

Seacoast Public Health Region

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Seacoast Public Health Region Misuse of Alcohol and Drugs 2016-2019 Strategic Prevention Plan

Seacoast Public Health Region

Misuse of Alcohol and Drugs

2016-2019 Strategic Prevention Plan

I. The Seacoast Regional Public Health Network

The Seacoast Regional Public Health Network is one of 13 Regional Public Health Networks (RPHN) in the state of New Hampshire. The function of the RPHN is to deliver public health services within the region. Each region has a Public Health Advisory Council (PHAC) which represents communities, organizations and sectors interested or involved in public health activities within the region. The role of the PHAC in each region is to assess needs, guide decision-making, and encourage shared resources and investments in positive health outcomes.

New Hampshire's Regional Public Health Networks (RPHN) provides the infrastructure for a regional substance misuse prevention network. The role of the prevention network is to conduct three core prevention functions: 1) Align regional prevention efforts with the goals of the state plan and the New Hampshire State Health Improvement Plan (SHIP), 2) Build, maintain and sustain a regional network of professionals and community members who are concerned about substance misuse in the region, and 3) Leverage resources and providing technical assistance to promote best practices within six core sectors (Safety and Law Enforcement, Health & Medical, Education, Government, Business, and Community and Family Supports) in the community.

The Seacoast PHN, along with the other thirteen Regional Public Health Networks, work in concert with other state agencies to address the goals and objectives outlined in the state plan, [*Collective Action – Collective Impact \(CA-CI\): New Hampshire's Strategy for Reducing the Misuse of Alcohol and Other Drugs and Promoting Recovery*](#), which was released in February 2013. During the planning process, the New Hampshire Governor's Commission on Alcohol and Drug Abuse established two over-arching goals for the state: 1) To reduce the number of residents misusing alcohol and other drugs and 2) To increase the number of residents with a substance use disorder accessing treatment and recovery support services. Within the first goal, the reduction of alcohol abuse, marijuana use and non-medical use of pain relievers and prescription drugs were specific areas identified for prevention efforts. The Commission has also identified the use of heroin and synthetic drugs as priority areas for prevention efforts since its state plan was released.

The Commission's substance misuse goals are broad and provide an opportunity within which public health regions and local communities may determine more specific goals and objectives that align with factors that contribute to the problem of substance misuse identified by those living and working in the community. The Commission also identified goals and objectives within strategy areas; leadership, financial resourcing, public education training & professional development, data utilization and effective policy, practice & programs. Commission, task force and stakeholder activities are described for each strategy area. (See *Collective Action-Collective Impact*, pages 35-43)

The Seacoast Public Health Network (SPHN) serves one of the largest populations in the state with 141,200 residents living within the 1 city and 22 towns that comprise the region with diverse culture, demographics, and geography. As with many regions in NH, socio-economic stratification has a noticeable influence on the culture of the communities. The Region absorbs hundreds of families each year as they leave the cities of northeastern Massachusetts to reside or vacation in the greater seacoast area of NH although many residents continue to work over the border in Massachusetts where wages are higher in a number of industries.

Rural areas located off major highways provide convenient locations for drug activity, and because of the Region's close proximity to I-95, local law enforcement agencies have experienced copious amounts of drug trafficking. In September of 2014, Rockingham County became 1 of 28 "High Intensity Drug Trafficking Areas" (HIDTA) regions designated by the federal Office of National Drug Control Policy. In order to address this, several of the small and often understaffed NH departments have partnered with the DEA, the Counter Drug Task Force, and larger law enforcement agencies in neighboring Massachusetts (MA). Root cause analysis shows that all of the Seacoast communities have suffered a significant increase in shoplifting, and burglaries over the past 2 years. The increase in property crimes are most often attributed to the pursuit of prescription drugs, which results in devastating health and safety consequences for the general community.

Alcohol and other Drug Problems in the Seacoast Public Health Network

In 2015 the Heroin and opioid epidemic in NH has escalated to alarming proportion. Over the last several months, the rising consequences and visibility of addiction to heroin and opiates has drawn attention from the public and the media. Data compiled by the newly formed NH Drug Monitoring initiative of the NH Information and Analysis Center demonstrates validity to this growing concern and is evident of a critical situation. The Seacoast has ranked high with trends associated to heroin and opioid addiction. Between December and February of 2015, Rockingham ranked the 2nd highest county for number of emergency department visits, totaling 35 visits. Rockingham also ranked 2nd highest county for number of Narcan administrations for a total of 142 doses. Unfortunately, the county also ranked 2nd highest for the number of drug overdose deaths.

In the past five years, quantitative and qualitative data consistently disclose that New Hampshire's substance abuse rates are statically higher for a number of population groups. Reported use of alcohol and marijuana in the past 30 days is higher for many age groups in NH. Among youth 12-17 and young adults 18-25, New Hampshire's rates of binge drinking are significantly higher than the U. S. ¹ In addition; New Hampshire's 12-17 yr. olds are one-and one-half times more likely than 12-17 year-olds nationwide to smoke marijuana. This amounts to one in four NH high school aged children who engage in regular binge drinking and regular marijuana smoking. Among youth in NH, non-medical prescription drug use in the past 30-days also exceeds national use. NH ranks in the top 10 nationally for substance misuse in the above categories mentioned.

Since the beginning of 2015, the heroin and opioid epidemic in NH has produced one of the highest overdose and mortality rates in the nation across the life span. Data compiled by the newly formed

2. SAHMSA (2010) Results from the 2009 National Survey on Drug Use and Health: Volume 1. Summary of Findings. P.3

NH Drug Monitoring initiative of the NH information and Analysis Center demonstrates validity to this critical situation. Between December 2014 and September 2015, Rockingham County ranked 2nd highest of 10 counties in NH in the number of heroin or opioid related emergency department visits and number of drug overdose deaths. Rockingham County also ranked 2nd highest for the number of Narcan administrations for a total of 142 doses. Those numbers are expected to peak again toward the end of the 2015 as the epidemic continues to destroy lives.

II. Network achievements and community assets

There have been significant changes from the previous Seacoast Public Health Network Grant program that created the strategic plan of 2012-2015. Transitions include new SPHN personnel and a new fiscal contractor that originated with Exeter Fire Department and subsequently changed to Lamprey Health Care in July of 2015. A new team was hired that included the Continuing of Care (COC) facilitator, Emergency Preparedness Coordinator (EPC) and in mid-October the Substance Misuse Prevention Coordinator joined the team.

This transition has increased our organizational capacity and strengthens our prevention efforts in each of our respective areas. This new organizational structure allows us to share assets and contacts which expand our sphere of influence. Lamprey Health Care is New Hampshire's oldest and largest private, Federally Qualified Health Care (FQHC) non-profit community health center and is a natural fit for SPH prevention efforts and provides Narcan to existing patients that request it. This extensive history in the seacoast region is an asset for potential funding opportunities in the future.

The following are a few examples of regional assets, local resources and gaps identified in the seacoast region.

Assets

1. A highly engaged Youth Coalition with over ten years of strong leadership, high community engagement, and resources that continues to build prevention capacity.
2. High response and engagement from local seacoast communities to address opioid/Heroin epidemic.
3. The Granite Youth Alliance Youth empowerment model is expanding capacity to assist other youth empowerment organizations.

4. The film festival event associated with the Seacoast United Way funded Granite Youth Alliance is growing capacity with the potential to have high impact in other regions.
5. Volunteer service from medial reserve corps and other groups has been active and committed to SMP work.
6. SPHN team brings extensive experience in the Continuum of Care and Emergency preparedness model that strengthens substance misuse prevention across the life span.
7. SBIRT screening tool is integrated in the Lamprey Health Care system to detect early warning signs of substance misuse and referrals if needed.

Gaps

1. The SPHN has tremendous gaps in Treatment and Recovery resources.
2. SPHN has identified gaps in the business and government sectors and will work on increasing partnership with these sectors.
3. The need to increase solid partnerships through networking opportunities.
4. The need to increase collaborations to maximize limited resources.
5. Young Adult focus groups reveal need for tool on how to navigate substance use in their lives.
6. SPHN needs to increase partnerships with the business community.
7. Youth leadership need increased visibility

Achievements

1. The expansion of Granite Youth Alliance Program from three to five partners that target substance use through evidence based youth empowerment models.
2. SPHN team collectively expanded its outreach through numerous substance use/misuse educational presentations throughout the seacoast region and created materials so the information could be disseminated to their partners to expand scope of information.
3. The creation of Narcan education and distribution self-starter kits expanded community capacity to reach those in need of these resources.
4. The creation of Coalition building and Community forum tool kits allows any community to launch its own local educational and prevention forums to multiply substance use education and prevention efforts.
5. The first Narcan education and distribution event in the state was coordinated by the SPHN in Newmarket. This community forum exceeds all expectations of more than 75 in attendance with excellent feedback/evaluations.
6. Seven Narcan community educational and distribution events were offered in just three month time period with over 200 Narcan kits distributed.
7. A Coalition and Forum tool kit was created by the SPHN to guide and assist community partners who request T.A.
8. Strategic partnerships were initiated with the medical and library system to systemically widen our reach with substance misuse prevention education.
9. Six Young Adult focus groups were completed that yielded valuable information towards substance misuse prevention strategic planning.

III. Regional Plan development

Process, Participants and Priority Substances

Key elements that facilitated the development of the SPHN Strategic plan for 2016-2019 is strong community partnerships and collaboration with all six community sectors (Safety/ law enforcement, Health & Medical, Education, Government, Business and Community Family Supports), the Seacoast Public Health Advisory Council, Exeter Hospital community needs assessment/evaluations, local, state and national data and the completion of the 2015 SPHN Community Health Improvement Plan.

The SPHN staff coordinated and partnered with the Community Health Institute (CHI) to facilitate a regional process to develop the 2015 Seacoast Region Community Health Improvement plan. The baseline goals and objectives for the 2016-2019 SMP'S Strategic Plan was prioritized based on previous N.H. three year and national trends. Statistical and demographic information came from a variety of valid sources including the Governor's Commission 2013-2017 Collective Action-Collective Impact plan, State Health Improvement Plan (SHIP), the Seacoast PHN Community Health Improvement Plan (CHIP-2015), Youth Risk Behavioral Surveys (YRBS), regional emergency room reports, New Hampshire Drug Monitoring Initiative and other sources. This ensured that our strategic plan goals and objectives reinforced the state's mission on substance misuse prevention and treatment strategies across the life span of NH residents.

In the last two to three years the incessant escalation of substance misuse in particular with opioids/Heroin, alcohol and marijuana guided our Strategic Plan of 2016-2019 with sustained efforts on youth (ages 17-19), young adults (18-25) with an emphasis on binge-alcohol past 30 day use, past 30-day marijuana use, past 30 day prescription non-medical use which is in alignment with the State's mission and data trends. Although baseline data from the last strategic plan was limited, the information suggests there were positive outcomes leading in the right direction.

Substance Misuse has a long history of pervasive negative and financial impact on communities such as society stigma, outdated treatment practices with lack of evidence based efficacy, minimal state and federal funding/resources to mention a few. To address some of these issues the state of NH endorses and promotes the federally based SAMSHA Strategic Prevention framework as the model for conducting evidence based prevention planning and implementation. The SPF is designed to engage community partners within a defined population in five continuous stages: Assessment, Capacity-building, Planning, Implementation and Evaluation (ACPIE). Cultural Competence and sustainability are always considered in every step to ensure relevant and effective prevention.

Recently, our work with young adult's focus groups, town forums, and surveys are crying out for education and tools on how to address the growing substance use and mental health issues affecting youth, young adults, and all ages across the life span. This information is incorporated in the Seacoast Public Health Network Strategic Plan to reduce risk factors and increase protective factors can effect positive healthy changes with young people and families.

The perception of harm with marijuana and legally prescribed pain killers must be addressed to combat "minimizing" the problem and stop the growing lethality of these drugs. Social media campaigns that involve youth leadership are powerful strategies that can influence cultural changes over time. We are seeing encouraging results from the Granite Youth Alliance program that runs the annual GYA youth film festival. Our partnership with Seacoast United Way and its investment in the Granite Youth Alliance Program is an exciting venture that is showing results. Our Strategic Plan will assist them in growing capacity and resources so it can be expanded throughout the entire seacoast school districts for collective impact. These growing partnerships throughout the seacoast and other regions are gaining momentum towards mitigating the substance misuse epidemic in the state.

The Seacoast Community Health Improvement Plan Process

The region utilized robust methods for indicator selection such as review of county and regional data, interviews of community stakeholders/ partners and a comprehensive strategic planning session were undertaken. These methods laid the foundation for the 2015 Seacoast Community Health Improvement Plan which outlines the region's six priorities. The following priorities were selected for our region based as a result of planning, research and listening to our community stakeholders. Although mental health was not listed in the State's Community Health Improvement Plan the seacoast communities expressed a strong request to include mental health which often coincides with substance misuse and therefore it was included in the Seacoasts CHIP. The following are the six priorities.

1. obesity
2. health disease/stroke
3. injury prevention (reducing falls in older adults)
4. *mental health Although not listed in the SHIP the community felt strongly that it should be added to the Chip
5. alcohol and substance misuse
6. public health emergency preparedness

Participants/tools that guided the 2016-2018 SPHN CHIP and SMP Strategic Plan

1. Staff from the Community Health Institute, (CHI) presented regional partner survey results that identified partnerships with in the region.
2. The Director of public relations at Exeter Health Resources presented the Exeter hospital's 2013 community health assessment, key staff oriented the Public Health Advisory Council (PHAC) to the CHIP template and expectation as outlined in the CHI's webinar training.
3. 2014 Rockingham county health rankings data was utilized.
4. The Department of Health and Human Services epidemiologist presented seacoast regional data based on the SHIP indicators.
5. The Seacoast Public Health Advisory Council (PHAC) was updated on the 2015 Rockingham county health rankings and county health rankings trends.
6. Individual surveys results were presented from various seacoast organizations to illustrate existing initiatives in the region in relation to SHIP indicators. Further phone and in person interviews were done with local organizations and stakeholders to gain further clarity of the scope of work that is already being done within each health indicator.
7. The SPHN Chip was submitted in September of 2015.

V. Seacoast Regional goals, objectives and strategies

The Seacoast Regional Public Health Network established goals and objectives that will strengthen the ability of the network to build and sustain the leadership, capacity, knowledge, coordination and collaboration necessary to promote effective practices, programs and policies and to address substance misuse within six core community sectors.

The Seacoast Regional Network is working to achieve the following over-arching goals and objectives:

- I. System-level goals and objectives that align with the goals and objectives of the state plan
- II. System-level goals and objectives necessary to create, maintain and sustain the regional network
- III. Goals and objectives indicating the substance use behaviors and risk or protective factors that the region is striving to impact through the implementation of best practices among the core sectors.

To meet the goals and objectives outlined above, the regional network will oversee best practices on three levels:

- The adoption of stakeholder activities recommended by and aligned with *Collective Action-Collective Impact (CA-CI)* (pages 35-43)
- The implementation of community organizing best practices to create, maintain and sustain the regional network infrastructure for prevention
- The implementation of best practices by the six core sectors to reduce or prevent use.

Regional Network Strategies

The table below demonstrates the commitments of the Seacoast Public Health Regional Network over the next three years to meet the goals and objectives identified by the region to support the state plan and to create maintain and sustain the regional prevention infrastructure. The strategies listed below focus primarily on information dissemination, the facilitation of community-based process and environmental prevention strategies.

Strategy Area (s)	Activity	Regional Objectives Addressed by this strategy	Alignment to SHIP and CA-CI
Community-Based Process	<ol style="list-style-type: none"> Promote and convene quarterly regional ASAP Round Table meetings for MH & SUD providers and stakeholders Develop and host monthly lunch and learn sessions with focused prevention topical training. 	OBJECTIVE 1: INCREASE REGIONAL NETWORK MEMBER PARTICIPATION IN PREVENTION RELATED NETWORK INITIATIVES BY 20% ANNUALLY FROM 2016-2019.	☒
Community Based-Process	<ol style="list-style-type: none"> Research, compile and distribute tools and guidance for community based coalition building strategies. Create and maintain a speaker's bureau of subject matter experts for regional partners to consult for planning/programming. 	OBJECTIVE 2: DEVELOP AND PROVIDE TOOL-KIT GUIDANCE FOR REGIONAL PARTNERS ON SUBSTANCE RELATED COALITION BUILDING.	☒
Community Based Information Dissemination	<ol style="list-style-type: none"> Host and/or support regional networking and educational opportunities for network membership and broader community. Expand Granite Youth Alliance network support beyond Y2Y focused models to at least 2 other youth empowerment projects. 	OBJECTIVE 3: INCREASE DENSITY AMONG SEACOAST PHN SMP PARTNERS AS REPORTED IN PARTNER SURVEY FROM 9.8% TO 20% BY INCREASING NETWORKING OPPORTUNITIES TO EXCHANGE RESOURCES AND INFORMATION AND BUILD KNOWLEDGE AND SKILLS.	☒

Goal 1: Strengthen the capacity of the Seacoast Public Health Network to address substance misuse.

OBJECTIVE 1: INCREASE REGIONAL NETWORK MEMBERSHIP IN ALLIES FOR SUBSTANCE ABUSE PREVENTION (ASAP) BY 20% FROM 2016-2019.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
1. Host and promote quarterly regional ASAP Round Table meetings for MH & SUD providers and stakeholders.	1. Convene two ASAP Round Table meetings in each FY of 2016, 2017, and 2018	1. Increase regional network membership in allies for substance abuse prevention (ASAP) by 20% as evidence by biannual PARTNER Survey (evidence based, web-based survey tool to measure collaboration, trust, and partner contributions within networks. Regional Network Stakeholder Survey (RNSS) results and P-WITS. (Database used to monitor and track process of all regional network activities.)

OBJECTIVE 2: DEVELOP AND PROVIDE TOOL-KIT GUIDANCE FOR REGIONAL PARTNERS ON SUBSTANCE RELATED COALITION BUILDING.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
1. Research, compile and distribute tools and guidance for community based coalition building strategies. 2. Create and maintain a speaker's bureau of subject matter experts for regional partners to consult for planning/programming.	1. Partner with NH Listens to identify coalition building needs and resources. 2. Make coalition building resources & guidance available on an ongoing basis; present tool-kit @ Spring 2016 PHAC meeting. 3. Promote development of SME list to fall 2015 & spring 2016 PHAC meetings. Distribute to other partners as appropriate.	1. Revise and distribute tool-kit resources to regional partners by 8 as tracked by (P-WITS) and measured by the biannual PARTNER survey and RNSS results.

OBJECTIVE 3: INCREASE DENSITY AMONG SEACOAST PHN SMP PARTNERS AS REPORTED IN PARTNER SURVEY FROM 9.8% TO 20% BY INCREASING NETWORKING OPPORTUNITIES TO EXCHANGE RESOURCES AND INFORMATION AND BUILD KNOWLEDGE AND SKILLS.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
<p>1. Host and/or support regional networking and educational opportunities for network membership and broader community.</p> <p>2. Expand Granite Youth Alliance network support beyond Y2Y focused models to at least 2 other youth empowerment projects.</p>	<ol style="list-style-type: none"> 1. Convene SMP/ASAP Round Table. 2. Attend Seacoast Collaborative meetings to share and promote SPHN SMP work. 3. Hold learning/networking Summit as indicated in Mental Health work plan. 4. Collaborate with Rockingham County Drug Court and Community Corrections program staff on prevention programming. 5. Participate in Newmarket Substance Misuse Prevention/ASAP coalition as subject matter expert support for substance misuse and coalition building. 6. Create and deliver SBIRT training to area partners upon request. 7. Convene or support at least 2 opportunities for participants of Granite Youth Alliance youth empowerment teams/programs to network and share successful strategies. 8. Hold two lunch and learns at local Chambers of Commerce (PWITS) 	<p>Increase density among SPHN partners from 9.8% to 20%</p> <p>Evidence measured by the biannual PARTNER survey and Stakeholder survey results.</p>

Goal 2: Increase community capacity to identify and assist people struggling with mental health and substance abuse disorders by 10%.

OBJECTIVE 1: DEVELOP RESILIENCE IN THE NETWORK OF AREA PARTNERS AND STAKEHOLDERS.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
<ol style="list-style-type: none"> 1. Convene and support a Continuum of Care Council. 2. Increase networking opportunities in SPHN. 	<ol style="list-style-type: none"> 1. Identify Seacoast Public Health members and community members who work in Substance Abuse Treatment/Recovery and Mental Health to expand community resource awareness. 2. Create a Substance Use Disorder (SUD) and Mental Health Treatment referral guide for community 3. Update guide as needed. <p>(PWITS)</p>	<ol style="list-style-type: none"> 1. Identify 15 Seacoast Substance Use Disorder and Mental Health providers to become members and or participate in community forums and other local treatment/recovery/prevention initiatives. 2. Disseminate 150 SUD/MH treatment and referral guides to community. <p>Partner Survey and Regional Network Stakeholder Survey (RNSS)</p>

Goal 3: Decrease the % of youth (ages 12-19) reporting binge alcohol use in the previous 30 days from 19.5% to 14.5% by 2018.

OBJECTIVE 1: DECREASE NUMBER OF STUDENTS WHO REPORT EASY ACCESS TO ALCOHOL THROUGH FRIENDS AND FAMILIES AND UNDERAGE PURCHASING BY 5%.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
<ol style="list-style-type: none"> 1. Granite Youth Alliance-Dover Youth to Youth empowerment model 2. Information dissemination 3. Partnership for Drug Free NH 	<ol style="list-style-type: none"> 1. Increase number of Granite Youth teams from 3 to 8 2. Hold or support two compliance checks and three server trainings with regional partners and the NH liquor Commission. 3. Leverage five additional external resources to support expansion of youth alliance empowerment network across the seacoast network. (PWITS) 	<p>Increase perception of harm with substance misuse.</p> <p>Reduce access as measured by (YRBS and PS)</p>

OBJECTIVE 2: INCREASE PUBLIC PERCEPTION OF HARM AND RISK OF UNDERAGE ALCOHOL AND DRUG MISUSE BY 15%.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
<p>1. Utilization and dissemination of data to tailor education on alcohol use among school aged youth and the impact of alcohol use on education, athletic performance and community connectedness.</p> <p>2. Partnership for Drug free NH media/Social marketing PSA/Social media (FB, Blogs)</p> <p>3. Life of an Athlete data GYA-Youth empowerment model</p>	<p>1. Facilitate a community forum in at least one regional community during the Fall 2016.</p> <p>2. Convene two regional Access to Recovery Day in FY 17/FY18.</p> <p>3. Identify available data on regional performance.</p> <p>4. Create and deliver educational sessions on perception of harm, and underage drug misuse in at least 6 partners. (PWITS)</p>	<p>Four SPHN schools will report increased perception of harm and risk of underage alcohol and drug misuse as measured by YRBS</p> <p>YRBS, P.S RNSS, GYA outcome monthly reports</p>

Goal 4: Decrease opioid drug misuse across the lifespan by 2019.

OBJECTIVE 1: INCREASE THE NUMBER OF PROVIDERS REPORTING AWARENESS AND UTILIZATION OF OPIOID BEST PRACTICES BY PRESCRIPTION MONITORING PROGRAM BASELINE TO 10%

Strategies	Short-term Performance Targets	Intermediate Performance Targets
<p>1. Education at Ground Rounds in medical facilities</p> <p>2. Educational presentations to medical providers through Lamprey system and other health care providers.</p>	<p>1. Promote awareness of prescribetoprevent.org to 35 medical providers and Develop additional training resources as indicated, to include continuing education, for regional healthcare partners. (PWITS)</p>	<p>Increase the number of providers who are utilizing Opioid Best practices. (PS) As measured by NH Prescription monitoring program and partner survey.</p>

OBJECTIVE 2: DECREASE EASE OF ACCESS TO PRESCRIPTION MEDICATION THROUGH FRIENDS AND FAMILIES IN SPHN SO THAT BY 2019 HALF THE COMMUNITY TAKES PRECAUTIONS OF PERSONAL PRESCRIPTION MEDICATION STORAGE.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
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<ol style="list-style-type: none"> 1. GYA Youth to Youth communication strategies to target audiences, youth, parents and seniors. 2. Information Dissemination. 3. Environmental strategies. 	<ol style="list-style-type: none"> 1. Promote safe RX Opioid misuse, storage and disposal safety at a minimum of 2 senior-focused events, 2 youth focused events, and 2 general population events. 2. Promote education materials at community events, three senior community membership groups to inform youth and adults about the risks associated with prescription drug misuse. (P-WITS) 	<p>At least 100 community stakeholders will report decrease of access to prescription medication through friends and families in SPHN as evidence by Regional Network Stakeholder Survey (RNSS) and YRBS and Partner Survey</p>
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OBJECTIVE 3: INCREASE SENIOR, PROVIDER AND CAREGIVER AWARENESS ABOUT MEDICATION RELATED FALL RISK BY 20%.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
<ol style="list-style-type: none"> 1. Information Dissemination 2. Community Based Process. 	<ol style="list-style-type: none"> 1. Partner with four senior organizations to provide medication management to seniors in the community. 2. Distribute education about prescription medication management to at least 6 providers. 3. Recruit and retain pharmacy subject matter expertise to injury prevention workgroup. 4. Partner with SPHR CHIP- Falls Prevention work group on medication management. (P-WITS) 	<p>Increase senior, provider and caregiver awareness about medication related fall risk by 20% measured by partner survey results.</p> <p>(P.S and RNSS)</p>

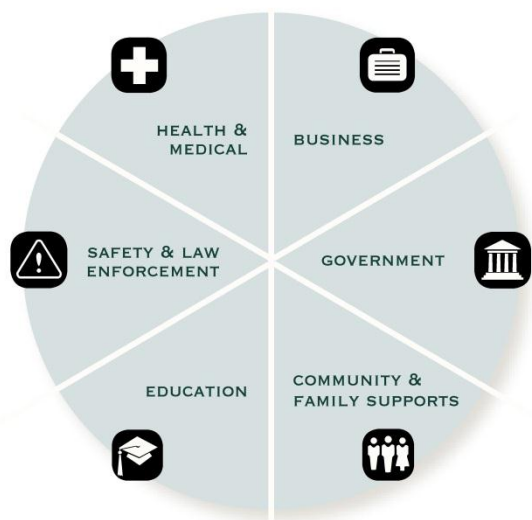
Goal 5: Reduce barriers to treatment and recovery support services by decreasing stigma and increasing access to care.

OBJECTIVE 1: DECREASE THE NUMBER OF REGIONAL HEROIN AND OPIOID RELATED EMERGENCY ROOM VISITS BY 50% BY 2017.

Strategies	Short-term Performance Targets	Intermediate Performance Targets
<ol style="list-style-type: none"> 1. Support community based naloxone harm reduction education per NH state guidance and partner requests. 2. Information Dissemination-Provide 	<ol style="list-style-type: none"> 1. Ensure at least 2 SPHN staff are trained Trainers to provide community based Narcan education to regional partners. 2. Coordinate provision or distribution of messaging and strategy guidance for at least 2 dedicated opioid/Narcan social 	<p>Decrease the number of Regional Heroin and Opioid related emergency room visits by 50% as tracked by Hospital Emergency room data</p> <p>PSS/RNSS</p>

<p>effective substance prevention messaging along the Continuum of Care for regional partners to use for social media campaigns.</p> <p>3. Problem Identification-Support identification of and efforts to address gaps and needs in community prevention, intervention, and treatment and recovery services.</p>	<p>media campaigns to regional partners for their own community education.</p> <p>3. Convene and coordinate two Continuum of Care Advisory Council to educate and promote SMP work</p> <p>4. Update Regional SMP strategic plan annually with SMP/ Continuing of Care Community forum in at least one regional community during the in Spring 2017.</p> <p>6. Provide staff subject matter expertise as speakers/coordination assistance for 4 forums held by communities within the region upon request. (P-WITS)</p>	
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Effective Substance Misuse Prevention Practice, Programs and Policies within the core sectors



The state of New Hampshire and the Seacoast Public Health Region utilize a six-sector model for state and community prevention that serves as the foundation for building readiness, promoting best practices, and leveraging resources in a comprehensive and collective manner. The six sectors represent community institutions that are present in most towns and cities. The six sectors are impacted by and have the ability to positively impact substance misuse. The six core sectors are: Safety and Law Enforcement; Health & Medical, Education, Government, Business, and Community and Family Supports.

The tables below demonstrate the anticipated commitments that will be made by each sector in the Seacoast Regional Network over the next three years to meet the goals and objectives identified by the region to prevent and reduce substance misuse. The strategies chosen address the various categories of prevention, as defined by the Substance Abuse and Mental Health Services Administration’s Center for Substance Abuse Prevention (CSAP). A comprehensive plan is essential to impact the substance misuse goals and objectives identified by the region

Safety and Law Enforcement

LOCAL LAW ENFORCEMENT • DRUG TASK FORCES • JUDICIAL SYSTEMS • FIRST RESPONDERS • EMERGENCY MEDICAL TECHNICIANS • DRUG DIVERSION INVESTIGATORS • NATIONAL GUARD

<i>CSAP Strategy</i>	<i>Strategy</i>	<i>Lead Organization(s)</i>	<i>Regional Substance Misuse Prevention Objectives Addressed by this Strategy</i>	<i>Alignment to SHIP and CA-CI</i>
Information dissemination Education Problem identification Alternatives	<ol style="list-style-type: none"> Increase the number of Granite Youth Alliance member teams receiving support from 3-8 Increase youth participation in Granite youth participation in Granite Youth Alliance programming to educate youth and adults about the risks of underage alcohol use and excessive drinking. Hold or support 2 compliance checks and 3 server trainings with regional partners and the NH Liquor Commission. 	SPHN-SMP GYA-Dover Youth-to-Youth Program Raymond Youth Coalition	Goal#3 Decrease the % of youth (ages 12-19) reporting binge alcohol use in the previous 30 days by 5% from 19.5% to 14.5% by 2017 Objective 1: Decrease number of students who report easy access to alcohol through friends and families and underage purchasing from 68% to 50%.	Yes
Information dissemination Community-based Process	<ol style="list-style-type: none"> Hold or support 2 compliance checks and 3 server trainings with regional partners and the NH Liquor Commission Collect and disseminate data on alcohol use among school aged youth and the impact of alcohol use on education, athletic performance and community connectedness. 	SPHN-SMP Newmarket Police Department Portsmouth Police department	Objective 2. Increase Public Perception of Harm and Consequences of underage alcohol and drug misuse by 15%	Yes

Health & Medical

ADDICTION TREATMENT • BEHAVIORAL HEALTH • EMERGENCY CARE • HEALTH EDUCATORS INSTITUTIONAL CARE • PEDIATRICS • PRESCRIBERS • PRIMARY CARE

<i>CSAP Strategy</i>	<i>Strategy</i>	<i>Lead Organization(s)</i>	<i>Regional Goals and Objectives Addressed by this Strategy</i>	<i>Alignment to SHIP and CA-CI</i>
Education Information Dissemination	1. Promote and present training for prescribers on safe opioid prescription practices including best practice tools like pain treatment contracts.	SPHN-SMP COC coordinator Lamprey Health Educator SPHN behavioral/Substance D.O health organizations	Goal: 4 Decrease the opioid drug misuse across the life span by 2017 Objective 1. Increase the number of providers reporting awareness and utilization of opioid best practices by 20%	YES
Education Information Dissemination	2. Promote education materials at community events to inform youth and adults about the risks associated with prescription drug misuse.	SPHN-SMP Raymond Youth Coalition Newmarket coalition	Objective 2. Decrease ease of access to prescription medication through friends and families by 10%	Yes
Education Information Dissemination	3. Distribute education about prescription medication management to at least 6 providers. 4. Recruit and retain pharmacy subject matter expertise to injury prevention workgroup.	SPHN-SMP COC Lamprey Health Care	Objective 3. Increase senior, provider and caregiver awareness about medication related fall risk.	YES

CSAP Prevention Category	Lead Organization(s)	Regional Goals and Objectives Addressed by this Strategy	Alignment to SHIP and CA-CI
Education Problem Identification Information Dissemination Alternatives Community Based Process Environmental	SPHN-SMP Dover-Youth-to-Youth Granite Youth Alliance Raymond high School Youth Coalition SPHN school partners	Goal: 3 Increase the % of youth (ages 12-19) reporting binge alcohol use in the previous 30 days by 5% from 19.5% to 14.5% by 2017 Objective 1. Decrease number of students who report easy access to alcohol through friends and families and underage purchasing from 68% to 50%.	yes
Information dissemination Education Community Based-Process	SPHN-SMP Newmarket ASAP Coalition Raymond Youth Coalition partners	Goal 1: Strengthen capacity of the SPHN to address substance misuse. Objective 1: Increase regional network membership in allies of substance abuse prevention	yes

Government

COUNTY OFFICIALS • FEDERAL GOVERNMENT • MUNICIPAL GOVERNMENT • LOCAL GOVERNING BOARDS • STATE REPRESENTATIVES • OTHER ELECTED OFFICIALS • CITY AND TOWN OFFICERS

CSAP Prevention Strategy	Strategy	Lead Organization(s)	Regional Goals and Objectives Addressed by this Strategy	Alignment to SHIP and CA-CI
Community Based process Information dissemination	1. Host and promote quarterly regional ASAP Round Table meetings for MH & SID providers and stakeholders.	SPHN-SMP SPHN-Regional Partners	Goal #1 Strengthen the capacity of the Seacoast Public Health Network to address substance misuse. Objective 1. Increase regional network membership in allies for substance abuse prevention (ASAP) by 20% from 2016-2019	Yes
Community Based Process Information Dissemination	1. Research, compile and distribute tools and guidance for community based coalition building strategies which include advocacy training. 2. Create and maintain speakers bureau of subject matter experts for regional partners to consult for planning/programming	SPHN-SMP/COC Seacoast Partners Collaboration New market coalition partners including members of the Governor's commission and legislators and other elected officials.	Objective 2: Develop and provide tool-kit guidance for regional partners on substance related coalition building.	Yes

Business

BUSINESS OWNERS AND OPERATORS • EMPLOYEE ASSISTANCE PROGRAMS • HEALTH EDUCATORS • HUMAN RESOURCE DEPARTMENTS • RISK MANAGEMENT • SAFETY COMPLIANCE OFFICERS • SENIOR MANAGEMENT

<i>CSAP Prevention Category</i>	<i>Strategy</i>	<i>Lead Organization(s)</i>	<i>Regional Goals and Objectives Addressed by this Strategy</i>	<i>Alignment to SHIP and CA-CI</i>
Information dissemination Education Community Based Process Environmental	Create and maintain a speaker's bureau of subject matter experts for regional partners to consult for planning/programming-including workplace substance misuse employee policies	SPHN-SMP Lamprey Health Education Newmarket Coalition	Goal 1: Strengthen the capacity of the Seacoast Public Health Network to address substance misuse Objective 1: Increase regional network membership in allies for substance Abuse Prevention (ASAP) by 20% from 2016-2019	Yes

Community and Family Supports

VOLUNTEER ORGANIZATIONS • COMMUNITY PROGRAMS • RECOVERY SUPPORTS • YOUTH-SERVING ORGANIZATIONS • FAITH-BASED ORGANIZATIONS
 SENIOR/ELDER SERVICES • FAMILY RESOURCE CENTERS

<i>CSAP Prevention Category</i>	<i>Strategy</i>	<i>Lead Organization(s)</i>	<i>Regional Goals and Objectives Addressed by this Strategy</i>	<i>Alignment to SHIP and CA-CI</i>
Education Information Dissemination	Convene and support a continuum of Care Council	SPHN-SMP COC	Goal 2: Increase community capacity to identify and assist people struggling with mental health and substance abuse disorders. Objective 1: Develop resilience in the network of area partners and stakeholders.	Yes

V. Monitoring and Evaluation

Monitoring and evaluation are fundamental to understanding the progress Seacoast Public Health region is making towards reaching its goals and objectives. The table below describes the tools that are available and will be used to measure the progress and outcomes related to the implementation of systems-level strategies that align to the *Collective Action-Collective Impact* plan and support the regional network.

Tool	Description of Tool and Measurement
PWITS	PWITS is a database that is used to monitor and track the process of all regional network activities.
PARTNER Survey https://nh.same-page.com/studio/v7/files/index.cfm?FID=55377&PID=398576#	PARTNER is an evidence-based, web-based survey tool used to measure collaboration, trust, and partner contributions within networks.
Regional Network Stakeholder Survey (RNSS) https://nh.same-page.com/studio/v7/files/index.cfm?FID=65389&PID=398577#	<p>The RNSS is a survey developed to measure the impact of the regional network on the members. This survey is administered to regional partners on an annual basis. The RNSS measures the following:</p> <ul style="list-style-type: none"> • The community participation in substance use prevention • Increase in knowledge of alcohol and other drug misuse • Increase in knowledge of effective strategies to prevent or deter misuse • Readiness to adopt or change policies or practices to prevent • Adoption of new policies or practices • Challenges and successes related to community involvement • Perception of changes in risk factors in the community (access, perception of risk, perception of wrongness, community norms)

The table below describes the data that will be collected to measure the impact of the prevention policies, practices and programs implemented by the core sectors on substance misuse and related risk factors.

Tool	Definition of tool and measurement
Youth Risk Behavior Survey (YRBS) http://www.cdc.gov/HealthyYouth/yrbs/index.htm	The YRBS measures substance use risk factors and behaviors among high school youth locally, statewide and nationally. It is administered every other year.
National Survey on Drug Use and Health (NSDUH) https://nsduhweb.rti.org/respweb/homepage.cfm	The NSDUH measures substance use nationally and statewide among all ages.
Behavioral Risk Factor Surveillance System (BRFSS) http://www.cdc.gov/brfss/	The BRFSS measures substance use among adults in New Hampshire.
County Health Rankings http://www.countyhealthrankings.org/	The annual <i>County Health Rankings</i> measure vital health factors, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income, and teen births in nearly every county in America.

Other Data tools/Quality Assurance

Young Adult Focus Groups outcome report

Quality Assurance and Oversight-NH Bureau of Drugs and Alcohol Services State Grant Administrator

Community Health Institute

SPHN administration

VI. Conclusion

The Substance Misuse Prevention Strategic Plan of 2016-2018 is an evolving document that will be updated periodically to reflect the changes and trends of the Seacoast Public Health Network Substance Misuse priorities. The priorities outlined in the Strategic Plan Goals and Objectives are in alignment with the State and Seacoast Public Health Region Community Health Improvement Plan and responsive to the needs of the community.

As the new team grows in its prospective roles we will continue the process of building strong partnerships with all six sectors and in particular with the business community. Our collection of data through PWITS and other state approved evaluation tools will aid in customizing our prevention strategies and provide quality assurance to our evidence based programs. We are constantly vigilant to identify those mutual partner intersections that can leverage resources and maximize limited resources. This strategy of creating cross communication systems will strengthen our capacity to disseminate education systemically throughout the region and improve the health of our community. See contact information page 25



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