

Prevention Learning Community Meeting

Hosted by: Division of Behavioral Health & Recovery

March 22, 2017

9:00 a.m.-12:00 Noon



Agenda

9:00 - 9:10 a.m.	Welcome / Introduce new prevention providers to the call
9:10 - 9:40 a.m.	Important OSPI Communication <ul style="list-style-type: none">• Healthy Youth Survey Workshops <i>Krissy Johnson</i> Important DBHR Communication <ul style="list-style-type: none">• Training updates <i>Lucilla Mendoza</i>• Evidence-based Practice program list update <i>Julia Havens</i>• Rx/Opiate misuse/abuse prevention messaging <i>Julia Havens</i>• Funding opportunities <i>Sarah Mariani</i>• Recognition <i>Lucilla Mendoza</i>
9:40 - 9:50 a.m.	Minerva Updates <i>Sarah Mariani</i> Behavioral Health Administrator DBHR
9:50 - 10:00 a.m.	Mapping Washington Suicide Prevention Efforts <i>Neetha Mony</i> Community Health Consultant DOH <i>Danny Highley</i> Prevention System Manager DBHR
10:00 - 10:30 a.m.	State-wide 2016 CPWI Community Survey Results <i>Rebecca Grady, Ph.D.</i> Prevention Research Manager DBHR
10:30 - 10:40 a.m.	Safe guarding Data Books <i>Julia Havens</i> Prevention System Implementation Manager DBHR
10:40 - 10:55 a.m.	Legislative Updates <i>Tim Gates</i> Prevention Policy and Project Manager DBHR



Welcome New Attendees!

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Welcome She:kon
Bienvenue vítaný welkom
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välkommen
Chào mung benvenuto



Krissy Johnson | Student Assistance Program Supervisor | OSPI

OSPI COMMUNICATION

(See separate slide deck)



DBHR COMMUNICATION

(No slides)



TRAINING ANNOUNCEMENTS

Training / Location	Training Date (s)
Mentoring Works WA – Mentoring Best Practices Builders Forum Webinar	March 23, 2017
Working Together to Support Positive Student Behavior Conference Live Streaming Available (Florida, WA)	March 24 – 25, 2017
Curriculum Based Support Group Training (GBSG) Pierce County, WA	March 28-29, 2017
College Coalition for Substance Abuse Prevention Webinar – E Cig and Vaping Webinar	April 6, 2017
Incredible Years Classroom Dinosaur Curriculum Training Colfax, WA	April 12 – 14, 2017
Native American – Substance Abuse Prevention Skills Training Lower Elwah Klallam Tribe, Port Angeles, WA	April 18-21, 2017
Ethics Training MARCH CANCELLED – MOVED TO FOCUS ON THE	April 24, 2017
Student Support Conference & Assessing and Managing Suicide Risk Yakima, WA	May 10-12, 2017
Spring Youth Forum Great Wolf Lodge, Chehalis WA	May 17, 2017
Saying It Out Loud Conference – REGISTRATION SCHOLARSHIPS AVAILABLE Tacoma, WA	May 22, 2017
Society for Prevention Research Washington, DC	May 30-June 2, 2017 http://www.preventionresearch.org/
Summer Coalition Leadership Institute Lacey, Tumwater, Olympia (Thurston County)	June 20 & 21, 2017



CPWI SPF WEBINAR SERIES

- Da
- 3p
- SP
- IN

Home | Prevention Headlines | **Training** | Learning Community | Learning Library | Who's Who in Prevention | Prevention Priorities

Upcoming Trainings

CPWI Trainings

CTC Study Guides

OWL E-Learning

PBPS Training

SHARE [Facebook] [Twitter] [Email] ...

Quick Links

- Site Map
- Calendar
- Shared Documents
- Community Prevention and Wellness Initiative (CPWI)
- State Projects
- Minerva - Reporting

[Home](#) » [Training](#) » CPWI Trainings

CPWI Trainings

These trainings are specifically designed and developed for CPWI coalition staff and members. If the training title has a green "+" next to it, you can click on the title to expand a list of related documents such as the PowerPoint presentation and handouts. Some trainings are also available to view with the audio as a webinar through the [OWL E-Learning](#) system.

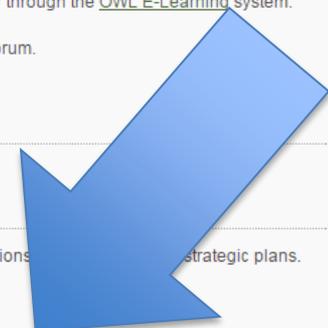
NEW: A list of [Self-Guided Training](#) opportunities you can find on The Athena Forum.

General CPWI Trainings:

2017 SPF Training Series

These webinars (and one in-person training) are designed to assist CPWI Coalitions with their strategic plans.

Topic	Date & Time	Link to GoToMeeting
<i>Organizational Development, Governance, Mission Statements</i>	Jan 31 9-11 am	https://attendee.gotowebinar.com/register/2004878469465804545
<i>Organizational Development Technical Assistance (Drop-in TA Call)</i>	Feb 16 2-3pm	https://global.gotomeeting.com/join/778613469
<i>Needs Assessment, Data Resources, and Resources Assessment</i>	Feb 15 9-11am	https://attendee.gotowebinar.com/register/9221819906513306113
<i>Assessment Technical Assistance (Drop-in TA Call)</i>	Feb 28 11-12noon	https://global.gotomeeting.com/join/869528973
<i>Data Books</i>	Mar 31 1-3pm	https://attendee.gotowebinar.com/register/8757103620452742659
<i>Needs Prioritizations and Comprehensive Approach Planning (Prevention Strategies, Goals and Objectives, Logic Model, Budget Planning)</i>	Apr 6 9:30-4pm	In Person Training. Reserve your spot at: https://attendee.gotowebinar.com/register/7140788542273290243



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Mentoring Best Practices Builder Forum

- Participants from new and developing mentoring programs in community, school or site-based programs.
 - March 23: Matching
 - April 27: Training
 - May 25: Monitoring and Support
 - June: Match Closure
- **Questions:** Pamila Gant, Sr. Program Officer, Outreach and Training phone (425) 679-5562;
pgant@mentoringworkswa.org



CPWI Training Highlights

- Curriculum Based Support Group Training (CBSG) (March 28-29)
- Incredible Years Classroom Dinosaur Curriculum Training (April 12-14)
- Eastern Washington Sector Summit (April 24)
- Focus on the Future TOGETHER! For Healthy Communities & Prevention Ethics Training (April 24-27)



Communities Talk



TOWN HALL MEETINGS E-ALERT

Special Edition

SAMHSA's National Prevention Week Webinars – Register Now

SAMHSA is pleased to announce a series of technical assistance webinars around [SAMHSA's National Prevention Week 2017](#) that have been developed specifically to support organizations working on the front lines of prevention. Using this year's NPW theme—Making Each Day Count—our webinars provide assistance and resources to states, CSAP grantees, and local community-based organizations to raise awareness and educate their communities on various prevention topics during NPW, May 14-20, 2017.

[READ COMPLETE ARTICLE >>](#)

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National Prevention Week



- <https://www.samhsa.gov/prevention-week>

The screenshot shows the SAMHSA website's National Prevention Week page. At the top is the SAMHSA logo and navigation tabs for 'Find Help & Treatment', 'Topics', 'Programs & Campaigns', and 'Grants'. Below the navigation is a banner for National Prevention Week with the SAMHSA logo, the text 'national prevention week', and a 'MAKING EACH DAY COUNT' graphic showing the dates '20 17' for May 14-20, 2017. The main heading is 'National Prevention Week'. The text below explains that National Prevention Week is an annual health observance dedicated to increasing public awareness of, and action around, mental and/or substance use disorders. It also mentions that SAMHSA's next National Prevention Week will be from May 14 to 20, 2017, with the theme 'Making Each Day Count'. There are four featured sections: 'Free NPW Promotional Materials', 'NPW Planning Toolkit', 'Community Events', and 'Our Partners'. Each section includes a brief description and a link to learn more.



Important Items to Note

- Evidence-based Practice program list update
 - *Updated DMA program lists for 2017-18 will be announced by April 6th*
- Rx/Opiate misuse/abuse prevention messaging
 - Mid April – launch in concert with Rx Take-Back Day
 - DEA Take-Back Day – Saturday, April 29th – please work with Law Enforcement Partners to register a collection site

www.deadiversion.usdoj.gov/drug_disposal/takeback/
- Funding opportunities

CPP Congratulations





Neetha Mony, MSW | Statewide Suicide Prevention Plan Program Manager |
Department of Health

MAPPING WASHINGTON SUICIDE PREVENTION EFFORTS



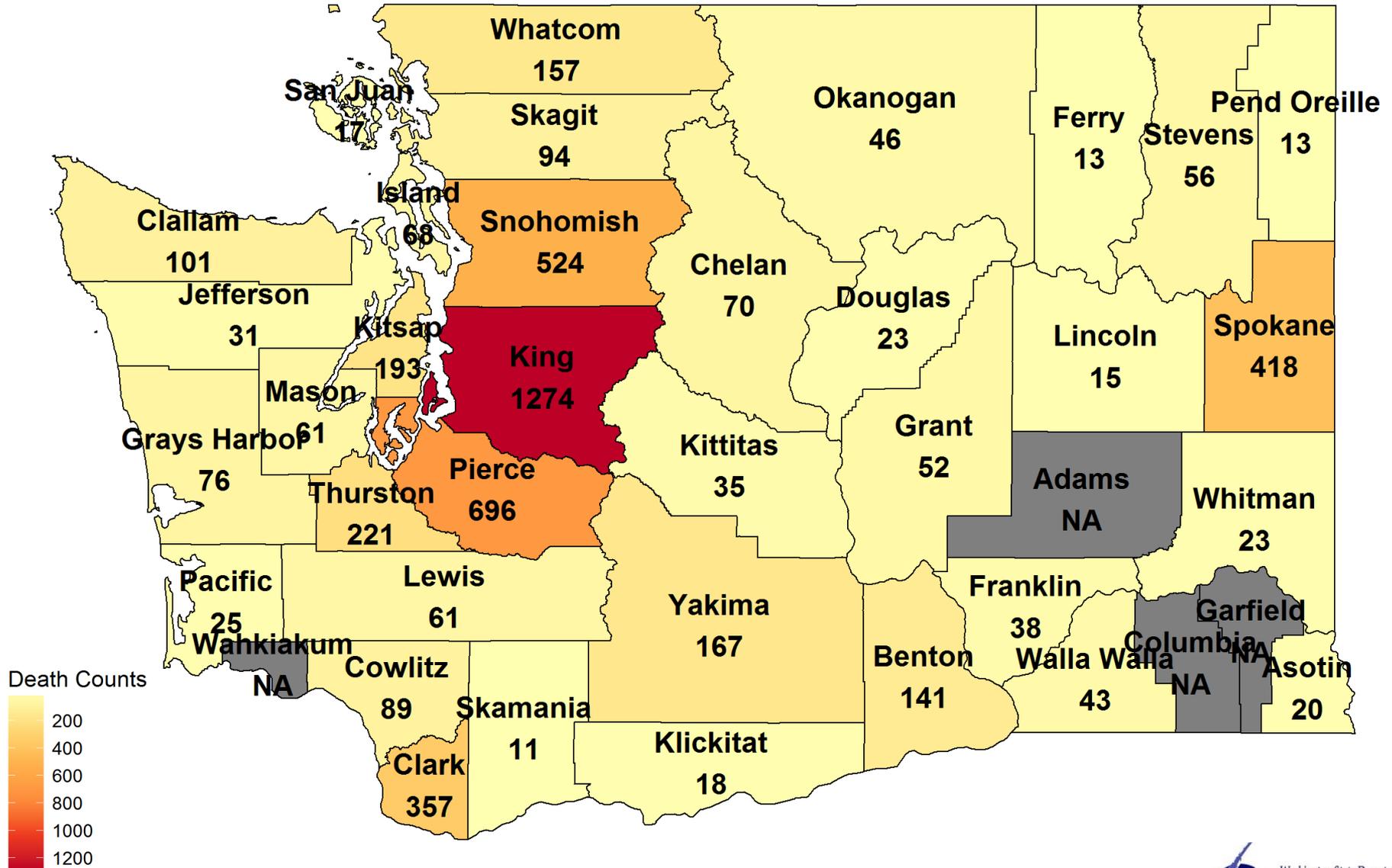
WA Suicide Prevention Efforts

March 22, 2017

PUBLIC HEALTH
ALWAYS WORKING FOR A SAFER AND
HEALTHIER COMMUNITY



2011 - 2015: 5,412 Suicides



Executive Order 16-02

- Conduct a [gap analysis](#) to determine the effectiveness of statutorily mandated our system for background checks
- Attorney General's office to [update 2007 white paper](#) on firearm access by those prohibited from possessing a firearm
- Amass data on deaths and injury hospitalizations attributed to firearms; recommend evidence-based prevention and safety strategies to reduce deaths and serious injuries
- Implement the [Washington Statewide Suicide Prevention Plan](#) recommendations

WA's Suicide Prevention Plan



WA Suicide Prevention Resource Map Survey

To promote awareness, communication, and collaboration, we are creating a public resource map (and directory) of suicide prevention-related services.

If you or your agency offer services, please complete the survey by April 17.

- At a minimum, please include your name, location, and contact information or website.
- The survey also asks for type of agency, services, languages, and if you serve specific populations.

And forward it on!

WA Suicide Prevention Resource Map Survey

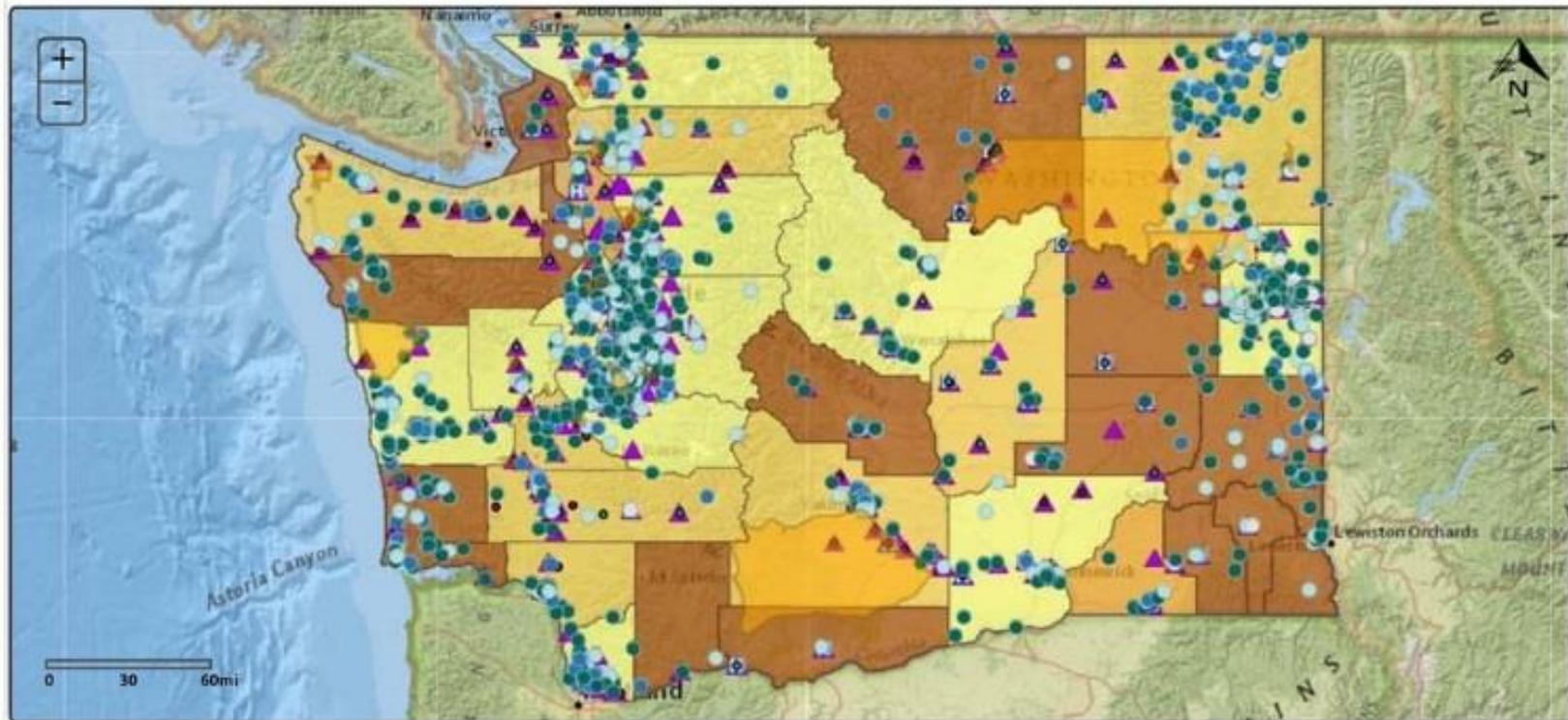
We offer these services: *

- Counseling (general)
- Counseling (suicide treatment and management)
- Crisis response
- Depression/suicide screening
- Grief support
- Hotline
- Peer support
- Safe storage of lethal means
- Social marketing campaign
- Suicide prevention
- Suicide intervention
- Suicide postvention
- Training (general mental health)
- Training (suicide prevention)
- Other:

We offer tailored services for these prioritized populations:

- Aging/elderly
- American Indian/Alaskan Native
- Chronic and advanced illnesses
- College students
- Domestic violence
- Foster care/adoption
- LGBTQ
- Homeless
- Men
- Incarcerated/parole
- Sexual violence
- Substance abuse
- Trauma/PTSD
- Unemployed
- Veterans/military
- Women
- Youth

Example WTN Resource Map



Adjust Transparency



Select Layers to Display

- Clinics
- Hospitals
- Mental Health Clinics
- Rural Health Clinics
- WAITING
- STARTED
- FINISHED
- Toxic Site Clean-up Status
- Tribal Clinics
- Tribal Land Boundary

Resources

- [Resource Map Survey](#)
- [DOH Suicide Prevention website](#)
 - [Update on Executive Order 16-02: Firearm Fatality Prevention – A Public Health Approach](#)
- [Gap Analysis on background checks](#) by the Office of Financial Management
 - [Interactive map](#)
- [2016 White Paper on firearm access](#) by the Office of the Attorney General



Rebecca Grady, Ph.D. | Prevention Research Manager | DBHR

STATE-WIDE 2016 CPWI COMMUNITY SURVEY RESULTS

The 2016 Community Survey

Community Prevention and Wellness Initiative

March 22, 2017

Prepared by
DBHR Decision Support & Evaluation

Presented by Rebecca Grady
Rebecca.Grady@dshs.wa.gov

Today's presentation

- *CPWI Community Survey* overview & process
- Findings from the *2016 Community Survey*
 - Using your data/reports
 - A snapshot of state results
- Conclusions and Q&A

2016 Survey

SURVEY OVERVIEW & PROCESS

What is the Community Survey?

- Yearly survey administered by community coalitions
 - Started in 2008 with 12 communities
- Captures local attitudes about teen alcohol & drug use and prevention programming
- Data informs coalition's prevention strategies

Fielding the survey in 2016



59
coalitions

Administration Type	
Data Entry	36% (4,859)
English Online	63% (8,546)
Spanish Online	1% (151)



13,556
Total
respondents

- Thank you to everyone working on the survey administration!
- Coalitions had a target minimum number of surveys to administer, based on population - vast majority met target

Survey Recruitment – additional recognition

Achieved over 150% of target responses

**Auburn
Bellingham
Marysville
Omak
Bethel
Ferndale
Washougal
White Center/Highline
Hoquiam
Dayton
Prosser
San Juan
Long Beach
Vashon Island**

Surveyed at least 4% of community members

**Tekoa
Pomeroy
Waterville
Morton
Cusick
Auburn
Wahkiakum
Crescent/Joyce
Dayton
Darrington
Klickitat/Lyle
White Swan**

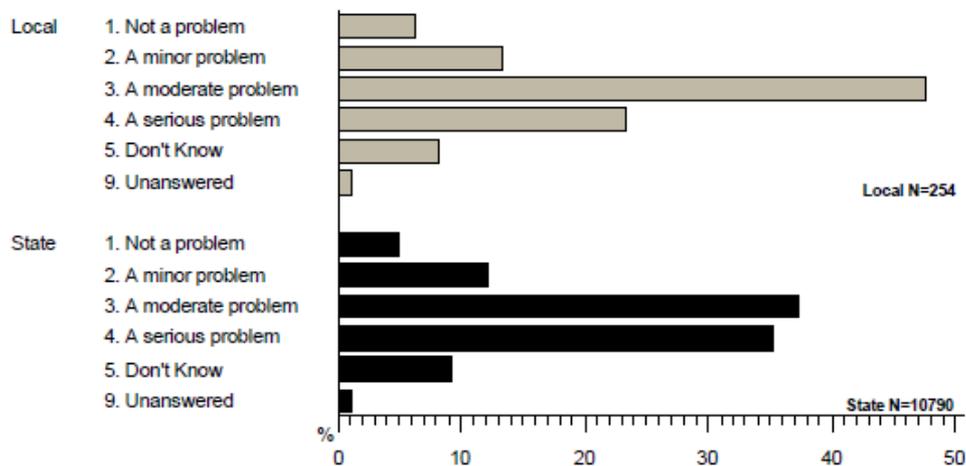
2016 Community Survey

TIPS FOR USING THE RESULTS

Using the Community Survey Data

- A pdf of results, comparing your community to the “state”

01a. How much of a problem do you believe each of the following is among youth (6 – 12th grade) in your community? Alcohol use



Answer	Local		State	
	Count	%	Count	%
1. Not a problem	16	6.3	545	5.1
2. A minor problem	34	13.4	1309	12.1
3. A moderate problem	121	47.6	4034	37.4
4. A serious problem	59	23.2	3795	35.2
5. Don't Know	21	8.3	985	9.1
9. Unanswered	3	1.2	122	1.1

- An excel file with more detail and the combined individual data
- If your community had added questions, a separate pdf with those results

Using the Community Survey Data

- Participants were recruited through a *convenience sample*
- As a result, there are some limitations:
 - Findings may not represent the beliefs/behaviors of your entire community
 - We must be careful about comparing data across regions and over time, but we can make some comparisons with these caveats

Using the Community Survey Data

- But, that doesn't mean the survey isn't useful or that we should discount what the results say!
- The Community Survey provides insights that none of the other data sources we have can provide
- Key: use the Community Survey data *ALONG WITH* other sources of information, such as
 - Healthy Youth Survey
 - Data Books
 - Risk Profiles
 - What you're seeing and hearing "on the ground"

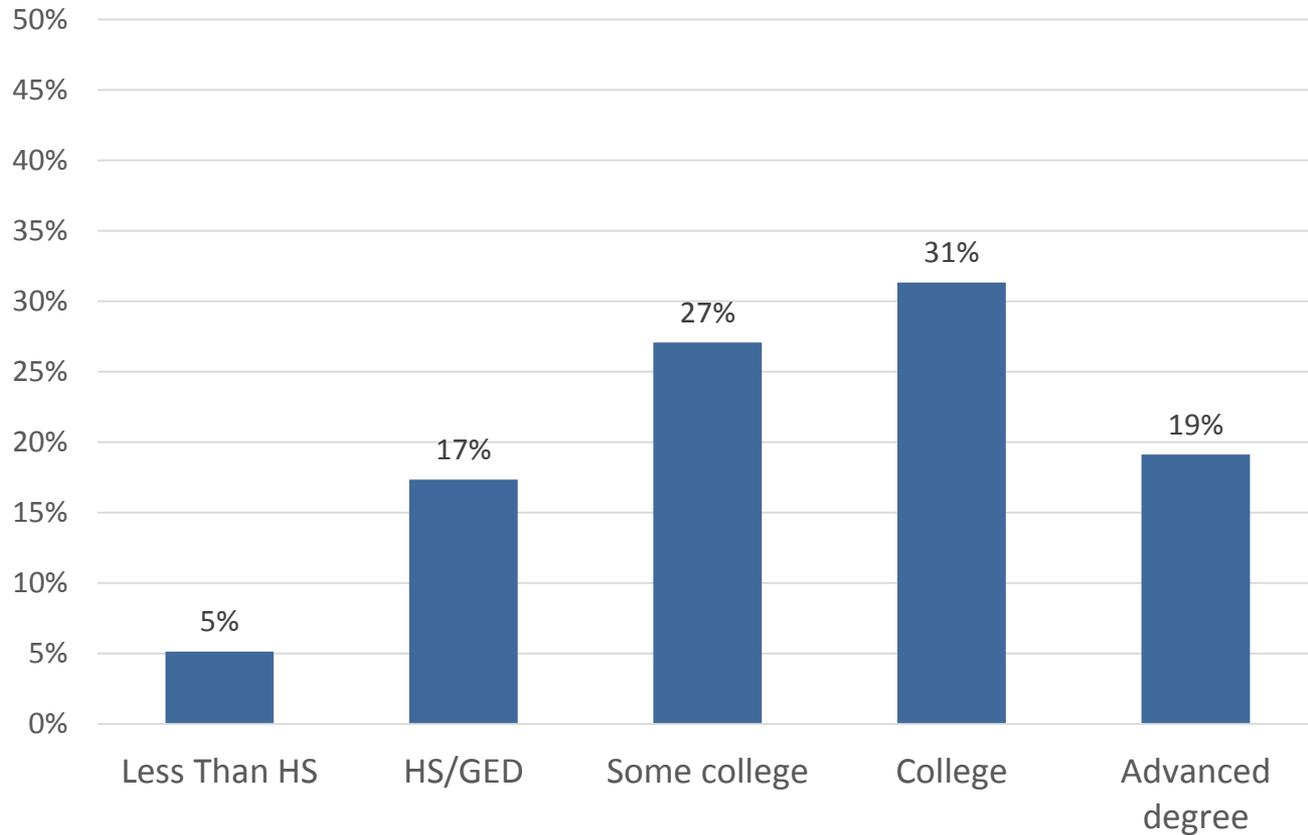
Using the Community Survey Data

- Community Survey can be used
 - To inform strategic planning
 - As baseline information on prevention concerns (for new coalitions) and to monitor change (for existing coalitions)
 - To start a conversation in the community
 - To encourage positive community & parent norms

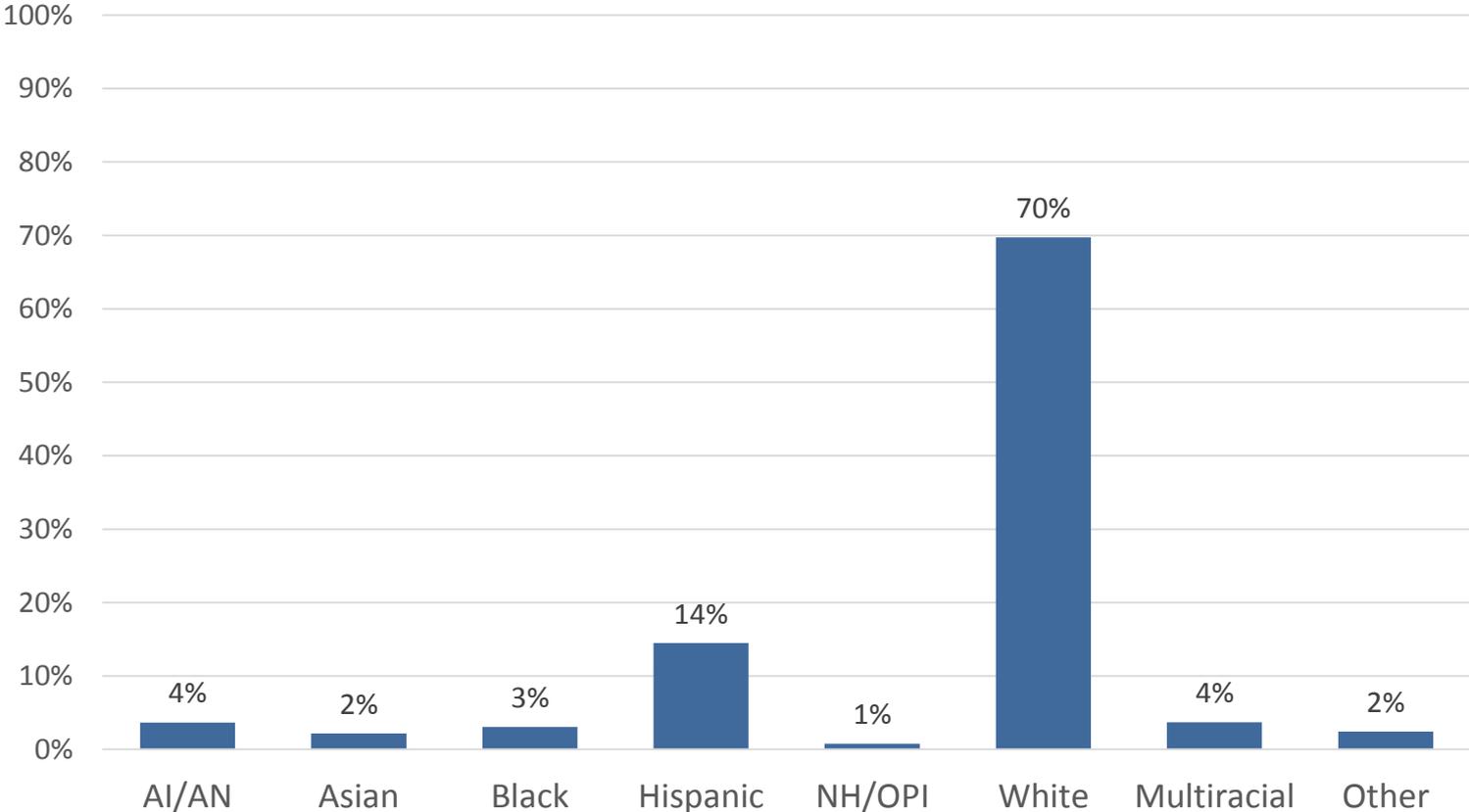
2016 Survey Respondent Demographics

WHO RESPONDED TO THE SURVEY?

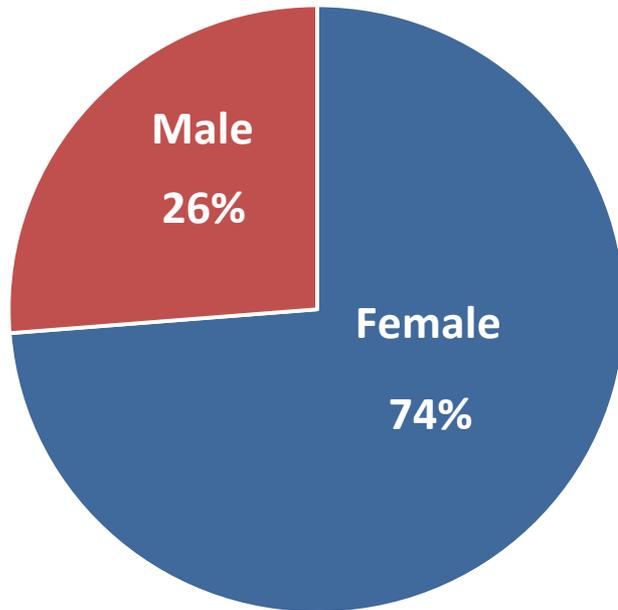
Educational Attainment



Race/Ethnicity

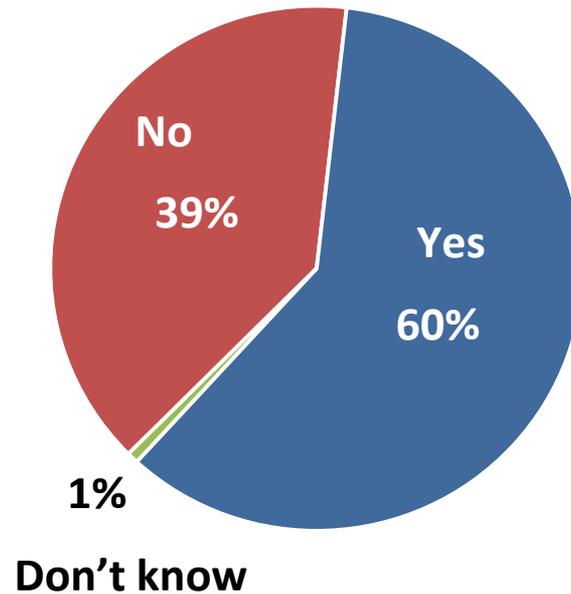


Sex/Gender



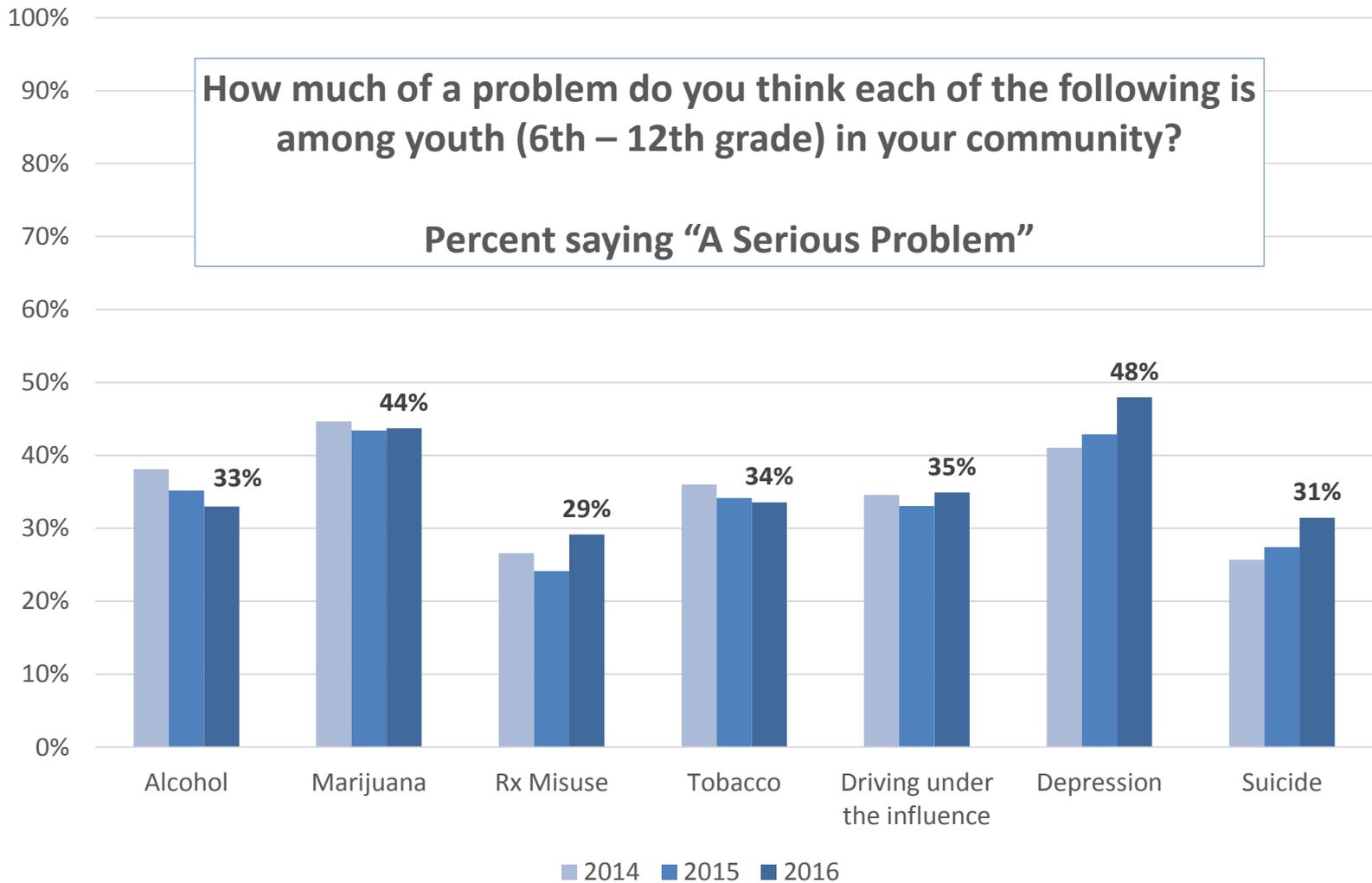
55 respondents (about 0.4%)
identified as Transgender

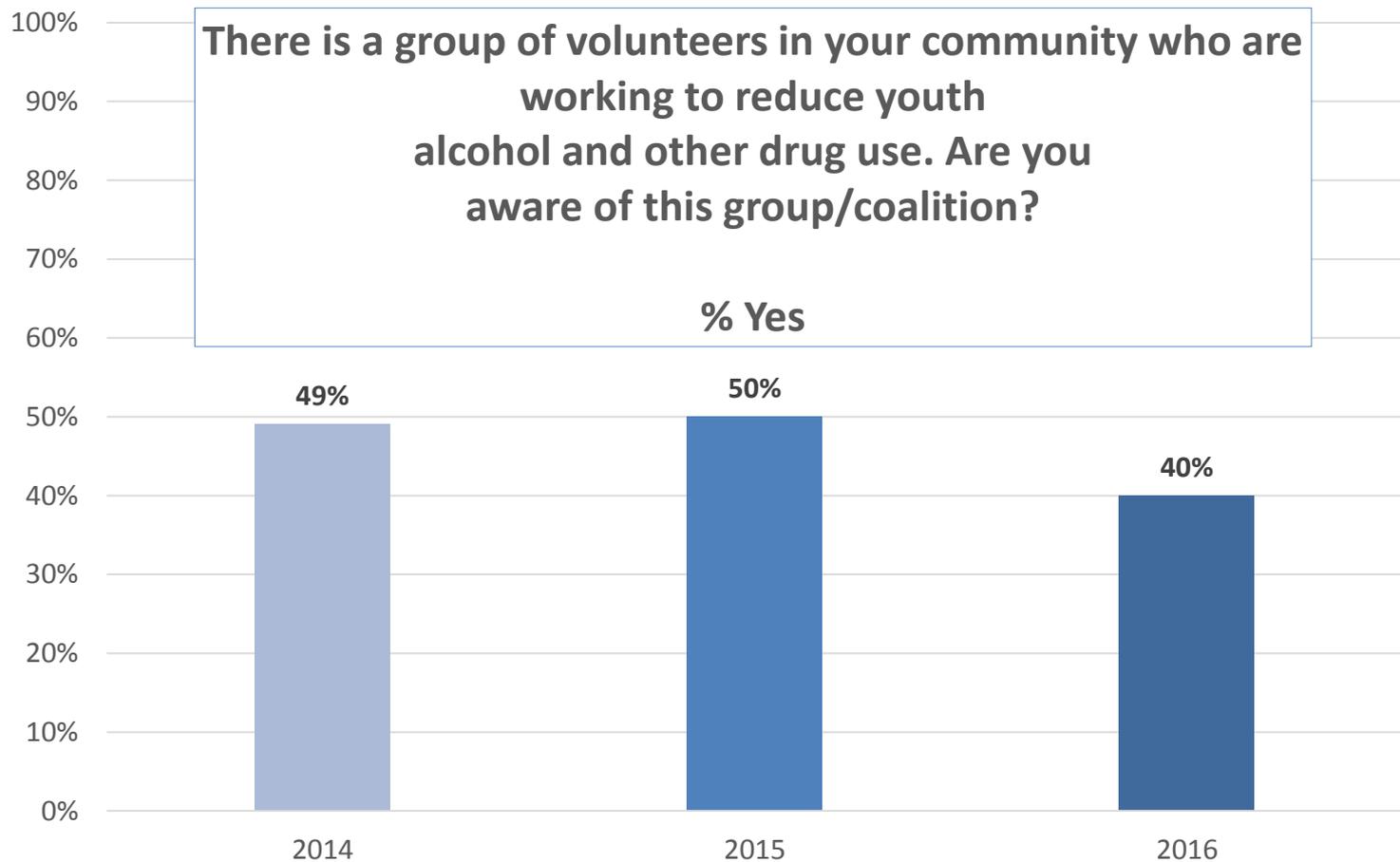
Parent/guardian of a 6th-12th grader



2016 Survey Results @ State Level

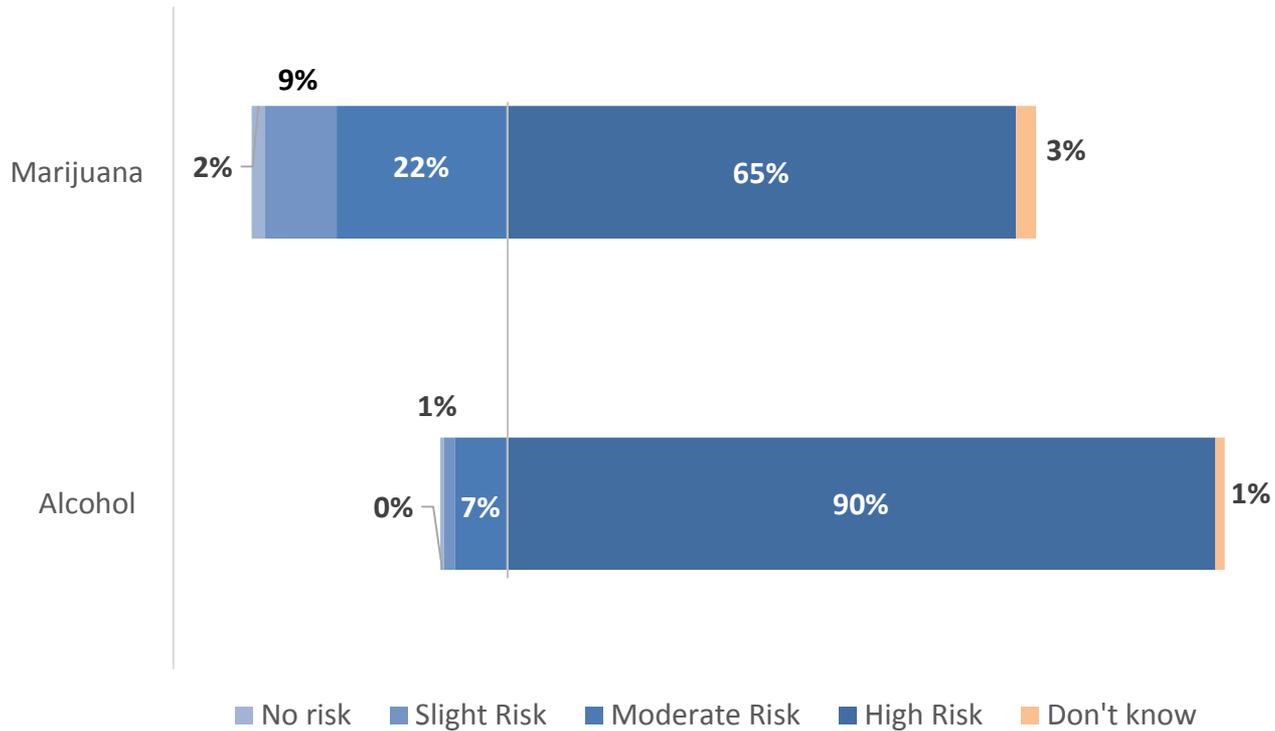
OVERVIEW OF KEY INDICATORS



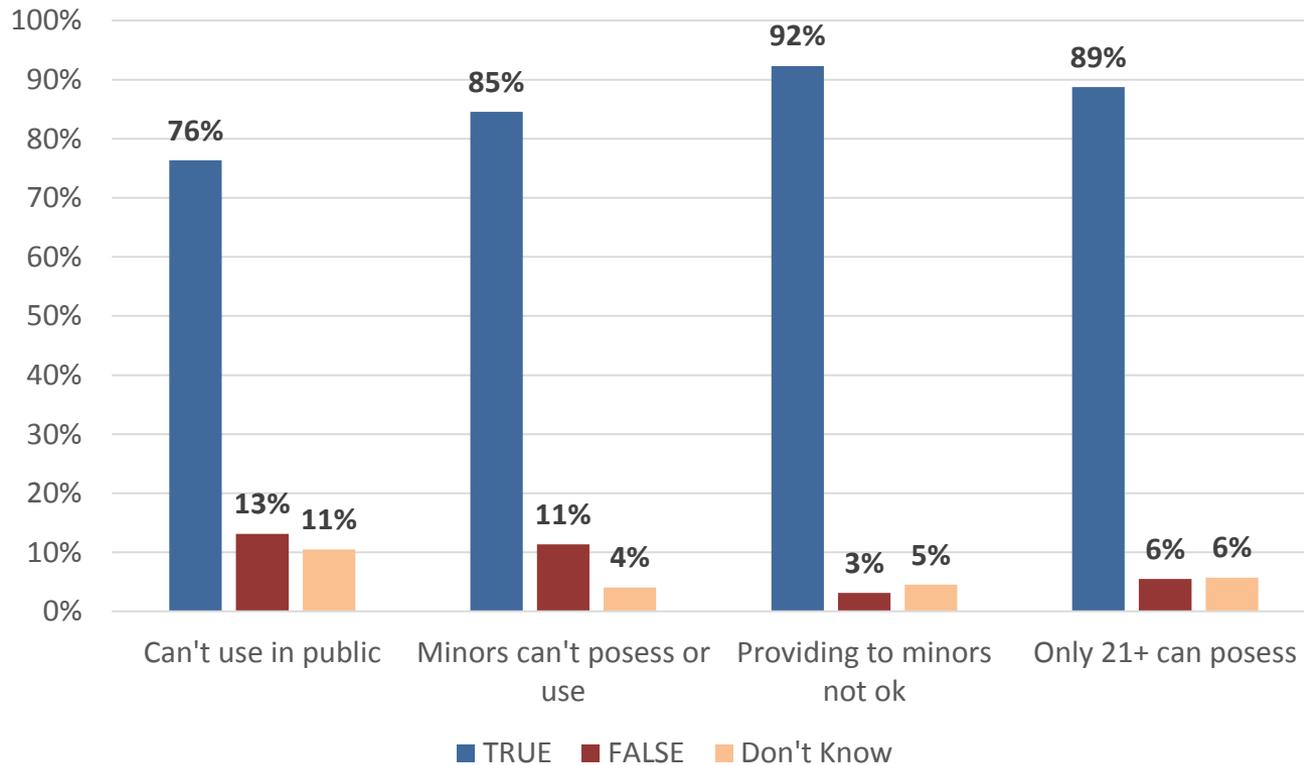


Ranged from 10% (in a very new coalition) to 93% in 2016

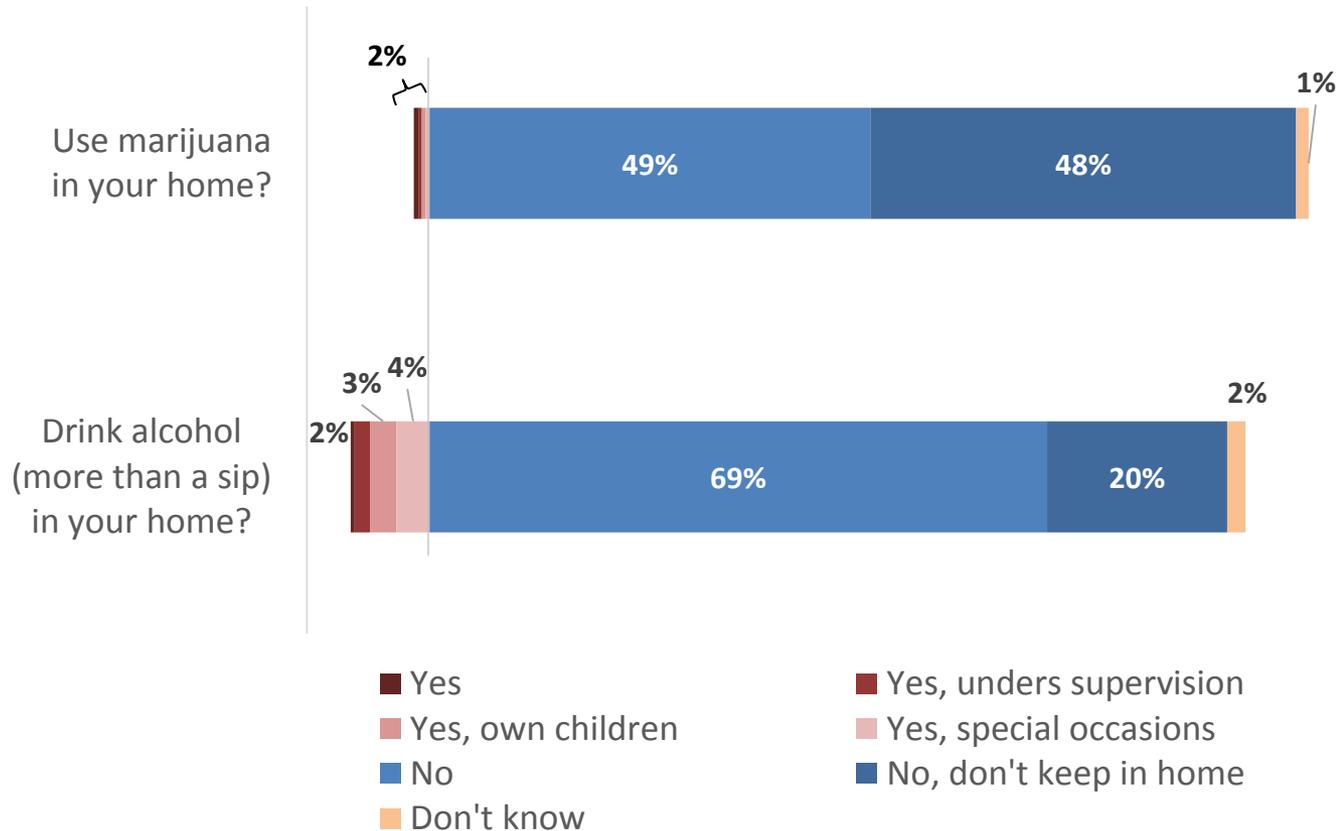
How much do you think people risk harming themselves and others when they drive under the influence?



True or False according to Washington State laws about recreational marijuana?



Do you allow youth to:



Conclusion

- Respondents seem increasingly concerned about teen depression and suicide and possibly also prescription drug misuse, while concern about alcohol may be slightly decreasing
 - It's useful to look at these Community Survey results in tandem with the teen use rates in the Healthy Youth Survey
- Respondents are fairly evenly split on their awareness regarding local prevention efforts, and this varies greatly by coalition

Conclusion

- Community coalitions did well with meeting goals on numbers of respondents
- However, as is a perennial challenge, participants were most likely White women with a college education.
- Consider what your survey results say when making plans for upcoming programming, but remember to consider these results along with other data and what you're seeing "on the ground."

Thank You!!

- Final note:
 - We will be putting together the 2017 Community Survey revision committee in late Spring
 - If you are interested in joining, contact Rebecca at Rebecca.Grady@dshs.wa.gov

Making other kinds of Percentages

	Count	%		Count excluding unanswerd	% excluding unanswerd		Count excluding unanswerd and don't know	% excluding unanswerd and don't know
Not a problem	16	6%		16	6%		16	7%
A minor problem	34	13%		34	14%		34	15%
A moderate problem	121	48%		121	48%		121	53%
A serious problem	59	23%		59	24%		59	26%
Don't know	21	8%		21	8%			
Unanswerd	3	1%						
Total	254	100%		251	100%		230	100%



Julia Havens | Prevention System Implementation Manager | DBHR

SAFE GUARDING DATA BOOKS



Important CPWI Data Book Reminders

- What are CPWI Data Books?
- Data Books contain district data.
- Data Books are for coalition planning purpose only.
- HYS data in the Data Books are not be be shared publically without appropriate permission from the school district.
- If your coalition wants to develop materials that reference HYS data included in the Data Book, please get school district approval first.



Helpful Tips

- Invite School District Administration to the data review meetings.
- Use a data workgroup to review the Data Books and local data and identify priority recommendations for the coalition.
- Invite partners who are interested in data analysis to attend the workgroup.
- Bring hardcopies of the data book to the meeting and collect them back.

Other Tips to Share?





Sarah Mariani | Behavioral Health Administrator | DBHR

LEGISLATIVE UPDATES



2017 Legislative Session –Marijuana Bills

Bill/Companion Bill	Title/Description
SSB 5131 (HB 1857)– Marijuana Advertising	Addressing the oversight and regulation of marijuana by banning outdoor advertisements including billboards and sign spinners. House Commerce & Gaming Committee
HB 1125 - Total Marijuana Licenses	Establishing an endorsement to the marijuana retailer's license to authorize marijuana delivery services subject to local ordinance and LCB rules. Senate Healthcare Committee
SHB 1060 (SB 5290) – Student Medical Marijuana	Concerning the administration of marijuana to students for medical purposes. Requires school district to adopt policies at parent’s request for non-smokable/inhalable medical marijuana use at school, on bus, or at a school event. If any part of the act is found to conflict with federal requirements, then those conflicting parts must be declared inoperative. Senate Commerce, Labor, & Sports Committee
HB 1250 – Lockable Drug Box	Authorizing retail marijuana outlets to give a free lockable drug box to adults 21+ and to qualifying patients age eighteen years and over subject to restrictions. Senate Human Services, Mental Health, & Housing Committee
HB 2021 – Medical Plants and Seed	An act relating to authorizing the sale of marijuana plants and seeds to qualifying patients and designated providers from marijuana producers. Senate Healthcare Committee



2017 Legislative Session—Bills related to Alcohol, Tobacco, Vaping & Mental Health.

Bill/Companion Bill	Title/Description
Alcohol: ESSB 5145 (HB 1119) – Private label alcohol sales	Authorizing certain sales of spirits carrying a private label exclusive to a restaurant or private club that is a licensed spirits retailer. House Commerce & Gaming Committee
Alcohol: SSB 5161 (HB 1165) – Alcohol in Theaters	The theater license authorizing the sale of beer, strong beer, and wine is no longer limited to theaters with up to four screens. House Commerce & Gaming Committee
Tobacco/Vapor: SHB 2038 – Unsecured Tobacco Displays	Eliminates a provision in a vapor products regulatory statute prohibiting retailers from offering tobacco products for sale in open, unsecured displays. Senate Commerce, Labor, & Sports Committee
Prescriptions: SHB 1339 – Opioid Drug Prescriptions	Providing for restrictions on prescriptions for opioid drugs by limiting initial prescriptions for opioid drugs for outpatient use to a seven-day supply, or a three-day supply if prescribed by a dentist. Senate Healthcare Committee
Mental Health: SHB 1377 – Student Mental Health	Improving students' mental health by enhancing nonacademic professional services. Senate
Mental Health: SHB 1612 – Lethal means, reduce access	Creating a suicide-safer homes project account to support prevention efforts and develop strategies for reducing access to lethal means. Senate Human Services, Mental Health & Housing Committee



2017 Legislative Session—List of all dead bills

Bills that did not pass legislative cutoff (dead bills)

Category	Bill	Title	Category	Bill	Title
Alcohol	HB 1020	Beer & wine specialty shops	Marijuana	HB 1667	Marijuana taxes
Alcohol	SHB 1039	Growlers of wine, sales of	Marijuana	SHB 1712	Marijuana delivery services
Alcohol	HB 1165	Theater licenses	Marijuana	HB 1858	Marijuana license fees
Alcohol	HB 1297	Distillery promotional items	Marijuana	SHB 1911	Marijuana odor masking
Alcohol	HB 1701	Alcohol concentration	Marijuana	HB 2060	Marijuana tax distributions
Alcohol	HB 1874	Blood alcohol level/vehicles	Marijuana	HB 2076	Marijuana revenue/local gov.
Alcohol	SB 5006	Beer & wine specialty shops	Marijuana	HB 2096	Marijuana legaliz. repeal
Alcohol	SB 5194	Sale of spirits, beer & wine	Marijuana	HB 2098	Marijuana/financial services
Alcohol	SB 5279	Growlers of wine, sales of	Marijuana	HB 2124	Marijuana/impeding revenue
Marijuana	SHB 1065	Marijuana offense penalties	Marijuana	SB 5101	Marijuana business contracts
Marijuana	HB 1092	Marijuana/home production	Marijuana	SB 5102	Marijuana business/residency
Marijuana	HB 1096	Marijuana retailer limits	Marijuana	SB 5130	Marijuana license fees
Marijuana	HB 1098	Marijuana plants and seeds	Marijuana	SB 5282	Alcoh. impact area/marijuana
Marijuana	SHB 1099	Marijuana/local moratoria	Marijuana	SSB 5284	Marijuana advertising
Marijuana	HB 1124	Marijuana edibles/packaging	Marijuana	SB 5290	Medical marijuana/students
Marijuana	HB 1127	Marijuana business licensing	Marijuana	SB 5323	Marijuana production stndrd
Marijuana	HB 1151	Marijuana business/residency	Marijuana	SB 5606	Marijuana plants & seeds
Marijuana	SHB 1152	Marijuana business contracts	Mental Health	SHB 1379	Higher ed. behavioral health
Marijuana	SHB 1212	Marijuana possession & trans	Prescription	SHB 1047	Medication disposal system
Marijuana	HB 1416	Use of marijuana in public	Tobacco/Vapor	SHB 1054	Tobacco & vapor products/age
Marijuana	HB 1461	Marijuana production stndrd	Tobacco/Vapor	HB 1261	Tobacco/unsecured displays
Marijuana	HB 1487	Marijuana merchandise	Tobacco/Vapor	SB 5025	Tobacco & vapor products/age
Marijuana	HB 1625	Marijuana around children			



Healthy Youth Survey

The Healthy Youth Survey is a statewide school survey administered every 2 years since 1988. The current version has been implemented since 2002.

The HYS collects data on health risk behaviors that contribute to morbidity, mortality, and social problems among youth.

Respondents: 6th, 8th, 10th, and 12th grade students.

Schools: 1,000 public schools

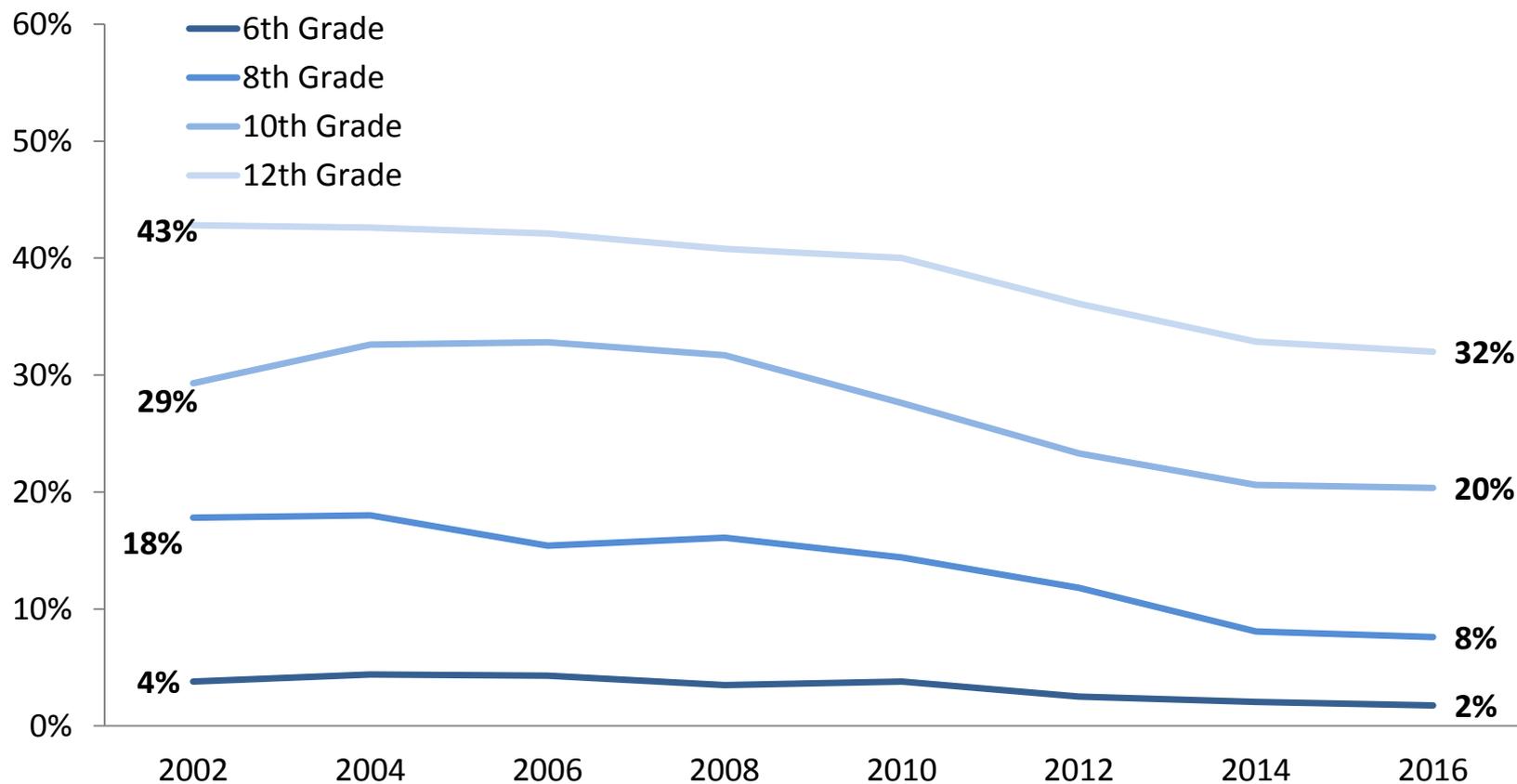
Participants: 230,00 students

State Sample: 38,000 students

State Sample 10th Grade: 11,000 students



Alcohol Use: Youth, Past 30 Days



Source: Washington Healthy Youth Survey - 2002, 2004, 2006, 2008, 2010, 2012, 2014, 2016.



Level of Alcohol Use: 10th Graders - 2016



Among 10th graders who drank alcohol in the past 30 days, nearly 1 in 3 are problem drinkers

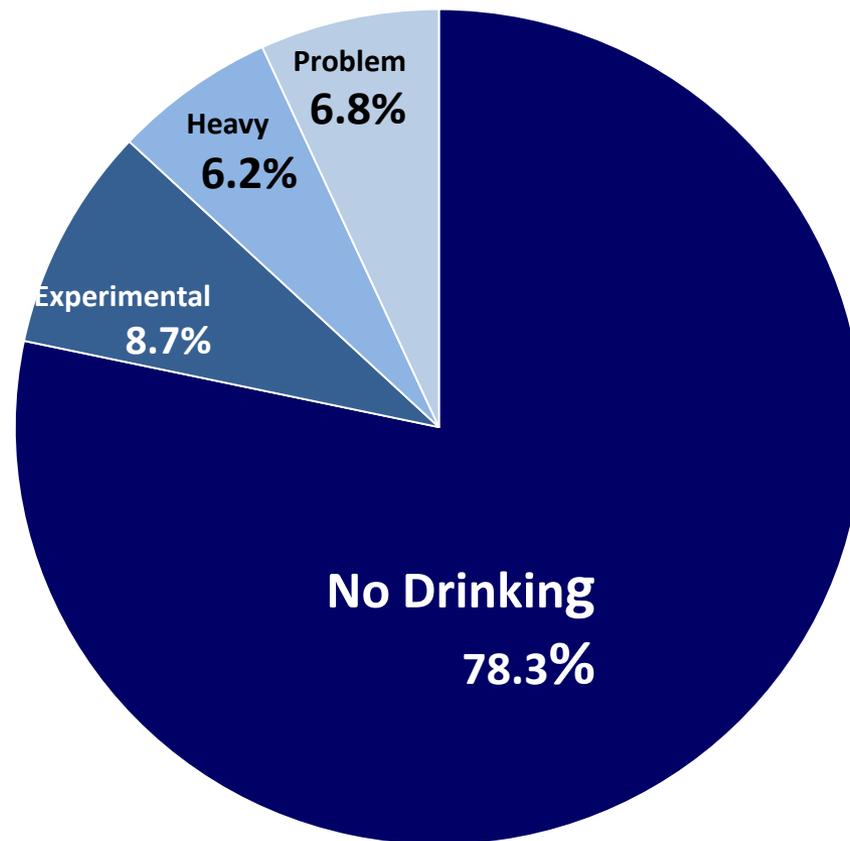
*LEVEL OF ALCOHOL USE

None: no drinking in the past 30 days and no binge drinking in the past 2 weeks

Experimental: 1-2 days drinking, and no binge drinking

Heavy: 3-5 days of drinking, and/or one binge

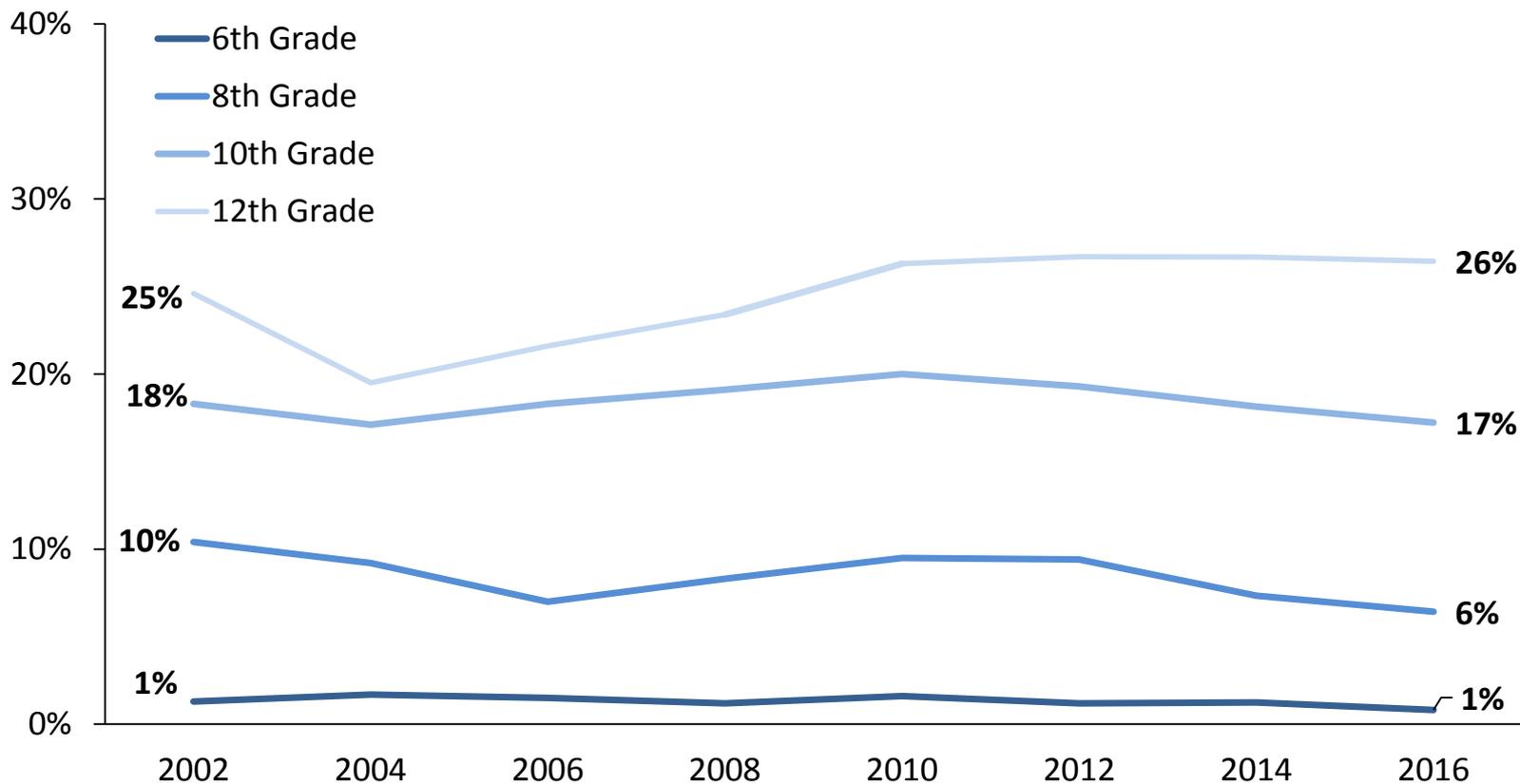
Problem: 6+ days drinking, and/or 2+ binges





Marijuana Use: Youth, Past 30 Days

Used marijuana/hashish during the past 30 days?



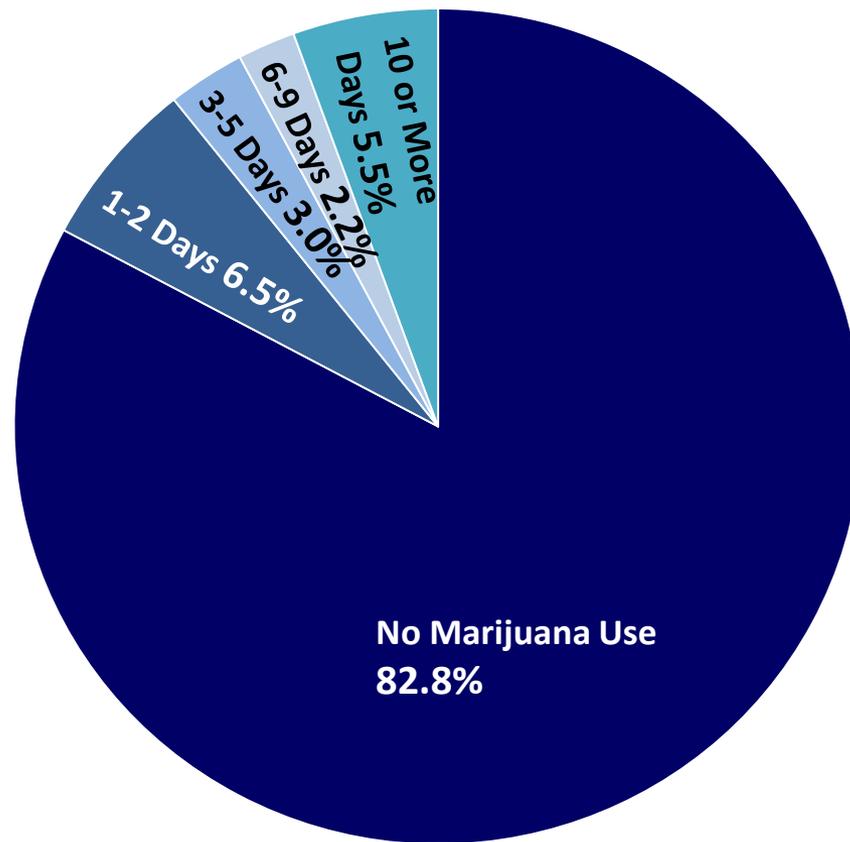
Source: Washington Healthy Youth Survey - 2002, 2004, 2006, 2008, 2010, 2012, 2014, 2016.



Level of Marijuana Use: 10th Graders - 2016



Among 10th graders who used marijuana in the past 30 days, nearly 1 in 3 used for 10 or more days

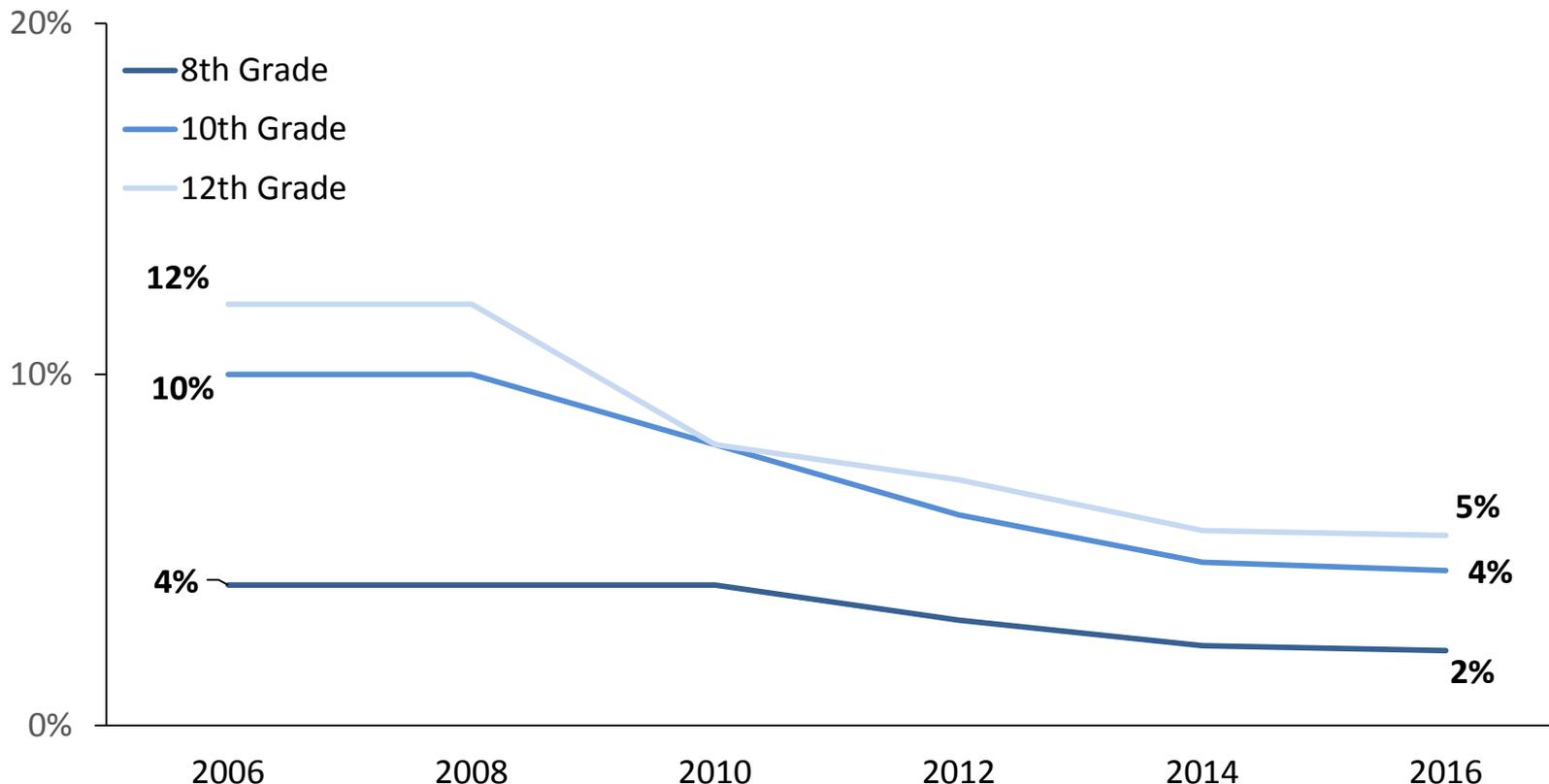


Source: Washington State Healthy Youth Survey – 2016.



Pain Killer Use: Youth, Past 30 Days

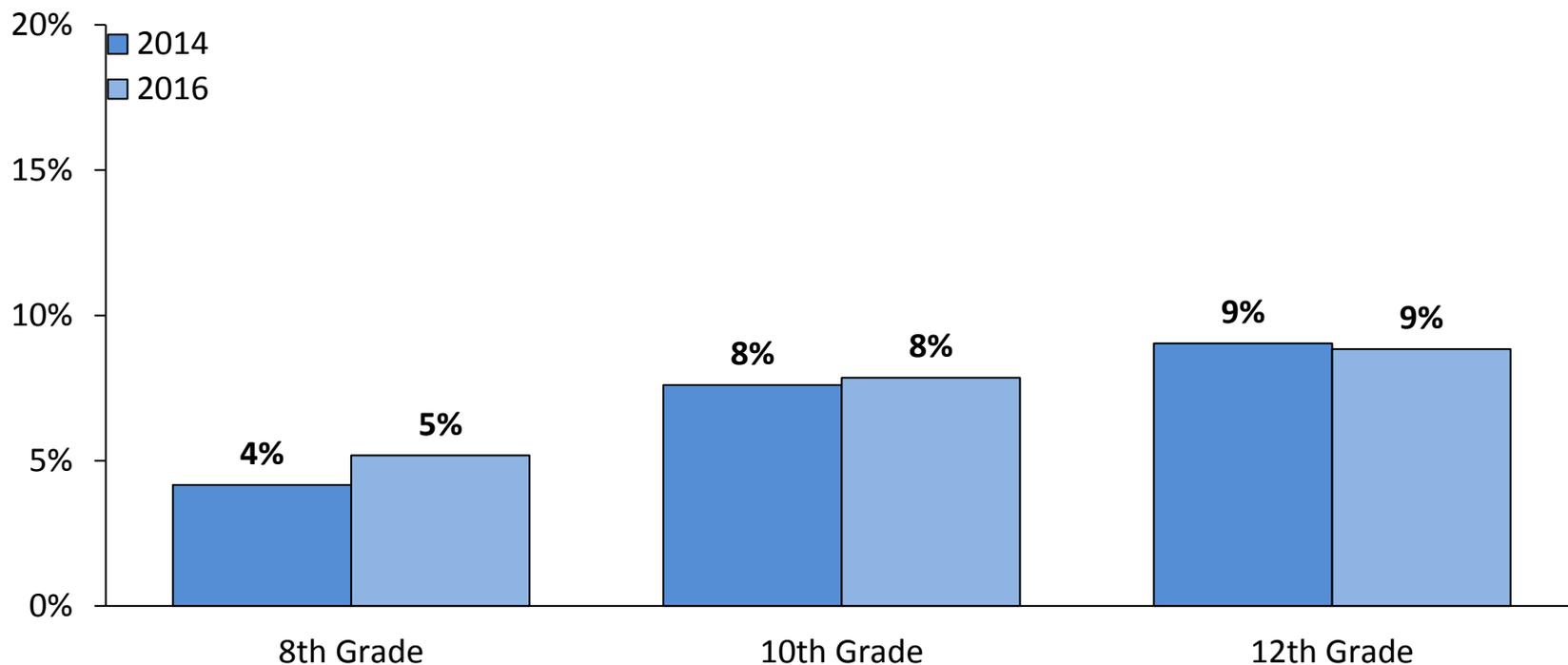
Q. Use a pain killer to get high, like Vicodin, OxyContin (sometimes called Oxy or OC) or Percocet (sometimes called Percs)?



Source: Washington Healthy Youth Survey - 2006, 2008, 2010, 2012, 2014, 2016.



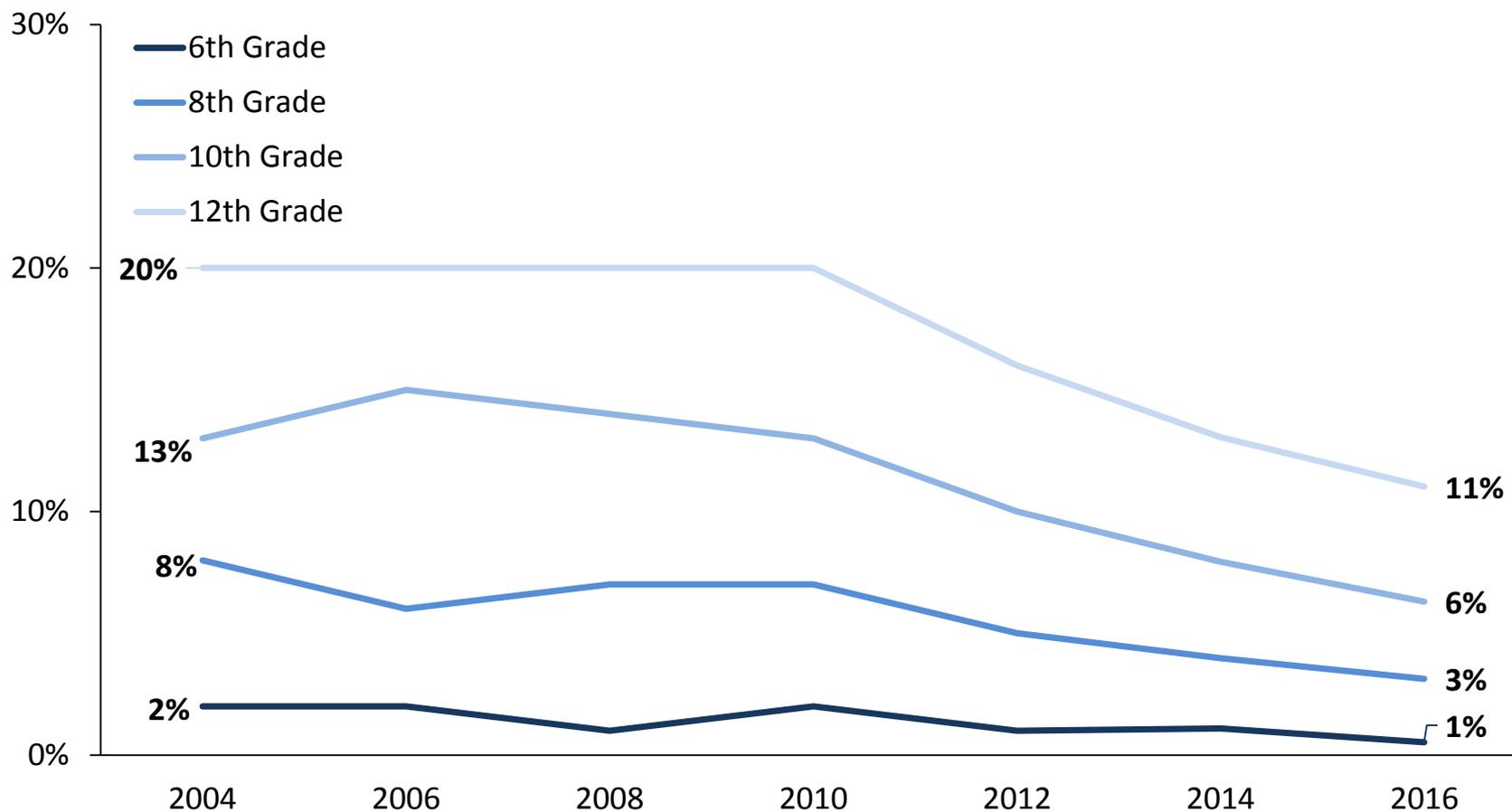
Prescription Drug Misuse: Youth, Past 30 Days



Source: Washington Healthy Youth Survey - 2014, 2016.



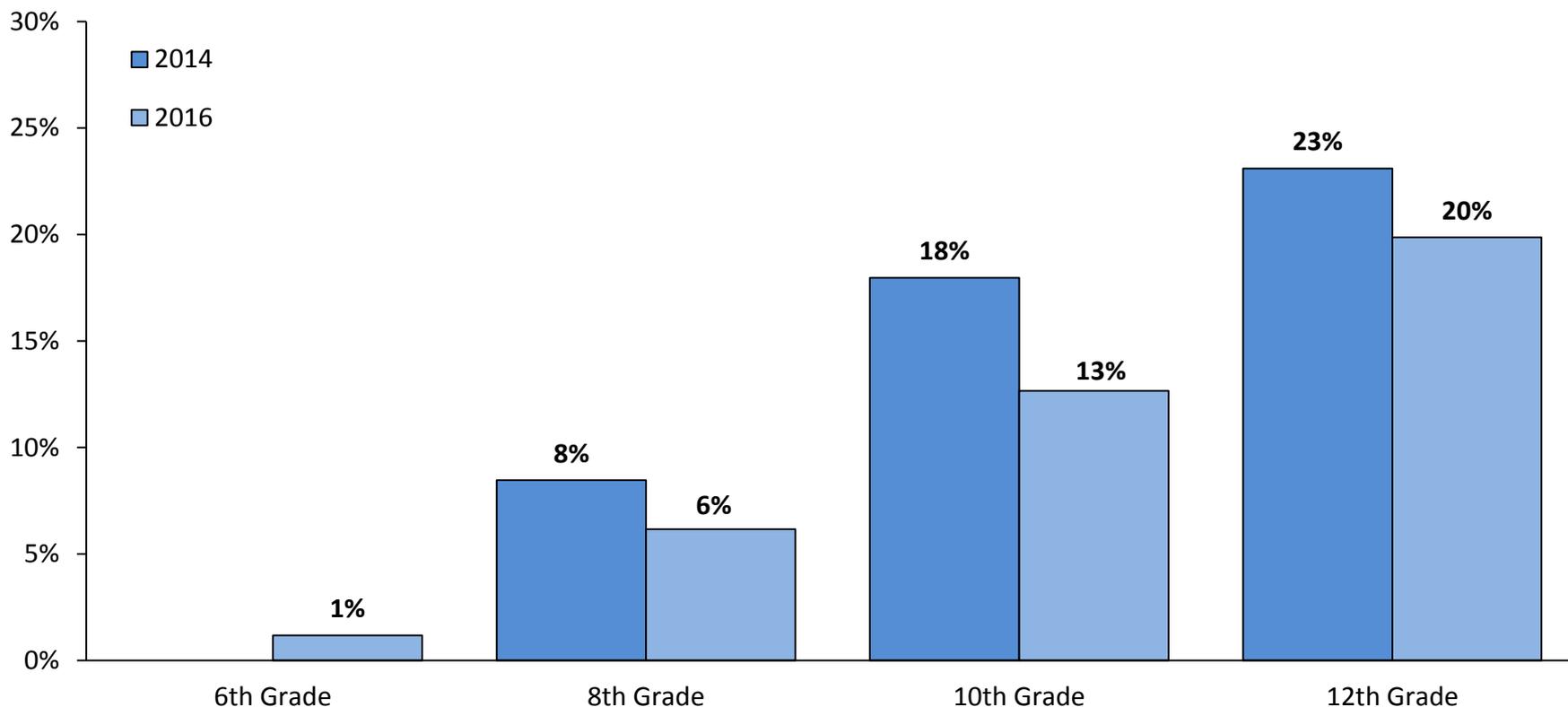
Cigarette Use: Youth, Past 30 Days



Source: Washington Healthy Youth Survey - 2004, 2006, 2008, 2010, 2012, 2014, 2016.



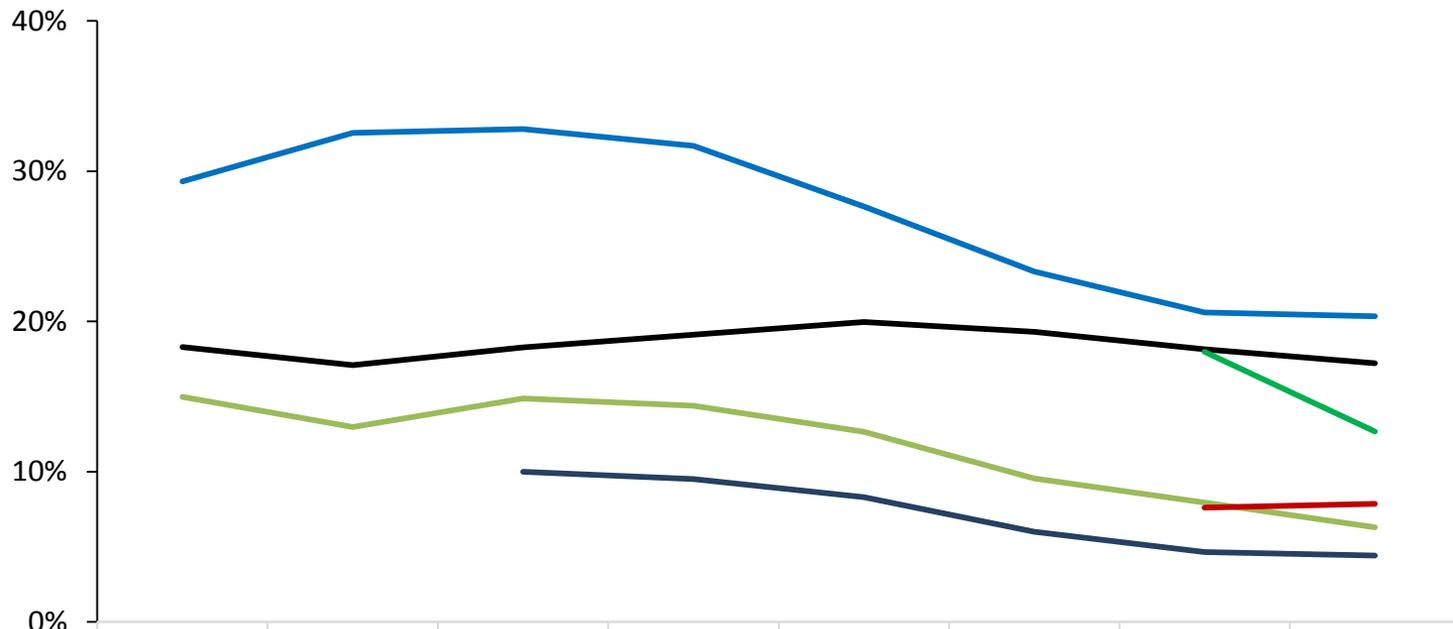
E-Cigarette Use: Youth, Past 30 Days



Source: Washington Healthy Youth Survey - 2014, 2016.



Summary 30-Day Substance Use 10th Graders, 2002-2016

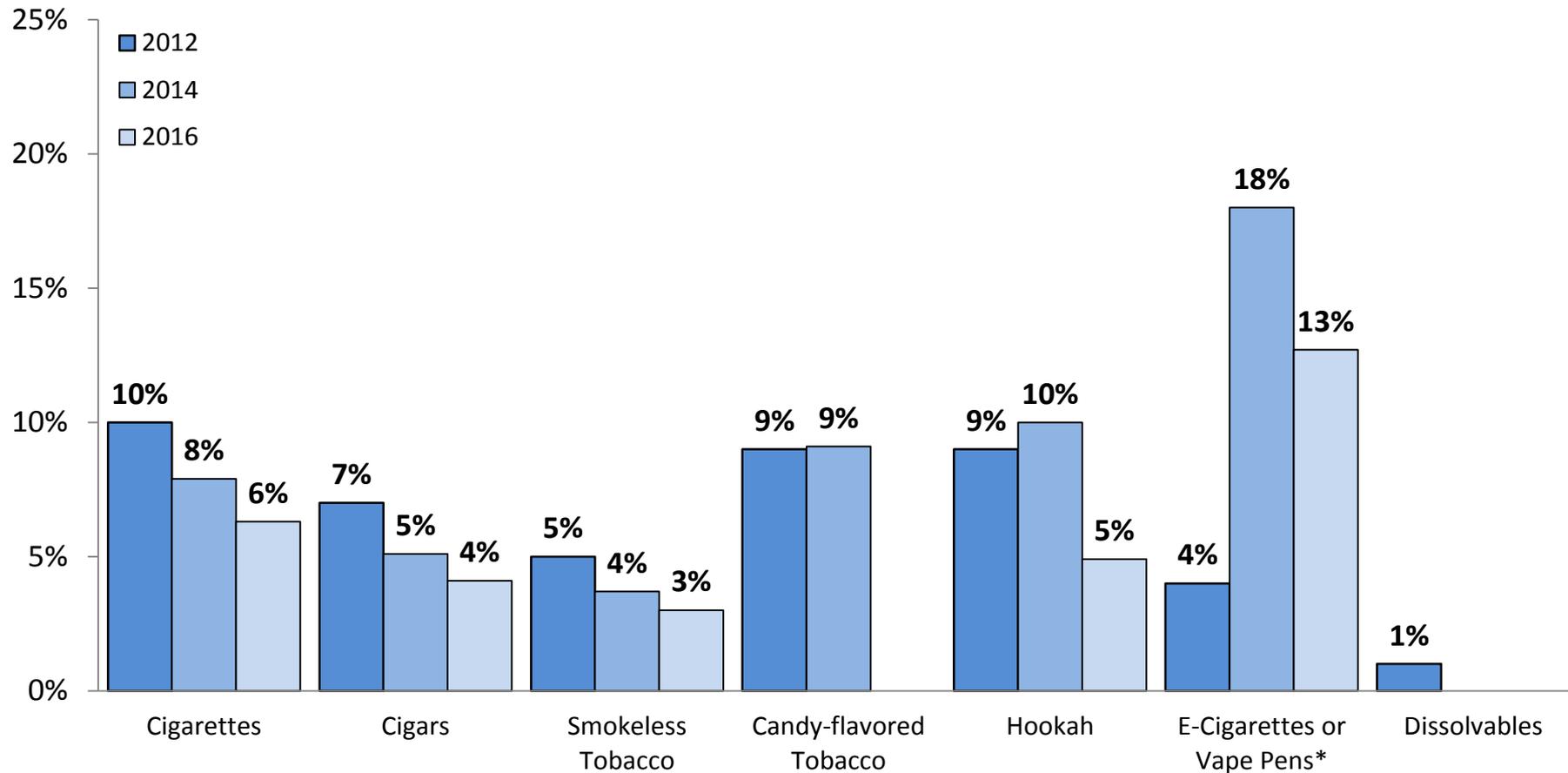


	2002	2004	2006	2008	2010	2012	2014	2016
Alcohol	29%	33%	33%	32%	28%	23%	21%	20%
Marijuana	18%	17%	18%	19%	20%	19%	18%	17%
Cigarettes	15%	13%	15%	14%	13%	10%	8%	6%
Pain Killer Use			10%	10%	8%	6%	5%	4%
E-Cigarettes							18%	13%
Rx Drug Misuse							8%	8%

Source: Washington State Healthy Youth Survey – 2016.



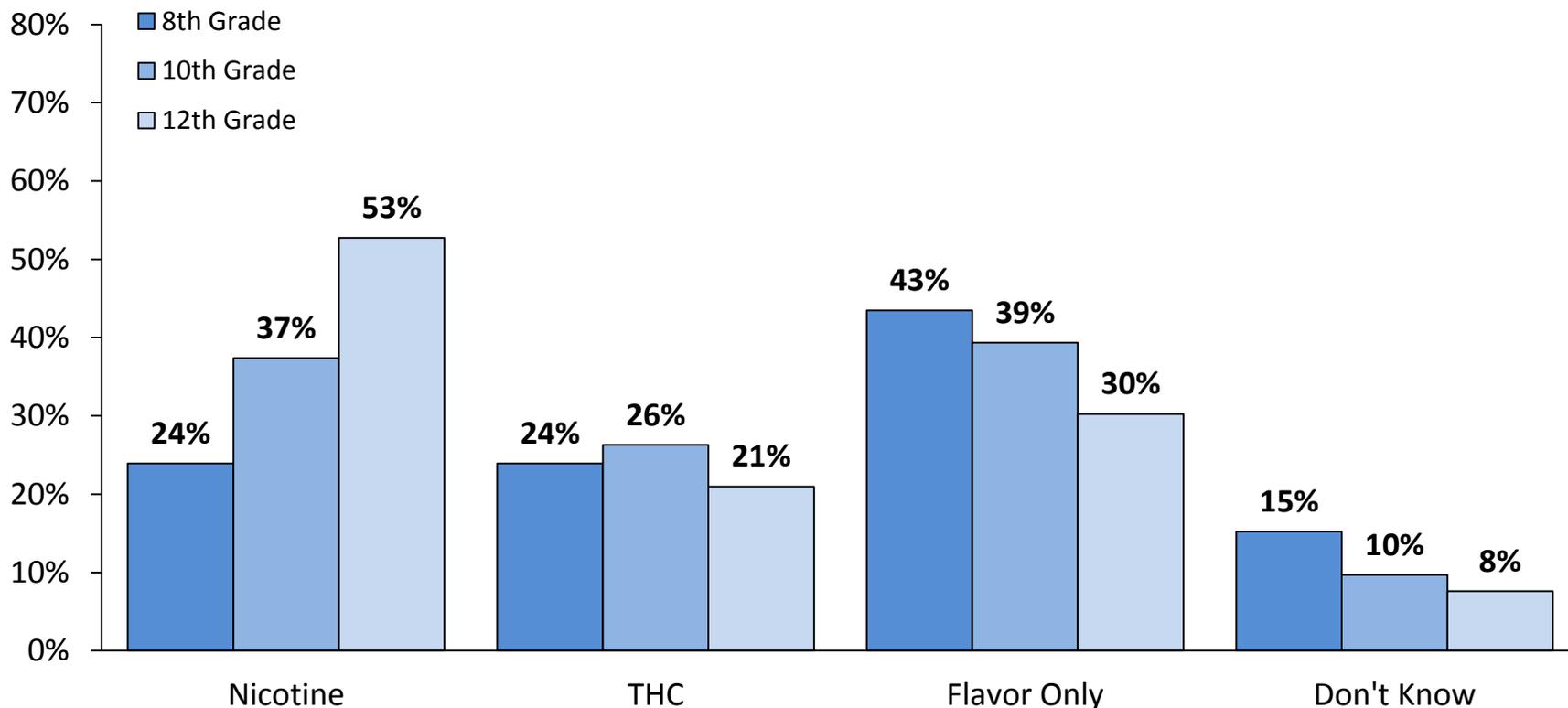
Tobacco Use by Type, Past 30 Days 10th Graders



Source: Washington Healthy Youth Survey - 2012, 2014, 2016.

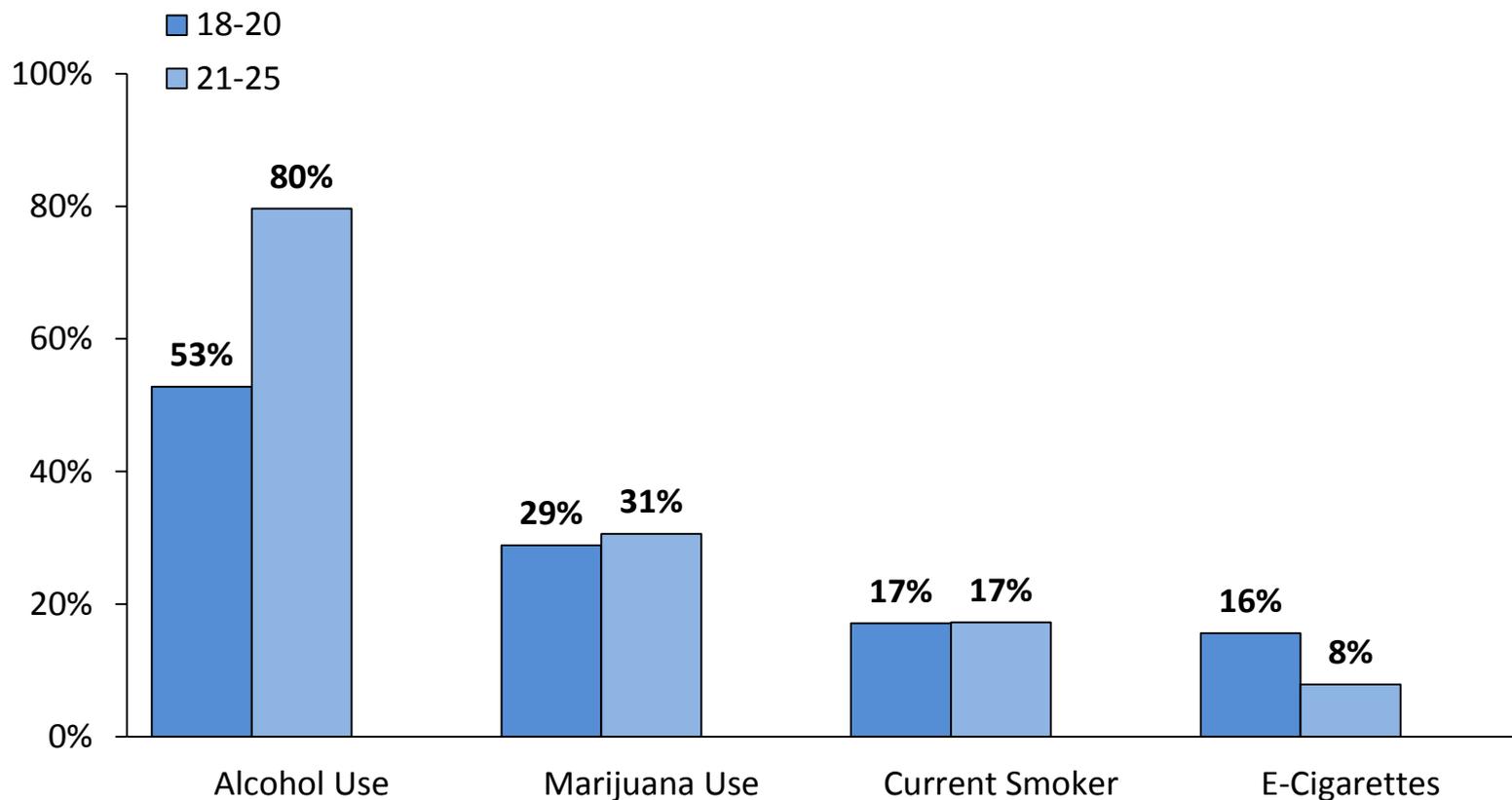


E-Cigarette Use among Youth: Type of Use Among 8th, 10th, 12th Grades Who Use Tobacco



Source: Washington Healthy Youth Survey - 2016.

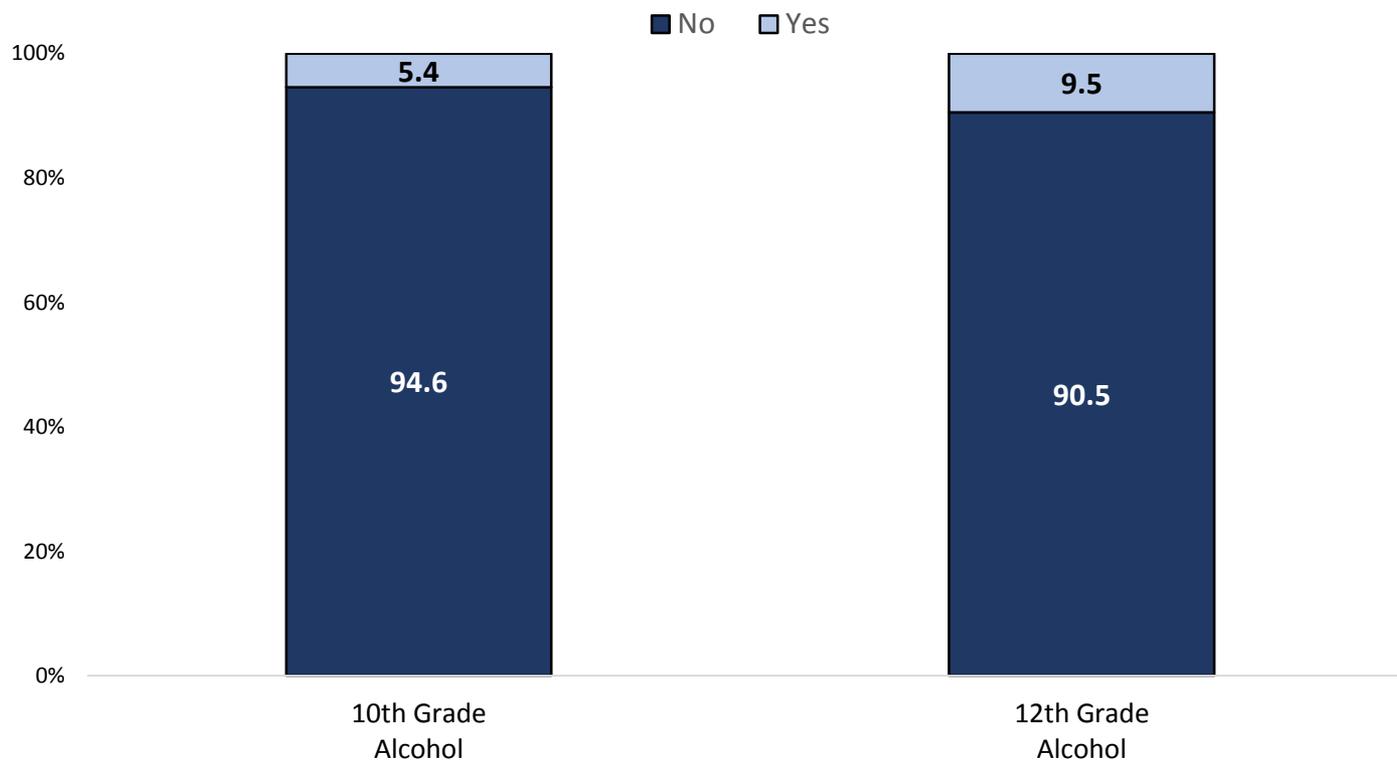
Young Adults by Age Group: 30-Day Drug Use



Source: Young Adult Health Survey - 2015



Drinking and Driving in the Past 30 Days among 10th and 12th graders

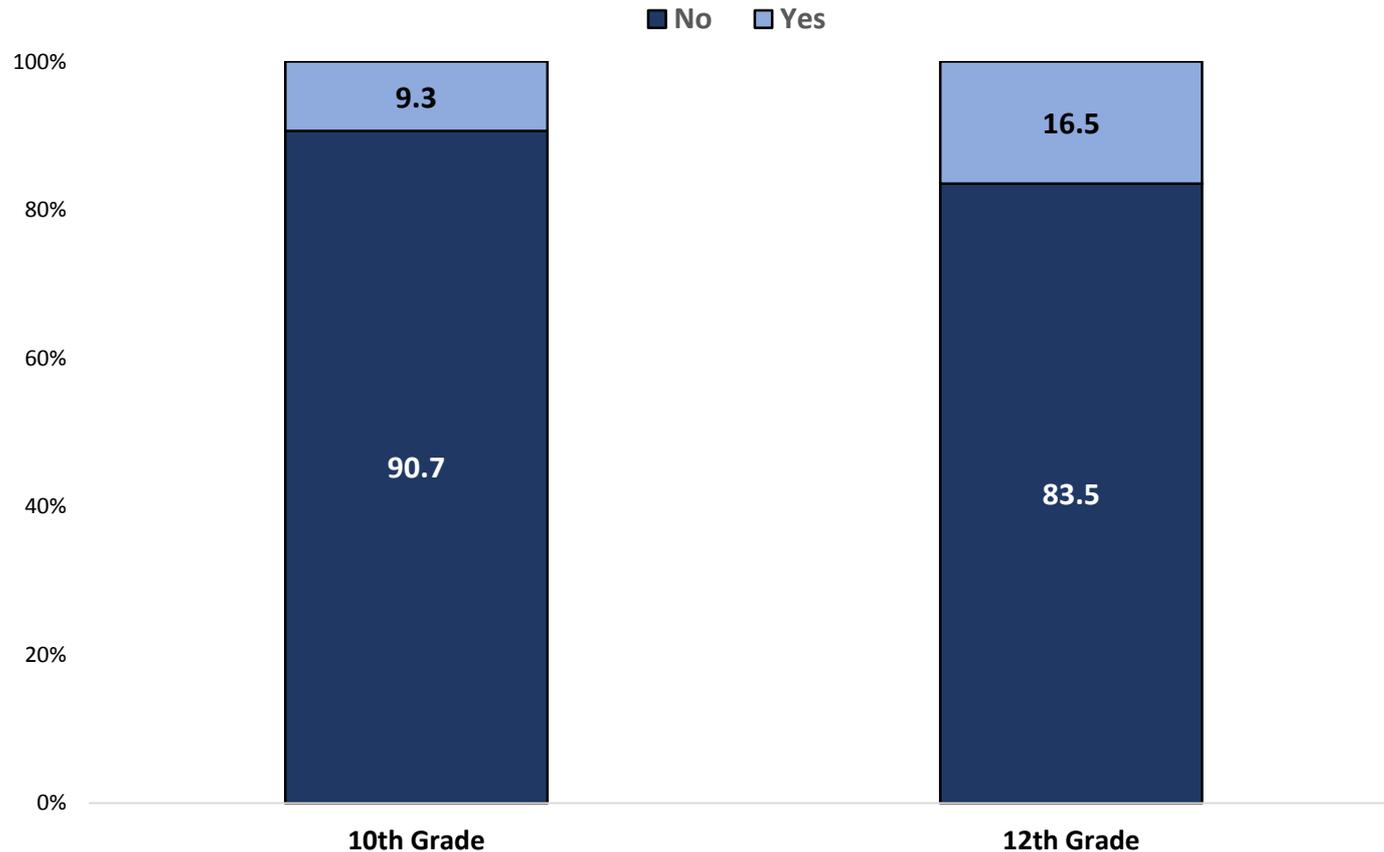


*Regular drinking: Drinking on 10 or more days in the past 30 days.

Source: Washington Healthy Youth Survey - 2016.



Driving within 3 Hours of Marijuana Use in the Past 30 Days: 10th and 12th Grades



Source: Washington Healthy Youth Survey - 2016.



Sarah Mariani | Behavioral Health Administrator | DBHR

MINERVA UPDATES

Minerva Announcement Page



Announcements

Mar 15, 2017

The system is now ready for users to input the Coalition Assessment Survey (CAT). All October 2016 CATs should be entered no later than April 15, 2017. For additional instructions please see User Guide posted at <http://www.TheAthenaForum.org/Minerva>



Coalition Assessment Tool

- Beta testing was completed and feedback incorporated

Coalition Assessment Tool (CAT) Survey Ready in Minerva for Data Entry

Havens, Julia

 This message was sent with High importance.

Sent: Fri 3/10/2017 9:52 AM

To: wa_dasacty@lists.unr.edu

Cc: Mariani, Sarah E (DSHS/BHA/CD)

Good afternoon,

The Coalition Assessment Tool (CAT) survey is now available for data entry in Minerva.

Instructions for entering your coalition's surveys can be found on Athena's Minerva page (<http://theathenaforum.org/minerva>). You'll find two resources available: (1) a quick-start reference sheet entitled "Instructions for entering the CAT in Minerva" and (2) an updated User Guide with CAT survey information included.

Please enter the data for all of your 2016 CAT surveys no later than **April 15, 2017**.

Thank you,

The DBHR Prevention Team

Partner Staff Module



- Should no longer receive duplicate entry error



Sarah Mariani | Behavioral Health Administrator | DBHR

MINERVA AND PBPS TUTORIALS



Saving Reports from PBPS

- A document with instructions will be posted on Athena.

Saving Reports from PBPS <https://waprev.onmosaik.com/waprevent2015/pEnter.aspx>

Purpose:
This document provides step-by-step instructions for how to run and save reports from the Performance Based Prevention System (PBPS). It also includes a listing of common reports to run.

What are the benefits to saving reports from PBPS?
Once we end our contract with the company that runs PBPS, the site will be closed down and the information will no longer be accessible.

Reports you run from PBPS can provide you with:

- Session information (date, topic, participants).
- Event information (date, numbered reach).
- Demographic information on participants.
- Training information, including dates of training, # that attended, and costs.

What reports should I run and save?
There are a range of reports you can run from PBPS. The ones you will want to run and save will depend on what information you already have in your files about the about the programs and services that were provided, and how easily you can retrieve that information.

See step #3 on the next page for the listing of the categories of reports. Each category has reports within it. Common reports to consider running include:

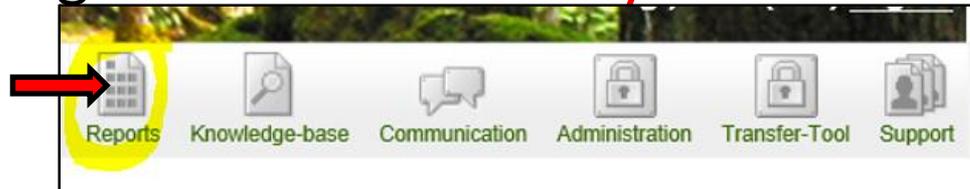
Category:	Report Name
○ Service:	Services by Activity Report (with Narrative).
○ DBHR Report:	Training – CPTS Report.
○ Outcome:	Outcome Report.
○ Service:	Participant Demographics Report



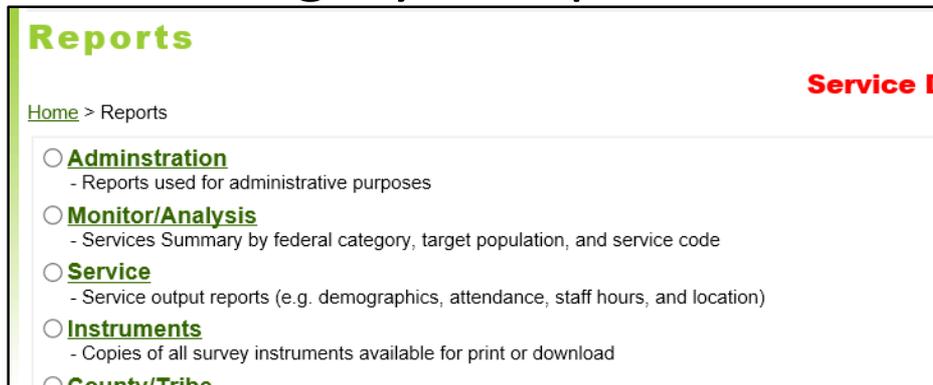
Saving Reports from PBPS

Use Internet Explorer. 

Log into the **2015-17 system** and click on the Reports icon.



Select a category of reports from the menu.





Saving Reports from PBPS

- Once a report is selected, define the parameters of the report.

Select New Report

Services by Activity Report (with Narrative) Generates the detail of providers' services within a specified date range by program and group with an activity description.

Time Period:	<input type="text" value="7/1/2015 - 6/30/2017"/>
Begin Date:	<input type="text" value="7/1/2015"/>
End Date:	<input type="text" value="6/30/2017"/>
Region:	<input type="text" value="1"/>
County/ Tribe:	<input type="text" value="201 -- Test Account"/>
Provider:	<input type="text" value="All"/>
Program:	<input type="text" value="All"/>
Group:	<input type="text" value="All"/>

Output To: Report Service PDF Excel

Click [here](#) for help if your PDF or Excel report is not appearing.

- For most reports, we suggest you save them as “Excel” files. Use the “Report Service” option for Demographic reports.

Program:	<input type="text" value="All"/>
----------	----------------------------------

Output To: Report Service PDF Excel



Saving Reports from PBPS

Click the “Show Report” button.

If the report does not appear in a new window, look for a menu bar like this towards the bottom of your screen:



Click the “Open” button.

Once file is open, name and save the file.

That all there is to it!



Jim Jackson | Accountable Communities of Health Specialist | DBHR

HEALTHIER WA & THE ACCOUNTABLE COMMUNITIES OF HEALTH

ACH Role in Medicaid Transformation Demonstration (1115 Waiver)

March 22, 2017



Healthier Washington's Medicaid Transformation Goals

Achieving the Triple Aim

- Reduce avoidable use of intensive services and settings
- Improve population health
- Accelerate the transition to value-based payment
- Ensure that Medicaid per-capita cost growth is below national trends

State Innovation Model (SIM2) Initiative. Under SIM2, Washington is launching key initiatives that invest in Washington's infrastructure to support multi-payer health transformation:

Community Empowerment and Accountability

Start-up support for Accountable Communities of Health

Practice Transformation Supports

Development of a Practice Transformation Support Hub for providers

Payment Redesign

Four payment models that drive health system purchasers and payers toward greater accountability for improved health outcomes and reduced cost of care

Analytics, Interoperability, Measurement and Transparency

Development of analytic and measurement capacity and tools that translate data from multiple sectors into actionable information

Project Management

Establishment of a public-private leadership council and accountable project management practices to ensure real-time evaluation and continuous improvement

Healthier Washington Accountable Communities of Health Monthly Stakeholder Meetings –Meeting Dates and Times Subject to Change.
Check with ACH Lead and/or Web-site Before Attending.



Fourth Friday – Board and Stakeholder Group
[North Sound ACH](#)

First Monday – Board Meeting - ? No Stakeholder group
[North Central ACH](#)

Fourth Wednesday - Stakeholder
[Better Health Together](#)



Dates Vary – Has Stakeholder and Board Meetings
[Olympic ACH](#)



First Tuesday – Leadership Council
[King County ACH](#)



Tacoma-Pierce County

Second Thursday Stakeholder Meeting – Also has Board Meetings
[Pierce County ACH](#)



Second Thursday – Stakeholder & Board one and the same
[Cascade Pacific Action Alliance](#)



Third Thursday Board Meeting
[Southwest WA Regional Health Alliance](#)

Third Thursday – Both Stakeholder and Board Meetings
[Greater Columbia ACH](#)

July 13, 2016

ACHs - A Common Regional Mission

- Bring together public and private, multi-sector partners to identify and work on shared regional health goals
- Identify opportunities for the ACH and community partners to understand and address aspects of health and quality of life that are traditionally outside the scope of clinical health care
- Identify community supports and coordinate systems so that services address all aspects of an individual's health needs – whole person health



HCA 82-009 (7/15)



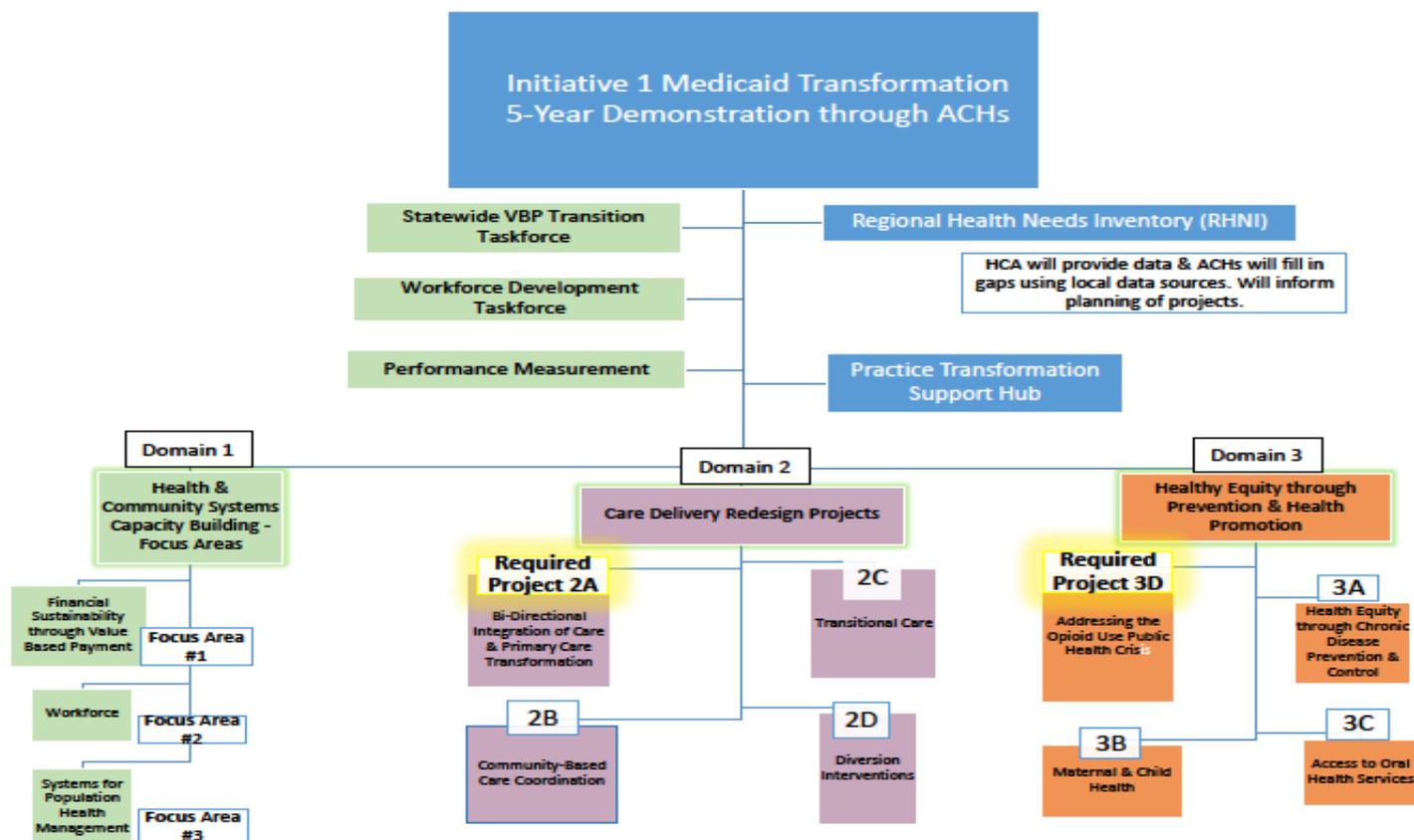
1115 Waiver Transformation Demonstration Initiatives

Initiative 1 Transformation through Accountable Communities of Health	Initiative 2 Enable Older Adults to Stay at Home; Delay or Avoid the Need for More Intensive Care	Initiative 3 Targeted Foundational Community Supports
<div data-bbox="146 725 618 822" style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> Delivery System Reform </div> <ul style="list-style-type: none"> • Each region, through its Accountable Community of Health, will be able to pursue projects that will transform the Medicaid delivery system to serve the whole person and use resources more wisely. <div data-bbox="146 1236 629 1282" style="border: 1px solid black; padding: 5px; margin-top: 10px; background-color: yellow;"> Transformation Projects </div>	<div data-bbox="730 725 1201 799" style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> Benefit: Medicaid Alternative Care (MAC) </div> <ul style="list-style-type: none"> • Community based option for Medicaid clients and their families • Services to support unpaid family caregivers <div data-bbox="730 956 1209 1045" style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> Benefit: Tailored Supports for Older Adults (TSOA) </div> <ul style="list-style-type: none"> • For individuals “at risk” of future Medicaid LTSS not currently meeting Medicaid financial eligibility criteria • Primarily services to support unpaid family caregivers <div data-bbox="1000 1245 1479 1288" style="border: 1px solid black; padding: 5px; margin-top: 10px; background-color: yellow;"> Medicaid Benefits/Services </div>	<div data-bbox="1306 725 1719 799" style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> Benefit: Supportive Housing </div> <ul style="list-style-type: none"> • Individualized, critical services and supports that will assist Medicaid clients to obtain and maintain housing. The housing-related services do <i>not</i> include Medicaid payment for room and board. <div data-bbox="1306 1002 1715 1085" style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> Benefit: Supported Employment </div> <ul style="list-style-type: none"> • Services such as individualized job coaching and training, employer relations, and assistance with job placement.



Based on original work by A. Fernandez of the Greater Columbia ACH 11/22/2016

Jim Jackson 03/21/2017





Domain 1: Health and Community Systems Capacity Building – Focus Areas

- Financial Sustainability through Value Based Payment
- Workforce
- Systems for Population Health Management



Domain 2: Care Delivery Redesign - Projects

- **Project 2A- Required: Bi-directional Integration of Care and Primary Care Transformation –**

Optional Projects

- Project 2B: Community-based Care Coordination
- Project 2C: Transitional Care
- Project 2D: Diversion Interventions



Domain 3: Prevention and Health Promotion - Projects

- **Project 3A- Opioid Public Health Crisis – Required**

Optional Projects

- Project 3B: Maternal and Child Health
- Project 3C: Access to Oral Health Services
- Project 3D: Chronic Disease Prevention and Control

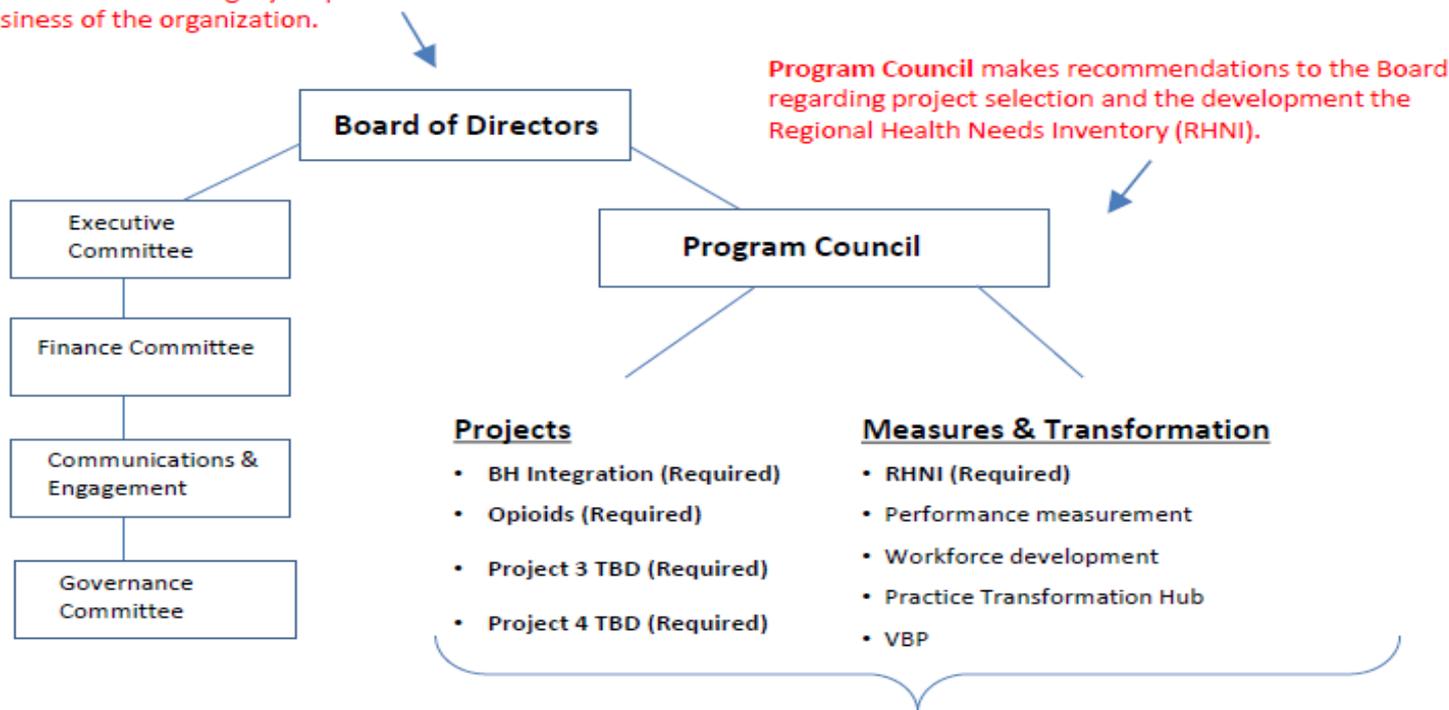


“Typical” ACH Organizational Structure.

Proposed Structure for NS-ACH

Version 4

Board of Directors legally responsible for the business of the organization.



Program Council charters work teams that are populated by experts and people working on the ground and monitors progress



- **Jim Jackson, DSHS, ACH Specialist, jacksj@dshs.wa.gov**
- **Healthier Washington Webpage:**
 - <http://www.hca.wa.gov/about-hca/healthier-washington>
 - Email: HealthierWA@hca.wa.gov (Email to join the feedback network)
- **ACH Webpage:**
 - <http://www.hca.wa.gov/about-hca/healthier-washington/accountable-communities-health-ach>
 - Email: CommunityTransformation@hca.wa.gov
- **Medicaid Transformation:**
 - <http://www.hca.wa.gov/about-hca/healthier-washington/medicaid-transformation>
- **Healthier WA Dashboard for ACHs:**
 - <http://www.hca.wa.gov/about-hca/healthier-washington/data-dashboard>
- **Chase Napier, HCA, Community Transformation Manager, chase.napier@hca.wa.gov**