

MINUTES
SUBSTANCE ABUSE SERVICES COUNCIL
APRIL 6, 2016
VIRGINIA ASSOCIATION OF COMMUNITY SERVICES BOARDS
RICHMOND, VIRGINIA

MEMBERS PRESENT:

Stephanie Arnold, *Department of Criminal Justice Services (DCJS)*
Tia Campbell, *Department of Education (DOE)*
Henry Harper, *Virginia Foundation for Healthy Youth (VFHY)*
Brian L. Hieatt, *Virginia Sheriffs' Association*
The Honorable M. Keith Hodges, *Virginia House of Delegates*
Parham Jaber, MD, *Department of Health (VDH)*
Jamie MacDonald, *Virginia Association of Community Services Boards (VACSB-Prevention Council)*
The Honorable Delores L. McQuinn, *Virginia House of Delegates*
Sandra O'Dell, *Virginia Association of Community Services Boards (VACSB)*
Ron Pritchard, *Virginia Association of Addiction Professionals (VAAP)*
Patricia Shaw, *Virginia Drug Court Association (VDCA)*
Jim Tobin, *Virginia Association of Community Services Boards (VACSB)*
W. Eddie Wirt, *Alcoholic Beverage Control (ABC)*
The Honorable Jennifer T. Wexton, *Virginia State Senate*
William H. Williams, Jr., *Virginia Association of Community Services Boards (VACSB-SA Council)*
Diane Williams Barbour, *Virginia Certification Board (VCB)*

GUESTS:

K. Carter Batey, Jr., *Children's National*
Mark Blackwell, *Virginia Association of Drug and Alcohol Programs (VADAP)*
Gail Taylor, *Department of Behavioral Health and Developmental Services (DBHDS)*
Marla Watson, *Substance Abuse Free Environment (SAFE)*
Regina Whitsett, *Substance Abuse Free Environment (SAFE) and CCoVA*

STAFF:

Margaret Anne Lane, *Department of Behavioral Health and Developmental Services (DBHDS)*

- I. WELCOME AND INTRODUCTIONS:** The meeting was called to order by in-coming Council Chair, Sandra O'Dell. She was welcomed by the former Chair, Will Williams, and the Council members. Ms. O'Dell thanked Mr. Williams for his leadership and service to the Council. Mr. Williams will continue to serve on SASC as the representative of the VACSB Substance Abuse Council. Ms. O'Dell introduced herself and affirmed her commitment to the Council's work. She welcomed members and guests and asked all attendees to introduce themselves. Ms. O'Dell introduced Jennifer Faison, Executive Director of VACSB, who welcomed Council members and guests and spoke briefly about recent VACSB activities.
- II. REVIEW & APPROVAL OF MINUTES OF AUGUST 5, 2015 MEETING:** A motion was made by Ron Pritchard and seconded by Will Williams to accept the minutes as presented. The motion was carried.

III. PUBLIC COMMENT:

Regina Whitsett: Due to high number of heroin overdoses in Chesterfield, the Chesterfield County Police Department joined forces with Chesterfield SAFE and other organizations to form the Central Virginia Opioid & Heroin Prevention Task Force, which has been meeting monthly since July 2015. On April 27th, from 1:30 p.m. to 4:00 p.m., the Law Enforcement Committee of the task force will sponsor Chief Leonard Campanello from Gloucester, Massachusetts, to talk about the angel initiative, which is an alternative form of policing to get heroin users help and treatment as opposed to incarceration.

Ron Pritchard: The Virginia Summer Institute for Addiction Studies (VSIAS) will take place July 11-13, 2016, at Colonial Williamsburg's Woodlands Hotel in Williamsburg. The keynote speaker is Cardwell C. Nuckols, Ph.D. For more information, visit www.vsiias.org.

Henry Harper: The Annual Reduce Tobacco Use Conference will take place April 25-26, 2016, at the Crystal Gateway Marriott in Arlington. The keynote speaker is Brian King, Ph.D. For more information, visit www.reducetobaccouse.org.

IV. **OLD BUSINESS:** There was no Old Business.

V. NEW BUSINESS:

➤ **PRESENTATION: “NEW INITIATIVES IN BEHAVIORAL HEALTH WELLNESS”**

Gail Taylor, Director, Behavioral Health Wellness

Department of Behavioral Health and Developmental Services

Ms. Taylor's presentation will be posted to the DBHDS website. Her key points were:

Prevention

- Prevention has become an office in the Department; name changed to Behavioral Health Wellness.
- Monitor 40 CSBs with prevention set-aside, as well as mental health first aid and suicide prevention efforts for the department; promote mental health.
- Challenges: difficult time understanding prevention; more than just education; needed along with other strategies.
- All funding comes from SAMHSA.

Behavioral Health Continuum of Care Model

- Promotion: These strategies are designed to create environments and conditions that support behavioral health and the ability of individuals to withstand challenges. Promotion strategies also reinforce the entire continuum of behavioral health services.
- Prevention: Delivered prior to the onset of a disorder, these interventions are intended to prevent or reduce the risk of developing a behavioral health problem, such as underage alcohol use, prescription drug misuse and abuse, and illicit drug use.
- We are shifting the paradigms to include integration of substance abuse prevention, mental health promotion, and primary care across the lifespan.
- Wellness means overall well-being. It incorporates the mental, emotional, physical, occupational, intellectual, and spiritual aspects of a person's life.

- Mounting evidence indicates that the populations affected by behavioral health problems overlap significantly, as do the factors that contribute to these problems. Consequently, improvements in one area often have direct impacts on the other.

Capacity Building

- Partnered with Virginia Foundation for Healthy Youth (VFHY) to provide Substance Abuse Prevention Skills Training (SAPST) to CSBs and their partner coalitions.
- Provided scholarships to each CSB for the CSB Prevention leader to attend the 2014 and 2015 National Prevention Network Research Conference.

➤ **REPORTS AND DISCUSSION ABOUT THE 2016 GENERAL ASSEMBLY AND SUBSTANCE ABUSE RELATED LEGISLATION**

Council Chair O'Dell thanked Senator Wexton and Delegates McQuinn and Hodges for their support of SASC-related issues during the General Assembly Session. She noted that there were some significant legislative changes pertaining to prescription monitoring and substance abuse issues in general. Chair O'Dell highlighted the legislative information included in members' packets.

Senator Wexton stated that 4.8 million dollars in additional support services money will be available over the next two years (2.4 million dollars per year) for treating substance use disorders. Senator Wexton described one of the bills she introduced, *SB 287 Prescription Monitoring Program; reports by dispensers shall be made within 24 hours or next day*. The bill, which pertains to the prescription monitoring program (PMP), revises the time frame for PMP reports, cutting the time by which dispensers have to report to PMP about dispensing scheduled substances from 7 days to 24 hours or the next business day. Senator Wexton noted that this change was a recommendation from the Governor's Task Force on Prescription Drug and Heroin Abuse in the Commonwealth. Ms. Whitsett asked about PMP reporting across state lines. Delegate Hodges noted that Virginia has relationships with 24 states, including most of the bordering states, allowing pharmacists to check PMP reporting in those states. He stated that the Board of Medicine will work with PMP to develop thresholds for prescribing certain medications and then work with prescribers on continuing education based on pain management and addiction concerns. Delegate Hodges also reviewed legislation for drug disposal related to engaging pharmacies to work with the Board of Pharmacy to decrease liability concerns by allowing pharmacies to participate voluntarily in drug disposal programs.

Senator Wexton described another of her introduced bills, *SB 556 Opiate addiction treatment; nonmethadone opioid replacements*. This bill pertains to access to medication assisted treatment in opioid abuse treatment programs. The bill removes certain restrictions on licensure of providers who provide treatment for persons with opiate addiction using opioid replacements that have been approved by the U.S. Food and Drug Administration (FDA) for the treatment of opioid addiction. Such restrictions included proximity of the provider to a school (i.e., no methadone clinic within a mile of k-12 school). After July 1, community services boards can start administering suboxone, a nonmethadone opioid replacement, in their medication assisted treatment programs.

Senator Wexton reported that there will be an additional 1.25 million dollars (\$300,000 the first year; \$960,000 the second year) for new drug courts. Ms. Shaw detailed drug court funding plans. She stated that, until this Session, drug courts had not received any increase in funding in ten years. There will be funding for two pilot sites (Norfolk and Henrico County) to use medication assisted treatment (MAT), specifically Vivitrol, which is an opiate blocker, not a replacement drug such as methadone and suboxone. Each court will receive \$50,000 for two years. The Supreme Court will distribute the money, as they have with previous grants.

Ms. Whitsett reported on marijuana bills. She noted that Community Coalitions of Virginia (CCoVA) and the Fraternal Order of Police had a rally day on January 27th and tracked the marijuana bills through the General Assembly Session. Ms. Whitsett's report included an explanation of *SB 701 Cannabidiol oil and THC-A oil, permitting of pharmaceutical processors to manufacture and provide*. This bill authorizes a pharmaceutical processor, after obtaining a permit from the Board of Pharmacy and under the supervision of a licensed pharmacist, to manufacture and provide cannabidiol oil and THC-A oil to be used for the treatment of intractable epilepsy. Access to these oils is intended to help families whose children suffer from this condition. The bill removed the caregiver model and changed language so that the oils can only be dispensed to patients' parents or legal guardian. Recipients must be Virginia residents and registered with the Board of Pharmacy. The bill sets limits on the number of permits that the Board may issue and requires that the Board adopt regulations establishing health, safety, and security requirements for permitted processors. The bill provides that only a licensed practitioner of medicine or osteopathy who is a neurologist or who specializes in the treatment of epilepsy may issue a written certification to a patient for the use of cannabidiol oil or THC-A oil. The bill also requires that a practitioner who issues a written certification for cannabidiol oil or THC-A oil, the patient issued such certification, and, if the patient is a minor or incapacitated, the patient's parent or legal guardian register with the Board. The bill requires further that a pharmaceutical processor shall not provide cannabidiol oil or THC-A oil to a patient or a patient's parent or legal guardian without first verifying that the patient, the patient's parent or legal guardian if the patient is a minor or incapacitated, and the practitioner who issued the written certification have registered with the Board. Finally, the bill provides an affirmative defense for agents and employees of pharmaceutical processors in a prosecution for the manufacture, possession, or distribution of marijuana. An enactment clause provides that except for provisions requiring the Board to promulgate regulations, the provisions of the bill do not become effective unless reenacted by the 2017 Session of the General Assembly.

Ms. Whitsett pointed out that these substances are not FDA-approved and that their use is still against federal law. She noted that a new organization, Cannabis Commonwealth, spoke at the hearing asserting that it was medical discrimination to allow these oils for children with intractable epilepsy but not to allow them for children with cancer. Cannabis Commonwealth is planning to have children at the hearings next year to seek equity.

Ms. Whitsett suggested providing updated information to legislators in off-session meetings. She asked Senator Wexton and Delegates Hodges and McQuinn to suggest opportunities for presentations to legislators during the summer. She noted that SAFE could invite representatives from Ohio, where they defeated a recreational bill, to share

their strategies. Delegate Hodges noted the difficulty in getting legislators to attend off-session meetings. He suggested regional presentations or weekly or monthly email updates to legislators.

➤ **DISCUSSION ABOUT COUNCIL PLANNING**

Chair O'Dell, stating that SASC members need to select topics to study in 2016 and 2017, invited suggestions from members. Mr. Harper suggested studying use of tobacco, e-cigarettes, vaping and alternatives, and offered to provide information and resources. Delegate Hodges noted the importance of prevention, especially educating youth. Delegate McQuinn suggested obtaining data on heroin addiction in Virginia and its impact on the Commonwealth. Delegate Hodges noted that heroin is the number one issue, especially in Gloucester, because it's so inexpensive. He suggested exploring the crime and gang aspects associated with addiction, especially with heroin. Mr. Williams agreed and also recommended study of supervised injection sites (SIS) as a way to do harm reduction. He recommended looking at how Project REVIVE is operating.

Mr. Harper noted that the Virginia Youth Survey results will soon be available. The survey will include information that addresses Delegate Hodges' concerns about youth and substance use (tobacco, alcohol and drugs). Mr. Wirt suggested a state-of-the-state analysis on vaping, e-cigs, and heroin to decide on the topic on which to focus.

Reflecting on Council's two-year study of marijuana, Dr. Jaber noted that deciding to study heroin would provide a concrete focus for the next two years. Ms. Lane noted that Council's study of marijuana was successful because of the two-year time frame: first year for strategic planning, second year for in-depth study. She recommended selecting a topic, identifying potential speakers and presentations, initiating research this year, and preparing for a thorough study in 2017.

Chair O'Dell summarized the discussion and suggested that Council hear a presentation on the Youth Survey results at the May 11th meeting and then discuss the information presented to decide the topic on which to focus.

VI. ADJOURNMENT: There being no further business, the meeting was adjourned.

Respectfully submitted,

Lisa Street / Margaret Anne Lane