

Welcome New Community Coalition Coordinator!

On behalf of the Health Care Authority’s (HCA) Division of Behavioral Health and Recovery (DBHR), we welcome you to the extended family of coalition coordinators working across Washington State to prevent and reduce substance misuse and abuse and promote mental health under the Community Prevention and Wellness Initiative (CPWI). We’re glad that you’ve joined us and look forward to getting to know you. The following is an overview of our Substance Use Disorder Prevention and Mental Health Promotion work as part of CPWI. We hope that you will find this summarized information useful as you begin your new role.



How is CPWI funded and administered?

CPWI is administered by the Washington State Health Care Authority’s (HCA) Division of Behavioral Health and Recovery (DBHR), through various federal grants from the Substance Abuse and Mental Health Services Administration (SAMHSA) and through other state funds.

Current Federal funding sources include:

SUPTRS	<i>Substance Abuse Prevention Treatment Recovery Services (formally known as SAPT)</i>
ARPA	<i>American Rescue Plan Act</i>
PFS	<i>Partnership For Success</i>
SOR	<i>State Opioid Response</i>

State funding includes:

DCA	<i>Dedicated Cannabis Account</i>
GFS	<i>General Funds State</i>

In the future, Opioid Settlement Funds might also be used to support CPWIs.

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How did CPWI begin, what is it, and how is it designed?

CPWI began in 2011 with 18 communities, and has grown to nearly 100 communities located across the state. Under this initiative, the state funded communities with greater need and higher risk for the purpose of implementing evidence-based substance use disorder prevention strategies from the community level to help reduce local risk factors for youth and adults and to promote mental health.

CPWI establishes a community coalition and in collaboration with that community's Educational Service District (ESD), provides a Student Assistance Professional (SAP). In CPWI communities, local coalitions make decisions about which risk and protective factors to address by implementing evidence-based prevention programs and strategies. A SAP is placed within the school by the ESD to deliver substance use disorder prevention curriculum, provide intervention services to students at risk for substance use disorder, and participate in the community coalition.

CPWI is a strategic partnership of state agencies, counties, communities, ESDs, schools, and prevention coalitions that support communities in preventing alcohol and other drug misuse. The design of CPWI is based on multiple factors: research and evidence of what works in substance use disorder prevention; limited state and federal resources tied to community-level change outcome requirements; and, coordination with prevention partners in Washington State and local communities. Together, these elements helped shape CPWI: a system that continually builds capacity, leverages resources, and focuses efforts to create positive community change, while measuring impacts for the purpose of building support for additional investment in prevention.

Why CPWI?

Because we know it works! CPWI focuses funding to address local coalitions in communities experiencing high levels of underage alcohol, tobacco, cannabis, prescription drug misuse and abuse, delinquency, academic failure, depression and anxiety. This system design provides an opportunity for the state to support local prevention efforts to be implemented effectively considering the unique cultures, values and environment of each community.

CPWI coalitions are representative of the diversity of the community. Through a needs assessment and a data-informed approach, these coalitions are able to identify disparities then successfully implement programs and strategies that ensure or improve access, retention, and cultural relevance in a manner that meets the needs of all racial/ethnic, minority, and other diverse populations, as well as underserved persons within the community.

We know that using evidence-based substance use disorder prevention strategies will help CPWI communities reduce underage drinking and other substance misuse and abuse among the targeted youth populations resulting in long term outcomes of fewer young people experiencing related problems of juvenile delinquency, mental health conditions, and academic failure. A 2019 evaluation by Washington State University shows that since its implementation, CPWI is having positive impacts on high-need communities. Evaluation results showed substantial decreases in almost all 10th grade substance use outcomes from 2008 to 2018 (a few outcomes were no change/neutral):

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- Current (past 30 day) alcohol use decreased by 39%, 33%, 31%, and 23% among cohorts 1-4 respectively.
- Binge drinking in past two weeks decreased by 45%, 42%, 39%, 24%, and 23% among cohorts 1-5 respectively.
- Current (past 30 day) cigarette use decreased by 60%, 50%, 54%, 50%, and 45% among cohorts 1-5 respectively.
- Current (past 30 day) marijuana use decreased by 5%, 9%, 14%, 26%, and 14% among cohorts 1-5 respectively.
- Current (past 30 day) prescription drug misuse decreased by 27% and 43% among cohorts 5 and 6 respectively (data not available for other cohorts).

What does CPWI do for local communities and coalitions?

The initiative provides support for community coalitions with funding, training, and technical assistance to implement the CPWI substance use disorder prevention system including ongoing assessment, strategic planning, implementation, and evaluation of local prevention strategies. This support helps communities build on successes, adapt to community cultures and substance use behavior, as well as measure how well prevention programs are meeting local and state goals.

As more resources become available, CPWI prevention services will be expanded to other high-need communities. Occasionally, additional focused prevention project opportunities will be offered. By saturating the state with evidence-based prevention services, we expect to achieve prevention results state-wide.

Who is here to support you, as you support your local community coalition?

DBHR staff are here to support you and your coalition. Additionally, your community has been designated a specific Prevention System Manager (PSM) to provide direct support, contract management, training, and technical assistance. Your PSM will be your primary contact for CPWI and related projects. If you have not yet been in contact with your PSM, they will be in touch very soon.

In the meantime, this handout and the online resources on the Athena Forum at www.TheAthenaForum.org/New_CPWI_Coordinator will help you get started in your critical role as Community Coalition Coordinator for this project.

What are the general CPWI coalition requirements?

(These are described in more detail within the [CPWI Community Coalition Guide](#). See also Task Order #1 of the current Umbrella Contract.)

- Establish/maintain a substance abuse prevention community coalition which includes a minimum of eight of 12 community sectors represented.
- A community coordinator for a minimum of 0.5 FTE in each community.
- A full time (1.0 FTE) SAP in each community working in select school(s) determined by the ESD.
- Partner with ESDs, county prevention staff (if applicable) and the community in implementing substance abuse prevention strategies.

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- Implement evidence-based direct services, environmental strategies, public awareness campaigns, and other capacity building strategies.
- Monitor and evaluate chosen programs, policies, and message dissemination.
- Participate in and ensure statewide evaluation. This includes ensuring school participation in the Healthy Youth Survey (HYS) on a biannual basis.
- Administer the CPWI Community Survey during odd numbered years.
- Support state efforts to reduce youth access to tobacco and comply with federal Synar regulations.

What is the Community Coalition Coordinator's role?

The Coalition Coordinator has a very important role in the ongoing development of the coalition and implementation of the coalition's strategic plan. It will be your job to help organize, support, and maintain the coalition as well as serve as the primary guide to implementing the CPWI prevention system.

Additionally, you will become an expert resource in volunteer management, community organization, and prevention science. Specific tasks will include but are not limited to:

- Providing support to coordinate coalition activities such as: assessment, planning, implementation and evaluation and reporting of coalition activities;
- Coordinating regular meetings of the coalition and subcommittees/workgroups to ensure implementation of the strategic and action plans;
- Supporting recruitment and retention of coalition membership as well as local key leaders;
- Providing and or/coordinating training for coalition members on topics including the Strategic Prevention Framework, prevention science, environmental strategies, and programs;
- Coordinating the regular review of coalition budget by coalition members and relevant staff from your Fiscal Agent;
- Working with individual member organizations to help align and integrate their work with goals and strategies of the coalition;
- Serving as a liaison between the coalition and HCA/DBHR; and,
- Participating in CPWI learning community meetings, monthly PSM check-in meetings, and any required trainings.

What is the HCA/DBHR Prevention System Manager's (PSM) role?

The PSM has two main functions in working with Coalition Coordinators:

- 1) To serve as the primary point of contact for all contract monitoring; and
- 2) To serve as the first point of contact for technical assistance and training coordination related to all aspects of coalition development and program management.

Your PSM will help ensure the coalition is in compliance with contract requirements. PSMs also deliver technical assistance and training to you and other coordinators on a wide range of topics. Technical assistance content ranges from the basics, such as helping to develop coalition agendas or identifying effective recruitment strategies, to more advanced needs, such as how to decide on the most appropriate

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environmental strategies for your community’s needs and readiness. PSMs also provide referrals to resources such as relevant websites or contract requirements. You will have online monthly check-in meetings with your PSM as well as occasional in-person meetings as needed.

We hope this introduction has been helpful. As you settle in, start reviewing the information in more detail. Your PSM will also use this document to help shape the discussion during your initial check-in meetings. Don’t hesitate to reach out. DBHR staff are here to support you and your coalition.

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Optional “Quick Reference” Page

Feel free to use this page to gather some key information in one spot. The charts below are formatted so that you can type information into the blank cells.

Role	Name	Contact Info
Prevention System Manager		
Student Assistant Professional		

Meeting	Schedule/Information
Monthly Coalition Meetings	
Coalition Leadership/Executive Meetings	
Check-in Calls with your DBHR System Manager	

Item	URL or File Location
Task Order #1 from current Umbrella Contract	(insert file location within your computer network or system)
Minerva log-in page (Via SAW)	This SAW log-in page will then pull you through directly to Minerva 2.0.
Contractor fiscal and invoicing	https://theathenaforum.org/billing