

Substance Misuse Prevention Oversight and Advisory Council (SMPC)
September 2026 Meeting Minutes

Date: September 28, 2026 Time: 1-2:50 PM	Mtg. Facilitator: Dr. Rick Hildebrant Mtg. Recorder: Heather Michaud Where: Microsoft Teams
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	Name	Organization and Role
X	Rick Hildebrant	Department of Health, Chair
X	Amy Brewer	Northwestern Medical Center, Vice Chair
	Mourning Fox	Department of Public Safety, Executive Committee Member
X	Monica Hutt	Agency of Administration, Executive Committee Member
	Courtney O'Brien	Representing Courtney O'Brien, Agency of Education, Executive Committee Member
X	Kimberley Diamond	Big Brother Big Sister, Member
X	Kheya Ganguly	Department of Mental Health, Member
	Maryann Morris	The Collaborative, Member
X	Janet Potter	Hartford Middle and High School, Member
X	John Searles, Ph.D.	Department of Health (Retired), Member
X	Olivia Terranova	Vermont Judiciary, Member

Others Present: Abby Becker, Sabra Jones, Beth Keister, Galaxia Pistole, Katie Stetler, Rhonda Williams

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Agenda Item	Lead	Minutes
Welcome and Introductions	Dr. Hildebrant	The meeting opened with greetings and introductions.
Review and Approve July 2026 Minutes	Dr. Hildebrant	- Quorum check – confirmed. - Janet Potter moved, seconded by Monica Hutt, to approve the July Minutes as presented. The motion passed unanimously.
Discuss Potential New SMPC Members	Dr. Hildebrant	- Dr. Hildebrant noted that although the Executive Committee is formally responsible for appointing new members, leadership wanted the full committee to weigh in before the Executive Committee votes later in this meeting. - Three prospective members were discussed for seats that are required by statute and currently vacant: - Dr. Michelle Shepard, a pediatric provider at UVM, was proposed to fill the pediatric provider role. - Jess Farnsworth, a Community Relations Coordinator at Northwestern Medical Center, was proposed to fill the communications role. - Liberty Belote, a youth engagement specialist for UP for Learning, was proposed to fill the youth services role. Council members shared support and relevant experience for each candidate. - Discussion about broader membership needs ensued. Kheya Ganguly raised the importance of representation from LGBTQIA+, BIPOC and other marginalized communities, emphasizing that health data indicates significant disparities and higher risk among these populations. She also raised the need for greater attention to alcohol-related concerns. Dr. Hildebrant agreed and noted concerning trends in the Youth Risk Behavior Survey (YRBS), especially for women, students on IEPs, and marginalized groups. - Amy Brewer inquired as to what other vacancies exist beyond the three being discussed today. Katie Stetler noted the existence of an Excel spreadsheet identifying open positions. She will follow up with Courtney O'Brien regarding outstanding vacancies and recruitment efforts. Monica Hutt suggested circulating the spreadsheet to the group.
Finalize SMPC Strategies Including Policy Role	Dr. Hildebrant	Katie Stetler shared draft strategies developed with the SMPC Executive Committee. Long-term goals were reviewed. Katie clarified that the goals were developed by the Council based on its legislative charge rather than being stated verbatim in statute. The newly proposed strategies are intended to translate the broad goals into more specific and actionable work. Monica Hutt and Janet Potter expressed appreciation for the more structured and actionable

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		framing of the proposed new strategies compared to past approaches. • A major part of the discussion focused on SMPC's policy role. Members questioned whether the Council should only respond to proposed policies or also recommend new ones. Members noted that SMPC has historically done both – it has responded to proposed legislation and also included policy recommendations in its reports. It was pointed out that this is different than drafting legislation or finding legislative sponsors which has typically not been SMPC's role. • There was discussion about whether to add a separate strategy addressing policy recommendations or incorporate that responsibility into an existing strategy. Members clarified that the Council's statutory reporting responsibilities include recommendations to both the Governor and General Assembly and agreed that this responsibility should be reflected in the strategies. • The discussion ended with consensus in support of the proposed strategies with a modification to more clearly incorporate SMPC's role in policy education and recommendations, potentially within the first strategy.
Brainstorm/Refine Performance Measures: if we're effective at implementing our strategies, what does success look like?	Dr. Hildebrant	• The discussion focused on performance measures related to newly refined strategies. Katie Stetler introduced a results-based accountability framework centered on three questions: How much did we do? How well did we do it? Is anyone better off? and asked the group to brainstorm how success should be measured. • Monica Hutt noted the Council's strategies are very process-oriented, making the "better off" measure difficult or beyond the Council's scope of responsibility and control. • Several members emphasized distinguishing population health indicators (e.g., YRBS data) from performance measures the Council can directly influence. • Members suggested tracking the Council's impact on policy – such as the number of laws or policy decisions the Council influences. The annual report with recommendations was identified as an important concrete product that incorporates much of the Council's work. • There was discussion about improving the Council's ability to provide legislators with timely, credible information. Janet Potter proposed creating a database of subject matter presenters or experts that could be contacted when legislators are drafting or reviewing bills. Opportunities and challenges (e.g., maintenance, timeliness) for that idea were discussed. • Reactive versus proactive legislator education was discussed. • Amy Brewer suggested better utilization of the Council's annual report – sharing it more widely, highlighting identified gaps, promoting recommendations, and ensuring role descriptions are included.

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		- Members suggested reestablishing previously active subcommittees (policy, equity, prevention). This was seen as a way to accomplish more detailed work between full Council meetings. There was consensus to revisit subcommittee structure once new members have joined. - Katie Stetler offered to draft potential performance measures based on today's discussion, balancing meaningfulness with feasibility of data collection. Katie also noted the need to identify concrete annual activities aligned with each strategy.
Annual Report Update	Dr. Hildebrant	- Katie Stetler presented an outline of the upcoming annual report, explaining what is required by statute and how the report will be structured. DSU staff will draft the sections addressing statewide data and use of prevention funding, and Katie will prepare the sections focused on the Council's work. The goal is to have a draft available before the October meeting so Council members can provide substantive feedback. - Much of the discussion focused on whether the report should give greater attention to alcohol use and alcohol-use disorder. Members highlighted: - Concerns around increasing alcohol-related DUIs, community impacts, and racialized responses. - Youth alcohol trends slightly increasing. - Need for renewed statewide prevention and social-norming efforts. - Identifying gaps across systems (schools, courts, media, enforcement). - The discussion supported giving alcohol greater attention. Dr. Hildebrant suggested it could be highlighted in the annual report and raised with appropriate partners so alcohol-use disorder receives focused education and attention with other substances. Katie Stetler noted the discussion as a useful example of a broader challenge for the Council: how to take an issue members identify, connect it to the Council's strategies, and turn the discussion into a tangible action or recommendation. - Discussion continued as to how the Council determines what prevention needs are not being met. Amy reflected that presentations from the VPLOs had helped members understand existing activities, but the Council had not developed a clear process for comparing those activities against data and community needs to determine what was missing. She said with only six meetings each year, presentations consumed substantial meeting time without necessarily leading to gap identification or action. Monica Hutt agreed, noting the problem may have been the questions asked of the prevention partners. Going forward, she suggested asking them to report on what they are seeing in their communities, what gaps remain, and what emerging

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		issues they see on the horizon rather than asking them to report on their own performance. Dr. Hildebrant suggested the use of community needs assessments rather than relying on program performance presentations and said he would talk with DSU staff about the best way to bring that information to the Council.
Public Comment	Dr. Hildebrant	None.
Executive Session (for EC to vote on new members)	Dr. Hildebrant	Dr. Hildebrant clarified that what was initially referred to as an executive session was actually an open meeting of the Executive Committee that had been publicly warned and placed on the agenda in order to comply with open meeting law requirements. The purpose was to vote on three recommended new SMPC members. Janet Potter moved, seconded by Amy Brewer, to approve the three new SMPC members including Dr. Michelle Shepard, Liberty Belote, and Jess Farnsworth. The motion passed unanimously. With no additional business, the open meeting of the Executive Committee concluded.
Adjourn	Dr. Hildebrant	The meeting adjourned at 2:45 p.m.