» Oregon Nicotine Treatment and Recovery:

Expert Panel Meeting



» Introductions

- Name
- Pronouns (optional)
- Organization
- Icebreaker question (optional): If you could play an Olympic sport, what would it be?



» Agenda

Topic	How	Lead	How long
Welcome/ introductions	Everyone shares their name, pronouns (optional) and organization	Beck	15 minutes
Project Grounding	Review project purpose and timeline	Beck	5 minutes
SUD Survey	Updates on survey Distribution plan Incentives	Beck	20 minutes
Assessment: population level data	Discuss population-level data in context of this project Review data sources Determine best variable(s) for NSDUH	Jill + Beck	20 minutes
Assessment	Update on other assessment questions	Jill	10 minutes
Wrap Up	Review next steps	Beck	10 minutes

Rede Group Team



JILL HUTSON chief executive officer



KARA SKELTON of counsel



BECK WRIGHT

evaluation lead +

senior consultant



ALEX MUVUA managing consultant + analyst



ERIN CHARPENTIER

design director



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OHA Team



KAITLYN LYLEhealth systems policy analyst



SARAH "SARI" HARGAND lead tobacco epidemiologist



Luci Longoria state policy, systems and environmental change manager



» Project timeline



SPRING 2021	FALL 2021	WINTER 2022	SUMMER 2022	WINTER 2022-23
 Convened expert panel (ongoing) Identified assessment questions 	 Expanded scope of project and timeline Conduct policy research/ literature reviews (ongoing) 	 Assess SUD facilities Assess CMHPs Conduct key informant interviews 	··· Conduct interviews/ focus groups with BH providers	 Make system recommendations for nicotine recovery and treatment services in Oregon

» Regular Meeting

Second Wednesday of each

month 12:00 to 1:30



» SUD survey progress

- Survey has been reviewed by sub-group of the Expert Panel
- Rede is refining distribution list with help from Nirmala and David (OHA); Licensing lists are primary source
- Kaitlyn is working with OHA leadership to share that the survey is happening



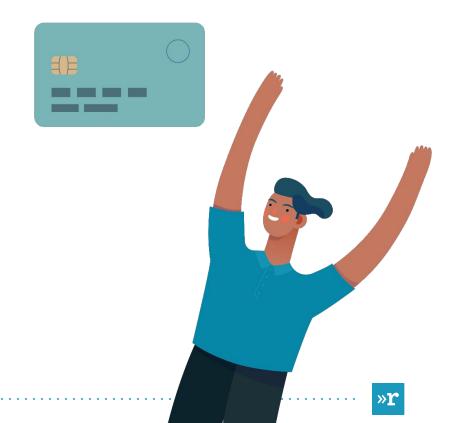
» SUD survey next steps

- Distribution "launch" is ontrack for February
- Likely to be distributed in waves as the recipient field is fine-tuned



» Incentives for survey

- \$15 gift card (coffee card?
 Visa gift card?)
- Free nicotine treatment and recovery training provided to staff
- \$XXX worth of nicotine replacement therapy to provide to clients onsite



» Distribution Details

Sent out by OHA - Tatiana Dierwechter to licensing distribution list

Link sent to: Association of Oregon Community Mental Health Programs and Oregon Council for Behavioral Health with request to forward

» Survey dissemination questions

Other ideas for disseminating survey link?



» Population-level Data

Behavioral Health and Tobacco Dependence



» What is population-level data and what is it good for?



Population-level (what it is)

For our purposes:

First hand data which are collected for an entire but still defined group of humans by census, vital registration, sample survey, administrative records, population register, etc.

Other levels:

Patient-level

School-level

Neighborhood-level

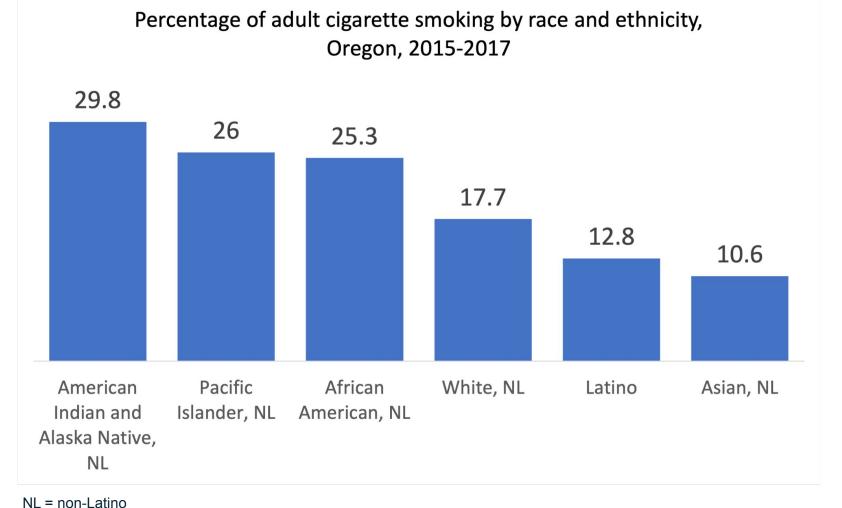
What is it good for?

When collected well, population-level data can allow us to make **population-level estimates** which we can then use to tell us important things about our population's health.

From there we can figure out the "why" behind health trends.

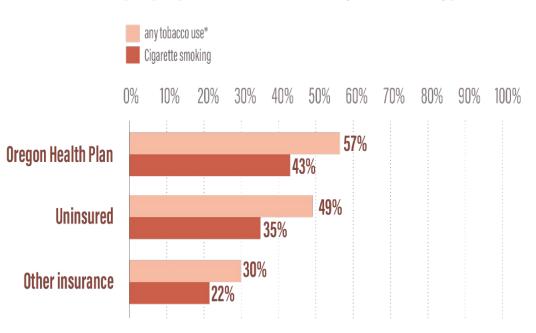
Once we know the **why,** we can try to **make changes** to improve health

For example:



Source: Oregon Behavioral Risk Factor Surveillance System Race Oversample, 2015–2017. Unpublished data

Percent of cigarette smoking or any tobacco use* among people poor mental health** by insurance type, 2018

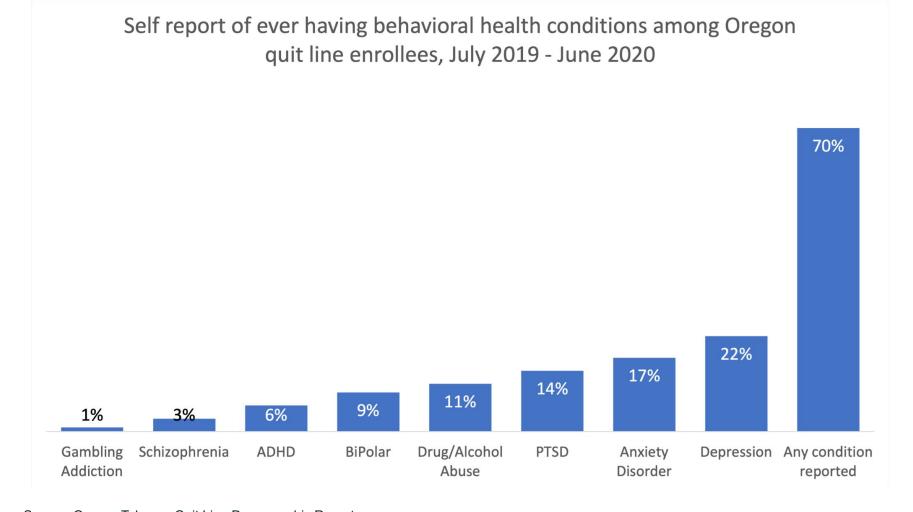


^{*} Any tobacco use includes cigarettes, little cigars, large cigars, hookah, electronic cigarettes or smokeless tobacco use.

Estimates reflect the self-reported experiences of those surveyed and are not generalizable to the Oregon population.

Data source: Oregon Behavioral Risk Factors Surveillance System

^{**} Poor mental health is having 14 or more days in the past 30 days where mental health was not good.



» Data Sources

- All Payers All Claims (APAC)
- Behavioral Risk Factor Surveillance System (BRFSS)
- Student Health Survey (SHS) (student-population)
- Oregon Tobacco Quit Line Data Dashboards (this is patient-population)
- National Survey on Drug Use and Health (NSDUH)

» All Payers All Claims (APAC)



- Includes most Oregon residents
- Administrative health care data on topics such as insurance coverage, health service cost, and utilization for Oregon's insured populations
- Includes medical claims, dental claims, pharmacy claims, payment amounts, member demographics, billed premiums, and provider information
- Any data related to substance use disorders is considered sensitive data and is restricted

» Behavioral Risk Factor Surveillance System (BRFSS): Who

- Adults (18+) in Oregon who have a telephone (one per household)
- Excludes individuals living in institutions, and anyone who needs assistance completing the survey (such as an intellectual or developmental disability)



» BRFSS: What

- Includes questions about modifiable risk factors for chronic diseases and other leading causes of death
- Annual, although some questions are asked on a rotating basis
- State and county level data
- Telephone survey

» BRFSS: Data relevant to BH & tobacco

- Alcohol use
 - Heavy drinking
 - Binge drinking
- Depression diagnosis
- Number of poor mental health
- Tobacco use
 - Smoking
 - Vaping
 - Smokeless tobacco

» Oregon Tobacco Quit Line Data Dashboards

- Provides demographic data on who is calling the Oregon tobacco quitline
- Unable to do any crosstabs of the data

» Quitline reports: Data relevant to BH & tobacco

Callers are asked if they have any of the following diagnosis:

- ADHD
- Anxiety
- Bi-Polar
- Depression
- Drug or alcohol abuse
- Gambling addiction
- PTSD
- Schizophrenia

» Student Health Survey (SHS)



- Oregon data source
- Data available for state and counties
- Launched in 2020 and will be conducted every other year
- Prior to 2020, student health data was collected through the Oregon Healthy Teens Survey, the Student Wellness Survey and the Youth Risk Behavior Survey

» SHS: Who

• 6th, 8th and 11th graders in Oregon public schools

» SHS: Data relevant to BH & tobacco

- Substance use (tobacco, e-cigarettes/vaping, alcohol, marijuana and prescription drugs)
- Emotional and mental health

Note: at this point, we cannot conduct crosstabs on this data set. 2020 SHS public use datasets will be available April 2022.

National Survey on Drug Use and Health (NSDUH): Who

- Approximately 70,000 people across US
- People age 12 and older
- Household addresses are randomly selected
- Includes residents of households and people in noninstitutional group settings (e.g., shelters, boarding houses, college dormitories, migratory workers' camps, halfway houses)
- Excludes people with no fixed address (e.g., people who are homeless and not in shelters), military personnel on active duty, and residents of institutional group settings, such as jails, nursing homes, mental health institutions, and long-term care hospitals

» NSDUH: What

- Sponsored by SAMHSA, conducted by RTI International
- National and state level data available
- Provides up-to-date information on tobacco, alcohol, and drug use, mental health, and other health-related issues
- Results are released each Fall
- Uses computer-assisted personal interviewing (was in person until Covid)

» NSDUH: Data relevant to BH & Tobacco

- Specific drug/alcohol use, abuse/dependence
- Tobacco use and dependence
- SUD treatment
- Mental health conditions
- SUD/Mental health comorbidities
- Mental health treatment (youth 12-17 and adults 18+)

» Diving deeper into NSDUH

- NSDUH is a very large data set
- Which indicator(s) are most important/relevant for this project?
 - Tobacco use vs. smoking
 - Substance use vs. dependence
 - All mental illness vs. serious mental illness
 - Any mental health treatment vs. outpatient vs. inpatient
 - Any substance use treatment vs. outpatient vs. inpatient

» Data Sources

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- National Survey on Drug Use and Health (NSDUH)

» Community-based Mental Health Programs

Mini-case studies about nicotine treatment integration

- Two to three Programs
- Ideally in cooperation with local health department; need to coordinate at the very least

Purpose

 Formative, gathering information to inform next stage of assessment

» Collaborative space

Collab Home | Q & A | Timeline | Meetings | Reports | Presentations Welcome to the Oregon BH-Nicotine Recovery Collab Space MEETING AGENDAS + SUMMARIES About the project TIMELINE Collaborators G AND A **Upcoming dates** REPORTS AND DATA PRESENTATIONS + VISUALIZATIONS

» Next steps

- Disseminate survey
- Analyze NSDUH data

