

Department of Health and Human Services · Mental Health and Developmental Services
Substance Abuse Prevention and Treatment Agency (SAPTA)
Multidisciplinary Prevention Advisory Committee (MPAC)

APPROVED MINUTES

DATE: September 28, 2011
TIME: 1:30 p.m. *Video-Conference*
LOCATION: MHDS Conference Room DCFS – West Neighborhood Care Center
4126 Technology Way, 2nd Floor 6171 W. Charleston Blvd., Bldg. 8
Carson City, Nevada Las Vegas, Nevada

Committee Members Present

<u>Carson City</u>	Monty Williams - Chair	Statewide Native American Coalition, Intertribal Council of Nevada
	Doug Banghart – proxy	For Kimberly Fahey, Nevada State Health Division
	* Elizabeth Fildes, Ph.D.	Director of Clinical Services, Nevada Tobacco Users’ Helpline
	Jeff Fontaine	Nevada Association of Counties
	* Susan Mears, Ph.D.	Division of Child & Family Services, Planning & Evaluation Unit
	Ron Pierini	Sheriff, Douglas County
<u>Las Vegas</u>	William Gazza	Office Services Supervisor, Clark County Coroner’s Office
	Brad Greenstein	Director, Foundation for Recovery, Inc
	Hon. Cedric Kerns	Judge, Las Vegas Municipal Court, Regional Justice Center
	Peter Quigley, LADC	Justice Outreach Specialist, Department of Veteran Affairs, SNHS

Committee Members Absent

John Johansen	Impaired Driving Programs Manager, Nevada Office of Traffic Safety
Deborah McBride	SAPTA Agency Director
Monica Morales	Wellness and Tobacco Programs, NV Health Division
Scott Schick	Chief Juvenile Probation Officer, Douglas County
Michael Bakios	Drug Enforcement Administration

Ex-Officio Members Absent

Michelle Frye-Spray	T/TA Specialist, GRAA Lead, CSAP’s CAPT Western Regional Expert Team
Mary Joyce Pruden	CSAP Public Health Advisor

Public Present

* Muriel Kronowitz	Community Member
--------------------	------------------

SAPTA Staff Present

Charlene Herst	SAPTA Prevention Team Supervisor
Bill Kirby	SAPTA Health Program Specialist
Linda Kreeger	SAPTA Health Program Specialist
Nan Kreher	SAPTA Health Program Specialist
Meg Matta - Recorder	SAPTA Administrative Assistant

* Telephonically

1. **Welcome and Introductions**

Monty Williams opened the meeting in due form at 1:36 p.m. by announcing the locations where notifications of the open meeting were posted and welcoming the attendees. After introductions, a quorum was established.

2. **Public Comment and Discussion**

There were no comments.

* 3. **Approval of MPAC Minutes of July 27, 2011**

Minutes of July 27, 2011 were approved with two corrections.

4. **Update on the Statewide Epidemiological Outcomes Workgroup (SEOW) Grant**

Because the contract was delivered late, SAPTA requested a nine-month extension on the contract to start on November 1, 2011 and end September 28, 2012. The extension was granted. SAPTA received communication from Synectix, the contractor for this grant, notifying SAPTA that a modification on the contract was received from SAMHSA CSAP with an extension granted until Sept 28, 2012. Charlene Herst estimated that this could mean an estimated \$110,000 to \$150,000 in funds to SAPTA.

Nan Kreher reported that the Data Dissemination Plan is the last deliverable for the SEOW Grant that started last December. It is a multifaceted plan that includes the 2011 Epi-Profile, which is posted on the SAPTA website; a Community Profile including Michael Coop's special reports on Nevada populations, also posted on the website together with short reports for reference by legislators. The final large piece of the Dissemination Plan is the proposed database. This will be an electronic interactive website containing state and national data that people can access for reports including graphs, charts, and maps. Over the summer, SAPTA put out a request for proposals (RFP). We recently received three proposals and they are currently out for review by a small external committee. The decision is expected to be made in a week, after which we will begin to build the database. One element will include data at the community and county level which the SEOW members may be able to provide. SAMHSA is pushing to get every state to prepare their data for sharing so that we get a broader picture not only of our own state, but also as we compare to the rest of the country. Throughout the process, we will be asking for statistics and data from the members. The vendors have produced this type of system before and are not starting from scratch, so SAPTA is looking forward to getting the database up and running in approximately 6 months. It was pointed out that updating the data to keep current will be important to the overall success of the project. Dr. Fildes promised to share data.

5. **Update on SEOW Grant Task 10 Final Deliverables**

There were two sections to the grant: the basic grant requirements; and for an extra monetary award, a Task 10 Deliverable. SAPTA was granted the extra award and fulfilled all of the deliverables. Task 10 was a follow-up on the Strategic Prevention Framework – State Incentive Grant (SPF-SIG). SAPTA was one of the first to be awarded that grant, and it timed out for us last September. They wanted us to share our lessons learned, and our accomplishments and successes. We selected two accomplishments to highlight and submitted our final Task 10 Deliverables on time. The first was a template for a

Comprehensive Community Prevention Plan (CCPP), the second was a prevention campaign called “I Am One of Many”.

The purpose of the Task 10 Deliverables was to describe two of SAPTA’s SPF SIG accomplishments to provide examples to other states which are still cohort 4 or 5 grant recipients and have a year or two remaining to fulfill their grant requirements. The two accomplishments outlined by SAPTA will provide a template that can be followed by other states to help them move forward.

SAPTA required each of their funded coalitions to submit a CCPP with specific requirements which included needs assessment, deeming requirements, 501(c)3 status, policies and procedures, by-laws, mission vision, goal statement, SAPTA certification information, description of their service area by counties and populations, minutes from the past 6 months meetings, their subrecipients and pass through funding, cultural competency, evidence based policy, and letters of support from their community partners. Every state is different, but CSAP has held up Nevada’s coalition system as a model. SAPTA’s requirements are more thorough and stringent than some other states.

The media campaign, “I Am One of Many”, was inspired by a similar campaign that originated in Montana. Each of Nevada’s community coalitions adopted the idea and personalized it with their unique community imprint. “I Am One of Many” is a statewide branding for a campaign that began with a focus on methamphetamines. A website was developed, and the campaign grew to include newsletters, radio spots, television ads, billboards, and print ads. The campaign was followed-up by a written evaluation process to provide evidence of its effectiveness.

Dr. Fildes asked what outcomes were collected from the “I Am One of Many” campaign, if we can measure its impact on prevalence rates, and if we have established a benchmark for a comprehensive prevention plan. Monty Williams and Charlene Herst answered that the Statewide Partnership collects the evaluations and community questionnaires and tracks the responses. When the information is collated, we can do a further presentation on the outcomes. It was further explained that the media campaign alone cannot be seen as the causal affect on change, whether the change is positive or negative. Especially with prevention, the program must be comprehensive, with wide coverage, although media is an integral part. To get SAPTA funding, 95% of the funds allocated to the communities must be evidenced based, and our coalitions and direct service providers have the tools and know-how to provide the required information. The coalitions cannot provide direct service; but they look at their own data to provide environmental strategies and changes in policies on a variety of issues at the local level, including access and training. They have to consider their own data, use evidence based programs that fit their demographics and the dollars they receive. Many coalitions are not only substance abuse prevention coalitions. They also cover many other issues because they are part of a small community and must be comprehensive in their services. They will partner with other coalitions to use their dollars more effectively, which is why we have a very active statewide coalition partnership in Nevada. Together they discuss challenges and solutions. As we move into Health Care

Reform and the coalitions have to combine their services with primary care and mental health, it will put an even larger strain on their budgets unless and until more funding is found. In the larger view, the state works together with the 13 coalitions to develop a comprehensive strategy that includes media, partnering with schools, brief intervention training. More will be discussed under the SPE Grant

6. **Update on Substance Abuse and Mental Health Services Administration's (SAMHSA) Strategic Prevention Framework State Prevention Enhancement (SPE) Grant**

Charlene Herst reported that SAPTA received notice of Grant Award in the amount of \$510,000. This is a one-year grant with no extensions. The purpose of the grant is to build infrastructure, upgrade data systems to accommodate all types of queries, and to do strategic planning. The purpose of the grant is to allow SAPTA to prepare for Health Care Reform. SAPTA will be using the funding to develop a new or enhanced electronic system for the collection and analysis of data in real time; connect the collection system to the data warehouse system, and provide a reporting system that will allow all interested parties access to the data. The data will be State collected and organized so that it is consistent across areas and put in a way that is equivalent so that the same things are compared. It will be designed to update and be current. Partners can upload their data for input, and as an end user, pull out any kind of special reports desired, whether based on age, sex, ethnicity, or any demographics of their choosing. This will be an end user system that will be able to map at a local level drug use, traffic accidents, or any special report or presentation the user wishes.

It was clarified that the previously discussed Data Dissemination plan is a goal of the SEOW grant; but the SPE provides the funding to connect the data dissemination with data warehousing and collection. The SPE will help ensure that we have the system, the hardware, and the people in place to make the data system an integrated and user friendly system.

On overriding goal of this grant is to transform how states think about prevention. There are multiple agencies in the state, as well as multiple community based, working groups, and tribal entities who have access to their own sets of information; but who all play a role in prevention. The goal is to bring all this information together, to combine data on their individual activities, and create a unified system with the ability to focus on prioritized issues. The end result will be to enable all the various entities across the state to work together in a cohesive and efficient manner. This will also help to broaden the definition of wellness to incorporate more than substance abuse prevention to include mental health promotion and mental illness prevention, and through that, a broadening of the potential partners and a braiding of funding streams.

7. **Review of the SPE Grant Deliverables**

The SPE Grant requires a Capacity Building and Infrastructure Enhancement Plan, which will be due at the end of the third month of the grant and consists of four components:

- Data Collection, Analysis and Reporting Plan
- Coordination of Services Plan

- Technical Assistance and Training Plan
- A Performance/Evaluation Plan

The five-year strategic plan is due at the end of the eleventh month. Tribal consultations are a requirement of the grant. Monty Williams shared that at a recent National Prevention Network meeting he learned that although the federal government is unable to define best practices in the Tribal Communities because of the variety of cultures among the nations, the state of Oregon formally recognized best practices among the Oregon tribes. The best practices recognized by Oregon included pow-wows, sweat lodge ceremonies and family canoe trips. He suggested that SAPTA work in a similar way with the Nevada tribes to identify the best practices in the tribal community and recognize them as evidence-based programs. He has seen success with the Naming Ceremony, the Men's Gatherings and the Women's Gatherings, as well as Talking Circles, and would like to see data gathered and included in the data warehouse. Michael Coop added that in one small tribe in New Mexico, the reinstatement of the use of cradle boards for infants reduced the instance of SIDS from 75% to zero in one year. He affirmed that the cause and affects of such practices needed to be documented in the data collection.

Another requirement of the grant is the existence of a Policy Consortium and this will be the role of the MPAC. Everything SAPTA does along the way must be approved by this committee. Michael Coop will be working closely with MPAC going forward, and assist the members to have a clear understanding on the expectations of the grant and the participation required from MPAC.

8. **Update on the Federal Fiscal Year 2012 Block Grant**

Charlene Herst reported that SAPTA has submitted the Substance Abuse Prevention and Treatment Block Grant ahead of schedule, and MHDS submitted their portion on time. There was an anticipated problem with submitting electronically, so although the due date is October 1, a hard copy was sent on September 27th and should be received on September 28th. There were many major changes to the block grant this year, including how SAPTA will be working with the Division of Mental Health and Developmental Services on behavioral health issues. As with the other grants, the various agencies have to prepare for Health Care Reform by emerging from their individual funding silos and braiding themselves together in a unified and coordinated effort. SAPTA is moving in the direction of working together with health authorities, law enforcement, the military, and the local governments at community, county and state levels to solve the issues in our state. This year SAPTA had to submit goals, objectives and strategies as well as measurable indicators for all stated priorities. SAPTA's approach is to work collectively on the Block Grant but to keep priorities consistent with other grants submitted. Charlene thanked the members of the committee for their reports which were used as a foundation for the block grant.

SAPTA knows that we will get funding from the block grant, we just do not know the amount of the funding yet. However, this will probably be the last funding cycle where substance abuse prevention will be a part of the grant. It is anticipated that in the future, the 20% set-aside for prevention will be pulled together with other prevention discretionary grants into a formula grant for a combination of mental health promotion and substance abuse prevention. There is a fifty-million set-aside for tribal block grants, separate from the state block grant.

9. **Information on the November 15, 2011 Presentation by Dr. Ira Chasnoff**
Charlene Herst extended an invitation to all members of SEW, MPAC, Coalitions, the Health Division and MHDS to attend the Ira Chasnoff Presentation on November 15th at 10:00 a.m.; 4150 Technology Way, Room 303. Dr. Chasnoff will present information on the effects of substance use during pregnancy, give an overview of our state's Fetal Alcohol Spectrum Disorders (FASD) Project and present the latest data for Nevada.
- * 10. **Discussion and Approval of Date and Agenda items for Next Meeting**
Possible dates for the next meeting were discussed and it was moved and seconded to set November 30th, 1:00 p.m. as the date for the next meeting. Motion carried
11. **Public Comment and Discussion**
Welcome to all the new members of the committee.
- * 12. **Adjournment**
Monty Williams welcomed all new members and called for a motion to adjourn. The motion was made and seconded, the motion passed and the meeting was adjourned at 3:04 p.m.