

STATE OF VERMONT
EXECUTIVE DEPARTMENT
EXECUTIVE ORDER NO. 09-17

[Governor's Opioid Coordination Council]

WHEREAS, opioid addiction and abuse in the State of Vermont negatively affect all people, of all ages, in all communities, at all income levels; and

WHEREAS, opioid addiction and abuse has caused and continues to cause an increase in drug trafficking and other criminal offenses throughout Vermont which erodes our way of life and endangers all Vermonters; and

WHEREAS, opioid addiction and abuse has caused an increasing number of overdose deaths in Vermont, particularly among young Vermonters; and

WHEREAS, the fight against opioid addiction and abuse continues to consume an increasing portion of scarce State resources; and

WHEREAS, because it is not feasible or effective to rely solely on state social service agencies or law enforcement to resolve the opioid crisis, all Vermonters must play an important role in helping to eradicate this scourge from our State; and

WHEREAS, to effectively meet this challenge, the State, municipalities, and all Vermonters must work together on a three-pronged approach to this crisis:

- the demand for opioids must be significantly reduced through education, the building of strong families and neighborhoods, and increased economic and job opportunities;
- those addicted to opioids must be afforded adequate and effective treatment and recovery opportunities; and
- the supply of opioids must be reduced through robust and coordinated federal, state, and local law enforcement targeting drug traffickers and through more effective means of preventing the diversion of prescription opioids; and

WHEREAS, the Governor recognizes the diversity of Vermont municipalities and the distinct differences of population, geography, and resources; and

WHEREAS, the successful fight against opioid addiction and abuse will rely on the strength of this local diversity to enable and empower local authorities to adapt recommended policies, programs, and best practices to the needs of the various communities; and

WHEREAS, the City of Rutland has seen a significant decrease in opioid-related crime after successfully implementing Project VISION, a locally-driven strategy to identify and eliminate

neighborhood drug markets utilizing a creative, collaborative grass-roots effort involving individuals, families, local businesses, churches, law enforcement, community development organizations, and health care professionals; and

WHEREAS, in order to fully enable and empower local communities in their fight against opioid addiction and abuse and to build on the success of Project VISION, there is a need to ensure full coordination among State agencies, State municipalities, law enforcement, and treatment providers to strengthen Vermont's overall response to the opioid crisis through effective opioid addiction prevention, treatment, recovery and enforcement action plans.

NOW THEREFORE, BE IT RESOLVED, that I, Philip B. Scott, by virtue of the authority vested in me as Governor, do hereby create the Governor's Opioid Coordination Council, as follows:

I. Composition and Appointments

The Council shall consist of the following members who shall be geographically representative of the State to the extent possible:

- A. The Commissioner of Public Safety, Secretary of the Agency of Health and Human Services, and a community leader to be appointed by and serve at the pleasure of the Governor, all of whom shall serve as Co-Chairs;
- B. The Commissioner of the Department of Health or designee;
- C. The Attorney General, or designee;
- D. The United States Attorney, District of Vermont, or designee;
- E. One representative of the Vermont Mayors Coalition;
- F. One representative of a local non-profit housing organization to be appointed by the Governor;
- G. One educator involved in substance abuse prevention appointed by the Governor;
- H. One representative of State municipalities appointed by the Vermont League of Cities and Towns;
- I. One substance abuse prevention and treatment professional, appointed by the Governor;
- J. One representative of the Vermont Association of Mental Health, Addiction and Recovery;
- K. One representative of a designated agency appointed by the Governor;
- L. One representative of the Vermont Association of Hospitals and Health Systems;
- M. One representative of the Vermont Sheriffs' Association;
- N. One representative of the Vermont Association of Chiefs of Police;
- O. One representative of the United States Drug Enforcement Administration;
- P. One first responder to be appointed by the Governor;
- Q. The Chief Justice, or designee;

- R. One representative of Vermont's business community to be appointed by the Governor; and
- S. One at-large member to be appointed by the Governor.

Members appointed by the Governor shall serve for two-year terms, beginning as of May 1, 2017.

II. Director of Drug Policy

The Governor shall designate a Director of Drug Policy who shall act as the Executive Director of the Council and who will support, coordinate, and monitor the progress of the Council on a day-to-day basis.

III. Council Charge and Process

The mission of the Council will be to lead and strengthen Vermont's response to the opioid crisis by ensuring full interagency and intra-agency coordination between state and local governments in the areas of prevention, treatment, recovery and law enforcement activities. Where practicable, the Council will apply the strategies and lessons learned from Project VISION to other communities throughout Vermont. The Council shall initially meet at least monthly. The Council shall:

- A. Identify best practices for communities to address opioid addiction and abuse in order to assist them in: (1) significantly reducing the demand for opioids through prevention and education; (2) providing treatment and recovery services to those afflicted with opioid addiction; and (3) significantly reducing the supply of illegal opioids;
- B. Develop and adopt data driven performance measures and outcomes which will allow State and local community programs to determine whether they are meeting their goals and objectives in reducing opioid addiction and abuse;
- C. Review existing State health, mental health, and drug and alcohol addiction laws, regulations, policies, and programs and propose changes to eliminate redundancy and break down barriers faced by communities in coordinating action with State government;
- D. Propose legislation to strengthen a Statewide approach to fight opioid addiction and abuse and facilitate adaptation to the changing nature and multiple facets of the opioid crisis;
- E. Consult and coordinate with federal agencies and officials as well as those in surrounding states;
- F. Work in coordination with the Alcohol and Drug Abuse Council created pursuant to 18 V.S.A. 4803;
- G. Report to the Governor on a quarterly basis and as otherwise required by the Governor regarding: (1) recommendations for resource, policy, and legislative or regulatory changes; and (2) progress made under State and local programs measured against established data driven performance measures; and

H. In consultation with the Director of Drug Policy, do all things necessary to carry out the purpose of this Executive Order.

The Council may designate subcommittees as necessary. The Council shall receive administrative support from the Governor's Office and the Agency of Administration.

IV. Effective Date

This Executive Order supersedes and replaces Executive Order 02-17. This Executive Order shall take effect upon execution.



By the Governor:

Dated: May 8, 2017

A handwritten signature in black ink, appearing to read "Philip B. Scott", written over a horizontal line.

Philip B. Scott
Governor

A handwritten signature in black ink, appearing to read "Brittney L. Wilson", written over a horizontal line.

Brittney L. Wilson
Secretary of Civil and Military Affairs

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