

POLICY & PLANNING COMMITTEE

Meeting Summary – December 14, 2022

COMMISSIONERS REPRESENT: Tony Bell, Deena Duncan, Joseph Essavi, Lou La Monte, Mark Mendoza, Tonya McKenzie, Dean Nakanishi, Sharona R. Nazarian, Wendie Warwick

GUEST REGISTER: William Gould

MATERIAL DISTRIBUTED: Policy and Planning Committee December 2022 Agenda; Policy and Planning Committee November 2022 Minutes – Draft; P&P Handout - Legislative Updates December 2022; 2023_legislative_calendar_final

Topic	Discussion/Finding
1. Call to Order & Introduction of Commissioners and Guests	Chair Deena Duncan, County of Los Angeles, the Commission on Alcohol and Other Drugs (CAOD) Policy and Planning Committee convened the meeting at 12:02 p.m. Roll taken and quorum present.
2. Public comments	No public comments.
3. Approval of Meeting Minutes	Chair Deena Duncan asked for a motion to accept the minutes of the November 2022 meeting. Chair Deena Duncan entertained a motion which was moved to approve by Commissioner Tony Bell and second by Commissioner Tonya McKenzie Motion was unanimously carried.
4. Legislative Report/Update	William Gould, Health Program Analyst II, Policy and Strategic Initiatives Unit Strategic and Network Development Branch for Substance Abuse Prevention and Control (SAPC), provided an update on the following legislation: SB-367 (Hurtado) Introduced: 12/07/20 Student safety: opioid overdose reversal medication. This bill requires each community college district (CCD) and the California State University (CSU), and requests the University of California (UC), to collaborate with campus-based and community-based recovery advocate organizations to provide educational and preventive information about opioid overdose and the use and location of opioid overdose reversal medication on campus as part of each campuses' established campus orientations. The information is to be provided by the California Department of Public Health (CDPH). The bill also requires each CCD and CSU, and requests UC, to apply to use the statewide standing order to distribute dosages of opioid overdose reversal medication and apply to participate in the Naloxone Distribution Project administered by CDPH. Upon approval for use of the statewide standing order and participation in the Naloxone Distribution Project, the bill requires a campus to distribute opioid overdose reversal medication SB 1003 (Eggman) Introduced: 2/14/22 Trauma-Informed Care Training Certification Program. Existing law establishes the State Department of Public Health within the California Health and Human Services

Topic	Discussion/Finding
	<p>Agency. Existing law authorizes the department to perform activities relating to the protection, preservation, and advancement of public health, including evaluations of existing projects and the provision of training programs. This bill would have created the Trauma-Informed Care Training Certification Program under the State Department of Public Health for the purpose of certifying trauma-informed care training programs for employees of victim-witness programs, sexual assault victim programs, and other community-based programs that offer services to victims of crime. The bill would have required a state or local agency, nonprofit organization, or educational institution's trauma-informed care training program to be certified by the department. The bill would have required the department to approve and certify all trauma-informed care training programs that meet certain criteria, including, among other things, programs that provide a minimum of 40 hours of training and teach the major tenets of trauma-informed care, as specified. The bill would have set forth legislative findings and declarations in support of these provisions.</p> <p>AB 552 (Quirk-Silva) Introduced: 2/10/21 Integrated School-Based Behavioral Health Partnership Program. Existing law requires the governing board of any school district to give diligent care to the health and physical development of pupils and authorizes the governing board of a school district to employ properly certified persons for the work. This bill would have authorized the Integrated School-Based Behavioral Health Partnership Program, which the bill would have established, to provide prevention and early intervention for, and access to, behavioral health services for pupils. The School-based Early Mental Health Intervention and Prevention Services for Children Act of 1991 authorizes the Director of Health Care Services, in consultation with the Superintendent of Public Instruction, to award matching grants to local educational agencies to pay the state share of the costs of providing school-based early mental health intervention and prevention services to eligible pupils at school sites of eligible pupils, subject to the availability of funding each year. The bill would have authorized a county behavioral health agency and the governing board or governing body of a local educational agency to agree to collaborate on conducting a needs assessment on the need for school-based mental health and substance use disorder services, and implement an integrated school-based behavioral health partnership program, to develop a memorandum of understanding outlining the requirements for the partnership program, and to enter into a contract for mental health or substance use disorder services. This bill contained other related provisions and other existing laws.</p> <p>AB 19 (Patterson) Introduced: 12/05/22 Pupil health: opioid antagonists. Existing law authorizes school districts, county offices of education, and charter schools to provide emergency naloxone hydrochloride or another opioid antagonist to school nurses or voluntary trained personnel, and authorizes those nurses and voluntary trained personnel to use naloxone hydrochloride or another opioid antagonist to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an opioid overdose, as provided. This bill would require each individual public school operated by a school district, county office of education, or charter school to maintain at least two doses of naloxone hydrochloride or another opioid antagonist for purposes of those authorizations. By imposing additional duties on public schools, the bill would impose a state-mandated local program.</p>

Topic	Discussion/Finding
	<p>The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.</p> <p>This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.</p> <p>SB 10 (Cortese) Introduced: 12/05/22 Pupil health: opioid overdose prevention and treatment. Existing law sets forth various provisions regarding opioid overdose prevention and treatment, including, among others, provisions relating to a naloxone grant program and standing orders for the distribution of an opioid antagonist, as defined.</p> <p>Existing law, subject to an appropriation, requires the State Department of Education, on or before January 1, 2023, to recommend best practices and identify training programs for use by local educational agencies, as defined, to address youth behavioral health, including staff and pupil training. Existing law requires the department to ensure that each identified training program, among other requirements, provides instruction on recognizing the signs and symptoms of youth behavioral health disorders, including common psychiatric conditions and substance use disorders, such as opioid and alcohol abuse.</p> <p>This bill would, on or before July 1, 2024, add as a new requirement for the training programs the provision of instruction only to school staff on the use of emergency opioid antagonists for purposes of treating an opioid overdose, with the recommended training following specified standards and criteria.</p> <p>SB 19 (Seyarto) Introduced: 12/05/22 Anti-Fentanyl Abuse Task Force. This bill would, upon appropriation by the Legislature, establish the Anti-Fentanyl Abuse Task Force to undertake various duties relating to fentanyl abuse including, among others, collecting and organizing data on the nature and extent of fentanyl abuse in California and evaluating approaches to increase public awareness of fentanyl abuse. The bill would require the task force to be chaired by the Attorney General, or their designee, and would specify the membership of the task force. The bill would require the first meeting of the task force to take place no later than March 1, 2024, and would require the task force to meet at least once every 2 months. The bill would require the task force to report its findings and recommendations to the Attorney General, the Governor, and the Legislature by July 1, 2025. The bill would repeal these provisions on January 1, 2026.</p> <p>SB 51 (Bradford) Introduced: 12/05/22 Cannabis provisional licenses: local equity applicants. This bill would additionally authorize the Department of Cannabis Control, in its sole discretion, to issue a provisional license for a local equity applicant for retailer activities, indefinitely, if the applicant meets specified requirements. This bill would authorize the department, in its sole discretion, to renew a provisional license until it issues or denies the provisional licensee's annual license, subject to specified requirements, or until 5 years from the date the provisional license was issued, whichever is earlier. By extending provisional licensure, the applications for which are required to be signed under penalty of perjury, the bill would expand the scope of the crime of perjury, and would thereby impose a state-mandated local program.</p>

Topic	Discussion/Finding
	<p>HR 8454 (Rep. Blumenauer, Earl [D-OR-3]) Introduced: 7/21/22 Medical Marijuana and Cannabidiol Research Expansion Act. This bill establishes a new, separate registration process to facilitate research on marijuana. Specifically, the bill directs the Drug Enforcement Administration (DEA) to follow specified procedures to register (1) practitioners to conduct marijuana research, and (2) manufacturers to supply marijuana for the research.</p> <p>The bill allows certain registered entities (including institutions of higher education, practitioners, and manufacturers) to manufacture, distribute, dispense, or possess marijuana or cannabidiol (CBD) for the purposes of medical research. Additionally, the bill directs the DEA to register manufacturers and distributors of CBD or marijuana for the purpose of commercial production of an approved drug that contains marijuana or its derivative.</p> <p>Finally, the bill includes various other provisions, including provisions that</p> <ul style="list-style-type: none"> • require the DEA to assess whether there is an adequate and uninterrupted supply of marijuana for research purposes; • prohibit the Department of Health and Human Services (HHS) from reinstating the interdisciplinary review process for marijuana research; • allow physicians to discuss the potential harms and benefits of marijuana and its derivatives (including CBD) with patients; and • require HHS, in coordination with the National Institutes of Health and relevant federal agencies, to report on the therapeutic potential of marijuana for various conditions such as epilepsy, as well as the impact on adolescent brains and on the ability to operate a motor vehicle. <p>William Gould to find out if the county has taken a stance on the new bills presented.</p>
<p>5. Comments from Commissioners on items of interest</p>	<p>Commissioners asked for additional information concerning classification of Cannabis and Marijuana.</p>
<p>6. Adjourn to the next meeting of the commission</p>	<p>Meeting was adjourned at 12:27 p.m.</p>

Next meeting: January 11, 2023 location to be announced.