

State of Nevada
Department of Health and Human Services · Mental Health and Developmental Services
Substance Abuse Prevention and Treatment Agency (SAPTA)

**STATEWIDE EPIDEMIOLOGY WORKGROUP (SEW)
APPROVED MINUTES**

DATE: September 28, 2011
TIME: 10:00 a.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, NV Las Vegas, Nevada

Committee Members Present

Misty Allen	DHHS-Office of Suicide Prevention
William Gazza – Committee Chair	Clark Co. Coroner’s Office
Tony Fredrick	Southern Nevada Health District
Alicia Hansen	Bureau of Health Planning & Statistics
Diane McCoy	Boys and Girls Clubs of Western Nevada
Sue Meuschke	NNADV
Eric Ohlson – proxy for Kevin Quint	Join Together Northern Nevada
Cody Phinney	MHDS Planning
Ron Pierini	Douglas County Sheriff’s Office
Chris Pritsos	UNR
Pauline Salla	DCFS- JJPO
Linda Septien – proxy for Debbie Gant-Reed	Crisis Call Center
Angel Stachnik	Staff Epidemiologist, Indian Health Board, NV
Brad Towle	NSHD- Health Statistics, Planning, Epidemiology, & Response
Wei Yang	Nevada Center for Health Statistics and Informatics

Committee Members Absent

Ihsan Azzam – Ex-Officio	NSHD –Communicable Disease Control
Kristen Clements-Nolle – Ex-officio	UNR School of Community Health Science
Muriel Kronowitz	Bureau of Child, Family and Community Wellness
John Johansen	Nevada Office of Traffic Safety
Deborah McBride	SAPTA Agency Director
Susanne Paulson	Nevada State Health Division

Public Present

Jessica Rosas	Join Together Northern Nevada Intern
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Contractor

Michael Coop	Coop Consulting
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SAPTA Staff Present

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

1. Welcome and Introductions

William Gazza opened the meeting in due form at 9:15 a.m. by announcing the locations where notifications of the open meeting were posted and welcoming the attendees. Kristin Clements-Nolle, Muriel Kronowitz and Susan Mears attempted to join the meeting telephonically; but due to a technical difficulty, were disconnected. After introductions, a quorum was established.

2. Public Comment and Discussion

There were no comments.

*** 3. Approval of Statewide Epidemiology Workgroup Minutes of July 27, 2011**

The minutes from the previous meeting were read and approved.

4. Update on the Statewide Epidemiology 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 Synectics, 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.

5. Update on SEOW Grant Task 10 Final Deliverables

SAPTA submitted two 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 coalition to submit a CCPP with specific requirements which included needs assessment, deeming requirements, mission vision, goal statement, 501(c)3 status, policies and procedures, by-laws, 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.

- 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.
- 7. Update of the Data Dissemination Plan and Proposed Database**
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 Epidemiology Profile, which is posted on the SAPTA website; a Community Profile including Michael Coop's special reports on women and minorities in Nevada, also posted on the website. 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 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 SEW 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 done this type of system before and are not starting from scratch, so SAPTA is looking forward to getting the database up and running in a matter of months. It was pointed out that updating the data to keep current will be important to the overall success of the project.
- 8. Update on the Federal Fiscal Year 2012 Block Grant**
Charlene Herst reported that SAPTA has submitted the Block Grant ahead of schedule. 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 this day. 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. 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.
- 9. Update on Prescription Drugs**
Nan Kreher presented information on prescription drug overdose. According to an article in the New York Times, handout provided, the most commonly abused prescription drugs are oxycontin, vicodin, xanax soma and phentinel, causing more deaths than heroin and cocaine combined. In Clark County, 488 people died from prescription and street drug overdoses in

2010; an alarmingly high 3.2 times the number of people (148) who died in automobile crashes. Street drugs makes up about 35% of that combined total of overdoses; more men than women died as a result of street drugs. Most of the deaths (65%) were a result of prescription drug overdose, numbering about equal between men and women. It is not known how many of those occurrences were deliberate suicides, but about 95% are ruled accidental. Deaths from heroin overdose are relatively low in Clark County. The largest age group dying from overdose are the 45 to 59-year-olds. The numbers are expected to be much higher in 2011.

10. 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.

* **11. 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 as the date for the next meeting. Motion carried.

12. Public Comment and Discussion

Consultant Michael Coop distributed the final draft for the report, *Substance Abuse and Minorities in Nevada* and invited input and feedback to be directed to Nan or himself. Attention was called to page 10 of the report containing useful highlights.

* **13. Adjournment**

Chairman William Gazza thanked everybody for attending and expressed that he was looking forward to the next meeting. It was moved and seconded that the meeting be adjourned; the motion carried and the meeting was adjourned at 11:55 a.m.