TAADAS held its annual Legislative Breakfast as part of its Day on the Hill this year on February 8, 2017. Over 40 representatives from TAADAS member agencies visited legislators to discuss and advocate for recovery housing, parity enforcement, access to a restricted driver’s license to get to treatment and to work, and to support Governor Haslam’s budget allocation to fund addiction treatment. We handed out over 100 legislative briefing packets to legislators and 200 TAADAS mugs and 200 buttons to commemorate the occasion. We painted the place purple!

TDMHSAS Commissioner Marie Williams, pictured above with TAADAS Executive Director Mary Linden Salter, joined us for breakfast, as did many of her staff. We were also joined by several legislators including Rep. Brenda Gilmore, pictured right with her TAADAS mug in hand. Judge Seth Norman, a Recovery Court Judge for DC4 in Davidson County (pictured in the background right) visited with us while working to promote the TN Association of Drug Court Professionals Day on the Hill as well.

TAADAS Mission:
“To educate, support and engage our members and public, influence policy and advocate for prevention, treatment and recovery services.”

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PICTURED LEFT: Debbie Hillin, Buffalo Valley, attended the Day on the Hill with a proud mom and baby—born NAS free thanks to receiving treatment.

PICTURED BELOW: Maria Smith, TAADAS Training Director, welcomes Stuart Sigrest from CCS in Johnson City to the Legislative Breakfast. Maria was handing out pamphlets liberally as always.

PICTURED BELOW: TADCP was having their own day on the hill on February 8th as well as attending TAADAS’ event as members too. Marie Crosson, TADCP Executive Director, attended and came by to say hello to TDMHSAS staff including Rod Bragg, Asst. Commissioner for Substance Abuse Services.

PICTURED RIGHT: Mary Linden Saltier, TAADAS Executive Director, handed out the new, official TAADAS mug throughout the day.
Tom Starling, TCMHSAS Chairman and CEO of Mental Health America of Middle TN (pictured left), hosted the Day on the Hill for the Coalition on March 8th. Speaker Beth Harwell also addressed the crowd as well as Mary Shelton from the Bureau of TennCare. Bethany Morse of Memphis War on Hero-in spoke about addiction recovery issues.

The Tennessee Coalition for Mental Health and Substance Abuse Services is comprised of more than 30 statewide and local organizations, including TAADAS, that promote mental wellness and substance abuse recovery through advocacy, education and service.

**TCMHSAS Hill Day Advocacy:**

The Coalition **THANKS** the Governor for including additional funding for substance abuse treatment, pre-arrest diversion and enhancement to the crisis system. We also appreciate that the TennCare rate reduction will not be implemented.

The Coalition is **CONCERNED** how Tennessee Health Link and Episodes of Care will impact the behavioral health services that are important to Tennesseans. We ask that you monitor these initiatives to make sure adequate funding is available to deliver high quality services that are important to Tennesseans.

The Coalition **URGES** protection of the general fund by requesting continued use of dedicated funding to support the state’s transportation system. Using the general fund to meet our highway needs will lead to the ultimate erosion of many critical services and supports for children and families including persons needing behavioral health services.

PICTURED RIGHT: TDMHSAS Commissioner Marie Williams addresses the Day on the Hill participants. Over 440 people attend the advocacy event at War memorial Auditorium.

DOH Crowd is pictured below:

**TCMHSAS Day on the Hill**
Farewell Asst. Commissioner Rod Bragg

“It is with mixed feeling that I announce my resignation as the Assistant Commissioner of Substance Abuse Services with the Tennessee Department of Mental Health and Substance Abuse Services. I have known you for many years, and I admire each of you and the work you do in your communities. Working with you to better the lives of Tennesseans has been a highlight in my career.

As I have told my staff many times, "Go and serve!" Blessings to each of you. “

Rod Bragg

In response to Rod Bragg’s resignation from his position at TDMHSAS., TAADAS would like to express our gratitude for the years of service that he has given to our state and to the recovery field. TAADAS presented Rod our Voice of Recovery Award in 2012 to acknowledge his service as the Department of Mental Health became the Department of Mental Health and Substance Abuse Services. Rod was a big part of this transition and helped to shape the character and function of this division within the Department.

Rod attended TAADAS meetings monthly and always answered questions and concerns openly and directly. Rod was often challenged to address issues by providers and he responded graciously and willingly. He was a strong connection for the voice of providers to the Department. TAADAS members greatly appreciated his willingness to be available and responsive.

Rod was a champion of TAADAS and of the mission of all of our agencies. He recognized the mission driven nature of our work. His spirit and voice will be missed.
The Opioid Task Force, convened by Speaker Beth Harwell, finished its hearings in March. Presenters to the Task Force included Mary Linden Salter, TAADAS Executive Director; Paul Fuchcar, CADAS CEO; Dr. Stephen Loyd, TDMHSAS; Rod Bragg, TDMHSAS, Karen Pershing, Metro Drug Commission; Dr. David Reagan, DOH; Dr. Mitchell Mutter, DOH; Tommy Farmer, TBI; and several Recovery Court judges including Judge Duane Slone. The Task Force is considering several recommendations, for this year's legislative session as well as next year’s session. Those recommendations under consideration include funding for more prescription take back programs and locations, sanctions for the physicians who prescribe opiates to someone who overdoses, and more enforcement officers. A full report of the recommendations will be disseminated by TAADAS when available.

Tennessee’s Opioid Judicial Summit delegation continues to meet as a group and with the other 9 state delegations that are working on issues that effect the region. Representatives from Ohio, Indiana, Pennsylvania, West Virginia, Illinois, Michigan, Kentucky, Tennessee, and Virginia met in Nashville last month to discuss common data elements and definitions to track opioid issues. This will enable these states to compare data and work on enforcement issues with uniform standards. It is hoped that uniform standards for providers will promote reciprocity. The delegations will also be working to implement Recovery Oriented Systems of Care in each state and regionally. There is a working group that is also developing regional standards of care for individuals and that have entered the criminal justice system suffering from an opioid use disorder. The Tennessee delegation worked to initiate and pass legislation to mandate Office Based Opioid Treatment Guidelines. Noted below.

On April 7th, Governor Haslam signed the Office Based Opioid Treatment (OBOT) Guidelines legislation—SB 709/HB 746. These bills require the Commissioners of Health and Mental Health and Substance Abuse Services to produce guidelines on nonresidential buprenorphine treatment by January 1, 2018, and to annually update those guidelines. TAADAS will work to provide input in the development of these rules which should supplement and enhance the licensure rules for OBOT clinics that are already in place. Senator Ken Yager and Rep. Dennis Powers, both from East Tennessee, were the sponsors of the se bills and each deserves recognition for their work on this legislation.

New Jersey Gov. Chris Christie will take on an advisory role to help figure out ways the Trump administration can fight the opioid epidemic. The governor will work with representatives in state and local government, as well as law enforcement, medical professionals, and victims to figure out the best ways to deal with this epidemic. The Trump administration has said opioid addiction and treatment are priorities. On the campaign trail, Donald Trump spoke about expanding incentives for states to use drug courts and mandate treatment. He also vowed to expand access to treatment slots.
Fuel Tax Trials.
As we mentioned in a previous column, Governor Bill Haslam’s fuel tax proposal is proving to be a tough sell for the 110th General Assembly, particularly in the House. Governor Haslam has worked hard to cultivate relationships with the members of the General Assembly. Many recognize that he does not have to make the increased fuel tax legislation his signature proposal during his last two years in office. Governor Haslam realizes that Tennessee has a small tax base for the general fund and that Tennessee’s separate funding mechanism of user fees for transportation infrastructure funding is a conservative one and a fiscally sound one. Senate Speaker and Lieutenant Governor Randy McNally who learned at the knee of former Senate Finance Ways and Means Committee Chair Douglas Henry also understands the need to protect the general fund and is supportive of the Governor’s proposal.

The House of Representatives is another story. Speaker Beth Harwell is very anxious about presiding over the House when it may vote upon the Governor’s proposal as she kicks off her own 2018 gubernatorial campaign. She has floated through her lieutenants more than one proposal to use sales tax revenues for transportation infrastructure funding. Historically, Tennessee has used its general fund for education, health care, and public safety. At the same time, Tennessee has used a fuel tax to establish a dedicated fund for the state’s transportation infrastructure. That fuel tax which is paid on each gallon of fuel purchased has not been increased since 1989. If Tennessee were to abandon these separate funding mechanisms, the state would have another hungry program seated at the budget table every year seeking general fund resources, as opposed to say, perhaps, addiction treatment resources.

Governor Haslam’s fuel tax proposal is baked into his proposed budget this year. If the fuel tax legislation does not pass, the legislative session will run well into May rather than the April adjournment dates we have grown fond of.

Celebrate a Life Well Lived.
Senator Douglas Henry (90) died on Sunday, March 5, 2017. Senator Henry was a longtime member of the Nashville Bar Association, and he prized that professional association relationship. His 46 years of legislative service are longer than anyone else has ever served in the Tennessee General Assembly. During legislative conversations concerning our health care delivery systems, Senator Henry was always good to invite the comments and seek the counsel of our association. World War II veteran, Vanderbilt Graduate, Lawyer, Presbyterian, Public Servant, Senator Henry’s many accomplishments
are too many to list completely, but all Nashvillians and Tennesseans should pause and think of him every time they set foot in Radnor Lake State Park or use the services of the Tennessee Foreign Language Institute. Senator Henry will be missed, and we wish his family and friends well as they mourn his passing and celebrate a life well lived.

**Member Checklist.**

Start paying attention to the 2018 gubernatorial race. Governor Haslam is term limited, and the open seat is already luring candidates. Assuming Senate confirmation, State Senator Mark Green seems poised to become the next Secretary of the Army in the Trump Administration and will no longer be a candidate. Announced candidates now include: Former Commissioner of Economic and Community Development Randy Boyd is running in the Republican primary, and Former Nashville Mayor Karl Dan is running in the Democratic primary. Expect more announcements after the end of the 2017 legislative session. Ask them how you may be a resource to them as a candidate.

Call or write former Assistant Commissioner Rod Bragg and congratulate him upon his retirement from state service and thank him for his good work in supporting the treatment community.

Calendar Notes: State offices and TAADAS offices will be closed Friday, April 14th for Easter weekend, Monday, May 29, 2017 for the Memorial Day holiday and Tuesday, July 4, 2017 for the Independence Day holiday.

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*Nathan Ridley serves as Legislative Counsel for TAA-DAS and is an attorney with the Nashville firm, Bradley Arant Boult Cummings LLP. You may contact him by e-mail at nridley@bradley.com.*

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The **Tennessee General Assembly** website contains excellent information on each of our Legislators, how to contact legislators, legislative district maps, committee assignments for each legislator, and the status of Tennessee legislation including a hearing schedule. Sign up for alerts on Tennessee Legislation at:

[http://wapp.capitol.tn.gov/Apps/MyBills/Login.aspx](http://wapp.capitol.tn.gov/Apps/MyBills/Login.aspx)
WHAT IS RECOVERY SUPPORT?
Recovery does not happen in a vacuum. There are essential support services that can be delivered to help people enter into and navigate systems of care, remove barriers to recovery, stay engaged in the recovery process, and ultimately allowing people to live full lives in communities of their choice. These support services may be provided before, during, or after clinical treatment or may be provided to individuals for whom treatment is not part of their recovery process.

Recovery support services should include access to innovative practices supported by evidence such as supported employment, education, and housing. Safe and affordable housing is essential for all people, and residential stability is a critical part of recovery. Research indicates that the longer a person remains in a recovery environment, the greater the chance of long-term recovery, increased financial well-being, and overall stability.

WHY RECOVERY HOUSING?
RECOVERY HOUSING provides a living environment free from alcohol and illicit drug use and centered on peer support and connection to services that promote sustained recovery. By providing alcohol and drug free environments people who are pursuing recovery from addiction can live with peers in recovery and connect to other recovery services and supports. While recovery housing can vary greatly in design, from independent, resident-run homes to staff managed residences where clinical services are provided, all recovery housing provides safe, healthy living environments that leverage social and mutual aid to maintain recovery. The National Alliance for Recovery Residences has delineated four levels of support offered by different types of recovery residences and outlined ethical principles as well as quality standards for recovery housing across levels (see https://narronline.org/resources/).

Substance use disorders can have dire social consequences including: limited education, minimal work history, low or no income, increased criminal backgrounds, poor rental history, and poor credit. As a result, many people seeking recovery have difficulty accessing private or public rental housing, or obtaining mortgages. Because federal policy does not consider the sole diagnosis of addiction to be a disabling condition, recovering persons cannot access Medicaid coverage for the Aged, Blind, and Disabled, disability income, vocational rehabilitation services, or Section 8 rental assistance on this diagnosis alone.

Without the availability of flexible, supportive, recovery-focused housing options, people are less likely to recover from addiction and more likely to face continued difficulties that impact their well-being, families, and communities. These difficulties include costly health care as a result of acute and chronic medical complications and trauma; high use of emergency departments and public health care systems; being high risk for judicial involvement; and an inability to obtain and maintain employment. These challenges are compounded by a lack of affordable housing and the difficulties in maintaining housing while someone is struggling with addiction.

WHO IS RECOVERY HOUSING FOR?
- People that are in recovery from drug and alcohol addiction.
- People that desire a safe and structured living environment with others in recovery.
- People that want to engage in support, services, or treatment opportunities to further their recovery.
- People who are at-risk of homelessness because they are exiting treatment, incarceration, military duty or are living in a home or neighborhood that puts them at risk of returning to substance use.

Recovery housing creates an environment free from immediate and repeated triggers for relapse and provides a vital bridge from homelessness, unsafe housing, or institutions to eventual independent living. Recovery housing values:
- A length of stay that is driven by the resident.
- Access to a non-linear spectrum of housing to support changing and varying needs of individuals throughout the recovery process.
- A right-sized level of support where residents choose what type of housing and support they need.
RECOVERY HOUSING: ASSESING THE EVIDENCE

Existing research has established recovery housing as a model that supports long term recovery. Depending on the level of support, length of stay, and model type, recovery housing has been associated with a number of positive outcomes including:

- Decreased substance use
- Reduced probability of relapse/reoccurrence
- Lower rates of incarceration
- Higher income
- Increased employment rates
- Improved family functioning

Specifically, there are a few well-researched models and communities contributing to the overall evidence-base for such models. Both the Oxford House model and variety of therapeutic community models are listed on SAMHSA National Registry of Evidence-based Programs and Practices (see http://www.samhsa.gov/nrepp).

**Oxford Houses**, characterized as democratically run, self-supporting, and drug-free homes, are more effective in reducing substance abuse than referral to usual aftercare options following treatment. Further, costs of running these homes is low and are offset by the benefits associated with them such as reduced illegal activity, incarceration, and substance use. There are more than 1,800 Oxford Houses in the United States.

**Sober Living Houses**, democratically-run drug free homes that mandate participation in 12-step meetings, have been most studied in California, where more than 300 individual houses are members of the Sober Living Network in Southern California alone. Research conducted in sober living houses in Northern California have found improvements in substance use, psychiatric symptoms, employment, and arrests.

**Recovery homes in Philadelphia** are sober living arrangements often used in conjunction with outpatient treatment, self-help, and other community-based services. Qualitative research has shown operators of these homes see their roles as more than just helping residents remain abstinent, a desire likely stemming from being in recovery themselves or from being a recipient of the benefits of living in a recovery home.

**Recovery housing in Ohio** can vary across the spectrum of recovery residence levels of support. Recent qualitative research has shown that although recovery housing has not been integrated into many housing and treatment continuums in the state, there is growing consensus about its importance and need for various subpopulations.

A common predictor of positive outcomes across recovery housing types is the support individuals receive in recovery-oriented communities. This is consistent with broader research that suggests that one factor affecting the success of treatment is the availability of recovery capital, which includes the economic and social resources necessary to access help, initiate abstinence, and maintain a recovery lifestyle. Social support, such as that provided through 12-step program participation and social network support for sobriety, a key component of recovery housing, has been shown to directly affect recovery outcomes, including reducing the probability of relapse.
Art for Awareness

Dozens of consumers and peer specialists gathered recently for the **Twelfth Annual Art for Awareness** celebration to share their art and contribute to the awareness of recovery and the healing it brings. This event immediately followed the TN Coalition Day on the Hill on March 8th. Lisa Ragan, TDMHSAS Director of the Office of Consumer Affairs and Peer Recovery Services (pictured right), hosted the event. There were amazing pieces of art work shared but the event also included music and dance. Artistic expression and opening creative paths to wellness were encouraged for all the participants.
CADAS Wins Non-profit of the Year at Annual Greater Chattanooga Chamber of Commerce Business Exposition

Since 1982, business leaders, non-profit organizations and the community have gathered for an annual business exposition. EXPO Chattanooga has become the region’s largest tradeshow for local businesses featuring nearly 250 exhibitors.

The signature event of the EXPO is the annual Small Business Award Luncheon, honoring small business and non-profits in the greater Chattanooga area. On March 29th, more than 1,200 area business leaders attended this prestigious event.

According to Tax Exempt World there are 2720 non-profit organizations in Hamilton County. Among these organizations, The Council for Alcohol and Drug Abuse Services (CADAS), The Siskin Institute and Habitat for Humanity were singled out as the three finalists with CADAS being named the non-profit of the Year for 2017.

In accepting the award, Paul Fuchcar, Executive Director of CADAS (pictured above) stated "CADAS is honored to serve this phenomenal community. Today at CADAS 150 people woke up with a chance for a better life – a hope for a brighter future ... On behalf of those 150 people, our fantastic staff, our dedicated Board of Directors and all the people in this community that CADAS has served, I humbly thank you."

The judges said the decision was clear based on CADAS’ ability to weather diversity, the value it placed on its employees and the dedication demonstrated to serving a challenging yet deserving clientele. Board Chair Cheryl Godwin stated “The Board of Directors at CADAS are well-aware of the impact CADAS has had on the community for over 50 years. My heartfelt thanks to the Chamber of Commerce for this prestigious award. We look forward to continuing to serve our community for years to come”
Debbie Hillin was awarded a plaque for her 25 years of service to Buffalo Valley and to the alcohol and substance abuse field. Jerry Risner recognized her at the Buffalo Valley annual Christmas party with over 200 in attendance. Mr. Risner stated, "Debbie has served in the field for more than 30 years and has been the face of Buffalo Valley, Inc. for the last 25. As Vice President of Development, Debbie has worked closely with many of Tennessee's commissioners, the Veteran's Administration, SAMHSA, TennCare JCAHO and HUD and they all know and respect Debbie due to her hard work and dedication to the field." "For Debbie's dedication to perfection for twenty five years to Buffalo Valley, Inc. and to the field of addiction I am happy to award her this plaque," Risner concluded.

Awards

CARF International recently announced that the Helen Ross McNabb Center has been accredited for a period of three years for its continuum of rehabilitation services including mental health care, addiction treatment and social services programs. The Helen Ross McNabb Center was the first community mental health center awarded CARF accreditation in the state of Tennessee 16 years ago. The latest accreditation is the 7th consecutive accreditation the international accrediting body has awarded to the Center.

This accreditation decision represents the highest level of accreditation which can be awarded to an organization by CARF and shows the organization's significant conformance to the CARF standards. An organization receiving the Three-Year Accreditation has put itself through a rigorous peer review process and has demonstrated to a team of surveyors during an on-site visit that its programs and services are measurable, accountable and of the highest quality.

CARF International’s award letter states this achievement is an indication of the Helen Ross McNabb Center’s dedication and commitment to improving the quality of lives of the persons served. Services, personnel and documentation clearly indicate an established pattern of conformance to standards. “CARF’s accreditation demonstrates to our community that we greatly value the quality of our services while we strive to be the premier behavioral health agency in East Tennessee,” said Jerry Vagnier, president and CEO of the Helen Ross McNabb Center. “I am extremely proud of our staff whose expertise and passion make this accomplishment possible.”

CARF International is an independent, nonprofit accrediting body whose mission is to promote the quality, value, and optimal outcomes of services through a consultative accreditation process that centers on enhancing the lives of the persons served. Founded in 1966 as the Commission on Accreditation of Rehabilitation Facilities, and now known as CARF, the accrediting body establishes consumer-focused standards to help organizations measure and improve the quality of their programs.
The COMPASS-EZ is one step in a 12-step process to help guide an agency through improving co-occurring capability. The COMPASS-EZ is designed to help agencies organize a baseline self-assessment of co-occurring capability as the first step in a continuous quality improvement process in which the agency designs an action plan to make progress.

Many resources are available online at www.tncodc.com/strategic-initiative and by contacting Patrick Slay at si@tncodc.com, 615-244-2220, ext. 11.

COD Learning Communities
The COD Learning Communities, both Regional and Statewide, exist to support the Strategic Initiative’s goal to enhance Tennessee’s Co-Occurring Disorders System of Care. The Learning Communities specific mission is to support universal co-occurring capability for programs and staff.

Three Regional COD Learning Communities have been created at the Grand Division level – West-Middle-East. Here is the meeting schedule for the next meetings. Contact Patrick Slay with any questions at si@tncodc.com, 615-244-2220, ext. 11.


Free individual TA for provider organizations working on COD capability
As part of the COD Learning Community offerings, a 1:1 phone consultation with Dr. Ken Minkoff is available for any interested agency seeking individual Technical Assistance to help the agency make the most progress on COD capability. The purpose is to have your agency staff ask their questions and get guidance in moving through the steps of improving COD capability.

This opportunity is free of charge through the COD Learning Community which supports the TNCODC Strategic Initiative – enhancing Tennessee’s COD system of care. Consultations are by appointment only. If interested in arranging a phone call with Dr. Minkoff, contact Patrick Slay at si@tncodc.com, 615-244-2220, ext. 11.
TAADAS typically meets in Suite 130 at 1321 Murfreesboro Pike at 10 am on the second Thursday of each month and will meet this quarter on:

- April 13
- May 11
- June 8

For information please contact:
Mary Linden Salter, Executive Director
615-780-5901, x-18
marylinden@taadas.org

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**TAADAS Training**

Grant Writing 2 day Training -Jackson
May 18-19, 2017
Vicki Lake
Lowell Thomas State Office Building
225 Dr. Martin Luther King Jr Dr
Jackson, TN 38301
8:30 AM-3:30 PM CDT

CPRS Supervision Training -Knoxville
May 22-23, 2017
Michael Runningwolf, B.Ed
1301 Hannah Ave
Knoxville, TN 37921
8:30 AM-4:00 PM EDT

CPRS Supervision Training -Nashville-sold out
May 25-26, 2017
Michael Runningwolf, B.Ed
1101 Kermit Dr room 4

Nashville, TN 37217
8:30 AM-4:00 PM CDT

Recovery Roundtable -Nashville
Mary Linden Salter & Panelists
Mt. Zion Baptist Church
7594 Old Hickory Blvd
Nashville, TN 37189
9:30 AM-3:00 PM CDT

WRAP I Training-Nashville-sold out
June 5, 2017
Ken Barton, CPRS, AWLF
Oaks Tower
1101 Kermit Dr room 4
Nashville, TN 37217
8:30 AM-4:00 PM CDT

Group Counseling Training
Geri Miller, Ph.D
Appalachian St. University

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**April is Alcohol Awareness Month**
PARTNERS in PREVENTION
Building Collaborations; Exploring Intersections

2017 Statewide Conference
Hosted by CHASCo and the Tennessee Certification Board

Thursday, June 22 and Friday, June 23
Cumberland University, Lebanon, TN

For more information visit
www.tncertification.org

Presented by:
CHASCo
TCB
Cumberland University
Department of Mental Health & Substance Abuse Services
This project is funded by the Tennessee Department of Mental Health and Substance Abuse Services
Finding resources for children in Tennessee has never been easier.

With the Kid Central app, you’ll get mobile access to state services, receive useful notifications and have important contact info on the go.

Visit [http://kidcentraltn.com/](http://kidcentraltn.com/) for more information and to download the app for android or iphone.
The first-ever Surgeon General’s Report on Alcohol, Drugs, and Health reviews what we know about substance misuse and how you can use that knowledge to address substance misuse and related consequences. Read the executive summary and full report at: https://addiction.surgeongeneral.gov/

Board of Alcohol and Drug Abuse Counselors

Meeting Schedule:

- April 14, 2017. 9 am, Poplar Room
- July 14, 9 am, Poplar Room
- October 6, 9 am, Poplar room

Meetings are held at:

665 Mainstream Drive, MetroCenter
April is Alcohol Awareness Month
"Talk Early, Talk Often: Parents Can Make a Difference in Teen Alcohol Use"

Quitting Alcohol
Does alcohol interfere with your close relationships? Do you worry about having enough alcohol for an evening or weekend? The author provides suggestions and written exercises for changing behaviors and creating a dynamic personal recovery plan.

Relapse Prevention Workbook
This popular workbook provides an overview of the relapse process, high risk factors, cravings, social pressures and more.

Addictive Thinking
Abnormal thinking in addiction was originally recognized by members of AA, who coined the term "stinking thinking." It often appears rational superficially but it often leads to self deception.

Sober but Stuck
Sober But Stuck addresses the issues that can act as barriers to serenity and ultimately threaten sobriety.

Consider items from our bookstore for your Alcohol Awareness Month Event
Get Connected. Stay Engaged.

www.TAADAS.org

Our Mission
To educate, support and engage our members and public, influence policy and advocate for prevention, treatment and recovery services.

24/7 Support
Do you need help with addiction? Call the Tennessee REDELINE for 24 hour assistance 1.800.889.9789

Order Free Addiction and Recovery Literature
We offer free addiction and recovery literature shipped right to your door anywhere within the state of Tennessee. Just type in a few key words and add the literature you want to your cart, it’s free! https://www.taadas.org/free-literature

Support Recovery in Tennessee
Become a Member
Join us in bringing awareness of addiction and mental health issues to the community and creating change through legislative efforts. There are several levels of membership available, join now.
https://www.taadas.org/membership-info/membership-application

Get Your Training With Us
TAADAS offers professional trainings statewide, the current offerings can be viewed on nearly every page of our website on the left hand side of the screen.
https://www.taadas.org/training

Borrow Our Conference Room
We have a conference room that seats upward of 50 people, you can reserve the room online.
https://www.taadas.org/the-conference-room

Sign Up for Our Emails
We stay on top of current trends related to addiction and recovery services in Tennessee. If you’re interested in regional trainings, legislative reports, advocacy efforts or general addiction and recovery information then sign up!
https://www.taadas.org/contact-us/sign-up-for-our-emails
Help us to bring recovery support services to more Tennesseans

Designate TAADAS as the recipient for your Kroger Plus and Amazon Smiles rewards purchases. It’s easy to do and helps us to do more for the recovery community in Tennessee!

Amazon Smiles is as easy as 1 - 2 - 3!

1. Sign in to www.smile.amazon.com on your desktop or scan the Amazon QR code below with your phone.

2. From your desktop, go to Your Account from the navigation at the top of any page, and then select the option to Change Your Charity.

3. Or, from your mobile browser, select change your charity from the options at the bottom of the page. Select a TAADAS as your new charitable organization to support.

Kroger Community Rewards: How to Register

Use your existing Kroger Plus Card or get a new one from the customer service desk.

Visit www.krogercommunityrewards.com (scan the QR code below if you have a smartphone)

Sign up for an online account using the “new customer” box unless you already have an online account.

Once signed up retrieve the confirmation email and confirm your new account.

Now visit your new account and click on edit Kroger Community Rewards - input your Kroger plus Card Number.

Now enter the NPO 32194 and click confirm.

Your recipient organization’s name should now appear on the right side of the information page.

If you use your phone number at the register Call 1.800.576.4377 and select option 4 to get your Card Number.

You must swipe your card or use your phone number to get credit for any one purchase.

Two Great Programs

One Awesome Cause!
We thank the following members for their support and involvement in our organization!

**Organizational Members**

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<thead>
<tr>
<th>Barry Cooper, President</th>
<th>Jon Jackson, President Elect</th>
<th>Paul Fuchcar, Treasurer</th>
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<td>12th Judicial District Drug Court</td>
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<tr>
<td>Comprehensive Community Services, Johnson City</td>
<td>Prevention Alliance of Tennessee (PAT)</td>
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<td>Crossbridge, Inc. Nashville</td>
<td>Professional Care Services, Covington</td>
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<td>E.M. Jellinek Center, Knoxville</td>
<td>Recovery Services of TN, Lebanon</td>
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<tr>
<td>First Step Recovery Centers, Memphis</td>
<td>Renaissance Recovery, Knoxville</td>
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<td>Freeman Recovery Center, Dickson</td>
<td>Renewal House, Nashville</td>
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<td>Friend of Bill’s Recovery Houses, Lebanon</td>
<td>Samaritan Recovery Community, Inc., Nashville</td>
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<td>Frontier Health, Gray</td>
<td>Serenity Centers of TN, Knoxville</td>
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<tr>
<td>General Session Treatment Court, Nashville</td>
<td>Serenity Recovery Center, Memphis</td>
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<td>Grace House, Memphis</td>
<td>Smith County Drug Prevention</td>
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<tr>
<td>Grandpa’s Recovery House, Smyrna</td>
<td>STARS Nashville</td>
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<td>Hamblin County Drug Court, Morristown</td>
<td>Synergy Treatment Ctr., Memphis</td>
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<td>Harbor House of Memphis, Memphis</td>
<td>The Next Door, Nashville</td>
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<td>Healing Arts Research Training Ctr., Memphis</td>
<td>TN Certification Board</td>
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<td>HealthConnect America, Statewide</td>
<td>TN Mental Health Consumer’s Association</td>
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<td>Helen Ross McNabb Center, Knoxville</td>
<td>TN Assoc. of Drug Court Professionals</td>
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<tr>
<td>Here’s Hope Counseling Ctr., Dyersburg</td>
<td>Turning Point Recovery Residences, Nashville</td>
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<td>Highpoint, Johnson City</td>
<td>Vista Recovery Systems, Johnson City</td>
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<tr>
<td>Hope of East Tennessee, Oak Ridge</td>
<td>Welcome Home Ministries, Nashville</td>
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</table>

**Affiliate and Individual Members**

<table>
<thead>
<tr>
<th>Addiction Campuses</th>
<th>Mirror Lake Recovery Center</th>
<th>Cumberland Heights, Nashville</th>
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<tbody>
<tr>
<td>Ammon Analytical Labs</td>
<td>TN Assoc. of Alcohol &amp; Drug Abuse Counselors</td>
<td></td>
</tr>
<tr>
<td>Bradford Health</td>
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</table>

| Todd Albert | Nita Gamache | Judge Seth Norman |
| Ron Bailey | Leland Lusk | Butch Odom |
| James Beck | John McAndrew | Nathan Ridley |
| Natalie Broadway | Wayne McElhiney | Brad Schmitt |
| Richard Chirip | Harold Montgomery | Sheila Shelton |
| Craig Elliott | Melody Morris | George Snodgrass |
The Tennessee Association of Alcohol, Drug and other Addiction Services (TAADAS) began March 26, 1976 when a group of concerned Tennesseans joined together in Chattanooga for the purpose of “creating and fostering a statewide association to promote common interest in prevention, control, and eradication of alcoholism and other drug dependency.” The TAADAS mission is to educate the public and influence state/national policy decisions in order to improve services to those who are affected by alcoholism, drug dependency and other addictions. TAADAS programs are funded in part by grants from the Tennessee Department of Mental Health and Substance Abuse Services, Division of Alcohol and Drug Abuse Services. As a statewide association made up of prevention programs, treatment agencies, recovery services and private citizens, TAADAS strives to be the Voice for Recovery in Tennessee through its membership and many programs.

Alcohol and other drug dependence is a primary, chronic, progressive and potentially fatal disease. Its effects are systemic, predictable and unique. Without intervention and treatment, the disease runs an inexorable course marked by progressive crippling of mental, physical, and spiritual functioning with a devastating impact on all sectors of life — social, physiological, family, financial, vocational, educational, moral/spiritual, and legal. TAADAS is committed to helping the public understand that addiction is a treatable illness and that millions of people achieve recovery.

**TAADAS’s purpose is to:**
- Promote common interest in the prevention, control and eradication of alcoholism, drug dependency and other addictions;
- Work with and facilitate cooperation with all agencies interested in the health and welfare of the community;
- Impact legislation regarding alcohol and drug abuse and other addictions;
- Educate the community regarding alcohol and drug abuse and other addiction issues;
- Encourage and support the development of alcohol and drug abuse and other addiction services in areas that are underserved;
- Enhance the quality of services provided by Association members;
- To serve as a resource for Association members; and
- To further fellowship among those members.

**TAADAS Membership**
Through its association membership and by networking with public policy makers, TAADAS keeps alcoholism, drug abuse and other addiction issues in the forefront when public policy decisions are made and through the collective voice of its members, TAADAS directly impacts the important issues facing the addiction services field today. Membership benefits include:

- Expand knowledge – TAADAS has a statewide Clearinghouse of extensive resources and statewide training opportunities
- Impact public policy
- Networking opportunities that promote advocacy and best practices. TAADAS Committees address data and outcomes measurement, legislative advocacy and consumer support
- Publish in the TAADAS Times Newsletter
- Discounts at Recovery Books & Things
- Discounted hotel rates
- Credit union membership
APPLICATION FOR MEMBERSHIP IN TAADAS

Membership shall be open to individuals or entities with an interest in addiction, co-occurring, prevention, or recovery support services and subject to payment of membership dues. **Organizational Member** - Any non-profit or governmental organization or entity that is state contracted to provide addiction, co-occurring, prevention or recovery support services is eligible to become an Organizational Member of TAADAS.

**Affiliate Member**—Any organization or business that is affiliated with or wishes to support the efforts of the A&D provider and recovery community.

**Individual Member** - Individual membership is open to any individual with an interest in addiction, co-occurring or recovery support services in Tennessee.

**Student or Retiree Member**—Individual membership open to anyone with an interest in addiction, co-occurring or recovery support services in Tennessee who is retired, unemployed or enrolled in a higher education program or is working towards a LADAC.

**Annual Dues**

<table>
<thead>
<tr>
<th>Category</th>
<th>Revenue Range</th>
<th>Dues</th>
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<tbody>
<tr>
<td>Organizational/Affiliate Member</td>
<td>Annual Revenue &lt; $100,000</td>
<td>$200</td>
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<tr>
<td>with Annual Revenue = $100,000- $500,000</td>
<td>$500</td>
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<tr>
<td>Organization/Affiliate Member with Annual Revenue = $500,000 - $1,000,000</td>
<td>$1000</td>
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<tr>
<td>Organization/Affiliate Member w/ Annual Revenue = $1,000,000 - $2,000,000</td>
<td>$1500</td>
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<tr>
<td>Organization/Affiliate Member with Annual Revenue &gt; $2,000,000</td>
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<tr>
<td>Individual Member</td>
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<td>$100</td>
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<tr>
<td>Retiree or Student Member</td>
<td></td>
<td>$50</td>
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*Minimum suggested leadership pledge ... you may pledge more

Date: ___________ * Referring Member: (If Applicable) ____________________________

Name: ________________________________________________________________

Agency: ______________________________________________________________

Address: _____________________________________________________________

City: ______________________ State: _____ Zip Code: ________________

Phone: ________________________ Toll Free: ____________________________

Fax: _________________________ Email: _______________________________

Non-Profit: Yes       No

Government contracted: Yes       No

Agency Website: ______________________________________________________

Agency Representative: _______________________________________________

Representative Email: ________________________________________________

Please send your completed application to TAADAS at 615-780-5905 (fax) or taadas@taadas.org

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This project is funded by the Tennessee Department of Mental Health and Substance Abuse Services

Find us on Facebook
The Teen Institute is an exciting and educational 5-day youth leadership assembly hosted by JACOA (Jackson Area Council on Alcohol and Drug Dependency). TTI provides education and training for teens ages thirteen to eighteen in areas of personal development, leadership, alcohol/drug abuse prevention and safe driving. Participants will enjoy outstanding keynote presenters and workshops as well as the fun-filled night time activities. If your school, church, or youth organization is interested in sponsoring a team to attend this thrilling experience or if you would like more information, please contact the Teen Institute Director, at JACOA (731) 423-3653 or kristit@jacoa.org or you can visit www.tnteeninstitute.net.