

**Date:** August 28, 2007

**Meeting Title: GOVERNOR'S COUNCIL ON A&D ABUSE PROGRAMS MEETING**

**Members Present:**  Stephanie Soares Pump  Ann Uhler  Bill Hall  Laurie Nissen  Marv Seppala  
 Steve Vincent  Mark Branlund  Sharron Kelley  Gary Smith by phone  Rita Sullivan  Sen. Laurie  
Monnes Anderson  Rep. Jean Cowen

**Council Liaisons Present:**  Gina Nikkel  Debra Gilmour  Lt. Mike Dingeman

**AMH Staff Present:** CJ Reid, Karen Wheeler, Bob Nikkel, Caroline Cruz

**Guests:** Mickey Serice, CAF; Jay Wurscher, CAF; Iris Bell, CCF; Geralyn Brennan, AMH; Tony Biglan, ORI and Carol Black, ORI

Topic	Key Discussion Points	Action/Task/ Decision Log	Responsible Persons	Due Date
<b>Welcome and Introductions</b>				
<b><u>Agency Directors Presentations:</u> Iris Bell, Policy and Program Manager, Oregon Commission on children and Families</b>	Handout: power point slides Presented the process for the local coordinated comprehensive plans. <u>Key points:</u> 1) Plans identify level of concerns locally. 2) Partners include Children and Families, Department and Human Services, Department of Education, colleges. 3) Plans identify 19 high level outcomes including A&D and crime prevention. 4) The local partners have a broad range of participation and categories. 5) Alcohol and drug issues are consistently			

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	<p>seen among all counties.</p> <p>6) The 5 top identified gaps in service are : child mental health, family support, youth A&amp;D treatment, living wage jobs, and access to health and dental care. -These are the same top 5 gaps identified in 2004.</p> <p>7) A heightened increase in A&amp;D use was identified with a decrease in treatment utilization.</p> <p><b>Sharron</b> asked if the services are available in the communities.</p> <p><b>Ann</b> added that many medical doctors are not accepting OHP children.</p> <p><b>Rita</b> identified that the wait lists are a concern that keeps people from accessing treatment.</p> <p><b>Iris</b> continued:</p> <p>8) There are commonalities in gaps regardless of county size.</p> <p>9) Strategic priorities were presented.</p> <p>10) Counties continue prevention efforts, but A&amp;D use for 8<sup>th</sup> graders continues to climb.</p> <p>11) Counties identify methamphetamine as a significant concern.</p> <p><b>Stephanie</b> asked if CCF uses the statewide data to drive decisions.</p> <p><b>Iris</b> replied that each community develops the</p>	<p>Sharron recommended working to identify reasons in a Council subcommittee.</p>		

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<p><b>Mickey Serice,</b> Deputy Assistant Director, Department of Human Services, Children and Families <b>Jay Wurscher,</b> Alcohol and Drug Services Coordinator, Department of</p>	<p>plans using local data.</p> <p><b>Ann</b> identified that the state has two comprehensive planning processes. One is the county implementation plans required by AMH and one is the CCF plan described today. She suggests combining the two processes for consistency and efficiency.</p> <p><b>Rita</b> recommends providers be invited to participate in the planning process.</p> <p><b>Stephanie</b> reminded members that there will be subcommittee of the Council to work on children and families issues.</p> <hr/> <p><u>Key points:</u></p> <ol style="list-style-type: none"> <li>1) All three branches of Government looked at child welfare issues this legislative session.</li> <li>2) There were many bills passes with consensus related to child welfare.</li> <li>3) Front-end services are a priority with an emphasis on keeping families together.</li> <li>4) The number of reports of child abuse victims has risen with a slight decline in children going into foster care.</li> <li>5) The length of time a child is in foster care has increases. No concrete speculation at</li> </ol>		<p>Sharron and Gary</p>	

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Human Services, Children and Families	<p>this time.</p> <p>6) CAF does not keep data on re-abuse, that means children removed from the home repeatedly during parents alcohol and drug recovery process.</p> <p><b>Rita</b> believes this data is essential to help define evidence for length of successful treatment and could guide systems change.</p> <p><b>Sharron</b> Asked what is the criteria for removing a child from the home.</p> <p><b>Mickey</b> responded that this is statutorily defined. Use of drugs or alcohol is not itself a cause. Home visits to evaluate the environment are mandatory.</p> <p><b>Jay</b> introduced the Oregon Safety Model used by CAF that closely aligns with the American Society of Addiction Medicine (ASAM) placement criteria used in alcohol and drug treatment.</p> <p><b>Mickey</b> voiced encouragement to re-build the infrastructure with the new money targeted for the Children Safety and Health Initiative.</p> <p><b>Jay</b> distributed the <u>Status of the Children</u> report and the <u>Drug Abuse Impact on Foster Care in Oregon</u> available on line at:  <a href="http://www.oregon.gov/DHS/abuse/publications/children">www.oregon.gov/DHS/abuse/publications/children</a></p>	<p>Sharron requests the OSM be emailed to members.</p> <p>Send members these reports on line.</p>	<p>Jay Wurscher</p> <p>CJ Reid</p>	

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	<p><u>Key points:</u></p> <ol style="list-style-type: none"> <li>1) 6 of 10 children in foster care enter because of parental alcohol and drug problems.</li> <li>2) In five years, children entering foster care increased from 43% to 62%.</li> <li>3) Parents receiving treatment who are involved with child welfare has decreased.</li> </ol> <p>Council members recommended following data closely for the new residential beds targeted for families.</p> <p><b>Ann</b> asked if there is money for employment assistance.</p> <p><b>Mickey</b> responded that the administrator of Temporary Assistance for Needy Families (TANF) is working to allocate new money that included adults with alcohol and drug abuse problems.</p>	<p>Send the DHS Methamphetamine report to members.</p>	<p>CJ Reid</p>	
<p><b>AMH &amp; Governor's Council Strategic Development</b></p>	<p><b>Karen</b> gave a brief overview of the fist planning meeting</p> <p><u>Key points:</u></p> <ol style="list-style-type: none"> <li>1) Develop a strategic plan for the next 3 biennium during 5 regional meetings focused on a continuum of prevention, treatment and recovery.</li> <li>2) Product will be a report in alignment with</li> </ol>			

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	<p>the mental health Community Services Workgroup Plan. Include a page with recommendations.</p> <p><b>Stephanie</b> would like DHS to unite their priorities for the next legislative sessions based on the strategic plan.</p> <p>She recommends postponing the completion of the Domino II report to the Governor to June 2008 in lieu of the strategy process.</p> <p><b>Mark</b> observed that the community is looking forward to the Domino II report.</p> <p><b>Ann</b> would like to ensure the Council has opportunity to make budget recommendations to the Division.</p> <p>It was recommended to include the strategy document as an attachment to the Domino II report.</p> <p><b>Gina</b> announced that there is a new mental health coalition forming in Portland of special interest groups to ensure the Community Services Workgroup plan becomes the guide for services improvement. She is contacting both Oregon Prevention, Education and Recovery Association (OPERA) and the Oregon Partnership to become involved with this coalition.</p> <p><b>Rita</b> recommended practice guidelines for persons with co-occurring disorders.</p>		Due end of January 2008	

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	<p><b>Representative Jean Cowan</b> stated that a common goal among DHS is unreasonable and suggested a brief statement that represents dual disorder treatment from both mental health and addictions.</p> <p><b>Mark</b> suggested to invite a representative from the mental health coalition to a future Council meeting to begin a dialogue.</p> <p><b>Bob</b> supports providing outcomes for addiction services and working with the mental health coalition to build a relationship.</p>			

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<b>Old Business</b>	<p>1) ADES/DUII-</p> <p>2) Equity discussion: Request for contract amendments have been sent to all counties and stakeholders. Due date is Sept. 27, 2007.</p> <p>3) Stephanie reviewed the Council work plan. <b>Bob</b> presented a briefing on the Governors proclamation for the Children's Wraparound Initiative. That provides a funding source for integrated coordinated care.</p> <p>4) Stephanie reviewed the Statewide Strategic Planning process with members.</p> <p>5) Legislative Special Session 2008 was clarified by Rep. Cowan.</p> <p>6) Domino II report: Bill Hall will write the opening and conclusion. He will be the editor.</p>	<p>Work on a recommendation</p> <p>Decide at the retreat what county to visit in the spring.</p> <p>Send members information via email.</p> <p>Schedule a conference call with Domino II writers to determine what to include and format.</p>	<p>Ann and Steve</p> <p>Members to</p> <p>Karen and CJ</p> <p>CJ and Stephanie</p>	
<b>Announcements</b>	<p><b>Mark</b> asked members to RSVP about what meals they will be eating with the members during the October retreat.</p> <p><b>Stephanie</b> reported that the OLCC compliance checks on energy drinks that also have alcohol ingredients are showing increase in underage sales and targeted product placement for younger consumers.</p>	<p>Discuss implications at future meeting.</p>	<p>Members</p>	



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<b>Approval of Minutes</b>	<p>June 25, 2007: Ann moved to approve, Mark second. Approved</p> <p>July 24, 2007: Bill moved to approve, Rita second. Corrections on attendance made, acronym correction. Approved.</p>			
<b>Liaison Reports</b>	<p><b>OPERA: Debra Gilmour</b></p> <ol style="list-style-type: none"> <li>1) State Association of Addiction Services (SAAS) conference held in July. Information will be presented at the Fall retreat.</li> <li>2) Congressman Hooley's to medical aid met with Debra and Rick Treleven (President OPERA) to provide education about methamphetamine. Two bills are drafted for prevention and treatment.</li> <li>3) Spring Conference will occur at the end of March or early April with a training emphasis.</li> </ol>			
<b>AMH Report</b>	<p><b>Bob</b> reported AMH priorities include:</p> <ol style="list-style-type: none"> <li>1) Getting the re-allocation and money out toe counties.</li> <li>2) Concern about counties finding workers for increased caseload resulting.</li> <li>3) Dual diagnosis anonymous being funded and additional \$50,000, currently 1500 contacts per week.</li> <li>4) Block grant from the Federal Government is being worked on and due soon.</li> </ol>			



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	<p><b>Sharron</b> suggests a comparison between states with parity laws.</p> <p><b>Mark</b> announced that the workforce development bill regarding medical marijuana in the work place did not pass.</p>			
<p><b>SEOW Report</b> <b>Geralyn Brennan,</b> <b>Substance Abuse</b> <b>Prevention</b> <b>Analyst,</b> <b>AMH</b></p>	<p>Statewide Epidemiological Outcomes Workgroup (SEOW)</p> <p><b>Handouts:</b> <u>Alcohol Consumption and Consequences in Oregon</u> and <u>Epidemiological Profile on Alcohol</u></p> <p><u>Key Points:</u></p> <ol style="list-style-type: none"> <li>1) 2006 grant from SAMHSA developed a workgroup that is meeting monthly</li> <li>2) Goal is to use data to guide resource allocation for Oregon</li> <li>3) Described questions answered by data review, 100's of indicators were reviewed and a priority list resulted.</li> </ol> <p><b>Rita</b> reported that Jackson County is piloting a screening tool for all pregnant women at the first prenatal visit.</p> <p><u>Key findings:</u></p> <ol style="list-style-type: none"> <li>1) Oregon consumes lightly more alcohol than other states due to wine consumption.</li> <li>2) Underage drinking is higher for eighth graders</li> <li>3) Alcohol abuse rate for 12-18 year olds is the same as for those over 26 years old.</li> </ol>	<p>Send the screening tool to CJ for distribution.</p> <p>Send power point presentation to members.</p> <p>Invite Geralyn back to a future meeting for further presentations.</p>	<p>Rita</p> <p>Geralyn and CJ</p> <p>CJ</p>	

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	<p>4) Alcohol induced deaths because of related disease is the 3<sup>rd</sup> leading cause of death for males 55-64 years old and the fifth leading cause for women 55-64 years old.</p>			
<p><b>Oregon Healthy Teens (OHT) Survey Proclamation</b> <b>Tony Biglan, Senior Scientist, Oregon Research Institute (ORI) and Carol Black, Researcher, ORI</b></p>	<p>Requested that the Council consider writing a proclamation that support the value of the OHT survey that would be endorsed by a wide array of partners and stakeholders.</p> <p><b>Handout:</b> Draft Proclamation</p> <p>The process would involve a website to solicit organizations to subscribe.</p> <p>Goal is to have every school participate in the survey and include sixth grade.</p> <p><b>Debra Gilmour</b> volunteered to take this idea to OPERA membership.</p> <p>Tony is interested in piloting the survey for online participation to target drop outs, homeless and home schooled children.</p> <p><b>Bob</b> suggested to use the Children’s Wraparound initiative to engage the Department of Education in supporting the OHT survey.</p> <p><b>Sharron</b> moved to accept the proposal to support the OHT proclamation.</p> <p><b>Ann</b> Second.</p> <p>Passed.</p> <p><b>Sharron</b> suggests making the proclamation more appealing and exciting.</p>	<p>Send proclamation to Stephanie and CJ for distribution.</p> <p>Send the 12 controlled units and study on alcohol access and reduction in use when available.</p>	<p>Tony Biglan</p> <p>Tony Biglan</p>	

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<b>Meeting adjourned</b>				
	<p>For information on the Governor’s Council on Alcohol and Drug abuse Programs, contact CJ Reid, Policy and Program Development Specialist Addiction and Mental Health Division 503-945-9813 or <a href="mailto:c.j.reid@state.or.us">c.j.reid@state.or.us</a></p>			