



Virtual Advisory Board Meeting

Thursday, May 14, 2020

1:00 – 2:30 PM (MST)

NOTES

Board Members in attendance:

Durand Bear Medicine, Jenny Fuller, Thomasine Heitkamp, Kimberly Koch, Jodi Lockhart, Kent MacLennan, Matt McCullough, Rachel Nuss, Bethany Pace-Danley, Traci Pole, Craig Povey, Mitzi Racine, Meagan Rides at the Door, Jana Sprenger, Sara Swingley, and Alexa Wrench

PTTC Staff in attendance:

Dr. Jason Burrow-Sánchez, Marjean Searcy Nielsen, Shannon Christensen, Dr. Aaron Fischer, Rori Douros, Taylor Cook, Shandlie Bodily, and Dr. Glen Hanson

1. Welcome & Brief Introductions

Jason Burrow-Sánchez welcomed Board Members; and Board Members and Mountain Plains Prevention Technology Transfer Center staff introduced themselves; Jason provided an overview of the Mountain Plains PTTC and the Technology Transfer Center (TTC) Network.

2. Advisory Board Roles

- a. Rori thanked members for being a part of the Advisory Board. **She mentioned that a webpage listing the members of the Advisory Board is on the Mountain Plains PTTC website and can be viewed at: <https://pttcnetwork.org/centers/mountain-plains-pttc/mountain-plains-prevention-technology-transfer-center-advisory-board>. Rori asked members to view their information for accuracy and let her know if something needs to be updated. She also stated that she sent a handout with the agenda that includes all members email addresses so members can communicate with one another.**
- b. Rori mentioned the purpose of the Advisory Board is to help guide Mountain Plains PTTC efforts that will include providing a forum for on-going communication, collaboration and coordination. The Mountain Plains PTTC recognizes that members are all busy and they will serve in an advisory role. **The Mountain Plains PTTC would like members to attend annual board meetings and provide feedback to assist with planning, especially during this time of transition.** The Mountain Plains PTTC hopes to find out more about what each state needs during these “new normal” times later in the agenda.

3. SAMHSA Updates

Traci Pole, introduced herself as the new Assistant Regional Administrator for the Substance Abuse and Mental Health Services Administration (SAMHSA) Region 8 Office in Denver, Colorado.

- a. Traci stated that COVID-19 is putting behavioral health at the forefront. She provided the following update on SAMSHA:
 - i. There is hope. We are resilient. We will push through!

- ii. Charlie Smith, Regional Administrator has been instrumental in pushing out SAMHSA messaging about staying strong amid COVID-19.
 - iii. **As a result of Coronavirus Aid, Relief, and Economic Security (CARES) Act SAMSHA had 110 million dollars for the Emergency Response COVID Grant across Region VIII.** <https://www.samhsa.gov/sites/default/files/covid19-programs-funded-samhsa.pdf>
 - iv. SAMHSA Region VIII also has **four (4) out of the six (6) states (CO, ND, SD, and UT)** receiving funding for the Crisis Counseling Assistance and Training Program (CCP). FEMA funds this program, whereas SAMHSA serves as the Grant Project Officers (GPOs) and provides grant administration and program oversight.
- b. **Highlights on SAMSHAs Website:**
- i. Office of Behavioral Health Equity has a new release on Behavioral Health Disparities for Black and Latino Communities. Traci encourages board members to look through and consider as they are working with their communities. She said the Office of Health Equity is happy to help folks who want to talk more about it. <https://www.samhsa.gov/sites/default/files/covid19-behavioral-health-disparities-black-latino-communities.pdf>
 - ii. Last week they released guidance for law enforcement and public responders and naloxone. She encouraged board members to take a look at this, as well. <https://www.samhsa.gov/sites/default/files/guidance-law-enforcement-first-responders-administering-naloxone.pdf>
 - iii. NEW guidance/letter from SAMHSA supporting SUD treatment providers as essential health care providers (to assist with priority purchasing of PPEs): <https://www.samhsa.gov/sites/default/files/samhsa-ppe-letter-treatment-providers.pdf>
- c. **Region 8 Highlights:**
- i. **Behavioral health technology and telehealth** - more behavioral health (BH) providers are turning towards telehealth. Telehealth and technology continues to be priority for Traci and Charlie. The Regional Office is hearing reports of significantly higher requests for care, lower “no-show” rates. BH providers are spending increasing amount of clinical time providing tech support and training with patients, which is not reimbursable.
 - ii. Working with Ancillary Service Providers - Working with Region VIII ACF Head Start to increase competencies in SUD/Opioids, Early Childhood Mental Health, and Trauma. SAMHSA R7 and R8 (with MHTTCs) working with USDA-Women, Infant, and Children (WIC) to enhance Tribal-WIC staff BH training and knowledge of local BH resources. Developed Tribe-specific resource guides.
 - iii. **Music festival** - Last week Charlie and Traci amplified the work at Sober AF Entertainment (CO) as they hosted the S.AF.E and Sound Virtual Music Festival on May 7th-10th. Over 25K attendees participated in the first virtual music festival over the span of four (4) days to encourage community resiliency.
 - iv. **Workforce development** – There is a prevention-focused program (Public Health Associate Program), hosted by Center for Disease Control and Prevention (CDC), where a small cohort of professionals become CDC employees for two (2) years and then are placed in a state/local/community setting to gain applied public health experience. SAMHSA Region VIII applied to host a PHAP for the 2020-2022 years and if successful, the regional office will position this PHAP to support SAMHSA regional efforts in the suicide prevention and general prevention space. Traci will send

information to Mountain Plains PTTC to be distributed to board members (see below for more information).

- d. **The following are questions that participants asked Traci during the meeting. Traci located the answers and sent answers to the Mountain Plains PTTC to be placed in the notes:**
 - i. Strategic Prevention Framework – Partnerships for Success (SPF-PFS) grant is not moving to CDC, but the Drug Free Communities program is moving to CDC.
 - ii. Regarding the Center for Substance Abuse Prevention (CSAP) fellowship program, this ended several years ago and no discussions to it starting up again. Here are the PHAP (Public Health Associates Program) details, this would be a great way to grow the behavioral health workforce <https://www.cdc.gov/phap/index.html>

4. State & Partner Updates

Jason asked Advisory Board members to discuss their current/anticipated challenges and changes in their state due to COVID-19

North Dakota (ND)

- a. Advisory Board member Laura Anderson, was not able to attend due to another previously scheduling training in her state.
- b. Thomasine Heitkamp provided an update for the MHTTC and ATTC in North Dakota.
 - i. **She stated that the Mountain Plains Mental Health Technology Training Center (MP-MHTTC) & Addiction Technology Transfer Center (MP-ATTC) focus lately has been on creating resources in relation to COVID-19 for rural areas, farm stress, suicide prevention, depression and alcohol use disorder.** They are trying to minimizing isolation and help others to understand that Covid has affected everyone.
<https://attcnetwork.org/centers/mountain-plains-attc/home>
<https://mhffcnetwork.org/centers/mountain-plains-mhffc/home>
 - ii. **She mentioned that states are seeing an increase of forty-eight percent (48%) alcohol purchases since COVID-19 across the region.** “TO GO” alcohol is also a concern in ND.
 - iii. Thomasine mentioned that the pockets of ND have been hit, such as the agriculture community and the homeless community. She stated that some hotels have been opened to help the homeless. **Additionally, accessing medication and treatment to address Opioid-Use Disorder has been a concern. The MP-ATTC has implemented some online support groups to assist with this.**
 - iv. Thomasine also mentioned that the MP-MHTTC and MP-ATTC work collaboratively with the Mountain Plains PTTC. **Just recently the Mountain Plains MHTTC and Mountain Plains PTTC completed a successful, collaborative suicide prevention webinar series.**
 - v. She also mentioned that all of the TTCs in region 8 are connected and support each other well. She reminded the group that they can contact any of the TTCs and they will ensure you are sent to the correct person. **She also stated that all of the TTCs have received good support from SAMHSA through Traci Pole and Dr. Charlie Smith on telehealth and COVID-19 response, to support states.**

Montana (MT)

- a. Jenny Fuller stated that since there are many small, rural schools in MT, many have been shut down early. **Therefore, it has been a challenge to administer the prevention needs assessment to all the schools. They are working with Bach Harrison to collect their data. Different online options are being tried right now, with some pushback, to collect the data from the youth.** Also, since schools are harder to get into, social media has been emphasized for prevention specialists as well as quality online trainings. RAS (Responsible Alcohol Sales) Training has had to pivot and become an online training.

- b. Kimberly Koch mentioned that the state is starting to open up, so the real challenge has been to see how things are going to open up and what we can do. **“TO GO Alcohol” has been occurring and that has caused a challenge in making sure that this is occurring in a safe manner.**
- c. Durand Bear Medicine mentioned that there has been a **tribal lockdown on the Blackfeet Reservation. If someone leaves the county, there is a fourteen (14) day lockdown.** Many car wrecks and fights have been occurring due to substance related issues. There is a lack of communication of how to move forward. **They do have telehealth, but the challenge is how many of the students really have access to internet and a computer to access these tools.** The have cut “non-essential staff” which Durand stated includes addiction counselors. However, these individuals were needed all along, because antisocial and drug related behaviors are being seen. Durand was recently brought back as essential. He reached out and asked for advice/guidance as there is a lot of work to do. The tribe has 17,000 members with nine (9) members of council who have to decide what to do.
- d. Maegan Rides At The Door stated that she **is concerned with how free lunches will be effected with schools closing early.**

Wyoming (WY)

- a. Rachel Nuss states that WY is **experiencing the same issue as Montana in regards to collecting youth survey data. The state has been told by evaluators that they will not be able to complete data collection this year as there is a concern with the surveys being conducted at home.** Additionally, they are struggling with how to plan ahead/figure out what the rest of the year will look like in terms of grant distribution for prevention, etc.

Utah (UT)

- a. Craig PoVey stated that UT is experiencing the same concerns as everyone else. In addition, prevention is being asked to make budget cuts between five to twenty percent (5-20%). **The budget language states that there are to be no purchases unless there is a critical need or tied into COVID-19, which has caused an issue of trying to decide what to cut. This has also caused a hiring freeze and a freeze on funding for some local underage drinking efforts.**
- b. Alexa Wrench mentioned that Volunteers of America (VOA) has found it difficult to reach their youth target audience in Salt Lake City. **There is fatigue in trying to get youth the right resources and provide help via virtual settings, because the youth are tired of video chat.** Additionally, their population has a lot of digital inequities and are caring for younger sibling, etc.
- c. Glen Hanson stated that the School of Dentistry at the University of Utah is trying to help care for SUD patients safely. Testing is the critical factor in preventing the virus spread and to assist individuals who are virus positive, even if asymptomatic, get treatment and care. **Glen would like to see the PTTC and SAMHSA involved in the testing discussion since those with SUDs are at higher risk of getting COVID-19.**

South Dakota (SD)

- a. Jana Sprenger mentioned that **SD is trying to be proactive by getting resources out on a larger platform by using social media.** They are “pivoting” and promoting virtual trainings. **They also created an online Screening, Brief Intervention and Referral to Treatment (SBIRT) training for physicians and health students and a suicide prevention training for teachers.** COVID-19 has pushed SD faster than what they had planned but they are getting their quicker! Jana also mentioned that they are relying on federal funds because their state funds are down significantly. **They also put out a request for proposal (RFP) for an organization to conduct a state wide needs assessment, which they are very excited about since there hasn’t been one in years.** They are, however, concerned as to how a needs assessment will take place if the

awardee can't come on site. Additionally, Jana said that SD was never issued a stay-at-home order, rather their Governor left it up to personal responsibility but schools did move to virtual platforms under recommendation from the Governor. State employees were asked to stay home but are starting to transition back to the office. **She also said medical and recreational marijuana are both on the ballot for this Fall, so prevention professionals are gearing up/educating on that.**

Colorado (CO)

- a. Jodi Lockhart stated that CO is in a level 2 stay at home order. CO has 181 school districts so it looks different depending on where a person lives. In regards to prevention providers – everything is up in the air. In the Office of Behavior Health (OBH) their funding is federal and block grant funds are stable. **State dollars are being affected and more cuts are coming to tobacco funds. OBH is finding it difficult to plan for the future because they don't know what things will look like. Jodi mentioned that the Healthy Kids Colorado survey (data was collected last year) this is similar to Youth Risk Behavior Surveillance (YRBS) survey. They should have results soon, from the survey, and they should have some great data. Rise Above Colorado survey data is also coming out soon.** She also said that the Colorado Shared Risk and

Colorado (CO)

Protective Factors Conference had to be cancelled however, they are planning to offer some of the courses online.

Traci Pole mentioned that Jodi/CPDHE has done some awesome work with the Health Equity Response Team and suggested others should check it out, also.

<https://covid19.colorado.gov/covid-19-in-colorado/health-equity-response-team>

- b. Kent MacLennan stated that **Rise Above Colorado is working to move a lot of work online and they are still communicating through social norms and other campaigns.** They are trying to provide their teacher resources in a fully online format.
- c. Bethany Pace-Delaney (via chat feature due to meeting running short on time) **stated that they are pivoting their SBIRT in-person training to online via live webinar.** She stated that are still receiving requests for training and technical assistance in the midst of the crisis. They are currently working to compile and develop resources for telehealth specific to SBIRT, to support providers statewide in maintaining their services. **Bethany also mentioned that SBIRT is now (at least temporarily) a Medicaid billable service, via telehealth, due to COVID-19.**

Following is what Colorado Medicaid will cover regarding SBIRT:

Up to two (2) full screens per state fiscal year.

Up to two (2) sessions of brief intervention/referral per state fiscal year.

Two codes for SBI 15-30 minutes, and greater than 30 minutes. For 15-30 minutes, fee schedule is \$33.41, for 30+, \$65.51. There is also a code for a negative full screen and no brief intervention, \$24.00.

More info here: <https://www.colorado.gov/pacific/hcpf/sbirt-manual> Bethany also added that in addition to Jodi's updates regarding budget, Colorado may sweep much of the Marijuana Tax Cash Fund (MTCF) to the general fund to help to balance the budget. Many of the MTCF go toward funding programs that provide prevention and services across the substance use disorder (SUD) continuum.

5. Mountain Plains – PTTC Updates

a. Resources During Challenging Times

Shannon highlighted that the Mountain Plains-PTTC was able to adapt and respond to COVID-19 by developing the following products to assist prevention professionals during these times challenging times.

- i. Provided a “**Self-Care in a Selfless Field**” webinar, which has been one of our most attended webinars (over 630 attendees). The webinar provided prevention professionals with possible signs of burnout, how to implement self-care practices to their daily lives, and provided valuable resources to help combat the effects of work-related stress.
- ii. Provided a two-part webinar series, “**Supporting Prevention Efforts through Virtual Setting**” created and presented by Dr. Aaron Fischer.

Part 1: Understanding How to Leverage Telehealth Technology for Prevention Services

Part 2: Legal & Ethical Considerations for Telehealth Prevention

During this series, participants learned how to use technology to engage in direct prevention efforts, as well as indirect prevention efforts, by supporting coalitions, caregivers, and school staff. Participants also learned which requirements must be in place through a virtual setting as well as current changes due to COVID-19. Additionally, participants learned how to identify if a virtual platform is American Health Insurance Portability and Accountability Act (HIPAA) and/or The Family Educational Rights and Privacy Act (FERPA) compliant and how to safeguard their clients through responsible technology use.

- iii. **These webinars, and all Mountain Plains-PTTC webinars, have been recorded and are posted on our website along with PowerPoint slides and additional presenter resources** <https://pttcnetwork.org/centers/mountain-plains-pttc/recorded-webinars?destination=/group/28/nodes>
- iv. Additionally, a web page was created titled, “**Resources to Care for Ourselves, Our Work and Our Clients During These Challenging times.**” Resources include federal resources and information on COVID-19 as well as relevant Technology Transfer Center Resources; mindfulness/resiliency/self-care resources; prevention resources; and tools for educators, etc. <https://pttcnetwork.org/centers/mountain-plains-pttc/resources-care-ourselves-our-work-and-our-clients-during-these>

b. Upcoming Plans to Address Needs

Shannon briefly discussed some of the ideas the Mountain Plains PTTC have been discussing in order to continue to meet the needs of the region during COVID-19 and beyond, but due to being short on time, she was not able to discuss all planned items, therefore, those items have been added to these notes.

As was stated in section a. above, the Mountain Plains PTTC adapted and transitioned some events online and created webinars and other products to meet the immediate need. Shannon said that moving forward the Mountain Plains PTTC will also take into consideration the needs of board members.

- i. **PTTC will continue to adapt to the current needs by transitioning events to on-line/virtual format as well as continue to produce quality webinars.**
- ii. **Create/host a Region 8 Prevention Leaders Forum (two - four people per each of our six states, which could include board members)**
 - Share ideas and information on how prevention functions in each of the six states in Region 8 to learn more about and potentially model others’ structures, ideas, etc.
 - The forum will enable prevention leaders to discuss ways to structure prevention efforts effectively as well as to identify core components of prevention professionals to include; developing workforce pipelines and

professional advancement for prevention specialists, educating professionals on the science of prevention and educating professionals on the guiding principles of providing prevention.

- Determine specialty topics that could be pursued in the form of e-learning, webinars, etc.
- iii. **Hold a Region 8 SAPST (Substance Abuse Prevention Skills Training) ToT** – The plan, before COVID-19, was to hold an in-person ToT and invite each state in the region to send 2-4 people in order to increase training capacity in each state. At this time, the Mountain Plains-PTTC, along with the PTTC National Coordinating Office are looking into how to effectively move SAPST in general and SAPST ToT to an online/virtual format. For states that have requested a ToT, the MP-PTTC will provide updates as they become available. Thank you for your patience.
- iv. **Create e-Learning, self-paced prevention courses.**
- v. **Hold additional “Meet the Experts: Emerging Issues” online panel presentations** (similar format to “meet the press”).
- vi. **Hold additional Learning Labs.** Participants go into virtual breakout rooms, following a presentation, where they expand on the information delivered in the presentation where they are provided an opportunity for conversation between prevention professionals, guided by facilitators, to provide a greater level of detail and understanding into the key concepts of the topics addressed. Learning Labs (virtual breakout rooms) can be a venue for increased technology transfer, increased network development, and opportunities to trouble-shoot real life situations.
- vii. **Create a Social Media Campaign** for states to utilize throughout the region
- c. **Year 1 Snapshot (see handout sent via email)**
 - i. Mountain Plains PTTC included a YEAR 1 Snapshot (Oct. 2018 – Sept. 2019) handout via email in preparation for this board meeting. The snapshot provides an overview of some accomplishments in year one to include:
 - Mountain Plains PTTC had a total of thirty (30) events.
 - In the thirty (30) events there were 1,220 participants.
 - Of the 1,220 participants, 691 participants completed a post-event evaluation.
 - Mountain Plains PTTC is now on social media (Facebook & Twitter - @MPPTTC)
 - Mountain Plains PTTC developed three infographics:
 - The Healing Power of a Smile,
 - Understanding Adolescent Marijuana Use Infographic, and
 - Mountain Plains TTC (ATTC, MH, PTTC) Cross Collaboration Handout.
- d. **Year 2 Accomplishments**

Shannon briefly updated the board on what the Mountain Plains PTTC has been working on this past six to eight (6-8) months (Year 2), due to being short on time, she was not able to discuss all planned items, therefore, those items have been added to these notes.

 - i. **Adapted and responded to COVID-19 by developing products to assist prevention professionals during these challenging times.**
 - ii. **Collaborated with the MP-MHTTC to provide a six part, “Suicide Prevention Across the Educational Continuum” webinar series.** Throughout the series, participants were provided with information related to suicide prevention and intervention for youth, young adults, and college students.
 - iii. **Provided a two of a three-part “Cannabis Prevention, Policy, and Pharmacology” webinar series.** Unfortunately, one presenter became extremely ill (not COVID-19 related) and they are still in the process of rescheduling the pharmacology component of the series.

- iv. **Established a Tech Studio to provide virtual panel discussions**, such as “meet the experts”
- v. **Created “Research & Resource” pages for Vaping, Cannabis, and Alcohol.**
- vi. **Held the following in-person training events:**
 - Strategies to Effectively Select and Implement Evidence-Based Prevention Programs,
 - Methamphetamine Prevention Strategies, and
 - Systems Level Change Best Practices

e. Data Review

Shandlie briefly provided an overview, via a heat map, of where Mountain Plains PTTC participants (in year two) are located. She mentioned that the Mountain Plains PTTC webinars are not only being viewed regionally but also nationally. Shandlie was not able to discuss the other data slides, due to being short on time. Please view the PowerPoint slides sent previously to view those data graphs.

f. Lessons Learned

Shannon was not able to discuss this section/slide due to being short on time, but following are some of the items the PTTC has learned during this past year (Year 2).

- i. Be adaptable and flexible to changing priorities
 - Transitioned some face-to-face events to webinars or virtual.
 - Utilized technology to engage learning and technical assistance.
 - Started this process by assisting prevention professionals in learning how to deliver services using technology through Dr. Fischer’s two-part webinar series.
 - Plan to continue to do this in other ways.
- ii. To increase our webinar capacity due to interest in webinars.
 - Initially averaged about 75-125 participants on webinars (account could accommodate up to 500 participants).
 - Registration numbers increased significantly during Self-Care in a Selfless field and throughout the Suicide Prevention Webinar Series.
 - Mountain Plains PTTC Zoom account can now accommodate up to 1,000 interactive participants.

g. PTTC Network Updates

Rori briefly updated the board on the following National PTTC items. However, due to being short on time, she was not able to discuss all planned items, therefore, those items have been added to these notes.

- i. **SAPST (Substance Abuse Prevention Skills Training) /Prevention Ethics**
 - Prior to COVID-19, MP- PTTC had been talking about the need for more of the face to face SAPST to be moved online since it can be difficult for professionals to travel long distances in some cases and to be out of the office for 4 days. Then COVID-19 happened and all PTTCs were put in the same place. Since SAPST was created as an in-person training and a huge part of it is getting into workgroups and learning from others and building comradery, moving online will take some time to work through.
 - Mountain Plains PTTC had to postpone the two face to face SAPST we had scheduled in the late spring and summer. One of which is a Native SAPST and MT would still like it to be in-person so we are hoping to reschedule for spring 2021. The other is for ND and they are hoping for an online option.
 - Rori serves on the National Workforce Development Workgroup and reported that they are meeting weekly to determine the best approach(s) to creating/implementing a fully online SAPST. There are some regional PTTCs and

some individual states that have already began experimenting with online SAPST. The workgroup will be reaching out to them to inquire about best approaches and what is and is not working. Additionally, the plan will include training current SAPS (Substance Abuse Prevention Skills) trainers on best practices for delivering an online training.

- The National Workforce Development Workgroup is also meeting weekly to develop an online Ethics in Prevention course. A course that would need to be moderated is nearly completed, which current ethics trainers would need trained on how to use the backend of the training platform, etc. Additionally, the workgroup is looking into a fully self-paced ethics course for those needing recertification.
- Additionally, National Workforce Development Workgroup put together an online database system for any and all SAPS trainers around the nation to include their contact information and training experience as well as to communicate with other trainers around the nation.

ii. **National Workgroups**

Staff from the Mountain Plains PTTC serve on the following National PTTC Workgroups

- COVID-19 Workgroup
- Evidence-Based Interventions (EBI) Workgroup
 - Marjean mentioned that the two main topics that are being discussed nationally are the need to adapt EBI to on-line format maintaining program fidelity as well as providing engaging learning by engaging instructors.
- Workforce Development Workgroup