

A COMMUNITY COALITION'S ROLE IN BEHAVIORAL HEALTH

PRESENTED TO:
WASHOE REGIONAL BEHAVIORAL
HEALTH POLICY BOARD

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How the Coalition Structure Began

- **Substance abuse coalitions created deliberately at the state level to be able to react to situations at the community level**
- **October 2001** – Bureau of Alcohol and Drug Abuse (BADA) presented the vision of supporting and/or creating functional coalitions representing all counties in Nevada. Coalitions would incur the responsibility of prioritizing what programs are right for a community, while the state moved towards a technical assistance role. The state would continue to certify coalitions and direct service providers. The coalition infrastructure would be built first, then money would be dispersed through coalitions to direct service providers.
- **November 2001** - Sheila Leslie, District 27 Assemblywoman; Carlos Brandenburg, Administrator, Division of Mental Health, Developmental Services; Larry Carter, Chief, Division of Child and Family Services, Juvenile Justice Programs; and Maria Canfield, Bureau Chief, Division of Health, Bureau of Alcohol and Drug Abuse outlined their commitment to the coalition process by establishing the **Nevada Statewide Coalition Partnership** through a Youth Mental Health grant.

Creating the Substance Abuse Coalitions

- 1989 – First coalition created - Partnership Carson City (Carson City)
- 1998 – Creation of Join Together Northern Nevada (JTNN) (Washoe County) – 4th coalition in the state
 - ▣ Received Drug Free Communities Funding for infrastructure beginning in 2000
- Currently 10 coalitions across the state representing all Nevada counties

How the Coalition Structure Progressed

- In 2004, Richard Whitley began to support the coalition process through his role in managing chronic disease programs.
- In 2008, BADA secured the SPF SIG funding to further support the coalition process and begin funding local prevention services through the coalitions.
- In 2009, State Prevention Infrastructure (SPI) (intended to support direct services) and Methamphetamine Education and Awareness monies were secured through the legislature.
- Soon after, Block Grant funds were allocated to the coalitions to support primary prevention infrastructure – approximately 20% of overall state substance abuse block grant.
- In 2013, Partnerships for Success funds were secured to address the opioid problem.

JTNN Current Funding Sources through DPBH (Division of Public and Behavioral Health)

Funding (FY18)							
	SAPP	Block Grant	Total Pre-Subs	Sub-Recipients	% To Subs	PFS	Total
BUDGET	\$337,583	\$252,162	\$589,745	\$(279,402)	47.3%	\$195,000	\$505,343

Sub-Recipients Include:

ACCEPT, Big Brothers Big Sisters of Northern Nevada, Boys and Girls Club of the Truckee Meadows, The Children's Cabinet, Quest Counseling and Consulting, Reno Police Department and City of Reno Code Enforcement, Washoe County School District, Washoe County School District Family Resource Center

Americorps

Americorps provided to Northern Nevada HOPES in 2016-2017 and currently to Community Health Alliance.

How We Do Our Work at JTNN



Respond to a community or statewide need and ensure access to education, training, services and resources in the most cost effective manner while meeting community and state needs, without duplication of resources and efforts.

- **Assess community needs:** surveys, focus groups, key interviews
- **Build capacity:** partners, funding, other resources
- **Plan:** What should we do? (best practices, evidence-based program, group consensus)
- **Implement:** put the plan into action
- **Evaluate:** Is our plan succeeding? (review data, interviews)



A Few of JTNN's Accomplishments

- Established and funded the Substance Abuse Help Line through the Crisis Call Center (24/7 phone line – only one in the state).
- Collaborated with the City of Reno to create a Social Host Ordinance.
- Partnered with Reno Police Department to create the Prescription Drug Round Up (first in the state, replicated across the state, prior to DEA involvement).
- Reduced the number of incidents with intoxicated patrons at UNR football games by implementing the BASICS program with UNR.
- Developed curriculum and provided training to thousands of physicians and other healthcare providers about substance misuse topics.
- Developed substance abuse prevention media messaging used statewide.

Data Review



- 2017 – October-December – Washoe County Medical Examiner’s Office
 - 151 deaths in Washoe County
 - 70% of decedents had at least one drug in their system (not including nicotine or caffeine)
 - 37% - alcohol
 - 24.5% - marijuana/THC
 - 24.5% - methamphetamine
 - 19% - prescription opioids
 - 14% - benzodiazepines
 - 4.7% - heroin

2016 Substance-related Deaths Washoe County Report

- Review of deaths reported to the Washoe County Regional Medical Examiner's Office (WCRMEO)
- ~28% of deaths that occurred in Washoe were examined by the WCRMEO
- Of those, 26% (n=298) were found to have positive toxicology screens
- 229 cases were considered for inclusion for analysis
 - ▣ Cause of death determined to be due to the substance
 - ▣ Accidents or suicides with a positive toxicology screen

2016 Substance-related Deaths Washoe County Report

- Males represented 2 out of 3 deaths
- 28% of deaths among those 50-59 years of age
- 102 deaths due to a combination of two or more substances
 - ▣ Combination of heroin/meth caused 30 deaths
- Single substance cause of death: Illicit drugs 15%; alcohol 12%
- Blunt force (n=26), firearms (n=21), and motor vehicles (n=16) responsible for next three highest individual causes of death

2016 Substance-related Deaths Washoe County Report

- Majority (68%) of deaths were due to accidents
 - ▣ One in five accidental deaths due to illicit drugs
- 19% of all deaths due to suicide
 - ▣ 44% caused by firearms
 - ▣ One in four deaths occurred among those 40-49 years
- 10% of all deaths due to natural causes
 - ▣ 96% of natural deaths due to alcohol (usually cirrhosis due to long-standing alcohol consumption)
- 3% of deaths due to undetermined intent
 - ▣ 88% were female

2016 Substance-related Deaths Washoe County Report

- Most commonly found substances (#represents the number of times it was found in a case, each case could have multiple substances and was counted for each substance)
 - Alcohol (n=184)
 - Prescription opioids (n=182)
 - THC (n=143)
 - Benzodiazepine (n=109)
 - Stimulant (n=76)
 - Meth (n=66)
 - Antidepressant (n=53)
 - Opioid (n=51)

Our Partner Quest Counseling and Consulting

- Quest opened in 2003 as a private non-profit 501 c3
- Initially specialized in adolescent substance use disorders.
- Expanded to treat young adults and adults with substance use & mental health problems, and a history of trauma.
- Offer outpatient behavioral health services including substance use prevention, early intervention, and treatment: individual, group, and family counseling for clients with COD issues, comprehensive behavioral health assessments, drug testing, crises intervention, and parenting support groups. We have a 6 bed group home for adolescent males and plan to open a 6 bed residential home for adolescent females this year.

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