Carroll County Regional Public Health Network

Substance Misuse 3- Year Strategic Plan July 1, 2019 – June 30, 2022

For more information contact:

Kim Perkinson, MA Prevention Resources Coordinator Carroll County Coalition for Public Health Phone: 603-301-1252, Ext. 305 Email: <u>prevention@c3ph.org</u> <u>www.c3ph.org</u>



Carroll County Regional Public Health Network

| WHO WE ARE | The Carroll County Regional Public Health Network is one of thirteen Regional Public Health Networks (RPHN) serving the state of New Hampshire. The function of the RPHN is to deliver public health services within the region, with the guidance of a representative Public Health Advisory Council (PHAC). The role of the PHAC in each region is to assess needs, guide decision-making and foster shared resources and investments into positive health outcomes. The Regional Public Health Networks provide the infrastructure for the substance misuse prevention efforts in the county. The prevention network conducts three core prevention functions: | | | |
|----------------------------|--|--|--|--|
| | Align prevention efforts with the goals of the State Substance Misuse Prevention Plan and the New Hampshire State Health Improvement Plan, as well as with the Carroll County Health Improvement Plan adopted by the Public Health Advisory Council. | | | |
| | Build, maintain and sustain a regional network of professionals and community members who are concerned about substance misuse in the region and Leverage resources and provide technical assistance to | | | |
| | Enforcement, Health and Medical Providers, Government, Business and Community and Family Supports. | | | |
| CONTACT | Kim Perkinson, MA | | | |
| INFORMATION | Carroll County Coalition for Public Health, | | | |
| | An initiative of Granite United Way | | | |
| | prevention@c3ph.org | | | |
| | 603-301-1252, ext. 305 | | | |
| LEADERSHIP TEAM MEMBERS | Carroll County Regional Public Health Network Leadership Team | | | |
| | For the past year, the Carroll County Regional Public Health Network | | | |
| | Prevention Leadership Team has met jointly with members of the Continuum of Care/Access to Behavioral Health CHIP Work Group. | | | |
| | Meetings are held bi-monthly on the 1st Tuesday of even months. | | | |
| | Typically, the first part of the 3.5-hour agenda focuses on Prevention | | | |
| | Issues and Updates. A 15-minute Networking Break takes place, and | | | |
| | the meeting reconvenes with the second half of the agenda focusing | | | |



on Issues and Updates across the SUD Continuum of Care, especially intervention, treatment and recovery support. All meetings are widely publicized and any individual who lives and/or works in the region is encouraged to attend as often as they wish. The official "members" designated as the Prevention Leadership Team include the following individuals: Jennifer Selfridge, Carroll County Regional Public Health Network Substance Misuse Prevention Coordinator, Facilitator of Prevention Leadership Team Deborah Bunting, Outreach Coordinator, Governor Wentworth Regional School District (Education, Family Supports) Sheryl Power, Social Worker, Governor Wentworth Regional School District (Education/Family Supports) Lance Zack, Director, White Mountain Restorative Justice, Youth Diversion Program (Safety/Law Enforcement) Chief Doug Wyman, Police Chief, Town of Sandwich (Safety/Law Enforcement) Representative William Marsh, NH House of Representatives (Government) Representative Susan Ticehurst, NH House of Representatives (Government) Chuck Henderson, Jeanne Shaheen's Office (Government) Christian Seaholtz, Congressman Chris Pappas' office (Government) Catalina Kirsch, Continuum of Care Facilitator, **Carroll County Regional PHN**



Caleb Gilbert, Public Health Advisory Council Coordinator, **Carroll County Regional PHN** Cathy Livingston, Children Unlimited (Education/Family Supports) Heather Phillips, Population Health, Memorial Hospital (Healthcare) Rebecca Hewson, Population Health, **Huggins Hospital** (Healthcare) Lisa Ransom, Counselor, Interlakes & Sandwich Central School (Education) Eric Moran, Manager, The Shed & Shed North, Ossipee & Conway (Healthcare) Recovery Supports Janice Spinney, President, Mt. Washington Valley Supports Recovery (Family Support/Healthcare/Sober Housing), Business (Osco Drug Pharmacist) Eve Klotz, Clinical Director, Northern Human Services (Mental Health & SUD) Mary Reed, Assistant VP for Public Health, Granite United Way

RPHN PURPOSE STATEMENT

VISIONThe following Vision was adopted by both the Carroll County Public
Health Advisory Council and the Prevention Leadership Team in 2015:
We envision that the people of Carroll County understand addiction as an
illness of the mind, body and spirit; are free from the stigma associated
with addiction; and support prevention, intervention, treatment and
recovery.



| MISSION | The Mission of the Carroll County Coalition for Public Health (C3PH) is to promote, protect, and improve the health and well-being of communities within Carroll County, New Hampshire through the proactive, coordinated, and comprehensive delivery of essential public health services. |
|---|---|
| CORE FUNCTIONS | The Carroll County Coalition for Public Health is an initiative of Granite United Way, a nonprofit organization that makes strategic investments in our communities that help others Learn, Earn and Be Healthy. |
| | |
| VALUES | Granite United Way and its initiatives bring together stakeholders: local nonprofits, service providers, government, businesses, private foundations, and volunteers with the common goal of delivering positive community impact. |
| CURRENT ALCOHOL AND OTHER DRUG MISUSE IN CARROLL COUNTY | The Carroll County Prevention Leadership Team and Substance Use Disorder Work Group is awaiting aggregate regional data from the 2019 Youth Risk Behavior Survey for the first time since 2011. In 2019, all three public high schools in the county participated in the survey. These data will serve as baseline measurements of current misuse of alcohol and other drugs. An addendum to this report incorporating YRBS data will be prepared and publicized once the current data of adolescent drug use is available and the Leadership Team and Substance Use Disorder workgroup has an opportunity to review the information and make |
| COONT | recommendations for adjustments to this plan. In the meantime, we have conducted interviews with school personnel, first responders, law enforcement partners, healthcare professionals and SUD Counselors in the region to identify likely priorities for the next three years. |
| | Between 2013 and 2015 overdose deaths in the county increased significantly from a low of four deaths in 2013 to a high of 22 in 2015. In 2018, opiate overdose deaths decreased to 12 according to the NH Drug Monitoring Report for 2018. |
| | Currently the emerging use of methamphetamine, marijuana derivatives, and or bath salts blended with opiates presents challenges to first responders and to and law enforcement personnel. While Narcan is effective in mitigating the effects of opioids, it has no impact on other |



drugs. Other drugs may produce violent episodes or other aggression threatening the safety of those individuals.

It is critical that we continue to provide current information and continue to support to our neighbors and friends seeking treatment and recovery resources. At the same time, we can't lose sight of the imperative to strengthen our prevention infrastructure and commitment to identifying root causes, enhancing protective factors and mitigating risk factors in our work.

The Prevention Leadership Team will work with partners to provide information to the general population and youth about the harm and risks associated with the use of the following substances:

- Vaping products
- Alcohol
- Marijuana
- Prescription Medications
- Methamphetamines
- Marijuana derivatives
- Bath Salts

In addition to making reliable information available, we will continue to support partners' prevention initiatives in the county.



GOAL 1: Enhance the capacity of Carroll County RPHN Substance Misuse Prevention partners and others to effectively address substance misuse across the lifespan.

| | Objective 1:1 | | Objective 1.2: | |
|-----------|---|-----------|--|--|
| Baseline: | Increase regional prevention network participation in Leadership Team/Work Group meetings and activities by 10% by 2023. (Currently we have an average of 25 individuals/organizations engaged.) | Baseline: | Increase representation from all sectors by 10%. (See Objective 1.1.) | |
| Year 1: | Increase participation by 2 new individuals and/or organizations. | Year 1: | Increase business representation by 100% (Current representation from business sector is 1 organization) to 3. | |
| Year 2: | Increase participation by 1% | Year 2: | Increase individual membership by 10% | |
| Year 3: | Increase participation by 1% | Year 3: | Increase youth participation by 100% | |

| | Objective 1.3: | | Objective 1.4: |
|-----------|---|-----------|--|
| Baseline: | Increase the knowledge and skills of partners to promote, implement, and evaluate sector-based, evidence- based initiatives throughout the region. | Baseline: | Increase public awareness about the harm and consequences of alcohol and drug misuse, treatment and recovery support services available and the success of recovery. |
| Year 1: | Increase the number workplace initiatives by 10% | Year 1: | Produce and disseminate effective messages for a range of topics, public audiences and media channels regularly. |
| Year 2: | Increase training opportunities and technical assistance to individuals in coalition development. | Year 2: | Produce and disseminate effective messages for a range of topics, public audiences and media channels regularly. |
| Year 3: | Increase opportunities for youth participation in advocacy and educational initiatives. | Year 3: | Produce and disseminate effective messages for a range of topics, public audiences and media channels regularly. |

The following goals relate directly to reducing risk factors and enhancing protective factors that influence a young person's decision to use or not use illicit drugs and/or alcohol. The objectives represent intermediate evidence-based steps shown to mitigate risk factors and foster protective factors. While the objectives remain the same, each year the work plan developed for prevention in the Carroll County Regional Public Health Network, will potentially include different strategies (see list on page 13), and evidence-based and evidence-informed activities that contribute to meeting the stated objectives.



GOAL 2: Reduce the percentage of Carroll County Youth who report use of alcohol in the past 30 days by 2% (as measured by the YRBS 2019 Regional Data and the 2021 Regional Data).

| Objective 2.1: | | Objective 2:2 | | |
|----------------|--|---------------|--|--|
| Baseline: | Increase perception of risk among youth 12-17 who report young people who use alcohol are at risk of harming themselves. (2019 YRBS data to be will be baseline data). | Baseline: | Increase number of youth 12-17 who report talking with parents or guardians about the dangers of substance misuse. (2019 YRBS data to be will be baseline data). (2019 YRBS data to be will be baseline data). | |
| Year 1: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of alcohol use by young people | Year 1: | Provide opportunities for parents/ guardians and youth to learn effective ways to communicate with one another. | |
| Year 2: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of alcohol use by young people. (ongoing objective) | Year 2: | Provide opportunities for parents/ guardians and youth 12-17 to learn effective ways to communicate with one another. (ongoing objective) | |
| Year 3: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of alcohol use by young people. (ongoing objective) | Year 3: | Provide opportunities for parents/ guardians and youth 12-17 to learn effective ways to communicate with one another. (ongoing objective) | |
| | Objective 2.3: | | | |
| Baseline: | Increase the percentage of youth 12-17 who report that their parents or other adults in their family have established clear rules and standards for their behavior. (2019 YRBS data to be will be baseline data). | | | |
| Year 1: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | | |
| Year 2: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | | |
| Year 3: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | | |



GOAL 3: Reduce the percentage of Carroll County Youth who report use of marijuana in the past 30 days by 2% (as measured by the YRBS 2019 Regional Data and the 2021 Regional Data).

| Objective 3.1: | | | Objective 3.2: |
|----------------|--|-----------|--|
| Baseline: | Increase perception of risk among youth 12-17 who report young people who use marijuana are at risk of harming themselves. (2019 YRBS data to be will be baseline data). | Baseline: | Increase number of youth 12-17 who report talking with parents or guardians about the dangers of marijuana. (2019 YRBS data to be will be baseline data). |
| Year 1: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of marijuana use by young people | Year 1: | Provide opportunities for parents/ guardians and youth to learn effective ways to communicate with one another. |
| Year 2: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of marijuana use by young people | Year 2: | Provide opportunities for parents/ guardians and youth 12-17 to learn effective ways to communicate with one another. |
| Year 3: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of marijuana use by young people | Year 3: | Provide opportunities for parents/ guardians and youth 12-17 to learn effective ways to communicate with one another. |
| | Objective 3.3: | | |
| Baseline: | Increase the percentage of youth 12-17 who report that their parents or other adults in their family have established clear rules and standards for their behavior. (2019 YRBS data to be will be baseline data). | | |
| Year 1: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | |
| Year 2: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | |
| Year 3: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | |



GOAL 4: Reduce the percentage of Carroll County Youth who report misuse of prescription drugs in the past 30 days by 2% (as measured by the YRBS 2019 Regional Data and the 2021 Regional Data).

| Objective 4.1: | | Objective 4.2: | | |
|----------------|--|----------------|---|--|
| Baseline: | Increase perception of risk among youth 12-17 who report young people who misuse prescription drugs are at risk of harming themselves. (2019 YRBS data to be will be baseline data). | Baseline: | Increase number of youth 12-17 who report talking with parents or guardians about the dangers of prescription drugs. (2019 YRBS data to be will be baseline data). | |
| Year 1: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of prescription misuse by young people | Year 1: | Provide opportunities for parents/ guardians and youth to learn effective ways to communicate with one another. | |
| Year 2: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of prescription misuse by young people | Year 2: | Provide opportunities for parents/ guardians and youth 12-17 to learn effective ways to communicate with one another. | |
| Year 3: | Provide information about and opportunities to learn skills to share information about consequences and potential harm of prescription misuse by young people | Year 3: | Provide opportunities for parents/ guardians and youth 12-17 to learn effective ways to communicate with one another. | |
| | Objective 4.3: | | | |
| Baseline: | Increase the percentage of youth 12-17 who report that their parents or other adults in their family have established clear rules and standards for their behavior. (2019 YRBS data to be will be baseline data). | | | |
| Year 1: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | | |
| Year 2: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | | |
| Year 3: | Provide information to parents, guardians and the general public about the importance of providing clear rules and standards for behavior. | | | |



GOAL 5: Promptly respond to and prevent harms associated with emerging drug threats in the Carroll County Region.

| Objective 5.1: | | Objective 5.2: | |
|--|--|---|--|
| Increase data collection and monitoring efforts among stakeholders to identify emerging issues of concern related to substance misuse | Baseline: | Follow the Strategic Prevention Framework and develop and implement appropriate research-based strategies to address concerns. | |
| Collect data and monitor efforts | Year 1: | Apply Strategic Prevention Framework as necessary | |
| Collect data and monitor efforts | Year 2: | Apply Strategic Prevention Framework as necessary | |
| Collect data and monitor efforts | Year 3: | Apply Strategic Prevention Framework as necessary | |
| | Increase data collection and monitoring efforts among stakeholders to identify emerging issues of concern related to substance misuse Collect data and monitor efforts Collect data and monitor efforts | Increase data collection and monitoring efforts among stakeholders to identify emerging issues of concern related to substance misuse Collect data and monitor effortsBaseline:Collect data and monitor effortsYear 1:Collect data and monitor effortsYear 2: | |



STRATEGIES

| CSAP STRATEGY | ACTIVITIES | SECTOR | GOALS/OBJECTIVES ADDRESSED BY THIS STRATEGY | RISK/PROTECTIVE FACTOR TARGETED |
|------------------------------|---|--|---|---|
| INFORMATION DISSEMINATION | Fact sheet/brochure distribution | Education, General Public, | Goal 1, Objective 1.3, 1.4; Goal 2, Objectives 2.1, 2.3; Goal 2, Objectives 3.1,3.3; Goal 4, Objective 4.2, 4.3. | Lack of knowledge; Family provides structure, limits and rules; shares clear expectations for behavior and values, presence of mentors and support for the development of skills and interests |
| | Conference/Forum planning | Healthcare, Law Enforcement/Safety, Family & Community Supports, Business Community | Goal 1, Objective 1.3. 1.4; Goal 2, Objective 2.3; Goal 3, Objective 3.3. | Societal/community norms about alcohol and drug use; Favorable attitudes about drug use |
| | Media Campaign | Parents, General Public, Prevention Partners | Goal 1, Objective 1.3, 1.4; Goal 2, Objectives 2.1, 2.3; Goal 2, Objectives 3.1,3.3; Goal 4, Objective 4.2, 4.3 | Societal/community norms about alcohol and drug use; Favorable attitudes about drug use. |
| EDUCATION | Parenting/Family Management: Meetings and programs to assist parents and families in addressing substance use risk factors and enhancing protective factors | Parents, General Public, Prevention Partners | Goal 1, Objective 1.3, 1.4; Goal 2, Objectives 2.1, 2.3; Goal 2, Objectives 3.1,3.3; Goal 4, Objective 4.2, 4.3 | Societal/community norms about alcohol and drug use; Favorable attitudes about drug use. |



| | Peer Leadership Programs | Youth leaders and advisors, parents, | Goal 1, Objective 1.3, 1.4; Goal 2, Objectives 2.1, | Societal/community norms about alcohol and |
|---|--|--|--|---|
| | | general public | 2.3,2.4; Goal 2, Objectives 3.1,3.3, 3.4; Goal 4, Objective 4.2, 4.3 | drug use; Favorable attitudes about drug use. |
| ALTERNATIVE STRATEGIES | Promote community service activities with partners | Youth leaders and advisors, general public | Goal 1, Objective 1.3, 1.4; Goal 2, Objectives 2.1, 2.3,2.4; Goal 2, Objectives 3.1,3.3, 3.4; Goal 4, Objective 4.2, 4.3 | Youth connectedness to school and community |
| | Promote community recreational activities with partners | Youth leaders and advisors, business community | Goal 1, Objective 1.3, 1.4; Goal 2, Objectives 2.1, 2.3,2.4; Goal 2, Objectives 3.1,3.3, 3.4; Goal 4, Objective 4.2, 4.3 | Youth connectedness to school and community |
| COMMUNITY-BASED PROCESS | Ongoing needs assessment and asset identification | All | Goal 1, Objectives 1.3, 1.4; Goal 5, Objectives 5.1, 5.2 | Implementing Strategic Prevention Framework |
| | Multi-agency coordination/collaboration | All | Goal 1, Objectives 1.3, 1.4; Goal 5, Objectives 5.1, 5.2 | Implementing Strategic Prevention Framework |
| | Systematic Planning | All | Goal 1, Objectives 1.3, 1.4; Goal 5, Objectives 5.1, 5.2 | Implementing Strategic Prevention Framework |
| | Provide technical assistance & training opportunities | All | Goal 1, Objectives 1.3, 1.4; Goal 5, Objectives 5.1, 5.2 | Implementing Strategic Prevention Framework |
| ENVIRONMENTAL CONSULTATION/TECHNICAL ASSISTANCE | Support development of legislation, policies and regulation | Local and state elected officials, prevention partners | Goal 1, Objectives 1.3, 1.4; Goal 5, Objectives 5.1, 5.2 | Community Norms |
| | Media advocacy Coalition Development | Youth leaders All | Goal 1, Objectives 1.3, 1.4 Goal 1, Objectives 1.1, 1.2, 1.3; | Youth connectedness Community Norms |
| | Provide updates and information on marijuana commercialization efforts | Prevention Partners, General Public | Goal 1, Objective 1.3 | Societal/community norms about alcohol and drug use; Favorable attitudes about drug use. |

