

DHFS - Project Charter	
Title:	SBIRT Governor's Policy Subcommittee to Increase Patient Access to SBIRT Services
Justification:	SBIRT services need to be tailored to specific populations to increase access to and the effectiveness of services.
Description:	Disparities in public health outcomes around alcohol and drug issues are evident in Wisconsin. SBIRT is a population health approach to addressing these issues in primary care and public health settings. This subcommittee is charged with addressing barriers to services for populations that are being underserved by WIPHL by developing strategies and recommendations for reducing barriers and delivering services in an age-appropriate, culturally and linguistically competent manner.
Goals / Objectives:	Work with a multidisciplinary group to identify and articulate age-appropriate best practices around SBIRT service-delivery for adolescents to increase access to services and the effectiveness of service delivery. Objective 1 - Develop a plan with clear measurable objectives and strategies for delivering SBIRT services to adolescents in grant year 3.
Measurement Of Success:	The ability for WIPHL health educators to deliver SBIRT services tailored to adolescents in grant year 3.
Timeframe:	Improving access for adolescents to services will be addressed in the 2007/2008 grant year.
Project Organization:	Fall/Winter 2007- Appoint a Chair Chair can opt to appoint a co-chair or not Chair will set a meeting schedule for 2008 Prior to the initial meeting all subcommittee members will watch the WIPHL orientation video via the website www.wiphl.com under "About Us." An initial face-to-face meeting of 2 hours will be convened to flesh out a work plan and committee member assignments. Subsequent monthly meeting will be held with the option to meet face-to-face or via teleconference. The subcommittee will be comprised of 5 -10 people
Communication:	All subcommittees will publish an agenda and meeting location 1 week in advance of the meeting and will adhere to the meeting schedule initially established by the subcommittee. E-mail will be used for meeting notification and agenda and minutes distribution. The chair will report to the SBIRT Governor's Policy Committee on a quarterly basis. Stakeholders on the subcommittee and represented by the

	<p>subcommittee will receive communications. Electronic communication will be used to provide timely updates between regularly scheduled meetings.</p>
Resources:	<p>Budget - Participants need reimbursement for mileage to and from meetings, teleconference costs, and meeting supplies. Staffing- A WIPHL staff member can assist the chair in coordinating meetings. <u>Key Stakeholders</u>- DHFS, DPI, pediatric care providers, adolescent AODA Tx providers, parents, youth - possibly from Recovery HS</p>
Deliverables:	<p>A written plan for delivering SBIRT services to adolescents in primary care and public health settings.</p>
Issues And Constraints:	<p>Currently, there is scant research to guide the delivery of SBIRT services.</p>