care providers, law enforcement, court partners and carceral settings.	No Progress	Not Reported			
KPI 3	By March 31, 2025, plan and conduct a virtual roundtable with the Bureau for Behavioral Health, WV	No Progress	Not Reported			

	Hospital Association, WV Primary Care Association, and WV Behavioral Health Association, to inform assessment of tele behavioral health availability by county in the state					
KPI 4	By March 31, 2025, conduct a call with each Medicaid managed care organization to discuss tele behavioral health coverage and services offered by each.	No Progress	Not Reported			
KPI 5	By July 31, 2025, collaborate with the Office of Drug Control Policy to develop discussion questions for the 2025 Town Hall Meetings Treatment, Health Systems, and Research breakout."	No Progress	Not Reported			
KPI 6	By June 30, 2025, the Subcommittee will convene an in person meeting to develop recommendations and resources needed, for the role and need for	No Progress	Not Reported			

		Q1	Q2	Q3	Q4	
	expansion of new models for integration of care, digital therapeutics, medication-assisted treatment, mobile service delivery, and telehealth.					
KPI 7	By December 31, 2025, develop a toolbox of different digital therapeutics available to support.	No Progress	Not Reported			
KPI 8	By June 30, 2025, identify national and state subpopulation disparities in fatal and nonfatal overdoses (i.e., race, ethnicity, pregnant and parenting women, and others).	No Progress	Not Reported			

Goal 2: Reduce the risk of infectious diseases associated with substance use disorder.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Develop recommendations for health care providers,**					

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	state agency partners, and leaders around the state to integrate screening and rapid access more fully to treatment of infectious diseases for individuals seeking substance use disorder treatment.					
KPI 1	By March 31, 2025, plan and conduct key informant interviews of relevant associations (e.g., WV Behavioral Health Providers Association, WV Rural Health Association, WV Primary Care Association, WV Local Health Departments, and WV Hospital Association) to determine status of related outreach and utilization of screenings (including SBIRT, HIV, hepatitis B & C, STIs, endocarditis, of all clients and specifically individuals with a substance use disorder); clinical screening protocols for the above, and capacity to offer and provide HIV and hepatitis C	No Progress	Not Reported			Dr. Judith Feinberg attended a meeting to speak about public health and disease screening.

	treatment, abscess care, reproductive health care, dental care, and other primary care support in the outpatient and residential substance use disorder treatment setting.					
KPI 2	By June 30, 2025, prepare a written report of findings that Subcommittee reviews and establishes recommendations.	No Progress	Not Reported			
KPI 3	By June 30, 2025, invite the Bureau for Public Health (BPH) to a Subcommittee meeting to understand advances and continued gaps in capacity to rapidly expand community testing services for HIV/ hepatitis C virus, investigation, tracking, management of identified cases, and where these services are offered.	No Progress	Not Reported			
KPI 4	By June 30, 2025, collaborate with the Office of Drug Control Policy, Bureau for Public Health,	No Progress	Not Reported			

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		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
	Bureau for Behavioral Health, WV Hospital Association, and WV Primary Care Association to host a roundtable to discuss conduct and analyze findings for a survey of primary care providers capacity to provide Pre-Exposure Prophylaxis (PrEP) for HIV prevention for high-risk individuals.					
KPI 5	By September 30, 2025, develop recommendations, and resources needed, for providers to effectively reduce the risk of infectious disease among individuals with a substance use disorder.	No Progress	Not Reported			

Goal 3: Increase the availability of services to treat people with substance use disorder through education, use of technology, and workforce expansion.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments

Strategy 1	**Improve client and provider education about substance use disorder, including stigma, in the treatment setting.**					
KPI 1	By April 30, 2025, collaborate with the Marshall Center for Excellence and the BPH Office of Rural Health to understand current efforts, needs, and strategies to enhance workforce development for substance use disorder treatment.	No Progress	Not Reported			
KPI 2	By June 30, 2025, develop time-framed and measurable strategies to improve client and provider education for individuals with substance use disorder, including stimulants and polysubstance use.	No Progress	Not Reported			
Strategy 2	**Strengthen clinical expertise in the state to treat people who use**					

	multiple substances, especially stimulants.					
KPI 1	By December 31, 2025, implement evidence-based strategies developed to train providers to implement treatment with clinical supervision to ensure implementation with fidelity.	No Progress	Not Reported			
KPI 2	By December 31, 2025, begin to disseminate and educate providers on effective clinical applications to care for individuals using stimulants using various approaches (i.e., Project Echo).	No Progress	Not Reported			
Strategy 3	**Provide education about substance use disorder to providers in hospitals, urgent cares, and primary care practices.**					
KPI 1	By December 31, 2025, provide education to 1,000 future and current practitioners about	No Progress	Not Reported			

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	substance use disorder, including education on opioid, stimulants, and polysubstance use, medication-assisted treatment, as well as treatment and recovery capacity in the state					
Strategy 4	**Increase the number of clinical providers in the state to meet the needs of people needing treatment for substance use disorder.**					
KPI 1	Through December 31, 2025, continue loan repayment programs each semester to support clinicians.	No Progress	Not Reported			
KPI 2	Through December 31, 2025, work with the various graduate school programs in social work, counseling, and psychology to increase the number of students entering the substance use disorder field.	No Progress	Not Reported			

Goal 4: Conduct relevant research, evaluation, and dissemination to establish an evidence base and effective approaches to addressing the substance use disorder crisis in West Virginia.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Establish an infrastructure that enables identification, collection, and dissemination of research studies conducted across the state.**					
KPI 1	By March 31, 2025, develop recommendations on a process to collect and share research conducted in West Virginia related to substance use disorder.	No Progress	Not Reported			
KPI 2	By June 30, 2025, establish the platform/ infrastructure to collect and share research.	No Progress	Not Reported			
KPI 3	By September 30, 2025, launch process to collect research related to substance use disorder.	No Progress	Not Reported			

KPI 4	Through December 31, 2025, establish and conduct quarterly statewide webinars highlighting research conducted in West Virginia, related to substance use disorder.	No Progress	Not Reported			
Strategy 2	**Work with universities and research institutions to study the effectiveness of various interventions for combatting the substance use disorder crisis across the spectrum from prevention to recovery.**					
KPI 1	By March 31, 2025, establish a "Research Think Tank" as a standing group that meets regularly.	No Progress	Not Reported			
KPI 2	By September 30, 2025, the "Research Think Tank" will identify current as well as future needs and priorities for research on substance use disorders in West Virginia by developing a "Research Agenda".	No Progress	Not Reported			

Court Systems and Justice-Involved Populations

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

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Identify existing policies and work to overcome barriers in making Naloxone widely available in Department of Corrections and Rehabilitation facilities.**					
KPI 1	By July 31, 2025, identify policies and potential liability or other concerns that act as barriers and inhibit Naloxone accessibility in Department of Corrections and Rehabilitation facilities.	15%	100%			Department of Corrections and Rehabilitation facilities is now represented on the Subcommittee.
KPI 2	By November 30, 2025, create pathways and/or recommend broadening of policy to make Naloxone available and accessible to	0%	100%			

	correctional officers and detained correctional inmates in jails and prisons and upon release to increase life-saving actions.					
Strategy 2	**Determine availability and accessibility of treatment options for non-detained female (youth) status offenders who are at high risk of detention, overdose, and other health-risk behaviors associated with unaddressed substance use disorder.**					
KPI 1	By May 31, 2025, partner with groups serving this population and the Youth Subcommittee.	0%	100%			Partnered with them to look at Aetna Youth Substance Use Disorder Treatment survey data. Ongoing.
KPI 2	By October 31, 2025, map available treatment options for this population.	0%	50%			ODCP map rollout in September.
Strategy 3	**Identify and provide information to the judiciary on alternative sentencing options that could result in**					

	treatment in lieu of incarceration.					
KPI 1	KPI 1: By July 31, 2025, create a jurisdiction-specific resource guide based on type of substance use disorder treatment (inpatient, outpatient, sober living) available in each new judicial circuit.	0%	50%			Dependent on treatment map rollout.
KPI 2	By July 31, 2025, promote treatment provider awareness and fidelity in completing open bed list maintained and disseminated by the Office of Drug Control Policy.	0%	0%			Justin Smith continues to get submissions but needs to disseminate to treatment providers.
KPI 3	By August 31, 2025, partner with the Recovery Subcommittee and Treatment Subcommittee on available case management resources for this population.	0%	0%			
KPI 4	By September 30, 2025, identify case management resources that link incarcerated individuals	0%	50%			

	from the jail to treatment in the community.	 	 			
Strategy 4	**Identify ways in which the whole family affected by an individual family member's substance use disorder and criminal justice and/or child abuse and neglect involvement can receive substance use support services.**					
KPI 1	By March 31, 2025, partner with the Recovery Subcommittee related to their development of a Family Peer Support Specialist to serve affected families.	100%	100%			Amber Blankenship and Dan McCawley attended the February meeting to discuss.
KPI 2	By October 31, 2025, identify pathways to family treatment options to reduce stigma and interrupt the intergenerational risk cycle of substance use disorder for returning citizens directly impacted by substance use disorder and legal and/or	0%	0%			

	child abuse and neglect involvement.					
Strategy 5	**Advocate for expansion of Family Treatment Courts in West Virginia.**					
KPI 1	By April 30, 2025, advocate for funding resources needed to expand Family Treatment Courts across West Virginia.	20%	100%			All available options have been explored.
KPI 2	By October 31, 2025, promote opportunities to increase and enhance partnerships between local stakeholders and Family Treatment Court staff in new and proposed Family Treatment Court locations	0%	0%			
Strategy 6	**Identify gaps in quality treatment availability for specialized populations (youth, pregnant women) with substance use disorder and justice-involvement or at-risk of justice involvement because of substance use disorder.**					

KPI 1	By April 30, 2025, partner with the Youth Subcommittee.	10%	100%			Ongoing partnership established.
KPI 2	Through December 31, 2025, partner with the Pregnant and Parenting Women Subcommittee quarterly	25%	50%			June 26 Subcommittee Chair meeting.
KPI 3	By June 30, 2025, utilize information from Behavioral Health Providers Association about gaps and barriers in available services.	0%	100%			Received this information from Brad Story with West Virginia Behavioral Healthcare Providers Association.
KPI 4	By September 30, 2025, identify best practice-level of care and services for specialized populations to determine feasibility of implementation in West Virginia.	0%	80%			
Strategy 7	**Partner with the Pregnant and Parenting Women Subcommittee to increase awareness of the importance of prenatal care for mothers who use drugs with criminal and/or civil legal involvement.**					

KPI 1	Through December 31, 2025, hold quarterly meetings with the Pregnant and Parenting Women Subcommittee to increase awareness that seeking prenatal care while using drugs is not criminal in West Virginia.	25%	50%			June 26 Subcommittee Chair meeting.
KPI 2	By September 30, 2025, partner with Public Education Subcommittees to promote a stigma-reduction campaign regarding prenatal care for pregnant women with criminal and/or civil legal involvement and stigma reduction for court officials.	0%	50%			
KPI 3	By March 31, 2025, identify obstetric provider resources available to this population to share with jail medical for dissemination to women returning to the community.	100%	100%			Met with WV Perinatal Partnership and disseminated list of obstetrics providers working with Drug Free Moms and Babies.

Goal 2: Construct pathways to employment, housing, transportation, health, and behavioral health services for individuals with substance use disorders and criminal records.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Integrate social determinants of health assessment checklists into point of contact with justice-involved people who use drugs.**					
KPI 1	By June 30, 2025, partner with Public Defender Services and local public defender offices to provide social determinants of health assessment checklists that can be incorporated into jail (first intake) interviews.	50%	50%			Trial period with clients.
KPI 2	By November 30, 2025, determine gaps in resources and linkage across jurisdictions for making referrals to services that bolster social determinants of health.	0%	0%			

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Strategy 2	Promote available educational and employment resources to persons returning to the community with criminal and/or civil legal involvement.					
KPI 1	By February 28, 2025, partner with Jobs and Hope to promote available resources is promoted to persons returning to the community with criminal and/or civil legal involvement.	100%	100%			Deb Harris attended the February meeting.
KPI 2	By July 31, 2025, partner with the Transportation and Employment Workgroup to identify and expand on employers who have a second chance hiring policy.	0%	50%			Invited Ashley Payne to the July meeting.

Law Enforcement

Goal 1: Equip and train law enforcement agencies on key topics related to substance use disorder.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Provide education and training annually that includes but is not limited to, harm reduction, principles, overdose response (i.e., Naloxone and how to access Naloxone), self-care, and stigma).**					
KPI 1	By December 31, 2025, provide at least two training events per year (virtual and/or in-person) for law enforcement.	40%	100%			CIT Summit has 200+ registered with multiple other CIT trainings happening across the state.
KPI 2	Through December 31, 2025, track the number of law enforcement officers trained by county.	25%	50%			

Goal 2: Provide law enforcement with analytical tools, techniques, resources, and policies to improve enforcement of drug laws.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Utilize the Overdose Detection Mapping Application Program to identify drug trafficking routes across state lines and encourage local law enforcement to enter overdose data, as required by law.**					
KPI 1	Through December 31, 2025, continue notification of state and local law enforcement agencies of overdose events and apparent drug routes identifiable via the Overdose Detection Mapping Application Program.	25%	50%			
KPI 2	Through December 31, 2025, track and report the number of notifications sent monthly.	25%	50%			22 spike notifications have gone out this year.
KPI 3	By December 31, 2025, provide up to three trainings to law enforcement on how to use data in/from the Overdose Detection Mapping Application Program platform.	25%	50%			Justin Smith is working with Errol Randle to incorporate ODMAP training into existing training, so it

						reaches more people.
		🟩	🟩			

Goal 3: Continue and strengthen crisis intervention training for law enforcement.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Provide education and training to all law enforcement officers on diversion, trauma-informed care, and cultural sensitivity.**					
KPI 1	By December 31, 2025, provide at least two training events (virtual and/or in-person) that includes Angel, crisis intervention training, Sequential Intercept Model (i.e., Intercept 0), and social determinants of health.	50%	50%			
KPI 2	Through December 31, 2025, document the reach and location of law enforcement officers trained.	25%	50%			

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Goal 4: Strengthen use and understanding of the evidence base/implementation for Handle with Care and diversion programs.

		1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Establish effective processes that enable collection, analysis, and dissemination of data reflecting Handle with Care and other diversion programs (i.e., law enforcement assisted diversion) being implemented in West Virginia.**					
KPI 1	Through December 31, 2025, develop a quarterly written summary of activities for Angel, Handle With Care, and diversion programs (i.e., law enforcement assisted diversion and Police and Peers) that is reviewed by the law enforcement subcommittee.	25%	50%			
KPI 2	By December 31, 2025, based on the review of activities and data, develop strategies for sharing and dissemination of the data as well as written recommendations in 2025 and for the 2026 Plan.	25%	50%			

Public Education

Goal 1: Dissemination of the subcommittee-developed training and database from 2023-2024.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Disseminate the public education training and StigmaFreeWV database of trainings through the prevention lead organizations and other community groups.**					
KPI 1	Through December 31, 2025, build community capacity by ensuring all Prevention Lead Organizations by region have received Training of Trainers.	100%	100%			
KPI 2	Through. December 31, 2025, identify counties with robust coalitions that will require training.	100%	100%			

KPI 3	Through December 31, 2025, integrate interviews and training clips into at least three training events to address stigma.	90%	100%			
KPI 4	By December 31, 2025, develop materials for each of the previously identified key populations and specific profession groups and align them with existing video modules.	25%	25%			
Strategy 2	**Develop methods to integrate stigma-free campaigns and education into West Virginia communities through beautification projects, collaboration with schools and higher education, the Prevention Lead Organizations and community coalitions, and personal stories of recovery and home both in-person and online.**					
KPI 1	By December 31, 2025, develop an integrated statewide rollout for the StigmaFreeWV training database and Breakthrough Addiction campaign.	50%	75%			
KPI 2	By December 31, 2025, identify three communities in need of targeted stigma interventions at the community level and provide technical assistance to their community on implementation or strategy development.	100%	100%			

Goal 2: Identify, integrate, and develop a consistent statewide messaging, communication, marketing, and outreach campaign to address stigma in youth.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Develop training to address stigma in youth populations.**					
KPI 1	By December 31, 2025, a small group of subcommittee members will work to develop a stigma training for youth.	0%	10%			
KPI 2	Through December 31, 2025, collaborate with the Youth Subcommittee for input on youth training.	0%	0%			
Strategy 2	**Develop collaborative strategies to reduce duplication and improve scope and reach of educational services across the subcommittees.**					
KPI 1	By December 31, 2025, identify targeted messaging that incorporates mental health and alcohol and other drugs for youth.	0%	0%			
KPI 2	By December 31, 2025, integrate stigma-free messaging around Naloxone and laws.	0%	0%			

KPI 3	By December 31, 2025, develop a toolkit for having "frank conversations" with youth focused on the intersection of social determinants of health, justice, incarceration, discrimination, substance use disorder, stigma, mental health, and harm reduction (safe use, testing) with resources for how to help a friend or family member.	0%	0%			

Recovery Community

Goal 1: **Ensure equitable access to the full continuum of care for individuals with substance use disorder who are in recovery, including entry into treatment or transition out of treatment and into the workforce with continued support (i.e., harm reduction strategies, detox, inpatient, outpatient, recovery residence, peer recovery support specialists, medications, employment support, and independent living with structured housing).**

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Empower consumers with the autonomy to determine their recovery pathway through an informed consent process that prioritizes person-centered care.**					
KPI 1	By July 31, 2025, collaborate with the West Virginia Department of Human Services to promote adoption	50%	50%			

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	of a West Virginia model that includes a standard written consent and statewide tools/resources for use by treatment and recovery facilities. "					
KPI 2	By June 30, 2025, collaborate with the West Virginia Department of Human Services to develop a memorandum of understanding between the Bureau for Medical Services, the Recovery Subcommittee, and managed care organizations to incorporate education and training in treatment and recovery facilities.	10%	25%			
KPI 3	By December 31, 2025, collaborate with the West Virginia Department of Human Services to explore that written consent be used as a requirement of all contracts and funding awards.	0%	0%			
KPI 4	By December 31, 2025, collaborate with the Office of Drug Control Policy to evaluate processes and policies to provide individuals with all treatment options upon admission (i.e., strengths/weaknesses, medications for substance use disorder, abstinence, harm reduction strategies, faith-based, contingency management, etc.) and develop a written report of findings.	0%	0%			

KPI 5	By December 31, 2025, collaborate with the West Virginia Department of Human Services to assess feasibility, and if feasible, develop a consumer survey as an appendix to funding awards to understand effectiveness of client autonomy and prioritization of person-centered care.	0%	0%			

Goal 2: **Identify, develop, and expand evidenced-based support systems for families of individuals experiencing substance use disorder and collateral consequences.**

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**In collaboration with the Office of Drug Control Policy and Department and Bureau for Behavioral Health, the Recovery Subcommittee will engage behavioral health providers for a more robust family service program.**					
KPI 1	By March 1, 2025, work with the West Virginia Certification Board for Addiction and Prevention Professionals to identify, and/or develop, a curriculum to meet the standards of a Family Peer Support position in West Virginia.	0%	100%			
KPI 2	By July 1, 2025, work with the Office of Drug Control Policy and the West Virginia Department of Human Services to develop a strategic plan to draft	0%	10%			

	legislation to support Family Peer Support Certification.					
KPI 3	By December 31, 2025, identify a champion in the state legislature to support the codification of the Family Peer Support certification.	0%	20%			

Goal 3: **Ensure that populations who are justice-involved and who experience substance use disorder receive access to treatment, wrap-around services, and reentry integration supports to reduce recidivism.**

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**The Recovery Subcommittee will collaborate with the Courts & Justice-Involved Populations Subcommittee on associated goals, strategies, and key performance indicators.**					
KPI 1	By December 31, 2025, the Recovery Subcommittee will invite the Courts & Justice-Involved Populations Subcommittee Chair (or designated representative) on a bi-annual basis to Recovery Subcommittee meetings to identify opportunities for collaboration and synergy.	50%	100%			
KPI 2	By December 31, 2025, the Recovery Subcommittee will explore development of a letter of support with the Courts & Justice-Involved Populations Subcommittee to advocate for funding for needed	50%	50%			

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	interventions to meet identified key performance indicators and support individuals who are justice-involved and experiencing substance use disorder.					
Strategy 2	**Improve communication with the West Virginia Department of Corrections and Rehabilitation, regional jails, Federal Bureau of Prisons, and community-based organizations that offer re-entry support for justice-involved persons.**					
KPI 1	By December 31, 2025, the Recovery Subcommittee will collaborate with the Office of Drug Control Policy to explore targeted case management within West Virginia correctional facilities to better communicate with outside community supports for individuals with substance use disorder.	0%	100%			
KPI 2	By March 31, 2025, the Recovery Subcommittee will invite the Chief Executive Officer of PSIMED Corrections, Ltd. to a Recovery Subcommittee meeting for the purposes of synergy between behavioral health services delivered in state correctional facilities to understand the prevalence of substance use disorder and services offered within correctional facilities.	100%	100%			
KPI 3	By December 31, 2025, the Recovery Subcommittee, Office of Drug Control Policy, and community partners (i.e., PSIMED Corrections, Ltd.)	0%	25%			

	will explore opportunities to improve re-entry services, evidenced by a written plan.		🟩			
KPI 4	By December 31, 2025, the Recovery Subcommittee will explore funding to support implementation of the written plan developed to improve re-entry services.	0%	0%			

Pregnant and Parenting Women

Goal 1: Promote prevention, treatment, and care coordination for pregnant and parenting women.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Increase standardized screening from 60% to 75% to identify pregnant and parenting women with substance use disorder.**					
KPI 1	Through December 31, 2025, continue to partner with the West Virginia Perinatal Partnership to support collection and analysis of initial survey data from OB/GYN providers on their screening practices and identify barriers to completion of the PRSI (write this out) in their practices.	100%	100%			

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KPI 2	By June 30, 2025, develop a set of written recommendations based on survey findings to optimize standardized screening.	20%	50%			
KPI 3	Through October 31, 2025, share key findings of the survey and recommendations developed as result of the survey with stakeholders and elicit feedback, including but not limited to Office of Maternal Child and Family Health, Maternal Risk Screening Advisory Council, American College of Obstetrics and Gynecology West Virginia, and West Virginia Perinatal Partnership.	20%	20%			
KPI 4	By December 31, 2025, synthesize feedback from stakeholders to inform next steps and development of strategies to continue increase of screening practices.	0%	0%			
Strategy 2	**Increase capacity to provide treatment and recovery support across West Virginia (for all substances) for pregnant and parenting women, including those who experience a return to use.**					
KPI 1	Through March 31, 2025, review housing recommendations to inform development of strategies to increase capacity.	50%	50%			

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KPI 2	By April 30, 2025, plan and implement a one-day meeting to advance the work of Strategy 2, engaging other subcommittees such as Prevention, Treatment, Public Education, and Recovery.	100%	100%			
Strategy 3	**Develop and implement a campaign to educate providers, key stakeholders, and communities (PPW) on the risks of alcohol use, cannabis, nicotine/tobacco during pregnancy (especially the third trimester) to address current rates of fetal alcohol exposure, cannabis exposure, and nicotine/tobacco exposure.**					
KPI 1	By April 30, 2025, include implementation of education campaigns as a topic of discussion at the meeting with the other subcommittees mentioned in Strategy 2.	100%	100%			
KPI 2	By June 30, 2025, identify potential funding sources to support an educational campaign.	70%	70%			
KPI 3	Through December 31, 2025, continue to disseminate issue briefs on topics mentioned in Strategy 3 to providers such as the incidence of infants exposed to alcohol in the last 4-6 weeks of pregnancy and post them on Help and Hope WV.	0%	50%			
KPI 4	By December 31, 2025, choose an existing social media toolkit based on the issue briefs mentioned in KPI 2 and KPI 3.	0%	50%			

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KPI 5	By December 31, 2025, present to providers on the effects of alcohol, cannabis, and nicotine/tobacco at statewide meeting i.e. West Virginia Perinatal Summit, Appalachian Addiction Conference and document number of providers reached.	20%	20%			

Youth

Goal 1: Support statewide prevention efforts.

		Q1 Progress	Q2 Progress	Q3 Progress	Q4 Progress	Comments
Strategy 1	**Collaborate and support the Prevention Subcommittee 2025 State Plan.**					
KPI 1	Through December 31, 2025, meet quarterly with the Prevention Subcommittee to discuss the existing prevention framework, 2025 Plan efforts and where support by the Youth Subcommittee is needed.	25%	50%			
Strategy 2	**Document the current youth treatment and recovery service ecosystem in West Virginia.**					
KPI 1	KPI 1: By June 30, 2025, develop a data profile for WV youth that reflects indicators such as suspected overdoses, suicide, etc.	10%	25%			

KPI 2	By June 30, 2025, document existing treatment and recovery services for youth.	20%	50%			
KPI 3	By June 30, 2025, conduct key informant interviews with stakeholders such as regional youth service centers to further understand what is available and where there are gaps for youth treatment and recovery services.	0%	25%			
KPI 4	By April 30, 2025, meet with Treatment, Public Education, and Courts subcommittees to discuss improving treatment and recovery services for youth.	50%	50%			
KPI 5	By August 31, 2025, develop and define the youth substance use disorder ecosystem that exists in West Virginia for youth treatment and recovery services (i.e., primary care, regional youth service centers, expanded school mental health).	0%	25%			
KPI 6	By October 31, 2025, develop a written report and recommendations for youth treatment and recovery services.	0%	0%			
KPI 7	By November 30, 2025, present all findings and recommendations to the Governor's Council to inform them of next steps.	0%	0%			

Appendix A: Accomplishments

Quarter 1 Accomplishments

During the first quarter of 2025, a total of 13 (9%) KPIs were completed. Once complete, these KPIs are often ongoing but may also provide the foundation for advancing work of a subsequent KPI as a next step. The section below highlights accomplishments for KPIs measured at 100% at the end of Quarter 1 (January 1, 2025, to March 31, 2025).

COMMUNITY ENGAGEMENT AND SUPPORT
- Developed recommendations for strategies that promote comprehensive, uniform data collection processes among recovery housing residences.
- Created a provider network for the purpose of discussing and identifying the efficiency of resources.
- Identified regions and coverage areas for potential collaboration within provider networks.

COURTS AND JUSTICE-INVOLVED POPULATIONS
- Partnered with the Recovery Subcommittee related to the development of a Family Peer Support Specialist to serve affected families.
- Identified obstetric provider resources available to this population to share with jail medical for dissemination to women returning to the community by meeting with the West Virginia Perinatal Partnership.
- Partnered with Jobs and Hope, the program promotes available resources is promoted to persons returning to the community with criminal and/or civil legal involvement.

PUBLIC EDUCATION
- Built community capacity by ensuring all Prevention Lead Organizations by region have received Training of Trainers.
- Identified counties with robust coalitions that will require training.

- Identified three communities in need of targeted stigma interventions at the community level and provide technical assistance to their community on implementation or strategy development.

RECOVERY COMMUNITY

- Invited the Chief Executive Officer of PSIMED Corrections, Ltd., Terry Rusin, to a Recovery Subcommittee meeting for the purposes of synergy between behavioral health services delivered in state correctional facilities to understand the prevalence of substance use disorder and services offered within correctional facilities.

PREGNANT AND PARENTING WOMEN

- Partnered with the West Virginia Perinatal Partnership to support the collection and analysis of initial survey data from OB/GYN providers on their screening practices and identify barriers to completion of the PRSI (write this out) in their practices.
- Had a one-day meeting with all other Subcommittee Chairs with insight asked from Prevention, Treatment, Public Education, and Recovery.
- Had a one-day meeting with all other Subcommittee Chairs to discuss education campaigns.

Quarter 2 Accomplishments

During the second quarter of 2025, a total of 30 (21%) KPIs were completed. Once complete, these KPIs are often ongoing but may also provide the foundation for advancing the work of a subsequent KPI as a next step. The section below highlights accomplishments for an additional 17 KPIs measured at 100% at the end of Quarter 2 (April 1, 2025, to June 30, 2025).

PREVENTION

- Trained at least 20 prevention coalitions on the Community Readiness Model.
- Collaborated with stakeholders and organizations to share draft policies from communities.
- Developed a comprehensive training curriculum on advocacy strategies.

COMMUNITY ENGAGEMENT AND SUPPORT

- Identified a list of at least three funding opportunities and applied for them.
- Identified groups to provide stigma education to such as Transportation Workgroup members' organizations and those receiving Recovery Friendly Employer training.
- Collaborated with the Public Education Subcommittee to identify stigma training resources.

COURTS AND JUSTICE-INVOLVED POPULATIONS

- Identified policies and potential liability or other concerns that act as barriers and inhibit Naloxone accessibility in Department of Corrections and Rehabilitation facilities.
- Created pathways and/or recommended broadening of policy to make Naloxone available and accessible to correctional officers and detained correctional inmates in jails and prisons and upon release to increase life-saving actions.
- Partnered with Aetna and the Youth Subcommittee to discuss youth treatment options.
- Advocated for funding resources needed to expand Family Treatment Courts across West Virginia.
- Established an ongoing partnership with the Youth Subcommittee.
- Utilized information from the Behavioral Health Providers Association about gaps and barriers in available services.

LAW ENFORCEMENT

- Provided at least two training events on stigma, Naloxone, and harm reduction (virtual and/or in-person) for law enforcement by use of Crisis Intervention Training.

PUBLIC EDUCATION

- Integrated interviews and training clips into at least three training events to address stigma.

RECOVERY COMMUNITY

- Worked with the West Virginia Certification Board for Addiction and Prevention Professionals to identify, and/or develop, a curriculum to meet the standards of a Family Peer Support position in West Virginia.
- Invited the Courts & Justice-Involved Populations Subcommittee Chair (or designated representative) on a bi-annual basis to Recovery Subcommittee meetings to identify opportunities for collaboration and synergy.

- Collaborated with the Office of Drug Control Policy to explore targeted case management within West Virginia correctional facilities to better communicate with outside community supports for individuals with substance use disorder.