Northwest Regional Substance Use Steering Committee

Charter

| Chartering Date: | 9/21/2017 | Committee Start Date: | 11/6/2017 | Projected End Date: | 10/1/2018 | | | | |
|-------------------------|--|--------------------------------------|-----------|---------------------|-----------|--|--|--|--|
| Ownership and Authority | | | | | | | | | |
| Chartering Group: | 9/21/17 Steerii | 9/21/17 Steering Committee attendees | | | | | | | |
| Ideal Membership | Law enforcement, public health, primary care, emergency department, pharmacy, community, education, EMS, NAMI, PDO, | | | | | | | | |
| representation: | Addictions-Mental Health, minimum 2 people from each county | | | | | | | | |
| Members: | Debbie Morrow, Marge Jozsa, Kate Pillar, Safina Koreishi, Leslie Ford, Mark Bowman, Melissa Brewster, Carin Pluedeman, Nancy Knopf, Michael McNickle, Mathew Workman, Hilary Pohl, Claire Catt, Heather Oliver, Alan Evans | | | | | | | | |
| Committee Lead (s): | Kelly White & Heather White | | | | | | | | |
| Consulted (Secondary | Pharmacy, surgery, dental, community OHP member- CAC, localized community MH, EMS | | | | | | | | |
| Membership): | | | | | | | | | |
| Informed: | CPCCO CAP, co | mmunity partners, clinical partners | 3 | | | | | | |

Roles & Resposibilities for Membership

Members will make every effort to attend Steering Committee meetings in-person.

If unable to attend in person, a call-in line will be available for remote participation.

County champions will be identified who will be responsible for driving county-level work outside of Steering Committee venue.

Members will participate in a "regional inventory" to identify resources, stakeholders, minimize duplication, and establish points for communication.

Members will identify and prioritize focus area initiatives and participate in county-level subgroups to advance initiatives.

Members will report on county-level progress, barriers, and strategies during Steering Committee meetings.

Members will develop and execute communication pathways to inform community stakeholders on what the CCO & region are working on.

Members will contribute perspectives from day-to-day intersections with Opioids, Alcohol, and other SU to inform barriers and initiative prioritization.

Steering Committe will collaborate with CACs to inform development of 2018 CHA and 2019 CHIP.

Steering Committee will partner with and support organizations that go through a CHA process as part of environmental scan.

Purpose

The purpose of the Northwest Regional Substance Use Steering Committee is to reduce harm caused by opioids, alcohol, and other substances in Clatsop, Columbia, and Tillamook counties.

The members of this group represent regional expertise and community knowledge of the impact of substance use and related disorders. In convening these partners, we will align, inform, and ensure the execution of the Columbia Pacific CCO and northwest regional strategies to address opioid, substance use, and related disorders.

Measurable Goals

Establish an inventory of community stakeholders, organizations, and resources in the realm of opioids, alcohol, and substance use.

Initiate county-level subgroups to meet on monthly basis and advance county-specific initiatives & priorities.

Host listening session with community stakeholders in each county to understand barriers and prioritize initiatives for subgroup focus.

Establish communication pathways with regional community stakeholders.

Staffing and Facilitation Methodology

CPCCO will staff and facilitate meeting on November 6, 2017: charter, inventory, sub-group champions, & Listening Session framework.

CPCCO will staff and facilitate Community Listening Sessions in each county.

CPCCO will staff and facilitate quarterly Steering Committee meetings after completion of Community listening Sessions.

County sub-group champions will organize and convene monthly meetings after completion of respective listening session.

County sub-group champions will prepare/plan delivery of sub-committee updates during quarterly Steering Committee meetings.

Scope/Boundaries

Includes:

Opioids, acohol, MJ, methamphetamine, other substances

Substance use and related disorders

Advise & champion work related to:

Improved Clinical Prescribing

Safe disposal of pills and needles

Community Education Campaign

Expanding Access to teatment for substance use disorder

Naloxone

Improved treatment for pain

Excludes:

Tobacco- unless directly related to scope

Communication Schedule

| Meeting Cadence: | 1st Monday of the month 3:30-5:30 pm scheduled 90 minute meeting with protected time for extended discussion. | | |
|------------------|--|--|--|
| | Monthly meetings to accommodate: Inititial charter, strategy & planning, planning for listening Session in each county | | |
| | Monthly county-level subgroup meetings outside of Steering Committee venuescheduling per county. | | |

Reporting: Steering Committee to identify communication pathways with community stakeholders.

County-level subgroups report progress, barriers & strategies to Steering Committee during monthly meetings.

Issues and Risks

Risk:

| Over drawn resources for multiple committees/collaboratives |
|---|
| Low attendence to meetings |

Mitigation Plan:

Communicating with participants about volume/scheduling/overlap

| Constraints and Dependencies | | | | | | |
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Notes: