



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

Join Zoom Meeting

<https://us02web.zoom.us/j/81785017351?pwd=bEZ4T2tPSjdUeXVQWGtzV2tGV1hoZz09>

Join by phone:

+1 719 359 4580

Meeting ID: 817 8501 7351

Passcode: 444700

May 9, 2023

3:30-5:00 PM

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
<ol style="list-style-type: none"> 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. <p>*See full measures on next page.</p>

AGENDA

3:30-3:45 PM	Welcome, introductions, announcements, packet review
3:45-4:50 PM	Implementation plan development <ul style="list-style-type: none"> • RFP development: binge drinking prevention campaign • Youth Engagement in Vaping Prevention application review • Increasing detox beds & services
4:50-5:00 PM	Wrap-up and next steps

Working Document: https://docs.google.com/presentation/d/1O8HdpfQPrk-9T8K0tKUycX3kd_abi3FtoS4Utva0cM/edit?usp=sharing

Workgroup Budget: <https://docs.google.com/spreadsheets/d/1Gw9dL6ilRe1olGhJRMloXg9pEUofJ-KzU5WnscBbEX8/edit?usp=sharing>

Substance and Alcohol Misuse: Prevention and Treatment

Future State Measures – Full Detail

1. By December 2023, only 25% of adults aged 18 to 34 in Central Oregon reported binge drinking on at least one occasion over the past 30 days.
2. By December 2023, reduce the percentage of Central Oregon 11th grade students who report vaping or using e-cigarettes by 10% percent in each county, resulting in only 20.2% in Crook County, 26.5% in Deschutes County, and 14.9% in Jefferson County (OR Student Health Survey).
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

Land Acknowledgement

We recognize and acknowledge the indigenous land of which we live, work, learn, play, and grow. This is the land of the Warm Springs, Wasco, Northern Paiute, Tenino, Klamath, Molalla, and Yahooskin. We acknowledge them as the past, present, and future caretakers of this land. It is on their traditional land where we partner to improve the health and well-being of Central Oregonians. We aspire to be good guests honoring the concept in the Warm Springs culture: “This land is for you to know and live upon and pass on to the children.”

Substance and Alcohol Misuse: Prevention & Treatment



Background: Why are we talking about this?

<p>1980s social norming of alcohol increases / legalization of brew pubs on Oregon</p> <p>1990s opioids are introduced for pain treatment</p> <p>2007 E-cigarettes are introduced in the US</p> <p>2016 marijuana is legalization in Oregon</p> <p>2019 Surgeon General Report on Marijuana</p>	<p>1 in 10 Oregonians struggle with drugs or alcohol costing the state \$6 billion /year. These illnesses are common, recurrent and treatable. Research indicates that preventing substance misuse can have far reaching implications for individuals, families and our community, including impact on education, community safety, health care, employment and quality of life.</p>
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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: 5.2023

Strategic Direction: What are we going to try?

- Expanding Prevention and Community Education
- Broadening Partnerships to Align Efforts
- Diversifying and Expanding Intervention and Treatment
- Accelerating Systems, Policy and Environmental Change
- Formalizing Diverse, Welcoming Approaches

Focused Implementation: What are our specific actions? (who, what, when, where?)

When	What	
10.21	Binge Drinking Regional Assessment Consultant	Funded
03.22	Treatment referral card distribution	Funded
03.22	Peer Support Specialist Org Funding	Funded
04.22	Peer Support Specialist Sustainability Consultant	Funded
01.23	Healthy Retail Assessment	Funded
05.23	Youth Vaping RFP	In review
05.23	Binge Drinking Prevention Campaign RFP	In Development

Follow-Up: What's working? What have we learned?

{insert}



**Central Oregon
Health
Council**

Regional Health Improvement Plan (RHIP) Workgroup

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 chances, 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.

Five-Year Investment Overview
All Workgroups
 January 2020–December 2024

Budget	Spent	Available
\$12,000,000	\$7,144,584.04	\$4,855,416

Workgroup	Spent	Available
Address Poverty	\$941,993.79	\$1,058,006.21
Behavioral Health	\$1,914,157.00	\$85,843.00
Physical Health	\$1,117,158.56	\$882,841.44
Stable Housing	\$1,129,654.00	\$870,346.00
Substance and Alcohol Misuse	\$617,494.69	\$1,382,505.31
Upstream Prevention	\$1,424,126.00	\$575,874.00

Overview				
		Budget	Spent	Available
	5-Year	\$2,000,000	\$617,494.69	\$1,382,505.31
	Yearly Mini-Grant	\$17,877	\$0.00	\$17,877.31

By Future State Measure (5 year)						
	Budget* [1]	Spent	Available [2]	Currently Allocated [3]	Projected Available [4]	Notes [5]
Binge Drinking	\$488,750.00	\$150,553.69 [6]	\$338,196.31		\$338,196.31	
Vaping E-Cigarettes	\$488,750.00	\$36,281.00	\$452,469.00	\$350,000.00	\$102,469.00	
SUD Services	\$488,750.00	\$202,830.00	\$285,920.00	\$200,000.00	\$85,920.00	
ED visits	\$488,750.00	\$239,111.00	\$249,639.00		\$249,639.00	

*Budget for each FSM reflects the agreed upon 5 year 'soft budget' of \$500,000 minus the portion contributed to shared minigrant budget.

2023 Investments						
Organization	Process	Project	Award	Decision Date	Future State Measure	Latest Report
Upstream Public Health	Standard Grant Sustaining Peer Services Application (2020-2024 RHIP)	Upstream Healthy Retail Community Assessment for Central Oregon	\$34,792.00	1.23	Reduce the percent of 11th graders who report vaping or using e-cigarettes	



Regional Health Improvement Plan (RHIP) Workgroup

Voting Practices

As a partner within the Central Oregon Health Council's (COHC) Regional Health Improvement Plan (RHIP) workgroups, your participation is for the benefit of the region at large. It is not for personal gain, directly or indirectly, or to influence decisions directly benefiting yourself as an individual or an organization you may represent.

However, we recognize that our work often benefits many organizations, and we all stand to gain from the shared wisdom of our many RHIP workgroup partners. As such, you are still allowed to:

- Advocate for funding to an organization with which you have a professional connection
- Be the primary contact for a project requesting funding
- Complete a grant application on behalf of an organization

We ask workgroup partners to recuse themselves from final discussions or votes around funding for their organization or those with which they are affiliated.

For transparency purposes, workgroup voting partners must complete a yearly [conflict of interest statement](#) to maintain voting status.

It is common for organizations to have more than one person on a RHIP workgroup.

- When it is time to vote, people from the same organization will share a single vote.
- You will have a single vote if you are not associated with an organization (i.e., community member).

A decision is made when:

- At least 50% of the eligible voting partners vote.
- And when 75% of the Voting Partners are in agreement

Workgroup facilitators often use a method called a Focused Conversation. This technique encourages everyone to participate and brings the group closer to consensus. The Focused Conversation is followed by an electronic vote.



Consensus is defined as:

- Finding and creating areas of shared understanding.
- A coming together of the common sense of the whole group.
- An agreement that everyone can live with.