

WV's Partnership to Promote Community Well-Being

February 2004 Retreat Notes (Verbatim)

Opening Comments

- ❑ Prevention Planning
- ❑ The time is right.
- ❑ The Governor's Office is key and on-board.
- ❑ December 2003 was first Partnership Meeting. We decided then we needed more time to discuss direction and roles and responsibilities.
- ❑ Opportunity for collaboration and coordination of resources.
- ❑ Concern is to develop a good continuum of care for substance abuses.
- ❑ Opportunity to add intervention to focus on prevention and treatment.
- ❑ Opportunity to gain resources toward these issues.

Considerations

- ❑ There is no such thing as a dumb question.
- ❑ Listen to each other.
- ❑ Have fun!
- ❑ Take care of your own needs.
- ❑ Turn off your cell phone or put it on silent ring.
- ❑ Use the "Parking Lot" to park random ideas for later discussion.
- ❑ Explain acronyms. The "Acronym Police" will be listening.

Group Development

- ❑ Gathering
- ❑ Groping
- ❑ Griping
- ❑ Grasping
- ❑ Grouping

Getting To Know Each Other

- ❑ Name
- ❑ Clever Way To Remember Your Name
- ❑ 3 Things About Yourself
 - 2 Little-Known Facts
 - 1 Tall Tale

Medicine Wheel

- ❑ What are the characteristics of your group?
- ❑ What do others need to know about your work style to work well with you?

North

Characteristics

- Purpose/Goal Driven
- Details/Action/Task Oriented
- Product People
- Let's get the job done.
- Clear & Concise
- We will unintentionally hurt feelings.
- We have a task to do—we have to make decisions.
- We are usually good supervisors/leaders/administrators.
- Don't explain the obvious to us.

What you need to know...

- We really don't mean to hurt feelings.
- You need to get the job done.
- If you're not helping to get this done, then you are in my way.
- We always want to be able to answer the question, "What did you do?"
- Hard for us to "discuss" or "process"—we want a product.
- We get irritated because we want to do, not discuss.
- We don't have time for "stuff" but we do try to balance.

South

- Think Before Speak
- Sensitive to Others
- Interpretation of Comments
- Take longer to make decisions to assure input from all.
- Emphasize input/communication from all involved.
- Serve as caretakers in process.
- People need to remember to take care of us.
- Wear heart on our sleeve tendency.
- Difficulty separating work from other aspects of life.
- Tendency to put others first at the expense of our own needs.
- Get involved in too many activities over extended.
- Emphasis on human factors.

East

- Bounce Around
- Multiple Ideas Simultaneously
- Ability to Connect Ideas
- Keep Options Open/Massage Ideas
- Now and then we hit home runs, but we strike out a lot too.
- Showmanship
- Intuition-Keen sense informed, at times, by experience (timing, positioning).
- Lose People
- Think Holistically
- Begetting, Beginning, Being, Bequeathing
- Risk Takers

- Time Issues

West

- Organized
- Planners
- Lots of Lists
- Focus
- Task Driven (Sometime to the Detriment of Having Fun)
- Need to Have Facts
- Love Information
- Logical
- Persistent
- Hopeful
- Control (Like To Have Things Under Control)
- Outcome Oriented
- Flexible
- Reliable, Follow Through
- We prefer the truth.

Q& A: What I need to know about...

- About my job as a member of this Partnership.
 - How does my job fit into the big picture?
 - Do SIG desired outcomes justify my organization's involvement?
 - How do we differentiate between prevention and promotion (health)?
 - Is there (and if yes, what) a role for national service in the Partnership?
 - Partner Responsibilities
 - What is the time commitment as a Partner? What will be the time demand? What are the time requirements of each member (# of meetings, outside work, buy in from agency)? What will my job as a Partner be? What are the expectations/duties for me as an individual member of this group? Other than meeting attendance, what will my other responsibilities be?
 - What will our commitment be after we receive the SIG Grant?
 - How do we maintain our commitment to the process?
 - Does the Partnership have an advisory or decision-making role?
 - Potential conflict partnership member and applicant?
 - Who approves the plan?
 - What happens after this "planning year" if we don't get the SIG?
- About the role of the Partnership as a whole.
 - What does the development of a state plan mean?
 - There are multiple networks who work in communities (CDS, HPS, TPS, FRNs, etc.). How will we connect them?
 - Will there be interagency expectations of this membership? If so, example?

- How will other “non-core” partners be brought into the work of the Partnership?
 - Are we missing any perspectives?
 - What is the Partnership’s role in sub-granting funds?
 - What if we don’t get the SIG grant?
 - In five years, what do we expect to have accomplished?
 - Define community well-being.
 - Is there a time line for our plan?
- About the parameters and expectations of the State Incentive Grant (SIG) Planning Grant.
 - Incentive to do what?
 - Will we identify and recommend gaps in the continuum and recommend methods for funding?
 - What outcomes do we want...what change in West Virginia because of SIG?
 - How comprehensive is this plan supposed to be? What will it look like?
 - How do we prevent the SIG Plan from going on the shelf? (not implemented)
 - Will the Partnership shape or implement ideas or both?
 - How does the SIG define prevention and what are the limitations?
 - Is it possible for the Partnership to see beyond planning?
 - What is the place for volunteerism and service in the SIG process?
 - Do the parameters of the SIF overlap with other state initiatives and if so how will this be handled? How does this initiative relate to other statewide initiatives? Example: System of Care—Focus on children/youth(serious, emotionally disturbed.
 - How will present prevention initiatives be impacted by the SIG?
 - Other
 - What does “leverage prevention funding” mean?
 - Are you aware of the Governor’s and DHHR Secretary’s focus on prevention?
 - Are there family members as well as youth representation ? If not, how will we ensure that their voices are heard?

Q1: With what other issues & systems should substance abuse prevention connect?

- Group 1
 - Workforce Development
 - Youth to Youth Role Modeling
 - Youth to Adult
 - How do we promote a “system”?
 - Develop a Communication System
 - Plan for Homelessness/Etc.
 - How do we coordinate all those plans?
 - Overlap with any system
 - There are so many multiple plans in WV.

- Governor appoints several “councils” to address each have its own plan.
 - Inventory of the various plans.
 - Awareness of the existing groups.
 - Overwhelming task to do?
 - Target Audience?
 - Community Volunteer System Needs To Conect
 - Are there any systems that substance abuse prevention does not impact?
 - Must connect with school system and higher education.
 - How do we collaborate/coordinate existing systems? Utilize resources.
 - Media systems we need to connect with print/radio/TV press/public figures/role models.
 - We need to connect with faith-based systems.
 - We need to connect with business partners that would benefit from substance abuse.
 - We need to connect with pharmaceutical industry.
 - We need to connect with health systems.
 - Criminal Systems
 - Legislative/Funding Systems
 - Citizen (Youth/Families/Non-Providers) System Need to Be Involved-Get Their Voice Heard
- Group 2
- Behavioral Health Centers
 - Faith-Based Organizations
 - Justice System
 - School System
 - Public Housing
 - Primary/Care & School Based Centers
 - Domestic Violence
 - No Child Left Behind Act
 - School Consolidation
 - Environmental Approach/Community-Based
 - Parental Input
 - Senior Citizens
 - Lack of Alternative Activities
 - Decreasing Support for the Arts
 - Youth Leadership Development Training
 - Safe Environments
 - Nurturing Environments
 - Fathering Programs
 - Mentoring Programs
 - Decreasing State Population
 - Economic Development
 - Sex Offender Management

- Children of Incarcerated Parents

Q2: Within the context of the SIG, how does prevention promote community well-being?

- Group 1
 - What is prevention?
 - Is there a difference between individual well-being and community well-being?
 - Indicators of Well-Being: Crime, Health, Homelessness, Jobs, School Drop Outs, Delinquency, Violence (Domestic & Community)
 - Communities that invest in prevention have more well-being. Don't be reactive-be proactive.
 - Communities must have resources for youth-something to do/to get involved in.
 - Need to focus on the action and funding of prevention (coordinate a budget for prevention).
 - What indicators for prevention? Health, Crime, Education
 - We must focus on a couple indicators (but how?) so we can prove prevention works...promotes well-being and then build on it.
 - "Resources" means more than money-How do we focus "resources" for prevention methodology?
 - Narrow focus with substance abuse?
 - Need to identify focus area?
 - BIG SIG is Bonus—Not what we are working toward—the issues are what we are focusing on and attempting to address.
 - SIG could be a pilot for a prevention approach that could be used by other approaches.
 - We need to know gaps so we can address/promote.
 - The risk/protective factors do promote well-being.
 - Information from "Community That Cares" (indicators, etc.) have been valuable in our community.
 - We need to make more people aware of risk/protective factors. The stakeholders (US/legislators/etc.) need to know more about this approach.
- Group 2
 - Intense look at large issues...expansive longitudinal
 - Decreased use, less expensive.
 - Prevention in Well-Being
 - Locally Identified Needs
 - Illness/Risk Model now used instead of wellness model.
 - Decreased Crime = Safety, Domestic Violence
 - Holistic (Physical, Mental, Emotional, Spiritual) Look @ Issues
 - Treatment is specific to one need...too narrow.
 - Obesity/physical activity
 - Nutrition
 - Increase Protective Factors

- Decrease Risk Factors
- Scientific Model leads to Medical Model leads to Social “Case Work” Models leads to separation focus on single/item versus whole entity
- School-based wellness centers shifted from prevention to acute care.
- Prevention= time opportunity to explore.
- Availability of community assets to nurture children...especially after school.
- Health Literacy-Children ...adults
- Self Advocates

Q3:

- When we say we are developing a SIG plan for prevention of substance abuse in relation to its connected issues, what we mean by prevention is...
 - Communities will be able to identify and provide resources to kids before problems occur.
 - Reduce negative influences and change the way we think about behaviors that result in unhealthy lifestyles.
 - A system that identifies risk factors for primary prevention, intervention and supports treatment for SA.

Question & Definition Wrap Up

- Focus
- Perspectives
- Coordination
- Promotion/Asset-Based
- Non-Linear Thinking & Communication Strategies

You Are Here (Assets, Needs, Opportunities)

You Want To Be Here (Desired Results, Outcome)

Acronyms

- ABCA-Alcohol Beverage Control Administration
- AHC-Adolescent Health Coordinator
- AHIDTA-Appalachian High Intensity Drug Trafficking Area
- AMA-American Medical Association
- ATOD-Alcohol, Tobacco, & Other Drugs
- CDC-Centers for Disease Control & Prevention (www.cdc.gov/)
- CDS-Community Development Specialist
- CREATE-Coordination of Rehabilitation, Education, Awareness, Treatment, Enforcement for a Drug-Free WV
- DCJS-WV Division of Criminal Justice Services
- DHHR-WV Department of Health & Human Resources
 - BPH-Bureau for Public Health
 - BBHBF-Bureau for Behavioral Health & Health Facilities
 - OBHS-Office of Behavioral Health Services
 - DADA-Division on Alcoholism & Drug Abuse

- ❑ DOE-WV Department of Education
- ❑ FRN-Family Resource Network
- ❑ GPRA-Government Performance & Results Act
- ❑ HPS-Health Promotion Specialist
- ❑ KISRA-Kanawha Institute for Social Research & Action
- ❑ MSFA-Mountain State Family Alliance
- ❑ MSW-Masters in Social Work
- ❑ ONDCP-Office of National Drug Control Policy
- ❑ PRC-West Virginia Prevention Resource Center
- ❑ PRN-Peer Recovery Network
- ❑ PRO-Prevention Resource Officer
- ❑ RADAR-Regional Alcohol & Drug Awareness Resources
- ❑ RESA-Regional Educational Service Area
- ❑ RFP-Request for Proposal
- ❑ SAPT-Substance Abuse Prevention & Treatment
- ❑ S&DFS-Safe & Drug Free Schools
- ❑ S&DFC-Safe & Drug Free Communities
- ❑ SIG-State Incentive Grant
- ❑ SRO-School Resource Officer
- ❑ US DHHS-United State Department of Health & Human Services
 - SAMHSA-Substance Abuse & Mental Health Services Administration
 - CSAP-Center for Substance Abuse Prevention
 - CSAP-Center for Substance Abuse Treatment
 - CMHS-Center for Mental Health Services
- ❑ **WV AFHR**
- ❑ WVU PRC-West Virginia University Prevention Resource Center
- ❑ YRBS-Youth Risk Behavior Survey

Key Functional Areas On Which To Base Initial Plan Development

- ❑ Where We Are Now, Who's Doing What Now
- ❑ Existing Data
- ❑ Cost of Failure Analysis (Steve Heasley)
 - Must be real & convincing.
 - Might cost more upfront, but there will be long-term savings.
- ❑ Excessive Cost Analysis (Joe)
- ❑ Vision, Common Agreement About Future State
- ❑ What has to change to get us from where we are to where we want to be.
- ❑ Short-Term Plan v. Long-Term Plan
- ❑ Outcomes & Indicators In Existing Plans
- ❑ Build On What We Have
- ❑ Awareness of Trends & Opportunities
- ❑ Decision Criteria-Our Own & Mandated Criteria
- ❑ Politics

Parking Lot

- ❑ Consider potential Partner/SIG Recipient conflicts.
- ❑ Alternates representing Partners at meetings.
- ❑ How to deal with absences?
- ❑ Additional Membership/Perspectives
- ❑ Will there be sub-committee meetings?
- ❑ Timeline/Work Plan
- ❑ How we integrate our work or expand the dialogue to the community or other entities?
- ❑ Outcomes
- ❑ One-Page SIG Overview (On Post-Retreat To Do List)
- ❑ Prevention Definition
- ❑ Outcomes
- ❑ Website
- ❑ Plan Implementation v. Pie In The Sky
- ❑ Id any other statewide collaborative planning groups and make sure at least one Partnership member is connected. If not, bring in.
- ❑ How do you want the WVPRC to help you do the work of this Partnership?
- ❑ Consider youth/adult partnerships and non-provider input.

Post-Retreat To-Do List

By March 26 Meeting		Complete
❑ E-Mail decision criteria to Kelli Jo.	Judy Crabtree	
❑ E-Mail descriptive info and org/projects to Tammy.	Partners	
❑ Compile retreat notes and send to Partners.	Michele B. & Kelli Jo	
❑ Compile SIG, Prevention, & GPRA, Fact Sheets and send to Partners.	Tammy	
❑ Develop visual of current system and send to partners.	Tammy	
❑ Review retreat notes, decision criteria, fact sheets, and system visual.	Partners	
❑ Compile summary of all cross-system groups and plans including outcomes and indicators.	Tammy & Steve Heasley	
❑ Review and compile issues/assets data (YRBS, PRIDE, etc) to be used to develop problem statement.	Michelle Foster, Steve Heasley, Angie Saunders, Tammy, Andy	
❑ Identify and review methods for determining “Where We Want to Be.”	Judith Russell, Joe Barker, Monica	
❑ Identify and review methods for comprehensive planning for “How We’re Going To Get There.”	Judith Russell, Joe Barker, Monica	
❑ Identify and review methods for collecting youth and community input.	Lisa Estep-Bruer, Don Chapman, Angie Saunders, Andrea Bowman, Kathy Paxton	
❑ Develop Risk & Protective Factors Overview.	Wayne	

At March Meeting		
<input type="checkbox"/> Discuss issues/assets data.		
<input type="checkbox"/> Discuss methods for collecting youth and community input.		
<input type="checkbox"/> Identify sub-committee to work on Partnership Policies & Processes including: Potential Partner/SIG Recipient Conflicts, Partner Meeting Absences & Alternates, Additional Membership, Sub-Committee,		
<input type="checkbox"/> Discuss “Where We Want To Go.”		
<input type="checkbox"/> Present Risk & Protective Factors Overview	Wayne	
After March Meeting		
<input type="checkbox"/> Develop SIG/Partnership Website	WVPRC	
<input type="checkbox"/> Compile County-Level Picture of Prevention System		
<input type="checkbox"/> Compile Cost Benefits/Cost of Failure Analysis		
<input type="checkbox"/> Discuss “How We Want To Get There”/Comprehensive Plan (Short Term & Long Term)	Partnership	
<input type="checkbox"/> Identify & Discuss Partnership Policies & Processes	Partnership Sub-Committee	

Miscellaneous Note: We need to truly value and support youth/adult partnerships and community input and listen to youth input.

Retreat Feedback

- Positives
 - Networking Time
 - Getting to work with people I usually don’t work with.
 - A Comfort Seeing Agency People Getting Along
 - Educational Component/Learning Experience...Interconnectedness
 - Commitment of Busy People
 - Appreciate Community Representatives
 - Exciting Having So Much Work To Do
 - Openness of Group
 - Did A Lot Of Work
 - Facility
 - Exercise Room
 - Food
 - Swimming Pool
 - Wine List
 - WVPRC Staff
 - Getting To Know Each Other-Good For People Who Didn’t Know Each Other
 - Process

- Facilitation
 - Connections Made Through Grouping
 - Positive Experience
 - Medicine Wheel
 - Emphasis on Value of Everyone
 - “I am leaving a rich man.”
 - “This makes my job easier.”
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- Changes We Would Make
 - Arrive the Night Before
 - Spend Less Time “Getting To Know Each Other” & More Time Actually Planning
 - Have Every Partner Present
 - Wouldn't Commute
 - Wouldn't Miss First Day
 - Have Post-Retreat Feedback Process (So Everyone Can Comment)
 - More Time-Discussions not long enough to get to the meat.
 - More Planning
 - Lots of Info...Can Be Overwhelming
 - Thursday, Friday