Committee Goal
Make recommendations to the Commission for the next biennium’s budget

Policy Statement
The Commission’s Budget Committee was established by ORS 430.241. Moreover, the Governor has asked the Commission to provide guidance during the spring of 2014 on his budget for drug- and alcohol-related programs during the 2015-2016 biennium. The Budget Committee is the starting place for that work.

Objectives
1. Recommend budget policy priorities regarding funding for alcohol and drug prevention and treatment services across state agencies and throughout the state. ORS 430.241(11)(a)
2. Recommend budget policy priorities that identify additional funding from federal and private sources for alcohol and drug prevention and treatment services. ORS 430.241(11)(b)
3. Recommend budget policy priorities for authorizing suspension of state funding or state-administered funding for programs that do not comply with the ADPC’s rules or budget priority policy or are not effective. ORS 430.241(11)(c)

Methods
1. The Committee will review past and current budget documentation for each department’s alcohol and other drug programming.
2. Each department head, with designated department staff, will present their budgets, with a summary of their mandates, priorities, funding sources, projections and plans, to the committee.
3. The Committee will
   a. Determine mission-critical programs and compliance mandates.
   c. Determine cross-department priorities for funding of drug and alcohol treatment and prevention programs.
   d. Determine the impact of workforce shortages or training issues.
   e. Determine the impact of current trends and environmental factors
4. The Committee will develop a consensus budget or multiple budget scenarios.
5. The Committee will recommend a full budget package to the Commission for presentation to the Governor by May 2014.

Membership:

Membership of this committee is mandated by ORS 430.241(11):
Vacant, County Commissioner
Ellen Rosenblum, Attorney General;
Bruce Goldberg, Director of Oregon Health Authority
Colette Peters, Director of the Department of Corrections
Rob Saxton, Deputy Superintendent of Public Instruction (or designee)
Erinn Kelley-Siell, Director of Oregon Department of Human Services
Fariborz Pakseresht, Director of the Oregon Youth Authority
Iris Bell, Director of the Oregon Youth Development Council
Steve Marks, Administrator of the Oregon Liquor Control Commission
Judge Eric Bloch (non-voting)

Non-Commissioners may not serve on this committee.
Committee Goal
Prepare the Alcohol and Drug Policy Commission to function effectively as the State of Oregon’s leader in alcohol and other drug policy

Policy Statement
The State of Oregon will benefit from a unified, coordinated drug and alcohol policy that spans departments and levels of government. Taxpayer funds are insufficient to support every “good idea.” Decisions must be made to determine how limited funds can support those programs that are most urgent and most likely to succeed. The Commission has the opportunity to create policy that will guide such decision-making, but the current Commission structure has been an obstacle to its effectiveness.

Objectives
1. To articulate for the full Commission the expectations created by the ORS 430.241 and 430.242 and other legislation and administrative rules.
2. To evaluate the scope of the Commission’s role in state government.
3. To determine the optimum membership for an effective Commission.
4. To develop a package of statute and rule revisions.

Methods
The Commission Structure and Effectiveness Committee will
a. Study the genesis of the Commission and the entities or functions it was intended to supplant.
b. Survey and evaluate the variety of references to the ADPC in statutes and rules.
c. Survey and evaluate the activities and membership structure of other Oregon commissions, and the comparable alcohol and drug policy commissions of other state governments.
d. Create recommended statute and rule revisions, present them to the Commission, and prepare the Commission to advocate for enactment of the changes.

Membership

Membership of this committee is comprised of Commissioners:

Non-Commissioners may also serve on this committee if approved by the Commission Chair.
Alcohol and Drug Policy Commission
Prescription Drug Abuse Committee

Policy Goals 1, 2, and 3
Reduce or eliminate the exposure of children to drugs
Reduce the use of drugs by people of all ages
Reduce health risks and other harm to people who use drugs

Policy Statement
Prescription drug abuse and diversion are significant risks to children and people of all ages. Patients who need these drugs should have ready access to these drugs for medical needs, but public safety and public health require effective policy and a variety of interventions to prevent their misuse.

Objectives
1. To articulate policies that result in greater use of the State’s Prescription Drug Monitoring Program.
2. To advocate for evidence-based non-drug clinical interventions for pain management.
3. To advocate for public education and outreach programs that reduce the quantities of unneeded prescription drugs that may be available for misuse or diversion.
4. To articulate policies that can increase the availability of emergency life-saving interventions.
5. To recommend any other public policy that the committee determines is reasonable to reduce the incidence of and harms caused by prescription drug abuse.

Methods
The Prescription Drug Abuse Prevention Committee will
a. Survey and evaluate current statewide prescription drug abuse prevention efforts.
b. Identify successful community-based prevention, harm reduction, and intervention plans.
c. Articulate a feasible and scalable statewide plan to accomplish the committee’s objectives.
d. Recommend any legislation or regulation necessary to accomplish these objectives.
e. Collaborate with the group that is presently pursuing the federal grant to work on issues related to prescription drug abuse.

Membership

Membership of this committee is comprised of Commissioners:

Non-Commissioners may also serve on this committee if approved by the Commission Chair.
Policy Goal 9
Improve the value of prevention programs supported by taxpayer funds

Policy Statement
Taxpayer-supported drug use prevention programs should focus on creating nurturing school and home environments. These programs should help children develop self-regulatory, cognitive, and social skills.

Objectives
1. To articulate policies that result in drug use prevention programs that are
   a. Evidence-based (produce measureable positive outcomes)
   b. Cost-effective
   c. Scalable (to become statewide).
2. To advocate for changes in legislation or operations to enable implementation of these programs.
3. To advocate for workforce development necessary to operate these programs.

Methods
The prevention committee will
   a. Survey and evaluate current statewide prevention programming.
   b. Ascertain how current statewide prevention programs are funded.
   c. Evaluate the current prevention workforce and its needs.
   d. Create a model for evidence-based, cost-effective, scalable prevention programming.
   e. Will create a plan for statewide implementation of new prevention programming.

Membership
Membership of this committee is comprised of Commissioners:

Non-Commissioners may also serve on this committee if approved by the Commission Chair.
Policy Goals 1, 2, 3, 4, 5, 6
Reduce or eliminate the exposure of children to drugs
Reduce the use of drugs by people of all ages
Reduce health risks and other harm to people who use drugs
Reduce harm caused by people who use drugs
Reduce the violence that often accompanies distribution and use of drugs
Reduce the number of people in jails and prisons because of drug use

Policy Statement
Marijuana distribution, possession, use is decriminalized in Oregon for certain medical uses. Oregon is in the process of creating rules for a dispensary system for marijuana for medical use. It is likely that the voters will approve decriminalizing and regulating marijuana for general use in next November; the Legislature may preempt the initiative process. The Alcohol and Drug Policy Commission should apply its members’ expertise and influence to create a consistent and practical marijuana policy for Oregon.

Oregon Governor Kitzhaber’s Policy Guidance on Medical Marijuana Dispensaries
HB 3460 authorized Oregon Health Authority to establish procedures to license and regulate medical marijuana dispensaries. Governor Kitzhaber’s published a signing statement, articulating two main goals:
- Ensure overall safety of communities through appropriate rules to license and regulate dispensaries
- Allow eligible OMMP patients safe access to marijuana

And, he said, that OHA should “…set fees for dispensaries that will provide sufficient funding to OHA so they can be extraordinarily vigorous in their enforcement of the rules...” including “…inspect[ing] and audit[ing] the financial records of the dispensaries....”

Letter from Oregon Governor John Kitzhaber to Oregon Secretary of State Kate Brown, August 14, 2013.

Regarding marijuana enforcement under the Controlled Substances Act, all federal enforcement should focus its efforts on these eight enforcement priorities:
- Preventing the distribution of marijuana to minors;
- Preventing revenue from the sale of marijuana from going to criminal enterprises, gangs and cartels;
- Preventing the diversion of marijuana from states where it is legal under state law in some form to other states;
- Preventing state-authorized marijuana activity from being used as a cover or pretext for the trafficking of other illegal drugs or other illegal activity;
- Preventing violence and the use of firearms in the cultivation and distribution of marijuana
- Preventing drugged driving and the exacerbation of other adverse public health consequences associated with marijuana use;
• Preventing the growing of marijuana on public lands and the attendant public safety and environmental dangers posed by marijuana production on public lands;
• Preventing marijuana possession or use on federal property.


Objectives
1. To articulate a state marijuana policy that is consistent with the USDOJ’s Eight Points, and
   a. Addresses any adverse public health or public safety issues that are unique to Oregon
   b. Provides for a self-supporting regulation system that does not produce unintended consequences, e.g., does not create an underground market by excessively high taxes
   c. Provides a reasonable level of safety from mislabeling, misrepresentation, contamination, or intentional adulteration of product
2. To articulate a policy to direct the distribution and management of any state marijuana tax revenues that are in excess of those needed to support the regulation system.

Methods
The Marijuana Policy Committee will
   b. Identify successful policy elements that could be incorporated into Oregon’s policy.
   c. Anticipate problem areas to be addressed in Oregon; suggest solutions.
   d. Recommend policy, legislation, or administrative rules to the Commission.

Membership

Membership of this committee is comprised of Commissioners:

Non-Commissioners may also serve on this committee if approved by the Commission Chair.