

Substance and Alcohol Misuse: Prevention and Treatment Regional Health Improvement Plan Workgroup

Join Zoom Meeting https://zoom.us/j/254699270https://zoom.us/j/254699270

Join by phone: +1 669 900 6833 Meeting ID: 254 699 270

> July 14, 2020 3:30-5:00pm

Aim/Goal

Create and enhance cross-sector collaborations and programming so that all Central Oregonians have equitable access to skilled, evidence-based substance and alcohol misuse prevention, intervention, treatment, and recovery services that are culturally responsive and trauma-informed.

Future State Measures

1. Decrease binge drinking among adults.

2. Decrease vaping or e-cigarette use among youth.

3. Increase services for alcohol or drug dependence for individuals newly diagnosed.

4. Reduce mental health/substance abuse ED visits in Madras, Prineville and Warm Springs.

*See full measures on next page.

AGENDA

- 3:30-3:45 Welcome, Land Acknowledgement, Guiding Principles
- 3:45-4:00 Finalize Root Cause Analysis

4:00-4:30 Workgroup Reflections on Equity: Root Cause Analysis & Upcoming Strategic Directions – Ignatius Bau, DEI Consultant

- Reading: Understanding the Link Between Racial Trauma and Substance Use Among American Indians
- 4:30-5:00 Strategic Directions



Substance and Alcohol Misuse: Prevention and Treatment

	Future Sta	ite Measures – Full Detail						
1.	By December 2023, only 25% of adu drinking on at least one occasion ov	•	regon reported binge					
2.	By December 2023, reduce the perc vaping or using e-cigarettes by 10% County, 26.5% in Deschutes County Survey).	percent in each county, resul	ting in only 20.2% in Crook					
3.	By December 2023, 30% of Medicaid members (ages 13 and older) who are newly diagnosed with alcohol or other drug dependence and who began treatment within 14 days of the initial diagnosis will have two or more additional services for alcohol or other drug dependence within 30 days of their initial treatment. (Quality Incentive Measure (QIM))							
4.	By December 2023, Mental Health/Substance Abuse Emergency Department visits per 1,000 will be reduced by 25% in highest rate locations:							
	Warm Springs	Prineville	Madras					
	35.3	15	13.8					



ional Health Improvement Plan (RHIP) workgr

Guiding Principles

Shared Focus

We come together to improve the health and well-being of individuals living in various and diverse communities throughout Central Oregon region. We use the Regional Health Improvement Plan (RHIP) as our guide. It is our region's shared vision of current problems and our aims. As workgroup partners we develop agreed-upon actions to solve the issues and keep the needs of our communities as the main focus.

Shared Metrics

We measure progress, process and outcomes through a shared lens. We use the Regional Health Assessment (RHA), Regional Health Improvement Plan and community dashboard.

Involve Targeted Population

The individuals living in our diverse Central Oregon communities are the center of our work. We make every effort to include people from every part of the region in our workgroups, discussions, processes and decisions.

Collaborate to Solve Complex Issues

Inviting diverse perspectives from throughout the Central Oregon region deepens our shared understanding of complex issues and propels us toward better progress and outcomes. We practice frequent, structured, open communication to build trust, assure shared objectives, and create common motivation. We respect the privacy and sensitivity of information partners share.

Coordinate Collective Efforts

We are made up of diverse partner organizations and individuals with unique strengths, skills, and resources. We coordinate our efforts and use our unique strengths and skills to meet the goals of the RHIP.

Learn and Adapt Together

We embrace shared learning and a growth mindset. We create a space that allows for mistakes, failures, second changes, and a celebration of brave attempts. We adjust and apply our learnings to the complex and changing landscape of health and well-being in Central Oregon.

Substance and Alcohol Misuse: Prevention & Treatment

Background: Why are we talking about this?

1980s social norming of alcohol increases /	1 in 10 Oregonians struggle with drugs or alcohol costing the
legalization of brew pubs on Oregon	state \$6 billion /year. These illnesses are common, recurrent
1990s opioids are introduced for pain treatment	and treatable. Research indicates that preventing substance
2007 E-cigarettes are introduced in the US	misuse can have far reaching implications for individuals,
2016 marijuana is legalization in Oregon	families and our community, including impact on education,
2019 Surgeon General Report on Marijuana	community safety, health care, employment and quality of life.

Current Condition: What's happening right now?

- As of 2019, 19 cases of vaping related illnesses have been reported in OR, leading to 2 deaths
- Oregon has one of the highest rates of misuse of prescription opioids in the nation
- Deaths from methamphetamine overdoses in Oregon are up 400% between 2012 and 2017 **Current State Metrics:**
- 1. 37.4% of adults age 18-34 in Central Oregon reported binge drinking at least once in the past 30 days
- 2. 11th graders vaping or using e-cigarettes: Crook 22.6%, Deschutes 29.4%, Jefferson 16.6%
- 3. 7.8% of Medicaid members diagnosed with alcohol or drug dependence and who began treatment within 14 days of diagnosis, had 2 or more additional services within 30 days of initial treatment
- 4. Mental health / substance abuse ED visits per 1,000: Warm Springs 47, Prineville 20.1, Madras 17.2

Goal Statement: Where do we want to be in 4 years?

Aim/Goal

Create and enhance cross-sector collaborations and programming so that all Central Oregonians have equitable access to skilled, evidence-based substance and alcohol misuse prevention, intervention, treatment, and recovery services that are culturally responsive and trauma-informed.

Future State Metrics - By December 2023:

- 1. Decrease binge drinking among adults.
- 2. Decrease vaping or e-cigarette use among youth.
- 3. Increase additional services for alcohol or drug dependence for individuals newly diagnosed.
- 4. Reduce mental health/substance abuse emergency department visits in Madras, Prineville and Warm Springs.

Analysis: What's keeping us from getting there?

- Targeted seductive marketing encourages use •
- Minimization of risk & harm impact prevention & care
- Data is not easily accessible or known •
- Historical investment patterns impact SUD services •
- Alcohol culture dominates the local lifestyle •
- Inadequate screening & guidance at all contact points •
- Trauma significantly impacts well-being •
- Inaccessible & inequitable housing options •
- Inconsistent & ineffective health messaging •
- Pervasive stigma impedes prevention & access to care •

Date updated:			(group:		
Strategic	Direct	ion:	What	t are	W
{insert}					
					1
_					
Focused	Implen	nent	ation	:Wh	at
what, wh	nen, wł	nere	?)		
{insert}					_
Follow-U	p: Wha	at's v	worki	ng? '	WI
	p: Wha	at's v	worki	ng? \	WI
Follow-U	p: Wha	at's v	worki	ng? \	WI
Follow-U	p: Wha	at's v	worki	ng? \	WI



e our specific actions? (who,

have we learned?

Unnamed area

Substance and Alcohol Misuse:Prevention and Treatment

