

# Coalition Leadership Institute (CLI) 2021

## Summary of Events and Action Steps from the May 11<sup>th</sup>-13<sup>th</sup> CLI

### **Summary**

Over the course of Tuesday May 11<sup>th</sup> through Thursday May 13<sup>th</sup>, over 140 people gathered online for a virtual iteration of our annual Coalition Leadership Institute (CLI). Due to the continued COVID-19 pandemic and associated public health guidelines, the CLI was once again held in a webinar format. This event began at 8:30 AM and ended at 11:30 AM each day, involved multiple guest speakers, and covered a variety of topics which were chosen based on feedback from participants in last year's event. Several sessions had multiple presentation topics for participants to choose from, which allowed everyone to attend what they were interested in and what they thought best suited their individual needs.

### **Day 1 Morning: Welcome and Opening Remarks: 8:30 – 9:55am**

The supervisor team in the Substance Use Disorder Prevention and Mental Health Promotion Section of DBHR gave an update of the CPWI program and other state updates that were important for providers to be aware of. We also heard from Mandy Paradise with OSPI providing an update on the Student Assistance Professional (SAP) program, present in all schools associated with a CPWI coalition.

### **Day 1 Afternoon: Prevention Foundations: Shared Risk and Protective Factors: 10:05 – 11:30am**

Kevin Haggerty with PTTC and Social Development Research Group at the University of Washington presented on some of the foundations of prevention regarding shared risk and protective factors. Kevin discussed the importance of how our understanding of risk and protective factors has evolved over time and why it is important for communities to understand their local risk and protective factors. Multiple resources were also provided to assist participants in continuing to understand the relationship of shared risk and protective factors.

*Action Item: Discuss with your community the shared risk and protective factors present, and how to use evidence-based programming to target different risk factors.*

### **Day 2 Morning: Health Equity Activity: 9:30 – 9:55am**

The DBHR Health Equity Team led a session on health equity and DBHR's Health Equity Workgroup process to benefit CPWI communities. During this presentation, terms related to health equity were defined, as well as challenges and barriers that communities face to providing equitable services. The presentation ended with explaining how the DBHR Health Equity Workgroup focuses goals and tasks to align with the Strategic Planning Framework with the goal to eventually eliminate health disparities. The Menti software was used throughout this session to encourage discussion from participants related to the different sections of the session.

*Action Item: Continue to promote strategies in your community that involve all members representative of your community.*

### **Day 2 Afternoon Option A: CPWI Action Planning: 10:05 – 11:30am**

Ray Horodowicz and Martha Williams with DBHR presented information regarding CPWI Action Planning. They discussed some items that should be present on every coalition's Action Plan as well as how to write a successful Action Plan. They also explained the importance of making sure the Action Plan is lined up properly with the Budget Plan.

*Action Item: Review your Action Plan with your coalition to make sure it includes all items required by the CPWI contract.*

**Day 2 Afternoon Option B: Opioid Prevention: 10:05 – 11:30am**

Elizabeth Weybright and Kate Hampilos with the Center for Rural Opioid Prevention, Treatment & Recovery (CROP+TR) presented on integrated approaches to addressing opioid misuse. During this session, they discussed opioid trends, as well as the impact of opioids in specifically rural communities due to the different barriers rural communities face compared to urban communities. They then focused on opioid misuse prevention strategies and prevention programs aimed towards youth substance use in order to combat the growing opioid epidemic.

*Action Item: Research local data to see what opioid prevention programs would most benefit your community.*

**Day 3 Morning: Online Adaptation Success Stories: 8:30 – 9:55am**

For this session, participants had the opportunity to choose from seven breakout rooms. Each breakout room featured coalition leaders from all over the state that were invited to discuss their successful implementation of an evidence-based program in their community. With each presentation lasting around fifteen minutes, participants had the opportunity to go to multiple rooms to hear about programs they were interested in and ones that could be relevant to their own communities.

*Action Item: Use ideas from the breakout rooms you attended to come up with ways to implement programs in a virtual and/or in-person environment.*

**Day 3 Afternoon Option A: CPWI Data Books: 10:05 – 11:30am**

Sandy Salivaras with DBHR presented information on the Community Data Books that are available for each CPWI community. Sandy explained how to navigate and best use the Data Books in order to best guide prevention programs. Time was also spent receiving questions and feedback from the field about different aspects of the Data Books. Sandy also gave a brief overview of the AskHYS website, where people can go to look at different Healthy Youth Survey results.

*Action Item: Using the tips provided, revisit your Data Book with your coalition to look for information and data you may have missed before.*

**Day 3 Afternoon Option B: Data Entry into MIS/Minerva: 10:05 – 11:30am**

Lauren Bendall and Samantha Schrader from DBHR shared information on the data entry process for CPWI communities into the MIS/Minerva system. During this time, they explained the importance of why data is de-identified to protect participant confidentiality as well as information that is required to be entered into Minerva based on the data type. Best practices and tips around these topics were provided to help participants become more familiar with MIS/Minerva.

*Action Item: Review data entry protocol with your Prevention System Manager to make sure all required information for coalition activities is being entered properly.*

**Day 3 Afternoon Option C: Qualitative Data Clinic: 10:05 – 11:30am**

Miranda Pollock and Tyler Watson from DBHR provided participants the opportunity to learn more about qualitative data. During this session, participants gained in-depth knowledge about the importance of collecting qualitative data, how it differs from quantitative data, and how qualitative data is used to guide local prevention efforts. They also explained methods to analyze qualitative data since it can be more difficult to analyze than quantitative data.

*Action Item: Review how your coalition currently gathers qualitative data and how it is being analyzed alongside quantitative data.*

***Thank you for attending and we will see you in 2022!***