



Oregon Alcohol and Drug Policy Commission

To: ADPC Prevention Committee

From: ADPC Staff

Date: 10/8/2027

Subject: Roles of Alcohol and Drug Policy Commission, Director and Prevention Committee relating to proposed SUD Primary Prevention Center of Excellence

Note: this memo represents policy analysis and recommendations and not legal advice

This memo outlines the governance relationship between the full Alcohol and Drug Policy Commission (ADPC), the ADPC Director, the ADPC Primary Prevention Committee, and the primary prevention system. Further, the memo recommends that the Prevention Committee recommend to the full ADPC a contracting and oversight role with respect to the proposed Center of Excellence.

Full Alcohol and Drug Policy Commission Role and Authority for Primary Prevention

Oregon statute directs the ADPC to develop Oregon's comprehensive plan to address substance use disorder, establish state policies related to substance use prevention and substance use disorder treatment and recovery services, and hold state agencies accountable for carrying out those policies. The Commission Director has explicit authority to carry out the duties, functions and powers of the commission, including the authority to enter into contracts, and to apply for, receive and award grants.

Most recently, House Bill 2929 (2025) amended ORS 430.221 and 430.223 to read (sections bolded for emphasis):

*430.221. (2) There is created the Alcohol and Drug Policy Commission, which is charged with **improving access to evidence-based, evidence-informed and culturally informed substance use prevention**, substance use disorder treatment and recovery support services by **establishing state policies and holding participating state agencies accountable for carrying out those policies**.*

430.223. (1) For purposes of this section, "program" means a substance use prevention, substance use disorder treatment or recovery support services program that receives state funds or state administered funds.

(2) The Alcohol and Drug Policy Commission established under ORS 430.221 shall develop a comprehensive substance use prevention, substance use disorder treatment and recovery support services plan for this state. The plan may include, but is not limited to, recommendations regarding:

(a) Capacity, type and utilization of programs;

(b) Methods to assess the effectiveness and performance of programs;

(c) The best use of existing programs;

(d) Budget policy priorities for participating state agencies;

(e) Standards for licensing programs;

*(f) **Minimum standards for contracting for, providing and coordinating substance use prevention, substance use disorder treatment and recovery support services;***

*(g) **The most effective and efficient use of participating state agency resources to support programs; and***

*(h) **Youth substance use prevention and youth substance use disorder treatment and recovery strategies to reduce substance use disorders among individuals who are up to 26 years of age and their families. [...]***

*(5) The commission may: (a) Conduct studies related to the duties of the commission in collaboration with other state agencies; (b) **Apply for and receive gifts and grants for public and private sources; and (c) Use funds received by the commission to carry out the purposes of ORS 430.220 and 430.221 and this section.***

The Executive Branch has interpreted the ADPC authorizing statute to mean that the full ADPC commission has a broad mandate to support programs that improve access to primary prevention services through establishing state policies; holding accountable 14 state agencies and informing the programs they fund; financing programs when necessary; and planning, including the establishment of minimum standards for providing and coordinating substance use prevention services and recommending the most effective and efficient use of state resources. Below are some examples of how the ADPCs has implemented this mandate in the recent past:

- 1.) **Establish state policies:** ADPC has advised on and sponsored Legislative Concepts for the Governor. For example, ADPC is currently sponsoring a Legislative Concept on behalf of four state agencies to modernize statutes pertaining to evidence-based programs in carceral settings. In 2025, the full ADPC commission put forward an LC which led to House Bill 2929 as well as advised on House Bill 2502 and House Bill 2506 – both bills responsive to legislative reports written by ADPC staff and endorsed by the full commission.
- 2.) **Holding Accountable State Agencies:** ADPC has established relationships with all 14 state agencies outlined in ORS 430.221, channels of advice for program and rule design, and methods for determining if state agencies and their funded programs align with the comprehensive plan – including regular financial and program analysis (e.g. 2023-2025 SUD Financial Analysis). ADPC has proposals with the agencies to better align spending with the plan on the front end.
- 3.) **Financing Programs:** ADPC currently maintains two grant programs where issues addressed range across multiple state agencies and require close coordination: (1) School-Based Screening and Early Intervention and (2) Provider, School and Community Based Education on Adolescent Substance Use and Substance Use Disorder (through Oregon ECHO Network and mandated by House Bill 3321).
- 4.) **Planning, including setting minimum standards for delivering or coordinating services:** The 2026-2030 ADPC Comprehensive Plan lays out several strategies that illustrate this charge, including the example of developing definitions and standards for adult and youth facing Recovery Community Centers.

Given this interpretation and practice, the full ADPC can engage in any of these strategies as it relates to primary prevention, including as discussed by the Prevention committee: developing, funding, and overseeing a Center for Primary Prevention Excellences as called for by the 2026-2030 ADPC Comprehensive Plan – all within current statute.

ADPC Director Role and Authority

The Alcohol and Drug Policy Commission Director is appointed by the Governor and is responsible for implementation of ADPC policies and the performance of the commission's duties, functions and powers as called for by ORS 430.220. The director thus has all powers necessary to effectively and expeditiously carry out the duties, functions and powers of the commission, including authority to:

- (a) Enter into contracts; (b) Apply for and receive gifts and grants from any public or private source; and
- (c) Award grants from funds appropriated by the Legislative Assembly to the commission or from funds otherwise available from any other source.

Full Alcohol and Drug Policy Commission and the ADPC Committee Structure

The ADPC By-Laws (Last amended February 2026) set the relationship between ADPC's committee structure and the ADPC Full Commission. Section 3.1 states that the commission may establish committees to fulfill specific purposes and duties assigned by the Commission; and Section 3.2.4 states that Committees will make recommendations to the full Commission based on approval by a quorum of the committee members. Together, these sections mean that ADPC Committees act at the will of the full commission and cannot, on their own, engage on any of the actions mentioned above. For any strategy that the ADPC Primary Prevention Committee would like to pursue, change or prioritize, the committee must vote to endorse the idea and recommend the idea for consideration by the full ADPC. Nothing becomes the official stance of the ADPC without a vote of the full commission.

For example, as a result of HB 3321, ADPC commissioned a study of the primary prevention system that included recommendations from third party consultants. The recommendations of the third-party consultant were completed on behalf of the ADPC but are not endorsed by the full ADPC. In order for those recommendations to be adopted by the ADPC, the full commission would need to take a vote on said recommendations or instruct the prevention committee to endorse specific recommendations followed by a full commission vote.

Staff Recommendation for the Governance of the Center of Excellence

The Center of Excellence is the second major strategy of the Comprehensive Plan related to Primary Prevention and the full ADPC Commission assigned the prevention committee work to determine the scope, governance, sustainability, and staffing to move that work forward. Given the breadth of scope to date (described below), lack of coordination and access across the prevention continuum (See HB 3321 report), and the authority named above, staff believe the Prevention Committee should recommend a governance structure that is overseen by the Full Commission, especially in the near term. Reasoning:

- 1.) Breadth of Scope: The Prevention Committee has identified primary and secondary audiences of the Center and those audiences span multiple sectors and state agency authorities. Moreover, primary prevention practice requires a comprehensive community approach that requires levers and touch points with multiple sectors and institutions. To provide a truly coordinated center,

the full ADPC will need to advise and ensure that the center as an operating entity meets the needs of the ADPC's full charge with respect to prevention.

- 2.) Capacity and Contracting Infrastructure: As mentioned above the ADPC has contracting authority and already supports grant and contract programs to implement the full commission's plans. If the Commission takes on the Prevention Committee's recommended scope, the ADPC could act as a contractor for the center's operations.
- 3.) Streamlined accountability: Having the center fall under the oversight of the ADPC allows greater control and accountability for center operations, ensuring the programming aligns with the state plan and the Center as a resource/tool is adequately distributed and responsive to the needs of the public and the 14 participating state agencies.

Final Staff Recommendation: Once a scope is completed, the Primary Prevention Committee should endorse a recommendation for the full commission to establish and oversee a prevention center of excellence. This would be done through contract administration or intergovernmental agreements with a third party taking on center operations. The Full Commission could delegate oversight responsibilities to the prevention committee.