

**Vermont Alcohol and Drug Abuse
Advisory Council**

Department of Liquor Control
13 Green Mountain Drive
Montpelier, Vermont

Wednesday, January 23rd, 2013
10:00AM – 12:00PM

I. Welcome and Introductions

Welcome

Welcome everyone

Introductions

Barbara Cimaglio
Lauren Fisk
Mark Depman
Andy Snyder
Ryan Mitofsky
Lori Augustyniak
Marcia LaPlante
Chauncey Liese

Regrets

Patty McCarthy Metcalf
Mitch Barron
Joy Mitchell
Willa Farrell
Mourning Fox
Trudee Ettlinger
Steve Waldo
Mark Ames
Patrick Martin

II. Approval of Minutes: January 23rd, 2012

January 23rd– Minutes approved with the following changes: Add Marcia LaPlante to Introductions list.

III. Deputy Commissioner Report: Barbara Cimaglio

Program Updates – Marcia LaPlante for Barbara Cimaglio

Packet of handouts around Marijuana –

On the data brief, in the top left-hand column where it talks about prevalence use, John Searles summarized this from the national survey on drug use and health and they chunk those results in 2 years. This graph is for 2009-2010. In the last few days the 2010 and 2011 data has come out. John is updating this sheet. Regarding the second bullet, among 12-17 year olds our national ranking has moved from second highest, to first highest. Additionally Vermont is ranked highest marijuana prevalence among all ages nationally for past months use.

When we were implementing strategic framework incentive grant, everyone worked on underage drinking and communities had an option to choose either working on marijuana use or binge drinking and only 4 of 24 communities chose to work on marijuana. One of the communities never really got off the ground but the other 3 had a very large reduction in school-age marijuana use. The decision on what issues to target was related to community readiness for change assessment. So those initiatives came into communities that already acknowledged that they wanted to do something about it. Pouring intervention, prevention or public awareness dollars into a community that says, we are ok with it, might be good as an intervention, but bad as fiscal policy.

Mark Depman – Are we in a club with other states who have liberal attitude? Is it that simple? It is not that simple. We are in a club with the other northeast states

The graph on the left column is the national survey on drug use. It is very standardized across the country. When looking at the 18-25, Vermont is pretty high per capita among colleges. This particular survey does not differentiate between college/non-college students. When we were doing the evaluation on the state incentive grant, we did implement a statewide core survey on alcohol and drug issues in colleges. Vermont was significantly higher than the national rates on marijuana use in colleges.

What are current strategies being used to get this information to the policy makers? We decided to start with the numbers of what we know for sure. The challenge around summarizing the Marijuana research and picking what should go on a one pager is that a lot of the research is mixed. We pulled the numbers together first. On the second page of the packet is some of the same numbers, but also, on the right hand side, John Searles added some of the more recent studies of the impact of early and regular Marijuana use across the life span on executive functions. We have also decided to post other National summaries of the research literature. In this packet is also the NIDA fact sheet. The National Association of State Alcohol and Drug Abuse Directors also did a fact sheet. John has a couple concerns about a few of the bullets on this but for the most part the research is reliable. The Public Health Consequences of Marijuana Legalization; this includes a good summary of facts, but this is ONDCP's policy statement. They've begun a Marijuana Information Center.

Cannabis review; this looks at the research worldwide and is a great overview. Our next step is to take the information from NIDA and from the Cannabis review and write a brief summary of what we know about the impact of the health and social consequences of marijuana use, mainly around the impact of cognitive development and executive functions and how it affects work and school, respiratory health, traffic safety.

There is a tremendous amount of money that can be made around legalization. There are some very vocal people pushing legalization because of this. As public employees, what can we do?

A recent study shows that 74% of kids that use marijuana in Colorado got it from dispensary. How do we get this information to the people who are making the Yes/No votes?

Dr. Chen met with ADAP staff around Marijuana decriminalization versus legalizations. In terms of the VDH, right now we need to focus on getting best information we can to the stakeholders. We need to go into this eyes wide open around the impact of this substance. We are working as fast as we can to get this information out. The challenge for us at the Health Department is, how we can support all of the stakeholder groups in making this more

real. People are more ready to take action. They recognize that there is something going on here. We need to come up with a rapid reaction plan, but the Marijuana Workgroup is the only group that is focusing on that right now. We need someone with all of this information who is well versed and can react and be a spokesperson of the advocate community. Tying this to health care is really where they are focusing right now.

Update on Marijuana Workgroup – Prevention Works – Currently working on issue around Marijuana Liberalization laws. The workgroup has not convened in person yet, but hoping to meet Monday. The plan is to figure out an overall strategy of how to get information out, what do we need to get out and who to we need to get it to. A group of advocates is going to Washington the first week of February and will be meeting with Senator Leahy, or his staff. Senator Leahy has taken a lead on the National level around all of these laws and trying to convene a senate committee to look at liberalization laws. Prevention Day in Vermont will be held on April 25th. Kevin Sabett will be coming to Vermont. Kevin has been an advisor with several administrations, but is an expert on Marijuana Policy. The plan is for Kevin to come to Vermont to not only work with advocates who are interested in this issue but to testify at the State House. The focus right now is, what is the public health impact that these policies will have and how they will affect public health.

Prevention –

Partnership for Success grant – We are piloting a regional comprehensive approach in 6 of the 12 VDH regions. Those sites are Brattleboro, Windsor County (WRJ), Lamoille, Burlington, Rutland and Barre. The staff has provided regional profiles to the district offices. The national priority is focused on alcohol and prescription drug misuse in people age 25 and under. We will also be doing infrastructure support and communication. We are moving forward.

Enforcing underage drinking laws program – The federal block grants for this are ending due to a substantial budget cut at the federal level. A letter went out to the START teams and others for that program letting them know that we can fund services that they provide through June 30 2013.

Zero for Nine – This is a campaign to reach health care providers around alcohol during pregnancy. We are rolling this out. We are utilizing Minnesota's campaign and they have asked us to do a Memorandum of Understanding which has slowed things down. There will be more to come on this.

Hub and Spoke –

Timeline – The start date for Addison, Franklin, Grand Isle, and Chittenden was January 1 and is underway. Some of the work in the Spokes for Rutland and Bennington counties started January 1 as well. The Rutland Regional Hospital plans to start methadone services as soon as possible. There is a discussion underway with two additional regions to start Hub and Spoke services as of July 1. The plan is for an additional two Hub's to come online January 1, 2014. Barbara also compiled a wait list report. The total on the most recent report was 712. Most of those are from the Howard Center.

IV. New Business

Special Guest – Secretary Racine –

Introductions

Topics of discussion

Statute – Some of the duties in the statute for this council are to advise the Governor in the extent and nature of alcohol and drug abuse problem and make recommendations to the Governor for comprehensive and coordinated systems, as well as working with the state board of education which is in developing educational prevention programs. The council is interested in hearing Secretary Racine's thoughts on how we can be more effective.

Physician Provider Education around Medical Marijuana – Mark Depman

The council started a conversation about dispensaries at last few meetings. There is some concern about what will be happening this year around dispensaries. Dr. Depman did an informal questionnaire among a couple of the hospitals in Central Vermont as well as some of the EMS providers. A couple of the questions kept coming back. One among the primary care providers was what their role will be around medical marijuana. The second question was around concern of any legal ramifications around public safety, and wondering if there will be any sort of parody around testing people and motor vehicle accidents. One of the questions that Dr. Depman asked the doctors was "do you anticipate approving this for patients?" and 80-85% said no. Those doctors felt that there was no compelling evidence and that they would probably not approve this for their patients. Their concern then was, will there become a defacto doctor in the community who will become the hub for certifying this without actually having them as their patients.

Dr. Chen – Dispensaries are housed in public safety so there has not been a robust interaction in terms of the regulation of the drug, and the medical use of it from the Health Department. The challenge is as a controlled substance, there is not a lot of evidence. It would be a challenge to find national experts to come in and teach about how to use Marijuana. If we did do some kind of instructional guidance, we would be more likely to spend time on understanding the law and understanding the processes that are required by the law, and the intent of the law. Getting the medical practice board involved might be a way of trying to understand how best to get the education out to providers. A lot of physicians that Dr. Depman has spoken to have said that if they are not convinced that there is objective evidence that this is a worthwhile modality of treatment, should they sign off on the certification that they have a certain condition, knowing that the certification will be used to obtain medical marijuana. The reality of today is that patients have a choice in terms of who they see for a provider. It is important to be clear about what the role and responsibility of the physician is. All providers will be held to the same standard.

Prevention Groups – Lori Augustyniak – There are currently 29 prevention coalitions in VT. Most are concerned about the dialogue around marijuana liberalization laws right now and the impacts it may have on public health. The prevention workgroups are talking with colleagues in other states around what information they have around legalization including the effects on adolescent brain development. These workgroups will be doing some education on Prevention Day (April 25th) at the State House. Dr. Chen – This is something

the VDH and ADAP are struggling with. We can be very clear and specific about what the health effects are. We have a lot of materials at ADAP.

Marijuana and Alcohol – Mitch Barron – How are we going to do it all knowing that we are limited in resources? Heroin is in headlines and bath salts in headlines. We talk a lot about state hospital. However we have our number 1 and number 2 problems which are Alcohol and Marijuana.

The Heroin and Bath salts issues catch public attention, public safety, media, legislative attention, and are filling up the Emergency Rooms; however, outside all of the data, number one and number two problems are still Alcohol and Marijuana.

Sec. Racine – We are living in governmental world with diminishing resources and increasing demands and public expectations. One way that we are trying to respond is by thinking more strategically. There are a lot of elements with substance abuse.

Government's response has been to what's out there. What is lacking is strategic sense of how the pieces fit together and how we set priorities. We need to look at where we have gaps and how we can shift resources.

Dr. Chen – We need to create a broader structure. What do we want a system of care to look like?

Mitch – The issue has been raised around if there a substance abuse system of care.

There is a more integrated system of care in substance abuse world than in other worlds, partially because of the way it is mapped out on paper. At the systemic levels is where at times, we find mismatch

Andy Snyder – Interrelation between Alcohol and Marijuana, and violence. What rearrangements and tweaks have been made to address this? How can we interact with that in a meaningful way?

Sec. Racine – A lot of this is about getting information in front of people. To change public conversation is difficult. Having this conversation here is helpful but it needs to go beyond this council. The legislature responds to what public is hearing. If the public is not hearing about alcohol abuse, and the headlines are about a methadone clinic in Burlington, the legislature will respond to the headlines. The Hub and spoke is a great example of collaboration. Integrated Family Services is another great example of collaboration. With IFS, we have an opportunity to have a model that will look at the whole individual.

Thoughts on how we can be more helpful as a Council?

Sec. Racine – A regular update between Barbara, Dr. Chen and Sec. Racine.

Set up something more formal with Barbara or Patty to update Secretary Racine on what this Council is doing.

Sec. Racine is very supportive of Council electing its own chair.

Recovery Centers – Mark Ames – Mark will send to me what is to be distributed.

V. Old Business

VI. Future Guests

Brian Reamer – Suicide Prevention U Matter – Invite to a future meeting

Shayla Livingston – To discuss YRBS. The new one won't be done until later in 2013.

Craig Jones or Beth Tanzman – Blueprint for Health

Ena Backus – Green Mountain Care Board

VII. Member Reports/Announcements

Plaque to John Flannigan.

NEXT MEETING: Wednesday February 27th