



SHIP SUBCOMITTEE MEETING #2: Behavioral Health

Wednesday, September 18th, 2:00 – 4:00pm
800 NE Oregon Street, Suite 900
Portland, OR 97232

OR

Go to Meeting:
Conference call:
Access Code:

Vision: Oregon will be a place where health and wellbeing are achieved across the lifespan for people of all races, ethnicities, disabilities, genders, sexual orientation, socioeconomic status, nationalities and geographic locations.

Meeting Objectives:

- Finalize goal
- Identify outcome measures

2:00 – 2:15 **Welcome, introductions and agenda overview**

2:15– 2:40 **Follow-up from last meeting – finalize goal**

2:40 – 2:45 **Update from ADPC**

2:45 – 3:45 **Identifying outcome measures**

3:45 – 3:50 **Public Comment**

3:50 – 4:00 **Wrap-up & Next Steps**

- Next meeting: October 16th – Policy level strategies

Welcome & introductions

Share name and pronouns

What are three identities you hold?

An identity is any aspect – or descriptor of yourself - that is important to you.

Getting clear on language

Vision: Oregon will be a place where health and wellbeing are achieved across the lifespan for people of all races, ethnicities, disabilities, genders, sexual orientations, socioeconomic status, nationalities and geographic locations.

Goal: Broad statement(s) of what we're trying to accomplish within a given priority area to achieve the vision.

Outcome indicator: Long term measure that would indicate goal is achieved.

Strategy: Policy, community and individual level interventions needed to achieve the goal

Process indicator: Short term measure that would indicate strategy has been achieved.

Actions: Specific tasks needed to implement strategy

Getting clear on language - Example

Vision: Oregon will be a place where health and wellbeing are achieved across the lifespan for people of all races, ethnicities, disabilities, genders, sexual orientations, socioeconomic status, nationalities and geographic locations.

Goal(s): Improve behavioral health of priority populations.

Outcome indicator: Reduce POC identified adults reporting 1 or more poor mental health days in past 30 days by 50%.

Strategy: Increase number of culturally responsive mental health providers

Process indicator: Number of QMHPs that identify as a POC.

Finalizing the goal

- Reduce stigma and increase community awareness that behavioral health issues are typical and widely experienced.
- Build individual, community and systemic resilience for behavioral health
- Create a coordinated system of prevention, treatment and recovery

Outcome Measures

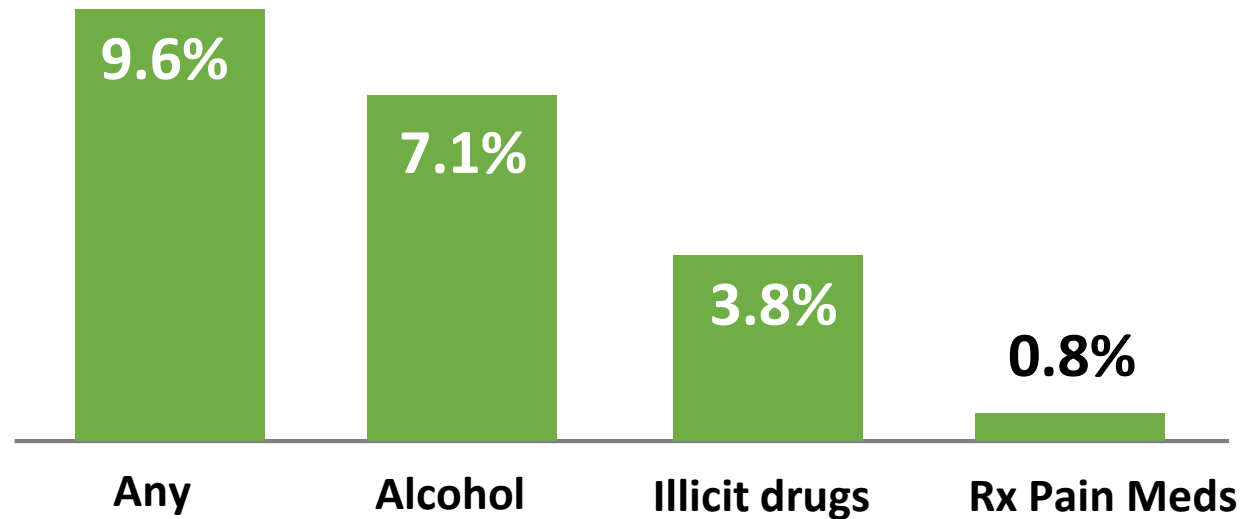
ALCOHOL AND DRUG POLICY COMMISSION

STATEWIDE STRATEGIC PLAN

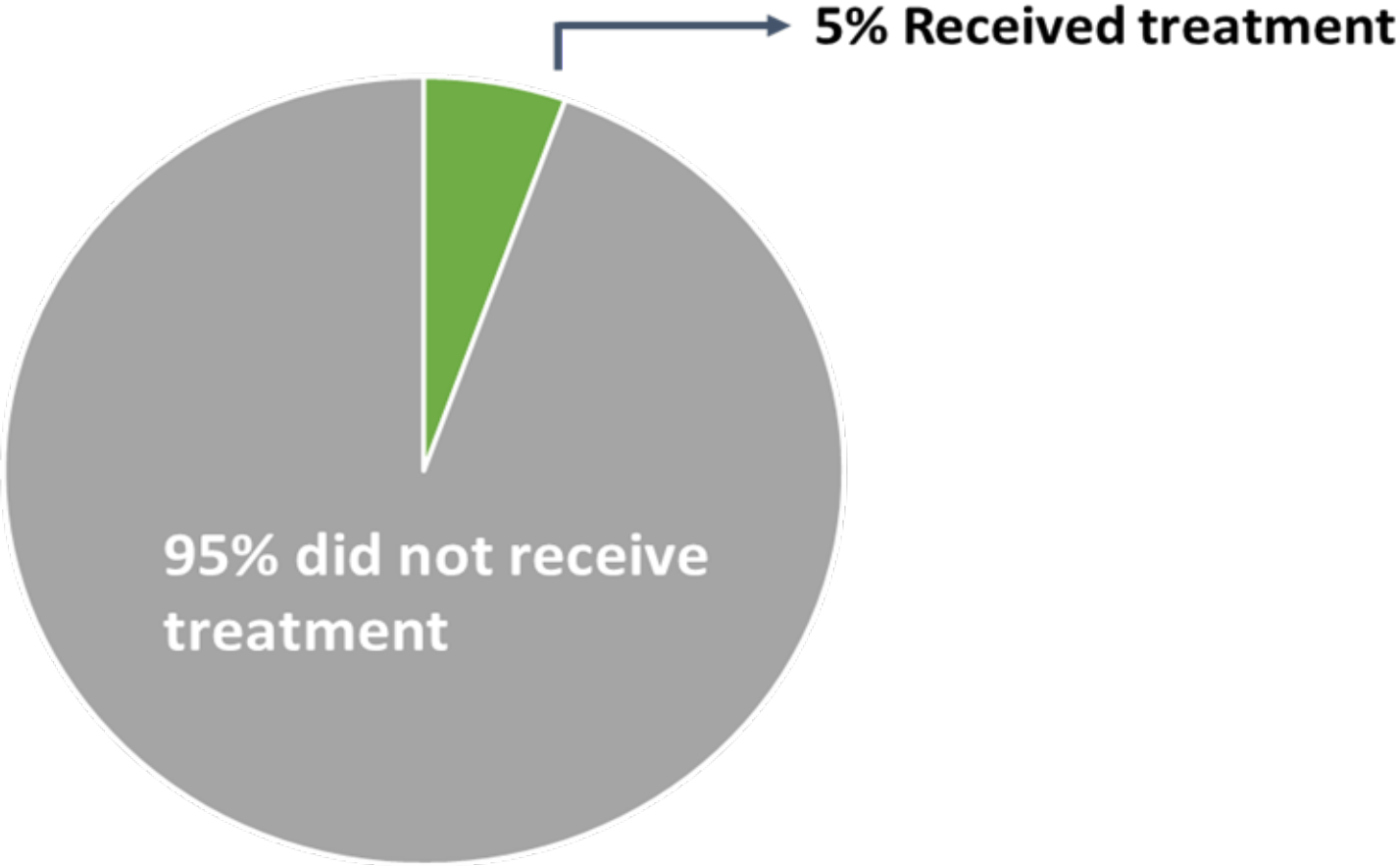
DR. REGINALD C. RICHARDSON

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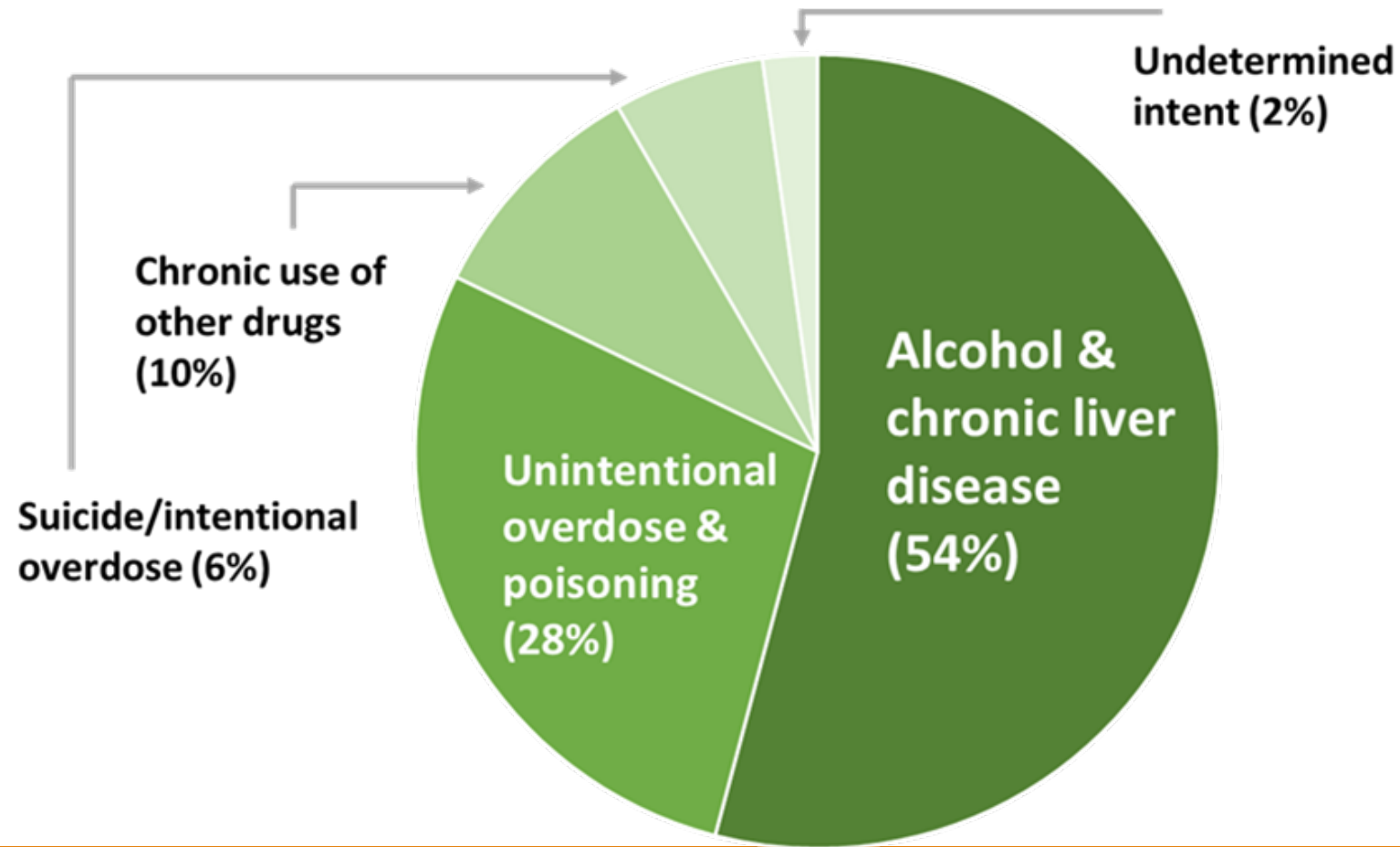
Nearly **1 in 10** Oregonians aged 12 and older were estimated to have a substance use disorder in 2015-2016



Most Oregonians with a substance use disorder are estimated to not receive treatment



1,549 deaths in Oregon in 2017 were due to alcohol or other drugs



Morbidity and Mortality

Gender

Two-thirds (67%) of alcohol and drug-related deaths occurred among males

More than half (56%) of intentional overdoses/suicides were among females

Age

The 55-64 age group has the highest rate of alcohol and drug-related deaths

Race

Whites comprised the majority of AOD deaths but Native Americans died at more than twice their rate

African Americans had the highest rate of death from AOD-related unintentional injuries, followed by Native Americans and Whites

Outcomes

1. Reduce Oregon's substance use disorder (SUD) rate from 9.55% to 6.82% in five years.*
2. Increase the recovery rate from 46% to 71% in 5 years**
3. Reduce morbidity and mortality related to SUD (e.g., motor vehicle crash, overdose, infections from injecting)

Process for measure identification

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Proposed process for measure development

- Goal: Identify 2-3 outcome measures for the priority
 - Communicate hoped for changes
 - May be long-term in nature (>5 years)
 - Model indicator for CHIPs and other implementers
 - Measure progress towards goal
- Process
 - Identify possible outcome measures from State Health Indicators and other data sources
 - Apply criteria to narrow measures
 - Identify baseline and target

Outcome vs process measures

Outcome measures align with the goal

Goal: Reduce harms associated with alcohol and substance use

Outcome measure: Opioid overdose deaths

Process measures align with the individual strategies

Strategy: Promote use of Lines for Life

Measure: Number of callers to Lines for Life

Proposed outcome measurement criteria

Criteria	Definition
Addresses health disparity	Measure addresses an area where health disparities exist.
Community acceptance	Right measure for the issue, measure is easy to understand by all community members
Feasible	Data is already collected, or mechanism for data has been identified

Examples

- **Adult suicide rate (2015-2019 SHIP), *Vital statistics***
- Percentage of adults reporting 14 or more days of poor mental health poor month, *Behavioral Risk Factor Surveillance Study (BRFSS)*
- **Adults reporting 1 or more poor mental health days in past 30 days (State Health Indicator), *BRFSS***
- Youth meeting Positive Youth Development benchmark, *Oregon Healthy Teens Survey*
- Proportion of adolescents aged 12 to 17 who experience major depressive episodes (Healthy People 2020)
- Recovery rate (ADPC)
- Substance use disorder rate (ADPC)

Brainstorm outcome measures

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Public Comment

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Next Steps & Final Thoughts

-+/Delta feedback review

- Next ADPC meeting is September 26th

- Next subcommittee meeting is October 16th.

-Homework: Continue to contribute strategic plans, data and policy documents to basecamp. Upload a photo of yourself to your basecamp profile. Contribute policy related strategy ideas – more information will follow.