Committee Planning (7 Different Committee Planning Committees)

Link to the presentation - [Job Descriptions Presentation](https://docs.google.com/presentation/d/1BtGlgcnTMtgATGV1q4SM_bNPIiPf2VzcSMRk3y84xyI/edit)

Prevention Committee -

* Christina Dyer Drobnack (NYSACHO) going to see if others could participate in other committees

Support for Recovery Peer Workforce

Treatment, Recovery, and Harm Reduction

Increased Resources and Grants

Labor outreach

Employer outreach

Symposium/Conference Planning

We could pare down some of these to 5 committees possibly? Some overlap?

We need to have time within the steering committee to have time to come back together and report out

A suggestion to pare down to four committees: Sign up form sent out to everyone!

1. **Labor Outreach and Training -**
2. **Employer Outreach and Training** - John Roarke, Julie Dostal,
3. **Symposium/Conference Planning -** Jeanette Zoeckler (OHCC/OHCN)
4. **Funding committee -** Need to recruit for this committee (recovery funding, pretty broad COVID recovery funding)
5. **Executive/Coordinating committee -** where the activities of the different committees are being directed and coordinated. This full steering committee meeting could do that.

Opening Paragraph for Committee Sign On Form:

First off, we’d like to thank you for participating in the NYS Coalition to Prevent Addiction and Support Recovery in Employment. The work we have done so far to gather folks from all different sectors has been tremendous! As we begin the next phase of coalition building, The Steering Committee thought to create five different committees for our coalition.

1. Labor Outreach and Training
2. Employer Outreach and Training
3. Symposium/Conference Planning
4. Funding Committee

These committees working together will bring the coalition to its ultimate goal of passing Recovery Friendly Workplace legislation in NYS. Please use the form below to decide which committee you think you’d be best suited for based on your interested.

In category 1 and 2, and training to the first two committees.

Get on the same page about what our training will be like? How will we train these folks? If we will go that route, we need some funding from the public sector, what a PAC?

Where do peers fit in here? Do peers integrate everywhere?

What is the incentive conversation for offering training for these employers and employees? How will we provide an incentive for this work? Has to be very relevant for the work they are doing. Maybe we want to focus on smaller employers to address employers

National Safety Calculator for the cost of not doing anything for the employers.

Potential Topics for Next Time?

In the chat: **Michael Galipeau**

What about making a committee that is focused on data-driven response which would cover much of the public health integration

We need to figure out what are the metrics that need to be measured to demonstrate that our efforts are effective, and how to integrate data collection into the financial incentives to implement these programs that are low barrier and also effective in demonstrating the efficacy of these policy changes.

This could include an annual point in time assessment to measure key indicators of success, whatever we determine those are.

**Cristina Dyer Drobnack**

Thank you for bringing up the need for metrics/data. That is very important for funders and for public health.

And **Julie Dostal:**

We just did a needs assessment for upstate New York employers. There is a willingness and a need for peers to be placed in places of employment. 200+ Employers

**Michael Galipeau**

I think there is a need to evaluate the capacity of low threshold employment opportunities for people who use drugs as well. If practicing harm reduction is determined to be a pathway of recovery, then offering opportunities for reintegration is vital to reducing the severity of use, risk for overdose, and improving quality of life indicators amongst critically vulnerable populations. At the national union, we have a number of organizations that are focused on creating low threshold employment opportunities to support the stabilization of individuals using drugs, and this creates a smoother pathway for individuals to reach longer term stability and community reintegration. We are still working to complete our Work-Life Balance curriculum that is intended to be informative to employers to support employees who have returned to use and not interested in pursuing abstinence or treatment.