

**Cohort 1 Meeting Highlights  
October 14, 2010**

**Theme: Using data to identify targeted community for prevention services**

**Question:** How much data will be provided by DBHR?

**Decisions:**

- A spectrum of data will be provided;
- Data will be provided electronically; and
- ZCTA data does cross county and school district lines.
- Cohort 1 counties will receive both school district & ZTCA data for 6, 8, & 10<sup>th</sup> grades, but an agreement will have to be made between the school district & the county for the use of the data.

**Question:** How will we work with individual school districts to get data we need?

**Decision:** DBHR will support this by working with OSPI and ESDs to facilitate data sharing with school districts. If necessary we could use composite scores.

**Question:** Can we add illicit drug use question to data? Counties would like to be able to track specific drug use and changes in drug use.

**Decision:** Core GIS data is available that you can also add – please note we are talking about data in relation to identifying the community to be served. Further data will be collected, reviewed and analyzed in the community assessment process that will take place later.

**Question:** Are we restricted to selecting communities from those DBHR provides data for?

**Decision:** We are trying to provide data on the highest need communities – would need a good rationale to select a community that does not meet criteria of high need, but there is no hard line. DBHR will be providing data for 5-7 communities in each county broken down by ZTCA, but the county and ESD will be choosing where they will focus their efforts collaboratively.

**Question:** How many communities will DBHR provide data for, to use in the selection process?

**Decision:** County-wide data will be provided with recommendations for the 5 – 7 communities that show indicators of highest need.

**Question:** Can we focus on tribal communities?

**Decision:** Tribal communities have not been included in this cohort due to current contracts; however, if Cohort 1 participants choose to include interested tribal communities that is fine.

**Question:** We would like to use different academic success data than school drop-out rates.. Is that possible?

**Decision:** Deb Drandoff from ESD 112 will send data to Alice Huber that shows “classes attempted/classes failed” indicator for further considerations of this as a more meaningful indicator of school success. DBHR will inform Cohort 1 participants as soon as a final decision is made.

**Question:** Can we get DOC data?

**Decision:** No, we are not able to use DOC data.

**Question:** Can we add self-reported gang involvement to data used to identify community to be served?

**Decision:** Data from the HYS that describes self-reported fighting can be added – perhaps a composite of related data from HYS would be useful.

**Question:** When will data be out that will help us select communities?

**Decision:** Data on Cohort 1 communities will be provided in November 2010. As the methodology is developed, eventually data will go out to all counties.

### **Theme: Community readiness indicators**

Suggested community readiness indicators include an existing coalition with a significant number of active DFC-related sectors in place. In the absence of a fully functioning formally defined coalition, readiness could include identification of key leaders ready to commit to participating in a new coalition.

Two phases of community selection:

- 1) Mobilize the community once it is selected, by asking for commitments from sector representatives to move forward.
- 2) Identify the community that meets criteria of both need and readiness;

**Decision:** Cohort will document sector willingness to participate from a minimum of 8 of the 12 DFC sectors. DBHR will provide a sample of the MOU template used in the past by the DFC program if people choose to use such a template. Most effectively, each MOU will include an individualized description of the sector representative's contribution as well as mutual expectations and deliverables.

**Question:** In large counties can we focus on more than two communities?

**Decision:** It is up to you, but may be complicated by needs and financial constraints of ESDs.

### **Theme: Role of Prevention/Intervention Specialist**

**Question:** What commitment do we need to have in working with P/I specialists?

**Decision:** Prevention Intervention Specialists must be actively involved with the community coalition (as opposed to solely delivering services in a school setting); they must implement P/I services in the school; and they must provide Best Practice programs in the schools. We also need commitment from the school district that it agrees to share the HYS data.

### **Theme: Outcomes**

**Question:** What are the main outcomes we will focus on?

**Decision:** The three primary outcomes are 10<sup>th</sup> grade alcohol use; a measure that indicates school success (exact measure still under discussion); and total arrests for 10 – 17 year olds. Recommendations for additional outcomes are welcome.

**Question:** How often will DBHR provide data to help us measure outcomes?

**Decision:** DBHR will try to provide data to communities each year.

**Question:** How long will identified communities be funded?

**Decision:** Communities will be funded for at least six years in order to be able to make meaningful change and show positive outcomes. Options may include a re-application after 4 – 5 years to remain funded for a longer time period.

### Theme: Process, organization, and communication

**Question:** Who will be the point person from DBHR related to PRI?

**Decision:** Your Regional Prevention Manager will be the initial point of contact. Frequently asked questions will also be posted on the Athena Forum.

**Question:** How will we know what training is available for our communities?

**Decision:** DBHR will develop a matrix of different training models, including Communities That Care, Community Organizing Training, and CADCA's Coalition Academy. The matrix will be posted with information about trainers, as a menu communities can choose from depending on what best meets their individual needs.

### Related requests and recommendations from participants

- Pierce County will share their RFQ with the other counties in Cohort 1.
- Request for mutual & coordinated training topics with other organizations too, i.e. LCB, DBHR, DoH, Commerce etc.
- Reminder that WA State Alcohol and Drug Clearinghouse is another great resource for materials and lending library.
- Request to set dates now for future Cohort 1 meetings so counties and ESDs can get them on their calendars; late notice meetings are difficult to attend because calendars fill up quickly.
- Request for webinars rather than conference calls.
- Some district offices have K20 access; WSU Extension Offices are good resources for communications, too.