Chair – Attorney General Cynthia Coffman

Vice –Chairs:

- Treatment – Marc Condojani, Director, Community Treatment & Recovery Programs, Office of Behavioral Health, Colorado Dept. of Human Services
- Prevention – (Vacant)
- Law Enforcement – Jerry Peters, Commander, Thornton Police Department


Guests: Amy Kingery, Aaron Miller, Mary Patrick, Jim Gerhardt, Jack Reed, Maggie Reynolds, Maj. Holger Peters, Marc Kudlac, Brie Reimann, Helen Kaupang, Laurendia Schmidt, Kent MacLennan, Daria Kilpatrick, Alyssa Auck, Jariya Phanpaktra, Sasha Svendsen, and A. J. Senerchia (by phone)

Introductions: Attorney General Coffman called the meeting to order and attendees and guests introduced themselves.

Review and Approval of Minutes: Minutes from the November 7, 2014 meeting were approved by motion as corrected.

Announcements from Task Force Members:
Marc Condojani, Colorado Dept. of Human Services: Stan Paprocki served as director of the Prevention and Early Intervention Programs at the Colorado Department of Human Services, Office of Behavioral Health, until his retirement today. The Chair and Vice Chair acknowledged his contributions to the Task Force.

There is a Drug Policy Alliance Symposium on March 5. See Liz Patrick for more information.

Dorothy Macias: There is a task force to re-write the Children’s Code, with an upcoming organizational meeting to determine its scope and priorities. Human Services Director Reggie Biccha has committed to bringing the enacted rules in line with statute.
Legislation:
Subjects of possible legislation mentioned at the last meeting were powdered alcohol, medical marijuana and caregiver abuse, edibles, and hash oil production. The legislature is moving quickly. Zach Pierce offered to have the Governor’s legislative analyst in this area come and give the Task Force an update. Jade Woodard commented that the commission to review the appearance of edibles across its many forms – liquid, bulk product, hard and soft candy, etc. – proposed packaging recommendations and a bill was introduced on labeling. Their efforts fell short in the area of appearance – making marijuana edibles look different from their non-marijuana counterparts, some said. A bill regarding powdered alcohol was being heard in committee today.

Rob Valuck commented on SB53 which the Colorado Consortium for Prescription Drug Abuse Prevention (“Consortium”) supports regarding standing orders for naloxone. HB1214 wants abuse deterrent formulations of prescription narcotics to be more readily available, although they cost more and their potential benefit in preventing drug abuse is questionable; the Consortium is not taking a position on this bill.

Shannon Breitzman reported that CDPHE is seeking funding in the long bill for household disposal and destruction of prescription drugs now that the DEA has ceased its take-back events. They would like to see a collection box in every community in the state, and to be able to pay for destruction. The Governor’s Office wants to continue the momentum in built by the take-back events in building public awareness. Rob Valuck pointed out that the most important need is still disposal. The Consortium sub-group is reviewing different mechanisms for funding, a budget for each disposal method, and how funding might be obtained.

The State Board of Education is reportedly considering critical changes to the annual Healthy Kids Survey. This presents a huge concern for Rise Above Colorado and other groups that use the survey data to gauge changes in attitudes and usage by students. The change proposed would be to make participation “opt in” by parents which would undermine its reliability as an indicator of a cross section of students. The next meeting is March 12 and the Task Force was encouraged to voice their opinions.

Substance Abuse Trends and Priorities of Task Force Members:
Each member and visitor present was asked to give a brief report on the top 2-3 substance abuse trends and responses from their perspective. This information will give everyone a general idea of who is at the table, and feed future strategic planning for the Task Force.
Marc Condojani, Vice Chair and Director of Community Treatment & Recovery Programs for Dept. of Human Services: Focus of his organization is on response. Since the start of the Meth Task Force, the drugs that are of concern change over time, and the Task Force has changed. It now has the people present with expertise on all drugs and aspects of abuse. Safety is important to him, and people have different thoughts on how to do that, but the Task Force combines these views to come up with workable answers. Treatment is key to helping people recover their lives and be productive. They are then strong advocates and lend their expertise to come up with the best quality treatment.

Jerry Peters, Vice Chair, Police Commander and former Commander of North Metro Drug Task Force: The Task Force was shaped from meth use, labs, and how they affected our communities. Meth, marijuana, heroin, and prescription drugs are still key areas of concern. Through the Task Force, different parties are brought together to see the scope of a problem and determine trends and then determine appropriate responses. In his role he would have access to arrest records, and deaths, which are only a part of the data to use. Data is needed to answer, for example, “Is there a cocaine problem in Colorado?” The Task Force is always in need of data, and has convened a data subcommittee. The Consortium is also working with Omni to develop a dashboard showing drug use with indicators and regions. Data from CDPHE and the federal government are being vetted. PDMP (Prescription Drug Monitoring Program) data will also be added. Heroin, benzedrene, and prescription drugs (with 417,000 prescriptions issued for opioids last month alone) are more of a focus for the Consortium than is marijuana. CODEC uses treatment admission data, but doesn’t have a centralized data gathering hub.

Jade Woodard, Director, Colorado Alliance for Drug Endangered Children: CODEC operates at the intersection of child abuse and drug abuse. Considerations are prenatal connection to parental use and environmental factors, appropriate intervention from law enforcement and social services, and treatment and prevention of abuse reoccurrence. Their interest is in developing and promoting good prevention, education, collaboration and solid recovery programs. There is little data to work with on prenatal substance exposure, and the limited information is from hospital testing and Medicaid tracking. A big concern they see is when drug abuse constitutes child abuse, especially in the area of legal substances such as marijuana and prescription drugs. How do child protection agencies determine when it is child abuse or neglect?

Liz Hickman, Centennial Mental Health Center, Sterling: Her observations are that not all rural locations face the same challenges. Centennial covers 10 counties; some have a meth problem, in others it’s heroin. Her area, the 13th Judicial District, is concerned with an increase in incidence and lowering the age of abuse. Now 10 or 12 year olds are using marijuana and needing treatment with probation. International data indicates that early exposure to drugs developing into abuse is linked to thought disorders and psychoses. There is a growing need for prevention
since kids have more access to drugs. There needs to be kid-friendly deterrent education geared to a level they will accept and respond to. Rise Above is a good example, providing testimonials from kids about what else there is to do. Jerry Peters added that the lack of a national program for prevention is contributing to an increase in drug abuse in the state. It is disturbing to some to hear more messages about how to follow the law and use marijuana than preventing drug abuse. Shannon Breitzman explained CDPHE’s unenviable task of balancing legalization of marijuana for adults with its effects on other populations as implementing a first phase to educate adults on use, including keeping drugs away from kids, and then will add prevention messaging for pregnant moms, etc. Zach Pierce stated that they are combating misinformation – they need to engage the audience and provide resources for them. Shannon added that scare tactics are not effective over time. Messaging should be carefully evaluated, providing well researched campaigns, which is what they are trying to do. They let the lab rat campaign run its course through November, and are focus group testing a new campaign. They feel youth will tune out if they perceive the message is not believable, but a message to not damage your health and chances for success are more palatable to young people. Fact sheets on health risks and knowing the law will accompany the new youth campaign. They also plan to target at-risk populations.

Marijuana is the monster that crosses many disciplines. Kathryn Wells contributed that there are many factors to drug abuse, such an environment, and when we say “x will happen to you” and it doesn’t, they discard the whole message.

Mary Patrick, Drug Policy Alliance: The Drug Policy Alliance is starting a law enforcement diversion program for low level drug abusers, one rural and one urban, which it will run in late bill status. They are also pilot testing a program in Seattle. (see attachment)

Dorothy Macias, Office of the Guardian ad Litem: They present a training program for attorneys representing children in the court system, so that they can keep current on the effect of drug abuse on families, kids and parents. They address whether a case justifies having court involvement and how to treat parents and children with the goal of reunification. They also are in need of data on drug use.

Melissa Gallardo, Manager of Adult Parole, Community Corrections and Youth Offender Systems: Her challenge is to stay on top of trends from all of the different disciplines represented in the SATF, to apply to her population of adult parolees. The biggest need is new options in treatment, for example, Vivitrol which blocks the high from opioids. They have a short window to identify offenders that can benefit from effective treatment before they get imbedded in abuse again. They are looking at other states to see how they deal with marijuana use by offenders, which is a big problem. She can attest that there is a cocaine problem in Colorado, as shown in parolees’ UA’s, as well as other drugs. Her agency collects data, and she’s open to sharing it.
Jim Gerhardt, Colorado Drug Investigators Assn: Organized crime groups are the primary focus of the Drug Investigators Task Force. Heroin is in wide use because of limited supply of opioid precursors. Meth is also in wide use, with recent large busts meth and heroin cartels. Another focus is properties being bought up to run grow houses for out-of-state distribution of marijuana. Neighborhood grow operations can make thousands of dollars and undercut the price of legal retail establishments; it’s not just a tax revenue issue. The legal industry storefront is getting the media focus. Marijuana advocates promoted that law enforcement would have time to spend on other crimes, but the sophisticated level of marijuana activity is taking a ton of time. Prevention messaging is key, not the political soft sell, he said.

Dan Rubinstein, Deputy District Attorney, Grand Junction: In his SATF role as legislative appointee, he provides technical assistance in drafting legislation. In his job he sees that meth use is on the rise again, as well as marijuana use. His concern is in messaging; whereas meth is already alarming to most people, marijuana is more difficult to arouse concern. In working with the school district and university in his area, the education programs need to be different, based on whether you can suspend someone from school for drug abuse (middle school and high school). Younger voters in Mesa County voted Amendment 64 in. Now we need to get them interested enough to talk to their kids and let them know that marijuana is bad for kids. This is done primarily through the newspaper, but they’re not reaching all of the parents they need to. Diversion programs will be a factor.

Zach Pierce, Governor’s Policy Analyst: His area is all of human services. His focus is more on prescription drug abuse and the Consortium. His involvement has been in PDMP enhancement, a safe usage and disposal campaign, and provider intervention. He feels the focus needs to be on downstream treatment and recovery; a holistic approach. Marijuana is the conversation of the day, across all disciplines and agencies. The Governor is proud of the work they’ve done so far. We only see the tip of the iceberg for data, on the marijuana experiment. We need to empower law enforcement, social workers, and others to approach it in a coordinated manner.

Jack Reid, Department of Public Safety: His task is working with all agencies to gather as much information as possible in one place, and be able to drill down to the impacts of marijuana legalization, or other specific matters, as deeply as possible.

Aaron Miller, CODEC: They partner with Rise Above Colorado, a direct result of the SATF forum. They meet in a different community each month and hear different concerns in each community. For example, moving into heroin from prescription drug abuse. Meth is back into the state. He also sees alcohol use by teens as a serious problem because the perceived risk is low; they have a tremendous uphill battle. They need to continue prevention messaging, but it’s important to have the right message; working together on how to reach teens and protect kids.
Lorendia Schmidt, Dept. of Human Services, Division of Child Welfare: With child welfare and protection their mission, they are trying to determine when drug use affects child safety and when it does not; when intervention is warranted. They have the same issues and questions with prescription drug abuse. They try to help child welfare workers determine those lines. Additional observations are that cessation of drug abuse does automatically make the child safe, residential treatment doesn’t work, and we need to augment community support programs for teens.

Amy Kingery, Judicial Department: Her aim is problem solving, for 79 courts in 20 out of 22 judicial districts providing drug courts. They try to target heroin use, and marijuana and alcohol have the highest use and concern. Trends they see are a lack of consistent access to doctor prescribed treatment, and equal access to courts by those who have traditionally had low access.

Colleen Bisnehan, CDPHE, Hazardous Materials and Waste Management Division: Their focus is environmental cleanup. They only have authority for meth clean up, from labs and heavy use. There is no reporting requirement in real estate transactions, so they only know if the home owner or buyer hires a professional to test for it and they have to notify the health department if the result is positive. Clean up in that instance is regulated.

Helen Kaupang, Drug Enforcement Administration: Her focus is drug diversion programs; keeping prescription drugs in their appointed avenue and not being diverted. They issue licenses and make drugs available for testing. Now that the DEA prescription drug take-back programs are giving way to local take-back programs, her focus is on other segments of the vast drug diversion program. She is working with the Consortium on a sustainable destruction program. They get lots of questions about marijuana, such as how someone can get registered for research, if the DEA can test their product, and addressing communities’ concerns about getting marijuana off the street now that it is allowed by state law.

Kent MacLennan, Director, Rise Above Colorado: Their focus is 12-17 year olds but it is trending younger. Middle school age is a critical time to reach kids, before access and curiosity kick in. The Meth prevention component of Rise Above is still very active with plans to redouble their efforts later this year, responding to an uptick in access. “I Rise Above” is a social media campaign, part of the Colorado Youth Project. Kids are encouraged to share their positive choices via social media. They also have billboards, posters, and community art projects to reinforce the message in 12 communities. They are compiling a new list of target communities for the next school year. Their message is not drug specific, but focuses on positive, healthy alternatives for the developing teen brain. There is strong local participation, not a statewide campaign coming in to tell them what to do. The campaign focuses on a positive approach rather than negative impact. They work with the Consortium to develop and distribute research proven, engaging resources to educators and youth groups.
Dr. Kathryn Wells, Denver Family Crisis Center: She is a child abuse pediatrician and participates in clinical research at The Kempe Center. She is seeing marijuana and prescription drug misuse, and also daily tries to draw the line of parental abuse. Colorado is in the spotlight on these issues. She works on recommendations to communities on how to protect kids. A problem she sees is a lack of consistent testing of newborns and pregnant moms. It’s difficult to tell when they’re abusing drugs, and doctors are fearful to ask because it may bring criminal prosecution of the mom. Their Substance Exposed Newborn subgroup of the SATF crafted legislation to protect doctors, which was huge. A question they are considering is, should we be testing for marijuana in pregnant mothers, with a positive THC level triggering a referral for a home evaluation. They also seek to make the process positive, not punitive.

Shannon Breitzman, CDPHE, Injury, Suicide and Violence Prevention: They seek mortality and child review data. There is a lack of marijuana data, and it is difficult to discern the areas of concern except emergency room admissions of children from ingestion of edibles. They are also seeing prescription drug abuse and heroin use. Alcohol is often overlooked although it is the most prominent drug cited in incidents of violence and traffic accidents. Also needed are marijuana treatment programs for youth and adults. They look at local partnering, positive youth development trainings, and partnering with the Consortium on prescription drug abuse. They determine where research is needed; it’s needed with medical marijuana now.

Wendy Andrade-Buxton, Prowers County Commissioner (by phone): The rural areas face all of the same challenges that the metro areas have but we face them with much less resources to fight them and all of the stuff that is moved out of the metro area moves into the rural areas because the drug dealers find they can get away with a lot more here because we can't fight them. One of the things that our community has done to try and combat the problems is our local substance abuse task force which convenes once a month to share what they are doing to help those addicted and what trends they are seeing. We have the Sheriff’s office, City Police, treatment clinics, the substance abuse counselors, the schools, the after school care center (Hope Center), probation, and most recently our judges. The group has been meeting for over a year and we now hope to institute a Drug Court; our challenges are we do not have the certified addiction counselors to support it. We need some ideas and help from the state in this area. From the child protection side in our community, just this last week we had four heroin-addicted babies put in out-of-home placement and still have a couple more in our system waiting for placement, all been born in the last six months, so our challenges are going to escalate. We recently had six people arrested with a high level distribution ring and had the assistance of federal law enforcement with those arrests.

Maj. Holger Peters, Colorado’s Joint Counterdrug Task Force: Army and Air National Guardsmen are federally funded to help local communities in drug abuse prevention efforts.
They have resources in people, skills, and assets to help local communities with a variety of needs. One example is helping the DEA transport 30,000 pounds of prescription drugs to Utah for destruction. They also help CODEC with prevention interdiction efforts, help with red ribbon events, camps and provide mentors for kids facing difficult situations involving drugs. They work 24/7 to make it happen, whatever the need.

*Maggie Reynolds, Peer Assistance:* Works with adult working age population, provides free comprehensive EAP services to companies, and provides protective factor education services.

*Rob Valuck, Colorado Consortium for Prescription Drug Abuse Prevention:* Rob is the coordinating center director of the Consortium, which is a subcommittee of the SATF. (He yielded his time to the update item later in the agenda.)

**Substance-Exposed Newborns Subcommittee:**

Jade Woodard, Colorado Alliance for Drug Endangered Children
Kathryn Wells, MD, Denver Health

The SEN Subcommittee is concerned with screening, prevention and education. They support CDPHE and CODEC’s work in this area. Medical providers are asking about testing expecting mothers and newborns and they want to provide guidelines. (Report abbreviated due to time)

**Colorado Consortium for Prescription Drug Abuse Prevention:**

Rob Valuck, University of Colorado Skaggs School of Pharmacy

The Consortium recently conducted a statewide survey. They found that people are more likely to participate in a state or local survey than a federally-sponsored one, by double or triple. They formed a Naloxone Work Group to try to get wider distribution of this treatment. Although hard data is difficult to obtain and primarily consists of treatment records from ambulance EMT’s, the drug is 100% effective, safe, non-abusable, and saves the lives of people in the midst of a narcotic overdose. The Consortium launched a public awareness campaign this week – to take meds seriously. The website focuses on safe use, safe storage, and safe disposal, and has a Spanish language mirror site. 9 News is a partner and the link from their website provided one third of the 7,000 hits in the first 3 days. They are also working to provide 20 permanent drug take-back locations around the state which will be linked to the CDPHE and police department websites. The goal is to have at least one in every county. The drugs are being stored in evidence lockers until an appropriate destruction method can be put in place. They have created recommendations for a Safe Disposal Program, and are finalizing a pilot version of the RxAbuse Data Dashboard. The PDMP system is gaining use by doctors checking for multiple prescriptions by their patients and they are exploring options for further improvements. Lastly, they are actively seeking sources of continued funding.
Responses to Heroin Trend:
   (Tabled until next meeting)

NARCAN Update:
   Marc Condojani reported that there is pending legislation around this topic. Also, networking over the SATF meeting break was helpful.

Closing Comments:
The Chair and Vice Chairs will work with the information given today, and in the past, to determine what is needed in subcommittee work. It would also be helpful to list the membership of subcommittees and a contact person. Dan Rubinstein commented that the SATF was set up as a vehicle for information sharing, but the focus has expanded into action. Cynthia Coffman wants to encourage this new direction into data sharing and creating helpful material. One of her objectives is creating an Office of Community Engagement within the Attorney General’s Office. The Chair and Vice Chairs will come up with some strategic planning proposals and send them to the members for input. Jade Woodard added that areas of effort need to be defined; it has been a long time since the Task Force has engaged in strategic planning. Cynthia also asked for input on potential members or contributors to the SATF and expressed her high opinion of the talent of and important projects being worked on by the Task Force, a task oriented group ready to make a difference.

Meeting Adjourned: 1:20 p.m.

Next Meeting:
Friday, May 1, 2015, 10:00 a.m. – 1:00 p.m.
Colorado Municipal League, 1144 Sherman St., Denver