

Statewide Partner Engagement Outreach Alcohol and Drug Prevention Across OHA

THANK YOU

Thank you for your participation throughout our statewide engagement process to talk about how we can work together to make Oregon a healthier state.

The reorganization of the Oregon Health Authority (OHA) and the transition of alcohol and drug prevention responsibilities to the Public Health Division (PHD) was a significant change for all of us. It was bumpy and unclear. We made mistakes.

We are grateful for the extensive engagement of partners so far, and look forward to continuing this engagement. The *Prevention Partner Conversations: Final Report* provided information about priorities, concerns, and perspectives of alcohol and drug prevention partners. We learned new information and gained further insight into topics that were already under consideration. As you'll see in the report, opportunities were identified to:

- strengthen collaboration and relationships,
- lead with transparency of decisions and priorities,
- foster evidence-based strategies, and
- address approaches and systems for professional development.

We invite you to continue to work with us to dig into these areas of opportunity. Together, we can grow in our support system-wide for stronger families and communities in Oregon.

Our intention through this statewide engagement was to gather input that will inform how we approach our work together going forward, including:

- opportunities to work in a more collaborative fashion,
- the best ways to continue to solicit input to inform alcohol and drug prevention work, and
- the most effective ways to communicate changes.

Again, thank you to all who participated. We are excited to move our work forward together!

BIG CHANGE IS CHALLENGING: WHAT WE LEARNED

The overall portfolio of work to expand alcohol and drug prevention into OHA-PHD was complex and the transition of fiscal and operational components is still underway. As with any large organizational change, there are elements that can't be shared openly because of privacy and confidentiality requirements. We do, however, recognize some of this work has not been as transparent to local partners as it should have been.

We know that the intent of some OHA-PHD communications and engagement didn't always come through. Looking back, it is helpful to understand where there were gaps in communication. A few examples that stood out to us are:

- **INTERNAL SYSTEMS AND INFRASTRUCTURE DEVELOPMENT**

Once OHA made the decision to move alcohol and drug prevention activities from the Addictions and Mental Health (AMH) Division to the OHA-PHD, our focus became transitioning fiscal systems, program administration, funder relationships, and staffing. In addition, we dug into understanding and aligning professional development resources, including certification through Certified Prevention Specialist (CPS) credentialing processes, with our colleagues in Health Policy and Analytics. This has been our focus for the last 18 months. Transitioning these systems has created the foundation for accountability, good stewardship of public resources, and sustained funding over time for existing infrastructure. These are complex systems that take time to shift and change. We recognize that external communication during this time did not meet expectations. We are committed to providing transparent and timely communication going forward.

- **DECISION-MAKING**

OHA is developing a *Collaboration Team* to ensure we have appropriate consultation and guidance from the field, to assure we have coordination across OHA and to make certain we have an effective approach moving forward. The *Collaboration Team* will be comprised of several individuals, 1) representatives from the prevention field; 2) a representative from OHA Health Policy and Analytics-Behavioral Health 3) a representative from the OHA Health Systems Division; 4) a representative from the OHA Health Public Health; and 5) a representative from OHA External Relations. We will be consulting with alcohol and drug prevention specialists/coordinators in collaboration with OHA Division Leadership regarding the *Collaboration Team* membership. We will identify and assemble this team in the next couple of weeks.

A substantial amount of time and energy has been focused on internal systems and infrastructure development, and ensuring consistent resources for existing local programs. It has taken longer than we thought. We are grateful that local programs and staff reached out to offer input, coaching and assistance during

this transition. It's clear we are all heavily invested in the success and future of alcohol and drug prevention for healthy families and communities. We have intentionally taken time to listen to local program perspectives in how we can work together and better understand the initiatives of local programs. We have not made any decisions regarding the planning and implementation of local programs. That is work we are now ready to do together.

We have worked on some initial ideas for our state interventions and are eager to share them with you for input and to determine how they may coordinate with local efforts. These are not static documents. Feedback is always welcomed and encouraged. There will be many opportunities ahead that will require input and deeper learning together for decisions made by OHA-PHD.

- **TRIBAL RELATIONSHIPS**

The feedback provided indicated a need for greater transparency and communication about our processes with input from tribal partners. We deeply value the work, expertise and relationships with tribes and tribal health prevention programs. We are committed to strengthening these relationships, continuing to learn from tribal partners, honoring Tribal Best Practices and minimizing changes to tribal operations. Recruitment for a Tribal Alcohol, Tobacco and Drug Policy Specialist to provide additional support to prevention will begin soon. We are coordinating with the OHA Tribal Affairs Director for invitations to attend tribal prevention-related meetings that will strengthen communication pathways. As related, we will also work with the OHA Tribal Affairs Director to participate in the Substance Abuse Prevention and Treatment Block Grant tribal consultation. This will provide opportunities to address tribal-specific issues with attention to tribal sovereignty and our government-to-government relationship.

- **VALUE OF DATA**

It is clear that we share a common value and appreciation of data and information. We are eager to provide data in support of local and state efforts working to improve health outcomes related to alcohol, tobacco and other drug use. A strong surveillance system is essential in our collective efforts and our shared understanding of how data are used for the planning and implementation of prevention interventions.

With regard to the grants management system, Oregon Prevention Data System (OPDS), we received feedback about how burdensome monthly reporting was, and how this took important time away from program staff in conducting their community prevention efforts. As a result of this feedback, we decided to end OPDS to simplify the planning and reporting process and to improve the quality of data collected and submitted for grant reporting. We recognize that some tribes and counties have found detailed tracking of program activity information useful. We look forward to continued discussion about systems to provide data and collect relevant information in support of our collective work.

- PROGRAM EXPERTISE

We value the local Tribal and County alcohol and drug prevention programs' leadership, extensive knowledge and expertise in this field. We also acknowledge that we have used different language to describe the work. To complement expertise, OHA-PHD will convene an *Advisory Group* comprised of prevention specialists and key stakeholders to provide guidance and direction for alcohol and drug prevention moving forward. The *Advisory Group* meetings will be public, and opportunities for public input will be provided. They will also be tasked with assessing prevention in Oregon and making recommendations to OHA-PHD for prevention implementation. This will be a group focused on alcohol and drug prevention moving forward and we will continue to consult with the Conference of Local Health Officials Healthy Communities (CLHO-HC) Committee and the Behavioral Health Prevention and Promotion Subcommittee of the Addictions and Mental Health Planning and Advisory Council (BHPP-AMHPAC).

We look forward to working with you to advance and leverage the complementary strengths of state and local program infrastructure and staff. If we can do this together, it will mean better health for all people in Oregon, which is our prime mission.

- WORKFORCE DEVELOPMENT LEARNING

We heard that the time and approach we took to study elements of the workforce development system came across as a lack of support or understanding of the training needs of the workforce. Workforce capacity development is essential to grantees working to change outcomes in local communities. We heard that the Certified Prevention Specialist (CPS) credentialing is an important component for partners and it is clear that we need to provide continued support for CPS certification and training.

We are in the process of assessing the available workforce development resources, existing rules and requirements, and the potential means and methods for delivery of training and certification through CPS credentialing processes nationally. Moving forward, we are committed to working together with local, regional and national prevention professionals to ensure CPS will continue to be supported.

- EVIDENCE-BASED POLICY, SYSTEMS AND ENVIRONMENTAL APPROACHES

Our approaches emphasize changes in community conditions that are shaped by policies and systems. Changing the places where we live, work, play, learn and receive healthcare is a priority because these kinds of changes are sustainable and can have a population-wide effect. We also recognize that there are special

populations that need more direct prevention interventions. OHA-PHD is working across the entire agency to ensure that these populations' needs are met.

We also acknowledge that we have different language to describe the work in some instances, yet common outcomes and goals. We can together learn about different or complimentary approaches. Work across the Center for Substance Abuse Prevention (CSAP) six prevention strategies (Information Dissemination, Education, Alternatives, Problem Identification and Referral, Community-Based Processes and Environmental Strategies) significantly contributes to achieving these outcomes and goals for our communities. We look forward to growing our competency around alcohol and drug prevention and coordinating with and learning from local efforts to strengthen our collective impact.

MOVING FORWARD TOGETHER

We are committed to focusing on the future and how we can leverage our strengths, expertise, and resources to support families and communities throughout Oregon. OHA-PHD is committed to improving the health of all people in Oregon, specifically focusing on reducing excessive alcohol use and tobacco use, and coordinating efforts for marijuana, prescription, and other drug use prevention. We are eager to begin work that will have the greatest impact on reducing substance misuse and preventable death.

[Work is already underway \(Table 1\)](#) that addresses some of these issues and opportunities from the Final Report. Thank you to those of you who have already provided contributions in these efforts.

There are also some [Initial Ideas for Moving Forward \(Table 2\)](#) that will address some of these issues. We know there is more work to be planned and prioritized, but it's promising to see some alignment.

OPPORTUNITIES FOR FURTHER DISCUSSION AND FEEDBACK

The Collaboration Team, in coordination with Kirsten Aird, Todd Beran, Karen Girard and Luci Longoria, will be reaching out to County and Tribal prevention program administrators over the next few weeks.

In addition, OHA-PHD will be holding workshops to gather input from you on what some of our additional steps should be. We will also work with some of you to design and pilot new approaches for input, communication and integrated work.

In those upcoming workshops, we will have conversations about the content of the report, but more importantly, we will ask you to help us identify:

- 1) The most promising opportunities for collaborative work
- 2) What criteria we should use when designing collaborative work

3) What criteria we should use when designing teams to work on collaborative design and demonstration projects

OHA-PHD will use the input gathered from conversations with program administrators and the Final Report Tour workshops to prioritize opportunities to move forward. We are committed to growing opportunities for greater collaboration in a transparent and ongoing basis.

We look forward to the conversations we'll have with many of you in the coming months. Please look for invitations coming soon. In the meantime, please do not hesitate to reach out if we can be of assistance in any way.

Thank you,

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TABLE 1. WORK UNDERWAY

Areas of Opportunity	Work Underway	How partners can be involved
<p>Establish clear points of contact and individualized relationships</p>	<p>Implementation of Regional Support Networks (RSNs) OHA-PHD staff hosts bi-monthly Regional Support Network (RSN) calls that provide local programs opportunities to share ideas and identify means to collaborate across OHA-PHD-supported prevention programs (i.e. ADPEP, SPF-PFS, tribes, TPEP, and Regional Health Equity Coalitions).</p> <ul style="list-style-type: none"> OHA-PHD staff contact: <i>Ashley Thirstrup, Community Programs Lead</i> ashley.thirstrup@state.or.us (971) 673-1026 	<p>Participate in RSN calls</p> <p>Volunteer to facilitate or set agenda in coordination with OHA-PHD staff</p> <p>Talk with your Community Programs Liaison</p>
	<p>Implementation of Community Programs Model OHA-PHD-supported alcohol and drug prevention grantees receive communication and support from Regional Support Teams made up of community program liaisons, policy specialists, and research analysts. This aims to establish clear points of contact and foundation for relationships in support of contracts management, local planning and implementation.</p> <ul style="list-style-type: none"> OHA-PHD staff contact: <i>Ashley Thirstrup, Community Programs Lead</i> ashley.thirstrup@state.or.us (971) 673-1026 	<p>Talk with your Community Programs Liaison and staff in your Regional Support Team for questions and support related to contracts management, local planning, data needs and implementation</p>
	<p>Coordination of Alcohol and Drug Prevention listservs Alcohol and drug prevention communication listservs have been created and maintained to support communication with and among all OHA-PHD-supported alcohol and drug grantees, as well as other prevention partners interested in substance abuse prevention activities efforts across OHA.</p> <p>Subscribe to HPCDP Prevention Coordinator Listserv http://listsmart.osl.state.or.us/mailman/listinfo/hpcdp_prevention_coordinators</p> <p>Subscribe to Public Health Prevention Integration Listserv http://listsmart.osl.state.or.us/mailman/listinfo/public-health-prevention-integration</p> <ul style="list-style-type: none"> OHA-PHD staff contact: <i>Amanda Cue, Alcohol and Drug Policy Specialist</i> amanda.c.cue@state.or.us (971) 673-1121 	<p>Request subscription to listservs</p> <p>Post relevant information for OHA-PHD grantees on HPCDP Coordinator listservs</p>

Areas of Opportunity	Work Underway	How partners can be involved
<p>Consider building communications protocol that encourages peer-to-peer communications between HPCDP and tribes</p>	<p>Adherence to OHA Tribal Protocols OHA-PHD staff will be adhering to a newly developed OHA process with the tribes for agenda requests for the OHA Tribal Monthly Meetings and the SB 770 Health Cluster Meetings. This is to ensure that agenda items are communicated in advance, with input from tribal partners, and materials are shared at least a week in advance of the meetings. In addition, OHA-PHD will work with the OHA Tribal Affairs Director to follow the Tribal Consultation Policy, once adopted (currently being drafted). OHA-PHD will continue coordinating with the OHA Tribal Affairs Director to keep abreast of priority issues for tribes.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: Danna Drum, OHA-PHD Strategic Partnerships Lead danna.k.drum@state.or.us (971) 673-1223 • OHA staff contact: Julie Johnson, OHA Tribal Affairs Director julie.a.a.johnson@state.or.us (503) 945-9703 	<p>Provide feedback and talk with: OHA Tribal Affairs Director; OHA Strategic Partnerships Director; OHA-PHD HPCDP Tribal Alcohol, Tobacco and Drug Policy Specialist (TBD)</p>
	<p>Hiring of Tribal Alcohol, Tobacco and Drug Specialist With feedback from tribal partners, OHA-PHD will be recruiting for a Tribal Alcohol, Tobacco and Drug Coordinator.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: Luci Longoria, Health Promotion Manager luci.longoria@state.or.us 971-673-1064 	<p>Tribal partners have provided input into the position description and will assist with recruitment efforts</p>
<p>Create opportunities for collaborative and cross-functional work teams</p>	<p>Implementation of Regional Support Networks OHA-PHD staff hosts bi-monthly Regional Support Network (RSN) calls that provide local programs an opportunity to share ideas and identify means to collaborate across OHA-PHD-supported prevention programs (i.e. ADPEP, SPF-PFS, tribes, TPEP, and Regional Health Equity Coalitions).</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: Ashley Thirstrup, Community Programs Lead ashley.thirstrup@state.or.us (971) 673-1026 	<p>Participate in RSN calls</p> <p>Volunteer to facilitate or set agendas in coordination with OHA-PHD staff</p> <p>Talk with your Community Programs Liaison</p>

Areas of Opportunity	Work Underway	How partners can be involved
<p>Consider taking steps to foster a stronger culture of evidence-based prevention</p>	<p>Fielding Oregon’s Youth Surveys OHA-PHD is administering the 2018 Student Wellness Survey. A survey recruitment package has been sent to school district superintendents. The survey will be fielded in the Spring 2018 with no changes in methods or questions.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: <i>Vicky Buelow, Alcohol and Drug Research Analyst</i> victoria.h.buelow@state.or.us 971-673-1104 	<p>Talk with schools and districts about youth survey implementation</p> <p>Other opportunities for input to be developed</p>
	<p>Development of Health Promotion and Chronic Disease Prevention (HPCDP) Five-Year Strategic Plan HPCDP coordinates its strategic plan development with the State Health Improvement Plan (SHIP). HPCDP is in the process of completing its new 5-year strategic plan for 2017-2022 that will focus on risk behaviors that cause the greatest illness, disease, disability and death. These are not static documents. Feedback on strategic plan objectives is always welcome and encouraged.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: <i>Amanda Cue, Alcohol and Drug Policy Specialist</i> amanda.c.cue@state.or.us (971) 673-1121 	<p>Opportunities for input to be developed together</p> <p>Provide feedback and talk with Community Programs Liaisons, Regional Support Team, Alcohol and Drug Policy Specialist</p>
	<p>Alcohol and Drug Prevention and Education (ADPEP) Communications Calls OHA-PHD hosts a monthly ADPEP Communications call for interested grantees and partners to discuss ideas for coordinating statewide alcohol and drug prevention communication. One component to this call is sharing updates about and opportunities for input to the Alcohol Formative Research process. This is the audience research on alcohol behavior and opinions that will be done to inform future strategic communications and media.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: <i>Megan Gerdes, Health Promotion Specialist</i> megan.e.gerdes@state.or.us (971) 673-1039 <i>Kati Moseley, Health Promotion Specialist</i> katarina.moseley@state.or.us (971) 673-1002 <i>Sarah Wylie, Health Promotion Specialist</i> sarah.a.wylie@state.or.us (971) 673-1051 	<p>Participate in ADPEP Communication calls to hear updates, offer input and ask questions</p>
<p>Communicate a clear response to the outreach</p>	<p>Coordination of OHA-PHD Manager meetings with local program administrators OHA-PHD will be meeting with local program administrators to review report findings and next steps together October through November.</p>	<p>Local program administrators talk with OHA-PHD Managers</p>

Areas of Opportunity	Work Underway	How partners can be involved
<p>process and any related changes</p>	<ul style="list-style-type: none"> OHA-PHD staff contact: <i>Kirsten Aird, Cross Agency Health Systems Manager</i> kirsten.g.aird@state.or.us 971-673-1053 <i>Todd Beran, Surveillance and Evaluation Manager</i> todd.beran@state.or.us (971) 673-1063 <i>Karen Girard, HPCDP Section Manager</i> karen.e.girard@state.or.us (971) 673-1046 <i>Luci Longoria, Health Promotion Manager</i> luci.longoria@state.or.us (971) 673-1064 	
	<p>Invitation to Final Report work sessions Work sessions will be held at the Grantees and Contractors meeting November 7-9, 2017 to communicate next steps and gather input for the design of collaborative demonstration work from conference attendees. Three in-person work sessions with the same content will be held across the state November 28-December 1st, as well as one webinar.</p> <ul style="list-style-type: none"> OHA-PHD staff contact: <i>Amanda Cue, Alcohol and Drug Policy Specialist</i> amanda.c.cue@state.or.us (971) 673-1121 	Participate in one of six work sessions at Grantees and Contractors meeting, around the State or through the webinar, by registering online through upcoming invitations

TABLE 2. INITIAL IDEAS FOR MOVING FORWARD

Areas of Opportunity	Initial Ideas for Moving Forward	How partners can be involved
<p>Create opportunities for collaborative and cross-functional work teams</p>	<p>Identification of Communities of Practice These are professional learning communities coordinated and facilitated by OHA-PHD staff that provide networking and collaboration related to a specific strategy area that grantees are working in or addressing.</p> <ul style="list-style-type: none"> OHA-PHD staff contact: <i>Ashley Thirstrup, Community Programs Lead</i> ashley.thirstrup@state.or.us (971) 673-1026 	<p>Once developed, participate in Communities of Practice to share expertise, experiences and learning within focus area</p>
	<p>Select and design opportunities for collaborative work As a follow-up to the Statewide engagement and outreach process, OHA-PHD will be hosting Final Report Tour workshops (six total) to get input on prioritized opportunities for collaborative work with state and local program staff.</p> <ul style="list-style-type: none"> OHA-PHD staff contact: <i>Amanda Cue, Alcohol and Drug Policy Specialist</i> amanda.c.cue@state.or.us (971) 673-1121 	<p>Participate in upcoming Final Report Tour workshops to help prioritize opportunities and design for collaborative work</p> <p>Participate in workgroups identified through the final Report Tour workshops for collaborative work</p>
	<p>Creation of OHA Collaboration Team OHA will be creating a newly formed Collaboration Team to ensure appropriate consultation and guidance from prevention partners in the field, to assure we have coordination across OHA Divisions and to make certain we have an effective approach moving forward.</p> <ul style="list-style-type: none"> OHA-PHD staff contact: <i>Tim Noe, Center Administrator</i> timothy.d.noe@state.or.us (971) 673-1139 <i>Danna Drum, Strategic Partnerships</i> danna.k.drum@state.or.us (971) 673-1223 	<p>Participate on the Collaboration Team</p>

Areas of Opportunity	Initial Ideas for Moving Forward	How partners can be involved
<p>Consider taking steps to foster a stronger culture of evidence-based prevention</p>	<p>Coordination of Oregon’s Youth Surveys The current plan is to field the Student Wellness Survey in 2018, Oregon Healthy Teens Survey in 2019, and a combined youth survey in 2020. Input from the field will be an essential part of the process to ensure local community data and evaluation needs are served. OHA-PHD has convened a workgroup to determine methods for merging the Student Wellness Survey and Oregon Healthy Teens survey. The intent is to conduct a single youth survey that meets the needs of all stakeholders who use these data. HPCDP is participating on this workgroup and is working to ensure the needs of all grantees are met, including our Drug Free Communities partners.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: <i>Vicky Buelow, Alcohol and Drug Research Analyst</i> victoria.h.buelow@state.or.us (971)673-1104 	<p>Provide input in a variety of formats to share insights, expertise and concerns, and give feedback on what would be most useful in a youth survey to support shared work. Specific mechanisms for input are in development</p>
	<p>Guidance for Program Strategies In addition to drawing from local partner expertise in prevention science, OHA-PHD will be bringing together the evidence base and resources to help guide prevention efforts that can best demonstrate progress toward common outcomes and goals. Our work together will be grounded in the evidence-base resources from Substance Abuse and Mental Health Services Association (SAMHSA), National Academies of Sciences (formerly Institute of Medicine), Centers for Disease Control (CDC) and Prevention and CDC Community Guide for Preventive Services, and Tribal Best Practices.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: <i>Shaun Parkman, Evaluation Lead</i> shaun.w.parkman@state.or.us (971) 673-0894 <i>Amanda Cue, Alcohol and Drug Policy Specialist</i> amanda.c.cue@state.or.us (971) 673-1121 	<p>Opportunities for input in development</p> <p>Educate OHA on Tribal Best Practices</p>
	<p>Revitalization of State Epidemiology Outcomes Workgroup (SEOW) OHA-PHD HPCDP’s Surveillance and Evaluation Team (SET), made up of data analysts, evaluation specialists and epidemiologists, serves as the foundation of Oregon’s SEOW. SET enlists support from evaluation contractors to support data collection and evaluation rigor. SET will establish and facilitate a scientific technical advisory committee to build a network of people and organizations to guide planning for the implementation of prevention best practices and to inform strategic planning.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: <i>Vicky Buelow, Alcohol and Drug Research Analyst</i> victoria.h.buelow@state.or.us (971) 673-1104 	<p>Opportunities for input, including how data are used locally are in development</p>

Areas of Opportunity	Initial Ideas for Moving Forward	How partners can be involved
	<p>Development of Advisory Committee OPD-PHD plans to convene an Advisory Committee comprised of prevention specialists/coordinators and key stakeholders to provide guidance and direction for alcohol and drug prevention moving forward. Broad advice from the prevention field as to group membership, scope and charter will be sought.</p> <ul style="list-style-type: none"> • OHA-PHD staff contact: <i>Tim Noe, Center Administrator</i> timothy.d.noe@state.or.us (971) 673-1139 	<p>Plans for committee structure and recruitment is in development</p> <p>Once developed, participate on Advisory Committee, provide feedback to committee members</p>