



PREVENTION TASK FORCE

Governor's Commission on Alcohol and Drug Abuse, Prevention, Intervention, Treatment & Recovery

Task Force Chair: Traci R. Fowler, MSW, CPS tfowlerconsulting@gmail.com

August 5, 2016

Attended: Traci Fowler, Betsy Houde, Katy Shea, Marissa Carlson (and Ksena), Susan McKeown, Ginger Ross, Katie Kachavos, Celeste Clark, Kate Frey, Sarah Shanahan, Devin Rowe, Anika Stanley-Smith, Courtney Gray, Cheryl Pacapelli, Kim Hyslip,

Welcome Devin (Partnership for a Drug Free NH), Kim (Army National Guard), Cheryl (New Futures).

Governor's Commission Appointment

Traci's three year appointment is up in September, however given that she and Tym are both representatives of the New Hampshire Charitable Foundation, it is most appropriate to have the Governor appoint someone else. At this point, Shannon Bresaw is being recommended to fill the seat and Tim Lena has agreed to step up and co-chair the Prevention Task Force. More information to follow.

Therapeutic Cannabis Educational Documents

For the past year, the Prevention Task Force has been working on developing a connection with the ATC's as well as developing educational materials to be shared with patients and the community about the importance of child safety and locking their cannabis. The statute requires materials be provided, and after meeting with each of the ATCs, we discovered a gap in child safety information being provided. After reviewing materials shared in Colorado, our group created Tips for Parents and Grandparents and a second documents called Laws and Responsible Use. Unfortunately, after vetting the materials with many people, it missed a critical point of review and needed to be put on hold. Traci has a meeting on August 12th with DHHS to address any final edits. The original intention was to ensure new patients would be provided these child safety materials along with the required materials provided by the ATC's in their new patient packets. Betsy indicated she heard a statistic that there's a significant increase in calls for child poisoning in states with therapeutic cannabis, and we want to avoid that at all costs in NH.

The group gave Traci feedback on how to further tweak the materials and partner with the Oversight Team in addition to BDAS.

Given the number of training requests and opportunities to share data from National Guard, State Police, local law enforcement and so forth, members requested that we share all materials developed.

ATC Oversight

GUESTS:

- John Martin, Attorney with DHHS, overseeing licensing bureau, and has been overseeing
- Rod Bascom, Chief of Health Facility Licensing Unit, is writing rules that ATC's need to follow.
- Judy Gosselin, part of ATC team to inspect dispensaries and cultivation facilities, been there 10 months. Prior, did reviews for Dept of Ed for child nutrition programs.

John indicated that Judy was the first dedicated person to work on this program, which was great news since there was no funding allocated to hire someone. There are so many components to this program. They've been able to get a website up, adopt rules for the registry, rules for ATC's themselves, database, forms they need, etc. Now they have two people staffing the registry (Ginger and Jackie). Judy's role is to ensure compliance with the statute. They've done everything as a team thus far, and done several inspections on those that are currently operating.

They are responsible for also monitoring the ATC's websites and educational materials and have found the ATC contractors as "very responsive" to the oversight team.

Traci explained our perspective around child safety and ensuring there is no increased access for youth... given our YRBS statistics on marijuana use, perception of harm, and so forth. Since the ATCs' material was a higher reading level than the public health model of 7th grade, we wanted to ensure adequate information was available. In addition, in reviewing the material being provided by the ATCs, there was a gap in material being provided specifically around child safety.

Rod indicated that there are (currently) only two youth under 18 who have qualified for a card due to seizures, and that most patients are age 50+, including one that is 96. The state currently sends materials out with the prescription card, including information about having them lock their products in the trunk of their car while transporting it and again once in the home.

Judy indicated that the ATC's don't have the skill set to develop educational materials and would welcome the materials we create once approved.

John indicated that they are veering away from the term Medical Marijuana since they do NOT recognize it as a medication and it's not prescribed.

The prescriber bill changed through SB419 allowing physicians licensed in NH AND bordering states to certify patients.

The Oversight Team agreed that once approved, our materials could be included in the packet with the original prescription card coming from the State. Then they could also get the same information once they get the new patient packet at the ATC.

Traci also brought up the notion of monitoring outcomes. Rod indicated they have asked that all new patients complete a questionnaire and then complete it again after three months. They want to understand how using therapeutic cannabis is impacting their use of other drugs, the conditions they are using it for, and the level of use. Currently they are getting anecdotal information but are finishing up the first quarter. Those surveys are currently handwritten on paper in a box and they are exploring ways to get the information in a formal database. Kate flagged that the Advisory Council is in charge of reviewing outcomes and making suggestions for adapting qualifying conditions, etc. The ATC's are in charge of developing the data base and the Oversight Team is pushing them to get it done soon. The Advisory Council last met in January of 2015, but is scheduled to meet in September and October. The question arose that if the ATC's are in charge of developing their own outcomes, can there be some outside influence to ensure the questions are not biased toward the ATC's? Rod assured the group that DHHS developed the questions, but the ATC's are the ones to develop the storage mechanism. Questions are included around the medications patients are currently using before starting therapeutic cannabis. The Task Force recommended that we continue conversation with the Oversight Team around outcomes – as public health outcomes should also be monitored,

including data that is already collected via the Youth Risk Behavior Survey (YRBS), such as youth access to marijuana, perception of risk, perception of peer disapproval, etc.

Judy indicated there is a yearly renewal provision for the prescription cards, although healthcare providers can approve 3 months or 6 months if they don't want to approve a full year right away.

They are also trying to encourage patients to use products with the lowest level of THC and higher level of CBD (non-psychoactive). Sanctuary is cultivating 58 different strains with lower/higher levels of THC and CBD. The state also approved a waiver for Sanctuary to develop a product where the THC hasn't been activated to cause a high.

Kate indicated that New Futures had been advocating for maximum dosage limits for the amount of THC that can be used in edibles to reduce opportunities for child poisoning. Sanctuary is producing single dose cookies and Temescel has purchased some from them. The labels do indicate the level of THC in the cookies, although the Oversight Team couldn't identify the percentage amount during today's meeting. Some patients also purchase treated flour (or sticks of butter), but it's unclear whether the ATC's offer a cookbook to teach people how to use it properly.

The ATC's are trying to educate patients that when using a smokable or vapor form, the impact occurs right away. For edibles, however, it could take a couple of hours for the "benefit" to kick in. It's very important that patients understand that to avoid taking too much.

Judy suggested developing a magnet that has critical phone numbers on it -- perhaps the Addiction Crisis Line and Poison Control.

Devin indicated that in the three towns in Maine having recreational marijuana, the youth perception of harm dropped to 10%, almost 40 percentage points. John shared the loophole in Maine's law that could allow someone registered in NH to go to a dispensary in Maine and get additional product. However, there is no quality control, caregivers can grow it in the basement, and so forth. NH law does make it illegal for a NH card carrier to purchase marijuana out of state.

Discussion ensued around people from neighboring states bringing their cards and product to New Hampshire and smoking it publicly. Education could be provided to law enforcement around what the rules are and how they could hold people accountable for violating NH law.

Judy suggested providing some education to health classes in schools to help youth understand. She is the primary contact with the field and will be our contact going forward. She sees a collective concern around these issues when she is meeting with the ATC dispensary sites and supportive of all that we are working on.

Kate asked about whether opiate addiction would be included as a qualifying condition. DHHS is not currently working on anything related to that. Providers will be able to petition for added qualifications, but Doris Lutz is in charge of the medical qualifications, and she is a stickler for scientific data.

New Future 5-Point Agenda/Press Conference

Kate shared the Action Alert from New Futures to update the group about their latest efforts. This year's policy agenda has been honed to five different points and are asking all partners to endorse this pledge from a community partner perspective along with elected officials.

August 16th at 10am Press Conference, Legislative Office Building

- Restore the New Hampshire Alcohol Fund
- Support Permanent Medicaid Expansion
- Invest in Evidence-Informed Prevention Programs
- Advance Behavioral Health Workforce development
- Remove barriers to Insurance coverage (especially non-clinical services such as recovery)

There are different means of policy to get the job done including -- legislation, rules, local policies... They are seeking a wide net of partners and are offering a more in-depth training on how to engage communities with the 5-Point agenda immediately after the press conference. Please let as many people know as possible.

Cheryl follow up by talking about #turnthetide hashtag. Please put it on everything! They will have a wide array of Facebook selfie frames and other fun social media opportunities to get the word out and start building momentum.

Workgroup Updates -- tabled due to robust meeting around ATC.

Meeting ended at 11:35am

See you next time!

Next meeting: **Friday, October 7, 2016, 9:30am – 11:30am**
at **Division of Enforcement and Licensing, 57 Regional Drive, Concord.**