Community Health Improvement Plan & Implementation Strategy Report

2018

Grand Forks Public Health

Altru HEALTH SYSTEM
COMMUNITY HEALTH IMPROVEMENT PLAN & IMPLEMENTATION STRATEGY REPORT

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Introduction

The 2016 Community Health Assessment was a joint effort led by Altru Health System and the Grand Forks Public Health Department and was approved by our governing bodies in September and October of that year. Our two organizations have a history of collaboration to improve community health. Together, we engaged multiple partners to conduct the assessment, which provides information on health issues, status, and needs and identifies areas for improvement. Our assessment work provides the backbone for our Community Health Improvement Plan & Implementation Strategy Report.

Altru Health System

Altru Health System is a community-owned, integrated system with an acute care hospital, a rehabilitation hospital, more than a dozen clinics in Grand Forks and the region, and large home care and outreach therapy networks. We employ more than 200 physicians and over 4,000 staff. We serve the approximately 224,000 residents of a 17-county region as shown in the map below.

Altru’s Service Area
Grand Forks Public Health Department

The Grand Forks Public Health Department provides services to the City and County of Grand Forks, North Dakota. We believe in creating a culture in which all people have the means and the opportunity to make choices that lead to the healthiest lives possible. We facilitate policy, system and environmental changes that are supported by businesses, government, individuals, and organizations all working together to foster healthy communities and lifestyles.

The Grand Forks Public Health Department is committed to:

» promoting healthy environments and lifestyles  
» preventing disease  
» building community resilience through preparedness  
» assuring access to health service

Grand Forks Public Health Department's Service Area

[Image of a map showing the service area of the Grand Forks Public Health Department]
**Assessment Methodology**

Leadership from Altru and Grand Forks Public Health agreed to adopt the process from the Association for Community Health Improvement (an American Hospital Association affiliated group) for our community health assessment. The diagram below shows the six steps that comprise the process.

![Six Step Community Health Assessment Process](image)

Our Community Health Needs Assessment report documents steps 1-5 of the process. This Improvement Plan & Implementation Strategy report will address step 6.

**Priorities**

As noted in our Community Health Needs Assessment report, we worked with a community-based Advisory Committee to conduct our assessment. (Please see Attachment One for a list of organizations represented by this group.) This group was instrumental in every step of the process. They also established the purpose for our assessment which was to “improve the overall health of the community by focusing on factors that promote health and wellness (versus treating disease).” After reviewing primary and secondary data, the Committee provided input for the priority setting process and ultimately agreed that the top five priority areas for improvement should be as follows:
1. Improve access to behavioral health services, including addiction treatment and counseling
2. Reduce incidence of prescription and illegal drug abuse
3. Reduce the rate of obesity
4. Reduce the incidence of binge drinking and alcohol abuse
5. Improve care coordination and access to health care

Committee members approved the following criteria to guide them during the prioritization process:

» The burden, scope, severity, or urgency of the health need
» The estimated feasibility and effectiveness of possible interventions
» The health disparities associated with the need
» The importance the community places on addressing the need
» The community resources already allocated to addressing the need
» The connection to the purpose of the assessment developed by the Advisory Committee: Improve the overall health of the community by focusing on factors that promote health and wellness (versus treating disease)

Improvement Planning/ Implementation Strategy Development

After approval of the Community Health Assessment, the Advisory Committee met and conducted some initial planning around the priority areas. The group discussed ideas for how we will measure our success in each priority area and existing community resources that could be leveraged to help with improvement.

A smaller committee comprised of individuals from the following organizations committed to work on the ongoing improvement planning/implementation strategy development.

» Altru Health System
» Grand Forks Public Health Department
» Grand Forks Substance Abuse Prevention Coalition
» Polk County Public Health
» Quality Health Associates of North Dakota

Working Document 12.10.18
The next section—Step 6: Planning for Action and Monitoring Progress—represents the work of this group. This will be an ongoing, working action plan for this smaller committee and the overall Advisory Committee. Additional implementation activities will be added as they are developed; completion dates will be added as activities are concluded. Updates will be provided annually to key stakeholders to document progress.

**Step 6: Planning for Action and Monitoring Results**

**Priority Area: Behavioral Health Services**

**Background**
The state of North Dakota commissioned a new Behavioral Health Report which was released in 2018. The report provided updated from 2015 which stated that many challenges facing North Dakota are self-imposed such as choosing a poor essential health benefits package for Medicaid, refusing to spend state funds on services and not applying for Medicaid waivers to provide services to those with chronic illness. Workforce shortages are debilitating on the state and local level, particularly in the area of addiction treatment.

The recommendations in the report served as a basis to inform the Interim Human Services Committee’s work to recommend policy initiatives for the 2019 legislative assembly. Public providers of behavioral health services report difficulty filling open positions and clients experience long waits for assessment and therapy across providers. In the Community Health Assessment for Polk and Grand Forks County increasing services for behavioral health conditions was identified as a priority area in both the focus groups and community surveys. The University of North Dakota has reported increases in utilization of the counseling center for behavioral health related conditions in their student population and Altru Health System reports that frequently their psychiatry and behavioral health services are operating at capacity. All organizations report challenges with recruitment of psychiatrists and other mental health providers.

The good news is that there is greater effort to integrate behavioral health into primary care and public health and incremental increases in services is being realized. Valley Community Health Centers (VCHC) has established an integration project and offers open access appointments for behavioral health. Northeast Human Service Center (NEHSC) offers walk-in drug and alcohol assessments two days per week, and the Grand Forks Public Health Department opened a withdrawal management (social detox) center in 2016 filling a gap that has existed for more than 20 years. Red River Behavioral Health (RRBH) offers a full array of behavioral health, medical detoxification, and addiction services. RRBH also offers a robust continuing education program for behavioral health providers. Several of these organizations serve residents from the region which includes both Grand Forks County and Polk County. The Northwest Mental Health Center is the governmental behavioral health provider in Polk County.
Consistent with national trends, law enforcement agencies report that they have increased their response to suicide attempts and suicide ideation. The Altru TEARS program has received funding sufficient to hire a coordinator and significantly increase suicide prevention and response activities throughout the region.

The 2018 County Health Ranking Data shows that residents in both Grand Forks County and Polk County experience “poor mental health days” at a rate that is lower or the same as the top U.S. performers at 3.1 for both counties and further, the County Health Rankings report that there is a 370:1 ratio of population to mental health providers in Grand Forks County and a 510:1 ratio in Polk County, which are worse than the top U.S. performing counties, but both have improved in the past year. Local indicators and anecdotal reports from community residents and stakeholders indicate a demand for services that exceeds capacity. Therefore, monitoring of these indicators is warranted, to determine if this is improving.

Alignment with State or National Initiatives
There is a statewide effort called the Behavioral Health Stakeholders that has held periodic meetings to address four priority areas for improving the behavioral health system in North Dakota. The priority areas are: 1) Workforce 2) Children and Youth Mental Health 3) Adult Mental Health and 4) Access to Drug and Alcohol Treatment Services. Mental Health First Aid is a national initiative that is training laypersons to recognize signs and symptoms and help people to access behavioral health services when needed. Coverage for mental health conditions and addiction treatment in all insurance plans is currently included in the Affordable Care Act, yet parity is not fully realized.


Policy Implications – State
The ND Behavioral Health Stakeholders group has developed the following policy goals for the ND Legislature: 1) Expand the behavioral health workforce; 2) Adequately fund public behavioral health programs; and 3) Create an integrated system of care. Local efforts are beginning to align with this agenda. Additional policy goals would be to ensure that patients ages 21 – 64 with ND Medicaid coverage can receive services at all residential treatment facilities, and expansion of prevention efforts at the community level.

Policy Implications – Federal
Opportunities for Medicaid Institutions for Mental Diseases (IMD) exclusions to allow improved coverage of services at all residential treatment services larger than 16 beds.

Support for behavioral health services as an essential benefit in health insurance coverage should be maintained.
**Owner/Lead Agency or Group**
There are multiple stakeholders in the community addressing behavioral health and addiction issues. There is a need to coordinate efforts among the various groups so that ownership can be assigned to specific objectives. An inventory of groups addressing behavioral health in the region is located in Attachment Two.

| Goal: Improve access to behavioral health services, including addiction treatment and counseling. |
|---|---|---|
| **Objective 1: By 2019, decrease the incidence of poor mental health days reported by residents to 2.7** |
| Performance Measure: Poor mental health days as reported in County Health Rankings (Poor mental health days in past 30 days) | Baseline: Grand Forks County: 3.1; Polk County: 3.1 | Target: 2.7 |

<table>
<thead>
<tr>
<th>Implementation Activities</th>
<th>Responsible Party</th>
<th>Progress to Date</th>
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<tbody>
<tr>
<td>Improve access to integrated behavioral health services</td>
<td>Valley Community Health Centers, Altru Health System, Red River Behavioral Health System</td>
<td>VCHC implemented screening and behavioral health services in primary care (2017). Recognized by CMS as a model program. VCHC transitioned to Epic EHR allowing for better care coordination. VCHC has 7 UND PhD interns providing behavioral health services. Red River Behavioral Health System has increased capacity for inpatient care. Altru has reorganized behavioral health services. Behavioral Health Integration and Educational session provided for GF Community Partners (Feb. 26, 2018)</td>
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<td></td>
<td>Quality Health Associates of ND and BCBS of ND</td>
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<td>Increase the number of community residents who are trained in Mental Health First Aid</td>
<td>Northwest Mental Health Center in Polk County communities, Altru, GFPHD, City County Health, Blue Cross Blue Shield Foundation, TEARS, UND, Polk County Schools, and Northwest Mental Health Center</td>
<td>2,957 in ND; 14,686 in MN as of 2018</td>
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<td>Provide suicide prevention and awareness activities.</td>
<td>Mental Health First Aid trainer certification course sponsored in Grand Forks November 5-9, 2018. Altru raised $410,000 for the suicide prevention program TEARS. This has enhanced the program’s activities throughout 2018 as follows: <strong>Education/Outreach:</strong> - February 20th: Hosted a session of Sources of Strength at Community HS with GFPD, Altru social workers, and GFPS teachers in attendance (15 total) - 5 presentations/booths at local events (approx. 100 attendees) - 1 Mental Health First Aid for Youth session March 2018 (20 attendees) - 2 Community events: Panel discussion on mental health at Calvary Lutheran Church and the Ripple Effect co-hosted by Prairie Harvest - Added a resources page to altru.org/tears website for each high risk demographic <strong>Survivor support:</strong> - Survivor grief kits: provides a passive postvention by funeral home employees. The kit contains a grief book as well as local mental health resources. It also contains information about the TEARS survivor support program.</td>
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Incorporate depression screening into primary care visits and substance use treatment programming.

Increase the number of people who receive substance use disorder treatment and support.

Valley Community Health Centers, Altru Health System, Northeast Human Service Center, UND College of Nursing Professional Disciplines

Northeast Human Service Center, Red River Behavioral Health, Valley Community Health Centers, UND Northern Prairie Community Clinic, Agassiz Associates, Face it TOGETHER, Riverview Recovery and other private providers.

Robust SBIRT training was offered in 2017; no new training was offered in 2018. The Addiction Technology Transfer Center (ATTC) located at UND has focused on SBIRT for allied health providers. SBIRT training is included in opioid grants in MN.

NEHSC started open access appointments in June, 2017. This has improved access to care and NEHSC reports approximately 1000 clients have accessed care in the first year representing more than 100 appointments per month. NEHSC has established three work teams that all have a licensed addiction counselor assigned and additionally are providing an LAC at LaGrave on First.

From January – June 20, 2018, there were 350 admissions to the Grand Forks Withdrawal Management Center representing 125 unique clients. During January – December, 2017, there were 483 admissions representing 179 unique clients.

Engagement in treatment remains a challenge. Face it TOGETHER began peer support counseling in April and has established an office in Grand Forks.

Group. We have currently given kits to 3 local funeral homes with more to be given out in July. 1 grief kit has already been given out to survivor family by funeral home.
Additional activities include: expansion of services at the GF County Correctional Center through Agassiz Associates, greater utilization of SUD vouchers. Vivitrol is now available and more accepted.

**Objective 2:** Reduce the number of Altru Hospital Emergency Room visits for addiction/mental health issues by 5%.

Performance Measure: ER visits with diagnosis codes related to addiction and mental health
Baseline: TBD
Target: TBD

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<th>Implementation Activities</th>
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<tbody>
<tr>
<td>Provide a path for direct admission to services without an emergency room visit.</td>
<td>Altru Health System</td>
<td>Path for direct admission available now at Altru</td>
</tr>
<tr>
<td>Increase the availability of inpatient/residential and outpatient behavioral health and addiction services in the community.</td>
<td>Red River Behavioral Health, Altru Health System, Centre Inc., Agassiz Associates</td>
<td>Altru inpatient unit operational at 23 beds RRBH is operating at full capacity. Agassiz Associates has expanded their services and now accepts the SUD voucher.</td>
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Priority Area: Prescription and Illegal Drug Abuse

Background
The issue of prescription and illegal drug abuse is a growing public health problem in both the United States and regionally. Drug related deaths are now the leading cause of death in the U.S. for certain age groups, surpassing traffic accidents. Communities in North Dakota initially experienced the threat of illegal drug abuse in 2012 and the problem has grown exponentially in the next five years. Altru Health System Prescription and Synthetic Drug Abuse Committee was formed in May, 2015, following initial meetings conducted by the law enforcement community in response to several high profile overdose deaths in the community. Efforts were aimed at addressing prescription and synthetic drug abuse in Grand Forks County, ND. Altru had a pain management working group for a few years previously that focused on prescribing practices, reporting to the prescription drug monitoring program (PDMP), and community drug take back programs. Mayor Brown and City Council Members initiated a Call to Action which hosted a community forum and targeted follow up actions. All of these efforts had measurable results in reducing unnecessary opioid prescriptions and reducing the availability of prescription drugs in the community, however overdoses remain high and deaths from opioid overdoses continue. The Grand Forks Public Health Department received an Opioid State Targeted Response Grant in late 2017, and since that time numerous activities have been initiated to mount a response to this public health concern. An infographic describing the activities is available in Attachment Three.

Alignment with state or national initiatives
There are both state and national initiatives related to this priority area including: recent legislation passed by Congress (Cures Act) SAMSHA initiatives, and the Stop Overdose prevention campaign in North Dakota. The First Lady of North Dakota established a statewide campaign to reduce the stigma associated with addiction, has hosted two annual Recovery Reinvented statewide events and formally established the office of Recovery Reinvented in the Governor’s Office. Healthy People 2020 has several objectives related to substance abuse screening and treatment, and non-medical use of prescription and illegal drugs by both youth and adults.

Source/ Evidence-Base
County Health Ranking measurements for Grand Forks County and Polk County are now available to measure progress on overdose deaths. A comprehensive report is available that measures the impacts of opioid abuse from several local sources. This document was updated in 2017 and 2018. Hospital data provides the number of admissions to the emergency department for overdose incidents and also other opioid related diagnoses.

Policy Implications
There are a number of related policy implications that will assist in reducing the incidence of drug overdoses as outlined below:
1) Increase the availability of naloxone in the community
2) Advocate for funding and insurance reimbursement for medication assisted treatment programs
3) Advocate for access to treatment within correctional settings and/or directly after release from jails and prisons
4) Maintain health care coverage options that include behavioral health benefits (i.e. expanded Medicaid and Marketplace plans)

Additionally, there is a need for public education to reduce the stigma of addiction through discussion of substance use disorder as a chronic disease. Law enforcement efforts to educate the public about immunity laws can help to increase the number of people who survive overdoses.

**Owner/Lead Agency or Group**
There are a number of groups working on various elements of this health concern including the Community Partners – Committee on Prescription and Synthetic Drug Abuse led by Altru Health System, the Call to Action and the Substance Abuse Prevention Coalition.

The Substance Abuse Prevention Coalition has a focus on prevention activities that can impact the outcome of this priority area through education and policy activities.

A complete inventory of groups addressing behavioral health and addiction is included in Attachment Two.

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**Goal: Reduce the incidence of prescription and illegal drug abuse**

**Objective 1: By 2019, reduce drug overdose deaths to zero.**

Performance Measure: Drug overdose deaths per 100,000 as reported in County Health Rankings
Baseline: 2017 Grand Forks County: 8; Polk County: 17
2018 Grand Forks County 11; Polk County 11
Target: 0

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<th>Implementation Activities</th>
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<tr>
<td>Drug Take Back events held on March 22, June 11, and September 11, 2018.</td>
<td>Altru Health System, Safe Kids Coalition, and the Grand Forks County Sheriff’s Department, SAPC</td>
<td>2018: 794 pounds</td>
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| Increase the availability of naloxone in community settings and for family members of those at risk of overdose. | Pharmacies, schools, health care organizations, GFPHD, GF Fire Department | GFPHD received Opioid STR Grant August 2017
Standing orders for naloxone distribution signed by Public Health Officer
GFPS authorized naloxone availability at middle and high schools
Inspire pharmacy has free doses available to the public; five other area pharmacies have naloxone available without a prescription.
Meetings have been held with UND to make naloxone available on campus.
Through the Opioid STR grant, more than 450 doses of Narcan have been distributed and numerous trainings on overdose response have been held. Naloxone is now available in multiple public locations and with all law enforcement agencies in Grand Forks County.
GFPHD sponsored a public event on opioids with Blue Cross Blue Shield on The Chamber sponsored a lunch and learn on the topic of opioids and its impact on employment.
Quality Associates convened District 4 Pharmacy Association to discuss role in community education. Opioid educational have been held by webinar. |
<p>| Provide community education on naloxone | Pharmacies, District 4 Pharmacy Association, GFPHD, Quality Associates | |</p>
<table>
<thead>
<tr>
<th>Provide community education on immunity laws</th>
<th>Grand Forks and East Grand Forks Police Departments</th>
<th>Polk County has held three panel discussions with information on immunity. Launched in early 2018 to address the opioid epidemic, Project ECHO is considered the “next step” in support of continued education for North Dakota providers, integrating with the Champion Prescribers initiative. Included topics:</th>
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<tr>
<td>Project ECHO</td>
<td>UND School of Medicine and Health Science</td>
<td>• Introduction to Opioid Use Disorder</td>
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<tr>
<td></td>
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<td>• Risk Reduction: Overdose Prevention and Management of Prescribed Opioids</td>
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<td></td>
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<td>• Adverse Childhood Experiences (ACEs) and Addiction</td>
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<td>• Introduction to Motivational Interviewing</td>
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<td>• Screening, Brief Intervention, and Referral to Treatment (SBIRT)</td>
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<td>• Medication Treatment for Opioid Use Disorder</td>
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<td></td>
<td>• Effective Team-Based Care for OUD (with focus on Nurse-led model) + Care Coordination and Addressing Social Determinants of Health</td>
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### Objective 2: By 2019, reduce the number of hospital admissions for drug related overdoses by 50%.

Performance Measure: Altru Hospital admissions for drug related overdoses  
Baseline: 410 admissions (2016); 345 admissions (January – September 2017)  
Target: 205 or fewer admissions

This indicator was refined in 2018 to exclude non-opioid overdose admissions – new information is as follows:  
2016 – 63; 2017 – 53; 2018 – 17 (through first two quarters)  
New Target:  50% of 2018 total

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<th>Implementation Activities</th>
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<tr>
<td>Continue education in school settings on the dangers of opioids, heroin and other drug abuse concerns</td>
<td>Grand Forks Public Schools, East Grand Forks Public Schools, Law Enforcement</td>
<td>Education in GFPS continued this academic year. Opioid panels were held in Crookston and Erskine schools.</td>
</tr>
<tr>
<td>Increase availability of treatment programs specific to opioid addiction</td>
<td>Northeast Human Service Center, Red River Behavioral Health, Valley Health</td>
<td>Medication assisted treatment now available at VCHC and Ideal Options as an outpatient program. Great Plains QIN provided series of webinars on safe prescribing, PDMP, and opioids, take back programs.</td>
</tr>
<tr>
<td>Continue efforts on safe prescribing and expand to dental practices</td>
<td>Altru, Call to Action, Quality Associates, Community Partners, Essentia Health, VA providers</td>
<td>Altru provides education on prescribing to providers. Also had a system change to generate OTP agreements as part of the PDMP (prescription drug monitoring program). One Rx program was launched for pharmacies to receive education on safe prescribing</td>
</tr>
</tbody>
</table>
**Objective 3: By 2019, increase the number of providers/clinics in Grand Forks and Polk Counties who offer Medication Assisted Treatment from zero to two.**

Performance Measure: Availability of Medication Assisted Treatment as reported by SAMHSA and provider practices.
Baseline: 3
Target: 6

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<tr>
<th>Implementation Activities</th>
<th>Responsible Party</th>
<th>Progress to Date</th>
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<tr>
<td>Provide education to providers on Medication Assisted Treatment (MAT) for opioid use disorder</td>
<td>Valley Community Health Centers, Altru Health System, GFPHD, RRBH, UND SMHS</td>
<td>VCHC has two DEA waivered providers and one in the process of obtaining that status. Ideal Options has one provider and they have opened an office in Grand Forks.</td>
</tr>
<tr>
<td>Sponsor MAT education for addiction counselors and substance abuse treatment professionals</td>
<td>Grand Forks Public Health, Red River Behavioral Health, UND Center for Rural Health</td>
<td>Project ECHO began in early 2018 sponsored by UND Center for Rural Health. MAT 101 Sponsored by RRBH on May 17, 2018 with support from the Opioid STR grant. More than 100 participants attended.</td>
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<tr>
<td>Project ECHO is providing education and support to providers on addiction treatment for opioid use disorder.</td>
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<td>Seminar held on November 9, 2018, at UND with MAT providers from St. Gabriel’s in Little Falls, MN. Total in-person and on-line attendance was 38.</td>
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Priority Area: Obesity

Background
Obesity was identified as a priority area in the 2013 Community Health Assessment and again in 2016. County Health Ranking data show that 30% of adults in Grand Forks County and 34% of adults in Polk County are obese with a BMI (body mass index) of 30 or greater.

Private and community groups have been working to raise awareness of the issue, steer our communities toward prevention, and help those who are obese or overweight improve their health by losing weight. Altru Health System offers a comprehensive Weight Management Program to help individuals reach their weight loss/health improvement goals. Altru also offers Healthy and Fit Kids and Families programming to help youth achieve weight loss and build the family support system to sustain the healthy changes necessary for long-term success.

Healthy Choices Greater Grand Forks is a community coalition aimed at reducing obesity. This group has worked with community partners to sponsor a walking challenge; post signs encouraging walking and biking, and encourages our community to make the healthy choice the easy choice. The group has worked to bring a Bike Share program to Grand Forks, supported efforts for community gardens, developed an obesity resolution that was approved by the Grand Forks Board of Health and Altru Health System’s Board of Directors, and supported the Grand Forks Metropolitan Planning Organization in their work towards a Complete Streets policy. Healthy Choices is also involved in a Diabetes Prevention Community Engagement program through the U.S. Department of Health and Human Services, Health Resources Services Administration.

A local measurement for childhood obesity has not been determined yet. The committee will work to establish a meaningful metric that can be tracked over time. Please note that any activities established in the community to impact adult obesity will also have a role in reducing the rate of childhood obesity.

Alignment with State or National Initiatives
There are many initiatives across the country addressing the obesity epidemic. As an example, the Centers for Disease Control and Prevention’s Division of Nutrition, Physical Activity, and Obesity (DNPAO) supports the nation to establish sustainable programs to improve dietary quality, increase physical activity, and reduce obesity and overweight. DNPAO funds and works with state health departments through a cooperative agreement (State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health program). 2016 reports for North Dakota and Minnesota highlight the work done in each state through this cooperative agreement. Each state has worked on the following activities during the first two years of the program.
North Dakota
- Provided 25 early care and education providers with technical assistance (TA) on Let’s Move! Child Care (LMCC). A trained consultant visits each provider, completes the LMCC checklist with facility staff, and helps identify one nutrition and one physical activity goal.
- In partnership with the Comprehensive Cancer Program, provided TA to three communities to implement worksite wellness strategies, including increasing worksite physical activity.

Minnesota
- Updated breastfeeding webpages to include guidance and technical assistance for maternity centers, workplaces, and health departments to be recognized as “breastfeeding friendly.”
- Delivered Coordinated Approach to Child Health Early Childhood training-of-trainers to 15 Statewide Health Improvement Program grantees and child care trainers to help increase physical activity in early care and education settings.
- Reached an agreement to implement healthy vending guidelines in state agencies.
- Launched the development of Minnesota Pedestrian System Plan in partnership with the MN Department of Transportation. The plan will include assessing pedestrian needs and challenges, developing recommendations for new projects, policies, and programs that would improve the pedestrian environment, and clarifying the roles and responsibilities of partners involved with creating better pedestrian environments in Minnesota. As a part of the plan, a background document regarding the pedestrian environment in Minnesota was published, a 30-person project advisory committee with broad stakeholder representation was created, and a community engagement toolkit to collect statewide input was disseminated.

Source/ Evidence-Base
https://www.cdc.gov/obesity/strategies/index.html

Policy Implications
There are several related policy implications that will assist in reducing the rate of obesity:
1) Adopting a Complete Streets policy for Greater Grand Forks that will make it easier for residents to bike and walk to their destinations versus driving.
2) Passing an Obesity Resolution to guide future decision making toward efforts that will support making healthy choices by default.
3) Supporting health in all policies to, again, guide future decision making so that the impact on our community’s health is always considered.

**Owner/Lead Agency or Group**
Every business or organization can be involved in efforts to reduce the rate of obesity in our community. Several are taking the lead: Altru Health System, Grand Forks Public Health, Healthy Choices Greater Grand Forks, Live Well Grand Cities, and NDSU Extension.

### Goal: Reduce the rate of obesity.

**Objective 1: By 2019, reduce the rate of obesity in adults by 10% of the baseline.**

| Performance Measure: Percent of adults with BMI >= 30 as reported by County Health Rankings |
| Baseline: Grand Forks County: 30%; Polk County: 34% |
| Target: Grand Forks County: 27%; Polk County: 30.6% |

#### Implementation Activities

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<tr>
<th>Activity</th>
<th>Responsible Party</th>
<th>Completion Date</th>
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<tbody>
<tr>
<td>Adopt an Obesity Prevention Resolution</td>
<td>Healthy Choices Greater Grand Forks, Grand Forks Board of Health</td>
<td>Adopted by the Grand Forks Board of Health on July 13, 2017. Adopted by the Altru Board on April 18, 2018.</td>
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<tr>
<td>Establish Community Gardens</td>
<td>Grand Forks Public Health, Polk County Public Health, Polk County Public Health/Polk-Norman/Mahnomen Statewide Health Improvement Partnership (PNM SHIP),</td>
<td>In 2018, the Grand Forks Community Garden on 4th Street was full. Thirteen gardeners actively participated.</td>
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<tr>
<td>Work toward healthy concession stand offerings for school and community activities</td>
<td>Healthy Choices Greater Grand Forks, Live Well Grand Cities, NDSU Extension/PNM SHIP</td>
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<tr>
<td>Increase the number of worksite policies that encourage healthy eating, physical activity, and breastfeeding</td>
<td>Healthy Choices Greater Grand Forks, PNM SHIP, GF Park District</td>
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<tr>
<td>Promote Altru’s Weight Management Program and Healthy and Fit Kids and Families</td>
<td>Grand Forks Public Health, Healthy Choices Greater Grand Forks, Partners for Healthy Community, PNM SHIP, Polk County Wellness Coalition, Healthier Fosston, Polk County Breastfeeding Coalition</td>
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<tr>
<td>Support and promote local Farmers’ Markets and Mobile Farmers’ Market</td>
<td>Altru Health System</td>
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<td>Healthy Choices Greater Grand Forks, Live Well Grand Cities, NDSU Extension, MN Extension, PNM SHIP, Polk County Wellness Coalition, Healthier Fosston</td>
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<td></td>
<td>Better Bites menu available at Grand Forks Hockey Arenas</td>
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<td>22 organizations have implemented policies as of December 2018.</td>
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<tr>
<td></td>
<td>In 2018, Altru’s weight management program served 37 patients. Healthy and Fit Kids and Families program had an additional 23. Monthly education at the schools reached 550 children with topics on mindfulness, stress reduction, healthy diets, and exercise in the schools and reaches 562 kids each month.</td>
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<td></td>
<td>Mobile market and 4th Street Market available in Grand Forks. EBT cards are accepted at these markets.</td>
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<tr>
<td></td>
<td>Both 2016 and 2017 Well Fed Classes were filled with 48 and 56 participants, including adults and children. 100% of participants reported an increase in their own and children’s daily intake of produce, and 88% agreed or strongly agreed they’ve</td>
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<tr>
<td>Initiative</td>
<td>Partners/Activities</td>
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<tr>
<td>Establish a Bike Share Program</td>
<td>Healthy Choices Greater Grand Forks, Live Well Grand Cities, Bike Crookston</td>
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<tr>
<td>Implement partnership with East Grand Forks</td>
<td>Altru Health System, PNM SHIP, EGF Parks &amp; Rec</td>
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</tr>
<tr>
<td>Parks to increase physical activity</td>
<td>Increase confidence in preparing fresh, local produce. Seven new and beginning farmers were featured through the trolley in 2017 and growing operations and vendors increased in 2018. The permitting process was approved by Grand Forks City Council on 4/23/18. We are currently waiting for vendors to apply. Altru staff presented educational sessions at the EGF Senior Center in January – June and September of 2018. Two workshops were presented at Campbell Library—Quick and Healthy Snack ideas (15 attendees) and Healthy Kids Workshop (60 attendees) Two community events were held—Get to know your Greenway in May and a Skate-A-Thon in October. Altru’s Sports Advantage opened a location at the EGF VFW and offers adult and youth/high school group training.</td>
<td></td>
</tr>
<tr>
<td>Adopt a Complete Streets Policy</td>
<td>Grand Forks Planning and Community Development Department</td>
<td></td>
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<tr>
<td></td>
<td>Complete Streets Policy Adopted by Grand Forks City Council on June 25, 2018</td>
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</tbody>
</table>
**Objective 2: By 2019, reduce the rate of obesity in children.**

Performance Measure: Percent of children with a BMI at or above the 95th percentile for their age.
Baseline: TBD
Target: TBD

<table>
<thead>
<tr>
<th>Implementation Activities</th>
<th>Responsible Party</th>
<th>Progress to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase the number of employers that have lactation support programs consistent with Healthy People 2020 goal of 38% (Baseline is 950 businesses in Grand Forks).</td>
<td>Grand Forks Public Health PNM SHIP, Polk County Wellness Coalition, Healthier Fosston, Polk County BF Coalition</td>
<td>To date, 44 agencies have adopted lactation policies, six were added in 2017 and four were added in 2018.</td>
</tr>
<tr>
<td>Train lactation counselors and childcare providers.</td>
<td>GFPHD</td>
<td>In 2018, 43 lactation counselors and 20 childcare providers received training.</td>
</tr>
<tr>
<td>Provide annual breastfeeding-friendly skills training.</td>
<td>Grand Forks Public Health Department, Grand Forks Public Schools, Healthy Choices Greater Grand Forks, PNM SHIP, Polk County BF Coalition Wellness Coalition, Healthier Fosston</td>
<td>In 2016, 70 people attended the Breastfeeding Skills Training. In 2017, 54 attended and in 2018 there were 10 participants.</td>
</tr>
<tr>
<td>Enhance efforts to support breastfeeding women.</td>
<td>Grand Forks Public Health, VCHC</td>
<td>Milk and Cookies, a breastfeeding support drop-in clinic, was started at VCHC in 2018.</td>
</tr>
<tr>
<td>Support implementation of healthy school lunch rooms through policies and design that promote the healthiest food choices throughout Grand Forks/Polk Counties.</td>
<td>Respective School Districts</td>
<td>Efforts are ongoing</td>
</tr>
<tr>
<td>Action</td>
<td>Collaborators</td>
<td>Results</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Adopt an Obesity Prevention Resolution</td>
<td>Healthy Choices Greater Grand Forks, Grand Forks Board of Health</td>
<td>Adopted by the Grand Forks Board of Health on July 13, 2017. Adopted by the Altru Board on April 23, 2018.</td>
</tr>
<tr>
<td>Establish Community Gardens</td>
<td>Grand Forks Public Health, Polk County Public Health, Healthy Choices Greater Grand Forks, Live Well Grand Cities, NDSU Extension/MN Extension/PNM SHIP/Polk County Wellness Coalition/Healthier Fosston Healthy Choices Greater Grand Forks, PNM SHIP, Grand Forks Park District</td>
<td>In 2018, the Grand Forks Community Garden on 4th Street was full. Thirteen gardeners actively participated.</td>
</tr>
<tr>
<td>Work toward healthy concession stand offerings for school and community activities</td>
<td>Healthy Choices Greater Grand Forks, Grand Forks Park District, PNM SHIP</td>
<td>Better Bites menu available at Grand Forks Hockey Arenas</td>
</tr>
<tr>
<td>Increase the number of organizations with policies that encourage healthy eating, breastfeeding and physical activity</td>
<td>Grand Forks Public Health, Partners for Healthy Community, Polk County Wellness Coalition, Healthier Fosston, Polk County Breastfeeding Coalition</td>
<td>22 organizations implemented policies as of December 2018.</td>
</tr>
<tr>
<td>Promote Altru’s Weight Management Program and Healthy and Fit Kids and Families</td>
<td>Altru Health System</td>
<td>In 2018, Altru’s weight management program served 37 patients. Healthy and Fit Kids and Families program had an additional 23. Monthly education at the schools reached 550 children with topics on mindfulness, stress reduction, healthy diets, and exercise in the schools and reaches 562 kids each month.</td>
</tr>
<tr>
<td>Support and promote local Farmers Market and Mobile Farmers Market</td>
<td>Healthy Choices Greater Grand Forks, NDSU Extension, MN Extension, PNM SHIP, Polk County Wellness Coalition, Healthier Fosston</td>
<td>Mobile market and 4th Street Market available in Grand Forks. EBT cards accepted at these markets. Both 2016 and 2017 Well Fed Classes were filled with 48 and 56 participants, including adults and children. 100% of participants reported an increase in their own and children’s daily intake of produce, and 88% agreed or strongly agreed they’ve increased confidence in preparing fresh, local produce. Seven new and beginning farmers were featured through trolley and have expanded growing plans for 2018. UND Nutrition and Dietetics students started a Farmers’ Market nutrition education program at the Grand Forks Farmers’ Market.</td>
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</tr>
<tr>
<td>Establish a Bike Share Program</td>
<td>Healthy Choices Greater Grand Forks, Bike Crookston</td>
<td>The permitting process was approved by City Council on 4/23/18. We are currently waiting for vendors to apply. Altru staff presented educational sessions at the EGF Senior Center in January – June and September of 2018. Two workshops were presented at Campbell Library—Quick and Healthy Snack ideas (15 attendees) and Healthy Kids Workshop (60 attendees) Two community events were held—Get to know your Greenway in May and a Skate-A-Thon in October.</td>
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<tr>
<td>Implement partnership with East Grand Forks Parks to increase physical activity</td>
<td>Altru Health System, EGF Parks &amp; Rec, PNM SHIP</td>
<td></td>
</tr>
<tr>
<td>Adopt a Complete Streets Policy</td>
<td>Grand Forks Planning and Community Development Department</td>
<td>Altru’s Sports Advantage opened a location at the EGF VFW and offers adult and youth/high school group training. A Complete Streets policy was adopted by the Grand Forks City Council on 6/25/18.</td>
</tr>
</tbody>
</table>

**Priority Area: Binge Drinking and Alcohol Abuse**

**Background:**
North Dakota historically ranks high in binge drinking and alcohol abuse. There is good news however, in that youth alcohol consumption has declined during the past few years. Several community groups have been established to address this topic and have achieved some significant outcomes in policy, education and advocacy.

The Substance Abuse Prevention Coalition (SAPC), Grand Forks Public Health Department, and Community and Campus Committee to Reduce High Risk Alcohol Use (CCC) completed working on the Grand Forks County Strategic Prevention Framework State Incentive Grant (SPF SIG) in September 2016 resulting in a comprehensive plan to reduce underage drinking and adult binge drinking. The project was considered successful; however, more work needs to be done. Please see Attachment Four for the 2018 Community Grand Project: Grand Forks County which shows the accomplishments of the Substance Abuse Prevention Coalition.

The CCC was successful at passing two local ordinances: 1) to outline social host responsibilities and 2) limiting extreme drink specials. Future potential policy initiatives include:

- Party Bus Regulations
- Liquor License Availability & Density
- Enforcement (i.e. Check-points)
- Healthy Entertainment Alternatives
- Restriction of Alcohol Service at Public, Family – Friendly Events
- Over Service Training
- Increasing Alcohol Taxes/ Cost
• Alcohol Compliance Checks
• Prevention Infrastructure

SAPC and its fiscal agent, Altru Health System submitted a grant proposal for the Drug Free Communities Grant on March 15, 2017. The goals of the proposal focus on reducing alcohol, marijuana, and prescription medication abuse among youth ages 18 and younger. Awards will be announced September 2017.

The CCC has recently conducted a study on the effects of adults drinking at youth sporting events and has presented the findings to the Grand Forks City Council and other community groups.

**Alignment with State or National Initiatives**
North Dakota First Lady’s Initiative on Addiction
ND Dept. of Human Services, Division of Behavioral Health [Behavioral Health Assessment](https://behavioralhealthassessment.nd.gov/)
SPF SIG Grant Report and Strategic Plan

**Source/Evidence-Base:**
The County Health Rankings has data on adult binge drinking rates and percentage of motor vehicle accidents are impacted by alcohol.

**Policy Implications:**
The policy implications are focused on changing the culture of alcohol consumption in our communities. A regulation for alcohol service on “party buses” is one area where attention is focused on the prevention of both underage drinking and also excessive consumption. Policies by local sports sponsoring organizations may be another area where Effects of Adults Drinking at Youth Sporting Events project receives attention with improved and strengthened policies and education for parents. The North Dakota Behavioral Health Assessment has a number of policy recommendations related to prevention, treatment and support for recovery in communities.

**Owner/Lead Agencies or Groups:**
Substance Abuse Prevention Coalition (SAPC), Call to Action, UND
**Goal: Reduce the incidence of binge drinking and alcohol abuse.**

**Objective 1: By 2019, reduce the percentage of adults who report binge or heavy drinking by 2 percentage points.**

Performance Measure: Percent of adults reporting excessive drinking as reported by County Health Rankings.
Baseline: Grand Forks County: 25%; Polk County: 23%
Target: Grand Forks County: 23%; Polk County: 21%

2018 County Health Rankings: Grand Forks County 26%; Polk County 22%

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<thead>
<tr>
<th>Implementation Activities</th>
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<th>Progress to Date</th>
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<tbody>
<tr>
<td>Continue public education campaigns</td>
<td>Grand Forks Substance Abuse Coalition, Polk County Drug Task Force, Polk County Toward Zero Deaths, PCHP, PNM Drug Free Communities Grant</td>
<td>Server training required for special event permits. Partnered with GF County Sheriff’s Department to provide web-based training for employees of liquor establishments in Grand Forks County.</td>
</tr>
<tr>
<td>Establish alcohol free environments at youth sporting events with education targeting parents</td>
<td>CCC, Youth sports organizations Park Districts, SAPC</td>
<td>No activity to report in 2018.</td>
</tr>
<tr>
<td>Promote policy action on party buses to reduce underage drinking and adult binge drinking</td>
<td>CCC, UND Committee on Student Use of Alcohol</td>
<td>No activity, City Attorney has draft ordinance available for review or action. More awareness and education activities are needed. Some harm reduction activities have increased such as ride sharing.</td>
</tr>
</tbody>
</table>
**Objective 2: By 2019, reduce alcohol impaired driving deaths to 25%.

Performance Measures: Percent of MVA deaths where alcohol was involved as reported by County Health Rankings.
Baseline: Grand Forks County: 29%; Polk County 38%
Target: 25%

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<tr>
<th>Implementation Activities</th>
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<tbody>
<tr>
<td>Toward zero deaths</td>
<td>Polk County Toward Zero Deaths, PCPH</td>
<td>No new activities to report</td>
</tr>
<tr>
<td>DUI Check points</td>
<td>Law Enforcement</td>
<td>Additional enforcement events held in 2018.</td>
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<tr>
<td>Saturation Patrols</td>
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<tr>
<td>Promote Responsible Beverage Server Training</td>
<td>Polk County Toward Zero Deaths, PNM DFC Grant, City of Grand Forks</td>
<td>Server training available at <a href="http://www.grandforksgov.com">www.grandforksgov.com</a></td>
</tr>
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</table>

**Objective 3: By 2019, decrease the percentage of students who currently drank alcohol (at least one drink of alcohol on at least 1 day during the 30 days before the survey) from 28% to 25% in Grand Forks Region and in Polk County (Polk County baseline and target TBD).**

Performance Measure: Percent of students reporting drinking alcohol
Baseline: Grand Forks Region: 28%; Polk County: TBD
Target: Grand Forks Region: 25%; Polk County: TBD

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<tr>
<th>Implementation Activities</th>
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<th>Progress to Date</th>
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</thead>
<tbody>
<tr>
<td>Apply for Drug Free Communities Grant to focus on reducing alcohol, marijuana, and</td>
<td>SAPC through Altru Health System</td>
<td>Drug Free Communities Grant received - $500,000 over four years.</td>
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<tr>
<th>Prescription medication among youth ages 18 and younger.</th>
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<tr>
<td>Continue prevention activities</td>
</tr>
<tr>
<td>SAPC Polk County Drug Task Force, Polk County TZD, PNM DFC Grant</td>
</tr>
<tr>
<td>Received $29,167 for substance abuse prevention activities from North Dakota Department of Human Services.</td>
</tr>
<tr>
<td>In 2018, CADCA Training held in January for youth and April for community leaders.</td>
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<tr>
<td>Parents Lead Campaign continued in 2017 and 2018.</td>
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<td>See Attachment Five for 2018 Grand Forks Youth Survey results.</td>
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**Priority Area: Care Coordination**

**Background**
For calendar year 2015, the Grand Forks community had a 13.1% higher rate of acute care utilization, including emergency room visits, observation stays, and inpatient hospitalizations*, than the North Dakota rate. Specifically, the Grand Forks community rate of inpatient hospitalizations* was 9.7% higher than the North Dakota rate (277.9 vs 250.8). Using the Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project’s (HCUP) 2014 average U.S. national inflation-adjusted cost per stay for all inpatient stays of $10,176, the difference in Medicare expenditure would be greater than $275,000 per 1000 Medicare beneficiaries.

Not all the problems associated with acute care utilization, including 30-day hospital readmissions, are the responsibility of community hospitals. Community-level weaknesses include transfer of information between providers and patients at the time of transition, a failure to assure patients and/or caregivers they can self-manage their condition during transition and a lack of standard processes to effectively manage the transition of the patient between settings. Socioeconomic factors, i.e., living alone, having unmet functional needs, lacking self-management skills, and having limited education are also important factors driving acute care utilization.³
Focus groups with new Americans, senior citizens, and people with disabilities as a part of the Community Health Assessment revealed concerns around care coordination or issues that can impact it. Themes included stereotyping and negative experiences with care, language issues/barriers, lack of care coordination and transportation issues.

To address these issues, there must be a focus on processes of care at a community level to engage providers and stakeholders across the continuum of care; not just the hospital. This includes home health agencies, dialysis facilities, skilled nursing facilities, pharmacies, physician offices as well as patients, families, payers and community stakeholders. This improved care coordination leads to better patient outcomes, overall satisfaction and reduces avoidable hospital admissions.

*per 1000 Medicare beneficiaries

Alignment with State or national initiatives
The Centers for Medicare and Medicaid Services’ (CMS) vision is to . . . transform the health care system into one that works every time, for every American. This transformed system aims to deliver better care, spend our health care dollars in a smarter way, and put consumers at the center of care to keep them engaged and healthy. The CMS Quality Strategy pursues and aligns with the broad aims of the National Quality Strategy:

- **Better Care**: Improve the overall quality of care by making health care more person-centered, reliable, accessible, and safe.
- **Smarter Spending**: Reduce the cost of quality health care for individuals, families, employers, government, and communities.
- **Healthier People, Healthier Communities**: Improve the health of Americans by supporting proven interventions to address behavioral, social, and environmental determinants of health, and deliver higher-quality care.

Two of the foundational principles of the CMS Quality Strategy is to implement integrated care across various health care delivery settings, including the development of effective linkages to community resources and encourage multidisciplinary, cross-sector learning communities that bring together clinicians, other licensed providers, persons and families, community health workers, urban planners and other community stakeholders.

Source/ Evidence-Base

**Policy Implications**

Policy implications include:

1) Establishment of consistent community coordination of care committee focusing on processes to strengthen and align transfer of care across the healthcare settings as well as community service and resource agencies.

2) Implementation of advanced care planning at a community level that will provide consistency in education, resources and standards of practice.

3) Community wide support of reinforcing the importance of healthcare coverage for individuals, ultimately reducing the number of uninsured individuals in the community.

**Owner/Lead Agency or Group**

Altru Health System in collaboration with Quality Health Associates of North Dakota (who serves as the Quality Improvement Organization (QIO) for North Dakota, striving to align state wide efforts with CMS Quality Strategies promoting better care, smarter spending and healthier people and communities)

**Goal: Improve care coordination and access to health care.**

**Objective 1: By 2019, reduce preventable admissions, ED visits, observation stays by 10%.**

Performance Measure: Quarterly rate of inpatient hospitalization, observation stay, and ED visits per 1000 Medicare beneficiaries

Baseline: Grand Forks County: 45/1000; Polk County: 44/1000

Target: Grand Forks County: 40.5/1000; Polk County: 39.6/1000
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<tr>
<th>Implementation Activities</th>
<th>Responsible Party</th>
<th>Progress to Date</th>
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<tbody>
<tr>
<td>Initiate Grand Forks Coordination of Care Committee</td>
<td>Altru Health System Quality Health Associates of North Dakota</td>
<td>No progress in 2018</td>
</tr>
<tr>
<td>Continue efforts to reduce readmissions.</td>
<td>Altru Health System</td>
<td>Several changes have been made to improve the discharge process per Altru’s Discharge Value Stream work:</td>
</tr>
<tr>
<td></td>
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<td>- Implemented consistent discharge folder in all inpatient units.</td>
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<td></td>
<td>- Implemented readmission predictive analytics in EMR.</td>
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<td>- Brought discharge appointment planning to patient’s bedside.</td>
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<td>- Created Med to Bed program.</td>
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<td></td>
<td>- Created standard work for CHF patients to be seen in the CHF clinic within two days of discharge.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Created standard work for utilization of Transitional Care visits. Increased from 56 visits in 2017 to 392 visits YTD in 2018.</td>
</tr>
<tr>
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<td></td>
<td>- Implemented Home Delivered Meals for patients who are at moderate to high risk for readmission. 60 seniors have utilized the program from initiation in April through September.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Developed standard work for sepsis response through a BPA (best practice alert) in EMR.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Increased use of “expected date of discharge” among hospitalists.</td>
</tr>
<tr>
<td>Initiative</td>
<td>Altru Health System, Grand Forks Senior Center</td>
<td>Altru pharmacists are at the GF Senior Center once a month and meet with seniors one-on-one to review medications (appropriateness, dosage, interactions, negative side effects).</td>
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</table>
| Initiate program to help seniors manage medications | Grand Forks Advanced Care Planning work group, Honoring Choices ND, Hospice of the Red River Valley | Provided community education on palliative care & advanced care planning  
- Promotion of National Healthcare Decisions Day  
- 2018 sponsored a community-wide social media campaign using #BeforeIDieND |
| Establish the Advance Care Planning Coalition to educate and promote completion of Healthcare Directives for 50% of patients accessing care in the Grand Forks Community | Area pharmacists & Quality Health Associates of ND | First Steps Training held in November of 2017 and October of 2018 to create larger number of educators in community.  
Created flyers to distribute to community informing of the coalition during 4th Quarter 2017  
Created cards with prompts to guide conversations in a consistent way across the community. Implemented February 2018 |
| Coordination of District 4 Pharmacists meeting to align efforts with Call to Action workgroups | | Met first quarter of 2018 |

**Objective 2: By 2019, decrease the number of uninsured individuals in each county by 2 percentage points**

Performance Measure: Percent of population under age 65 without health insurance as reported by County Health Rankings.  
Baseline: Grand Forks County: 10%; Polk County: 9%  
Target: Grand Forks County: 8%; Polk County: 7%
<table>
<thead>
<tr>
<th>Implementation Activities</th>
<th>Responsible Party</th>
<th>Progress to Date</th>
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<tbody>
<tr>
<td>Continue the HERO Program</td>
<td>Altru Health System</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Continue Point of Care enrollment</td>
<td>Valley Community Health Centers</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

**Objective 3: Decrease the hospital-wide all cause readmission rate to Altru Hospital to 10.5% by year-end 2017.**

Performance Measure: Percent of patients readmitted to Altru Hospital within 30 days of discharge  
Baseline: 11.6%; YTD September 12.1%  
Target: 10.5%

<table>
<thead>
<tr>
<th>Implementation Activities</th>
<th>Responsible Party</th>
<th>Progress to Date</th>
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</thead>
</table>
| Initiate Grand Forks Coordination of Care Committee | Altru Health System  
Quality Health Associates of North Dakota           | No progress in 2018                                    |
| Continue efforts to reduce readmissions.           | Altru Health System                                    | Several changes have been made to improve the discharge process per Altru’s Discharge Value Stream work:  
- Implemented consistent discharge folder in all inpatient units.  
- Implemented readmission predictive analytics in EMR.  
- Brought discharge appointment planning to patient’s bedside.  
- Created Med to Bed program. |
<table>
<thead>
<tr>
<th>Task</th>
<th>Location</th>
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<tbody>
<tr>
<td>Initiate program to help seniors manage medications</td>
<td>Altru Health System, Grand Forks Senior Center</td>
</tr>
<tr>
<td>Establish the Advance Care Planning Coalition to educate and promote completion of Healthcare Directives for 50% of patients accessing care in the Grand Forks Community</td>
<td>Grand Forks Senior Care Planning work group, Honoring Choices ND, Hospice of the Red River Valley</td>
</tr>
<tr>
<td>• Created standard work for CHF patients to be seen in the CHF clinic within two days of discharge.</td>
<td>Altru pharmacists are at the GF Senior Center once a month and meet with seniors one-on-one to review medications (appropriateness, dosage, interactions, negative side effects).</td>
</tr>
<tr>
<td>• Created standard work for utilization of Transitional Care visits. Increased from 56 visits in 2017 to 392 visits YTD in 2018.</td>
<td>Provided community education on palliative care &amp; advanced care planning</td>
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<tr>
<td>• Implemented Home Delivered Meals for patients who are at moderate to high risk for readmission. 60 seniors have utilized the program from initiation in April through September.</td>
<td>• Promotion of National Healthcare Decisions Day</td>
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<tr>
<td>• Developed standard work for sepsis response through a BPA (best practice alert) in EMR.</td>
<td>• 2018 sponsored a community-wide social media campaign using #BeforeIDieND</td>
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<tr>
<td>• Increased use of “expected date of discharge” among hospitalists.</td>
<td>First Steps Training held in November of 2017 and October of 2018 to create larger number of educators in community.</td>
</tr>
<tr>
<td>• Created flyers to distribute to community informing of the coalition during 4th Quarter 2017</td>
<td>Created flyers to distribute to community informing of the coalition during 4th Quarter 2017</td>
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</tbody>
</table>
Coordination of District 4 Pharmacists meeting to align efforts with Call to Action workgroups

Area pharmacists & Quality Health Associates of ND

Created cards with prompts to guide conversations in a consistent way across the community. Implemented February 2018

Met during first quarter 2018

Resources

Altru’s Corporate Development division and a team from Grand Forks Public Health have been co-facilitating the Community Health Assessment process. Both entities will continue to facilitate the process, coordinate activities where appropriate, and monitor progress per specific outcomes identified. Other community members will be involved as initiatives warrant.

Approval and Next Steps

This report will be shared for review and approval as follows:

» Altru Health System’s Board of Directors on December 17, 2018.
» Grand Forks Board of Health on January 11, 2019.

Upon approval by these bodies, the report will be available to the public as follows:

» An electronic copy will be given to each Advisory Committee member.
» An electronic file will be available on Altru’s website (www.grandforksgov.com/publichealth).
» A copy of the report will be available for review at the information desk located in Altru Hospital’s front lobby and at the front desk of Grand Forks Public Health Department at 151 South 4th Street.
» A copy of the report will be sent—electronically or via U.S. Postal Service—to anyone who requests it.
ATTACHMENT ONE | ADVISORY COMMITTEE MEMBERSHIP

In addition to Altru Health System and Grand Forks Public Health, individuals representing the following agencies/organizations made up the community-based Advisory Committee:

- Altru Health System
- Altru Family YMCA
- Community Violence Intervention Center
- Faith Community
- Global Friends Coalition
- Grand Forks Air Force Base
- Grand Forks City Council
- Grand Forks County Commission
- Grand Forks Fire Department
- Grand Forks Police Department
- Grand Forks Park District
- Grand Forks Public Health Department
- Grand Forks Public Schools
- Grand Forks Senior Center
- Lipp, Carlson, Witucki & Associates
- Northeast Human Service Center
- Polk County Public Health
- Quality Health Associates of North Dakota
- Third Street Clinic
- Valley Community Health Centers
- United Way
- University of North Dakota
- University of North Dakota School of Medicine and MPH Program
Behavioral health is a general term that encompasses the promotion of emotional health; the prevention of mental illnesses and substance use disorders; and treatments and services for mental and/or substance use disorders. (SAMHSA, retrieved from http://beta.samhsa.gov/grants/grants-glossary.) This list does not include behavioral health service providers.

**Altru Opioid Committee (Lynn Huot, Jennifer Burton, Altru)**
An inter-disciplinary team comprised of Altru leaders and physicians that seek to identify and reduce increased prescription drug abuse. Altru Health System has been active in revising policies and procedures internally to address the prescription drug abuse issue. Education and resources have been provided to Altru physicians to assist in managing the prescription drug/medication practicing patterns. Altru has partnered with the Grand Forks County Sheriff’s Department to create awareness within the community through its “Drug-Take Back” events.

**Call to Action (Pete Haga, Mayor’s Office)**
The Grand Forks City Council and Mayor’s Office established this broad coalition in 2017 to address the growing concerns regarding opioid use disorder and overdoses in the community. There are four committees working on priorities and they are: Prevention and Education, Treatment and Intervention, Recovery and Support, and Data and Communication. This group replaces the work of the Prescription and Synthetic Drug Abuse Community Committee, previously convened by Altru Health System. This group also serves as an advisory committee for the Opioid State Targeted Response Grant received by Grand Forks Public Health Department.

**Community Coordination Committee on Mental Health (Deb Davis, Randy Slavens, Northeast Human Services)**
A community coalition of health care providers, law enforcement, court system and human service providers who meet quarterly to problem solve community issues around mental health. The coalition also serves as a community platform to keep community stakeholders updated on mental health initiatives.

**Community Health Assessment (CHA) Advisory Committee (Audrey Lorenz, Altru & Debbie Swanson, Health Dept.)**
Altru conducted a Community Health Need Assessment in 2013 that drew from a wide-range of community stakeholders to identify the most pressing health needs in our community. Out of the top five priorities, access to mental health services was rated #2 and binge and excessive drinking was rated #3 in importance. The Advisory Committee has been expanded in 2016 to review data and conduct focus group interviews to update the Community Health Assessment. This work is a collaboration between Altru, the Grand Forks Public Health Dept. and the University of North Dakota Master of Public Health Program.
**Grand Forks Substance Abuse Prevention Coalition (SAPC) (Bill Vasicek, Altru)**
Community-based coalition comprised of many key individuals and agencies including: Altru, UND, GF Public Schools, GF Youth Commission, GF Police Department, GF Public Health department and others, that have come together to reignite the mission of a group formerly known as “The Answer.” SAPC holds monthly meetings with the goal of reducing substance abuse by building community capacity and supporting and/or initiating substance abuse prevention interventions. The Grand Forks Public Health Department has been awarded various prevention grants and subcontracts this funding to Altru to carry out the activities through the Substance Abuse Prevention Coalition.

**Healthy UND Coalition (Karina Knutson, UND)**
The coalition is made up of over 200 UND students, faculty, and staff who work in partnership to promote healthy lifestyle choices by enhancing awareness, building skills, changing social norms, and creating a healthier environment. Healthy UND’s overarching principle is to emphasize all seven dimensions of wellness including: physical, emotional, social, spiritual, occupational, intellectual, and environmental. Healthy UND 2020 priorities include alcohol and other drug use/abuse, mental health, nutrition, physical activity, and healthy relationships/social skills. Ongoing Healthy UND priorities include tobacco prevention, support for the Wellness Living Learning Community, Diversity, and Worksite Wellness.

**Healthy UND Commission on Student Use of Alcohol and Other Drugs (AOD) (Jodi Ramberg, UND)**
The Commission guides and coordinates UND’s efforts to reduce negative consequences associated with high-risk alcohol and other drugs use among students through a comprehensive approach that involves individual and environmental strategies. Duties and responsibilities include regularly reviewing data to identify patterns and trends in student behavior; developing, implementing, and evaluating a long-range strategic plan that aims to address student behaviors related to alcohol and other drug use and is based on evidence-informed practices; conducting a review of the UND’s alcohol and other drug programs every other year to determine their effectiveness; and providing input on the biennial report to the Department of Education.

**Safer Tomorrows (Julie Christianson, CVIC)**
Safer Tomorrows is one of eight projects in the nation to be awarded a grant from the U.S. Department of Justice Defending Childhood Initiative to address child exposure to all forms of violence in Grand Forks County. More than 40 organizations, public and private, urban and rural, secular and faith based, are collaborating to make children's lives safer. The project works closely with schools on violence prevention efforts and offers in-school interventions, as well as evidenced-based therapies proven to be effective for addressing trauma such as domestic and dating violence, sexual assault and bullying that are available free of charge through Community Violence Intervention Center.
Social Detox Advisory Committee (Debbie Swanson, Curtis Scanson, Grand Forks Public Health Department)
Several groups and community stakeholders collaborated to establish a withdrawal management (social detox) center at 201 South 4th Street, operated by the Grand Forks Public Health Department. Funding for the operation of the center is shared between Altru, the City of Grand Forks, Grand Forks County, Northeast Human Services, and the ND Department of Human Services. The City’s Community Development Block Grant Funds provided significant support to the construction and provides ongoing program support. The advisory committee meets quarterly.
Health Impact of Opioid Use in Grand Forks

Opioid overdose deaths

<table>
<thead>
<tr>
<th>Year</th>
<th>2016</th>
<th>2017</th>
<th>2018*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases</td>
<td>3</td>
<td>4</td>
<td>3</td>
</tr>
</tbody>
</table>

Overdoses and deaths are the tip of the iceberg.
For every person who died from an opioid overdose in 2015:

- 2,946 Used prescription opioids in the past year
- 377 Misused prescription opioids
- 68 Have a substance use disorder involving prescription opioids
- 18 Have a substance use disorder involving heroin

Opioid use has contributed in part to:

- **52%** New Hepatitis C cases in North Dakota between 2012 and 2017
- **7** HIV Total new cases in Grand Forks County in 2017
- **39** Hepatitis C cases in Grand Forks County

Interviewed new hepatitis C cases in Grand Forks County report injection drug use as a risk factor

CDC, 2017
Prevention

Strategies

- Increase access to naloxone for the treatment of opioid overdose
- Provide training on overdose recognition to community members which may encounter someone experiencing an opioid overdose
- Support standardized screening by pharmacists for everyone receiving an opioid prescription
- Provide resources to assist community providers in referring individuals with substance use disorders that are ready for treatment

Since August 2017

- Naloxone kits distributed: 275
- Community members trained: 529
- Naloxone kits provided at no cost by Grand Forks pharmacies: 37
- Opioid prevention and treatment guides distributed: 1,980

Treatment

Addiction is a complex but treatable disease that affects brain function and behavior. Treatment needs to be readily available and attend to the multiple needs of the individual. No single treatment is appropriate for everyone. NIDA, 2014

- Face It TOGETHER: Build peer support capacity using their sustainable peer support model
  - $29,000

- F5 Project: Assist reentry and provide peer support for individuals involved in the criminal justice system
  - $10,000

- Agassiz Associates: Provide treatment services to inmates at Grand Forks County Correctional Center
  - $29,000

- Valley Community Health Centers: Increase access to medication assisted treatment
  - $79,000
With funding provided by the North Dakota Department of Human Services, Grand Forks Public Health Department partnered with the Grand Forks Substance Abuse Prevention Coalition (SAPC) to improve the health and safety of our community by employing the following strategies to reduce underage drinking, adult binge drinking, and prescription opioid misuse.

The City of Grand Forks partnered with SAPC to host a Community Anti-Drug Coalitions of America (CADCA) substance abuse prevention workshop for members of the Grand Forks Youth Commission and a strategic planning workshop for community members involved in substance abuse issues.
GOAL: Decrease underage drinking and impaired driving by diminishing community norms favorable to use and by reducing easy social access of alcohol to persons under 21 years of age.

“Healthy bonding and attachment between parent and child is one of the biggest factors preventing behavioral health issues like underage drinking, drug use, depression, and anxiety.”

Grand Forks Substance Abuse Prevention Coalition (SAPC) members promoted Parents LEAD (Listen, Educate, Ask, Discuss) an evidence-based prevention program that provides parents and caregivers with a wide variety of tools/resources to support them in creating a safe environment for their children that promotes behavioral health. The program is designed to help parents:

- initiate and/or continue conversations with their children about underage drinking and other difficult subjects at any age
- role-model positive and healthy behaviors
- monitor their children’s whereabouts
- provide support and engagement

A key component of the program is its interactive website (www.parentslead.org) featuring parent, community, and professional portals; each offering tips, tools, and resources.

Parenting Wisely is a set of interactive, computer-based training programs for parents of children ages 3-18 years. Based on social learning, cognitive behavioral, and family systems theories, the programs aim to increase parental communication and disciplinary skills. Parents use this self-instructional online program. During each of nine sessions, users view a video enactment of a typical family struggle and then choose from a list of solutions representing different levels of effectiveness, each of which is portrayed and critiqued through interactive questions and answers. Each session ends with a quiz. All nine sessions can be completed in 2 to 3 hours. Parents also receive workbooks containing program content and exercises to promote skill building and practice. Parenting Wisely is being administered by GF Public Schools and Sharon Lutheran Church.
SAPC partnered with the Grand Forks Police Department and Anchor Marketing to design, produce and disseminate School Resource Officer (SRO) trading cards promoting GF Public School texting tip lines. In addition, SAPC provide the GF Police Department with Text-A-Tip posters that were posted throughout GF public middle schools and high schools.

GOAL: Decrease adult binge drinking and related consequences, such as driving while intoxicated, by promoting alcohol restrictions at community events.

Root Beer Olympics

The University of North Dakota College of Nursing partnered with SAPC to conduct a community assessment on the issue of binge drinking among students attending UND.

To educate UND students about binge drinking risks, nursing students hosted "Root Beer Olympics". The event featured activities such as jumbo-sized yard games that provided an interactive means to educate participants about the risks of binge drinking.


UND Nursing students and SAPC members also partnered with UND’s Prevention Coordinator to disseminate information, on campus, concerning the community’s loud party ordinance, social host ordinance, and UND Police Department’s Tip411 phone app.
SAPC partnered with the Grand Forks County Sheriff’s Department to promote and monitor the non-alcohol section at River Cities Speedway (RCS). Promotion of the non-alcohol section included:

- Public Address announcements
- Concession vouchers and t-shirts giveaway (In-Kind contribution from River Cities Speedway)
- Website banner ad placed on top of the RCS “Schedule” page and the bottom of the RCS “Results” page
- Complimentary tickets

**GOAL:** Decrease prescription opioid misuse and related consequences by reducing high access to prescription medication.

SAPC provided medication disposal informational materials along with medication disposal pouches to local funeral homes and senior citizen centers.

Grand Forks Public Health Department partnered with Public Health Units in Northeastern North Dakota to conduct a regional multi-media campaign to increase awareness that prescription opioids can be addictive and dangerous. The campaign also strived to decrease the number of individuals who use opioids recreationally or overuse them.
Grand Forks Youth Survey

Spring 2018 Results

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Eric Canen, M.S., Senior Research Scientist

With Assistance from:
Robert Leduc, PhD, Senior Research Scientist
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Introduction

Under contract with Altru Health System, the Wyoming Survey & Analysis Center (WYSAC) at the University of Wyoming undertook this project to provide baseline data to meet the requirements for the Drug Free Community Grant (DFCG). The survey asked all required DFCG measures in all applicable schools in the Grand Forks Public School District.

Methods

The survey questions were pulled from the DFCG website. WYSAC developed an online survey instrument for students to access. Grand Forks Public School District Prevention Coordinator, Sarah Shimek, provided classroom information and distributed administrator instructions to principals and teachers. Students in grades 8, 9, and 11 were surveyed on May 15, 2018 and May 29, 2018.

A total of 1,251 surveys were completed. Of those surveys, 1,141 were determined to be valid for analysis based on chosen the grades. Based on enrollment numbers pulled from the North Dakota Department of Education, this is a response rate of 72%.

To ensure appropriate representation, the sample was weighted to correct for school and grade level response rates based on the enrollment information pulled from the North Dakota Department of Education website. WYSAC used Stata 12.1 to conduct analysis.
Alcohol

Figure 1: 30 Day Alcohol Use, by Grade and Gender

During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?

<table>
<thead>
<tr>
<th>Grade</th>
<th>0 days</th>
<th>1 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>8th Grade</td>
<td>8%</td>
<td>92%</td>
</tr>
<tr>
<td>9th Grade</td>
<td>10%</td>
<td>90%</td>
</tr>
<tr>
<td>11th Grade</td>
<td>84%</td>
<td>72%</td>
</tr>
</tbody>
</table>

Note: Gender results combine all grades

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Figure 2: Alcohol Risk Perception, by Grade and Gender

How much do you think people risk harming themselves (physically or in other ways) if they have five or more drinks of an alcoholic beverage once or twice a week?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Moderate/great risk</th>
<th>No/slight risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>8th Grade</td>
<td>86%</td>
<td>14%</td>
</tr>
<tr>
<td>9th Grade</td>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td>11th Grade</td>
<td>79%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Note: Gender results combine all grades

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Working Document 12.10.18
Figure 3: Alcohol- Friend Perception, by Grade and Gender
How wrong or not wrong do your friends feel it would be for you to have one or two drinks of an alcoholic beverage nearly every day?

Note: Gender results combine all grades

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Figure 4: Alcohol- Parent Perception, by Grade and Gender
How wrong or not wrong do your parents feel it would be for you to have one or two drinks of an alcoholic beverage nearly every day?

Note: Gender results combine all grades

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Marijuana

Figure 5: 30 Day Marijuana Use, by Grade and Gender

During the past 30 days, on how many days did you use marijuana or hashish?

Note: Gender results combine all grades

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Figure 6: Marijuana Risk Perception, by Grade and Gender

How much do you think people risk harming themselves (physically or in other ways) if they try marijuana once or twice a week?

Note: Gender results combine all grades

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**Figure 7: Marijuana - Friend Perception, by Grade and Gender**

*How wrong or not wrong do your friends feel it would be for you to smoke marijuana?*

<table>
<thead>
<tr>
<th>Grade</th>
<th>Very wrong/wrong</th>
<th>A little/not wrong</th>
</tr>
</thead>
<tbody>
<tr>
<td>11th</td>
<td>52%</td>
<td>48%</td>
</tr>
<tr>
<td>9th</td>
<td>70%</td>
<td>30%</td>
</tr>
<tr>
<td>8th</td>
<td>83%</td>
<td>17%</td>
</tr>
</tbody>
</table>

Note: Gender results combine all grades

WYOMING SURVEY & ANALYSIS CENTER

**Figure 8: Marijuana - Parent Perception, by Grade and Gender**

*How wrong or not wrong do your parents feel it would be for you to smoke marijuana?*

<table>
<thead>
<tr>
<th>Grade</th>
<th>Very wrong/wrong</th>
<th>A little/not wrong</th>
</tr>
</thead>
<tbody>
<tr>
<td>11th</td>
<td>86%</td>
<td>14%</td>
</tr>
<tr>
<td>9th</td>
<td>92%</td>
<td>8%</td>
</tr>
<tr>
<td>8th</td>
<td>94%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Note: Gender results combine all grades

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Cigarettes

Figure 9: 30 Day Cigarette Use, by Grade and Gender

During the past 30 days, on how many days did you smoke part or all of a cigarette?

Note: Gender results combine all grades

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Figure 10: Cigarette Risk Perception, by Grade and Gender

How much do you think people risk harming themselves (physically or in other ways) if they smoke one of more packs of cigarettes per day?

Note: Gender results combine all grades

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Figure 11: Cigarettes- Friend Perception, by Grade and Gender
How wrong or not wrong do your friends feel it would be for you to smoke tobacco?

Note: Gender results combine all grades

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Figure 12: Cigarettes- Parent Perception, by Grade and Gender
How wrong or not wrong do your parents feel it would be for you to smoke tobacco?

Note: Gender results combine all grades

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Prescription Drugs

Figure 13: 30 Day Prescription Drug Misuse, by Grade and Gender

During the past 30 days, on how many days have you used prescription drugs not prescribed to you?

<table>
<thead>
<tr>
<th>Grade</th>
<th>0 days</th>
<th>1 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>8th</td>
<td>95%</td>
<td>5%</td>
</tr>
<tr>
<td>9th</td>
<td>97%</td>
<td>3%</td>
</tr>
<tr>
<td>11th</td>
<td>97%</td>
<td>3%</td>
</tr>
</tbody>
</table>

Note: Gender results combine all grades

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Figure 14: Prescription Drug Misuse Risk Perception, by Grade and Gender

How much do you think people risk harming themselves (physically or in other ways) if they use prescription drugs that are not prescribed to them?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Moderate/great risk</th>
<th>No/slight risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>8th</td>
<td>89%</td>
<td>11%</td>
</tr>
<tr>
<td>9th</td>
<td>88%</td>
<td>12%</td>
</tr>
<tr>
<td>11th</td>
<td>90%</td>
<td>10%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Moderate/Great Risk</th>
<th>No/slight Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>90%</td>
<td>10%</td>
</tr>
<tr>
<td>Female</td>
<td>89%</td>
<td>11%</td>
</tr>
</tbody>
</table>

Note: Gender results combine all grades

WYOMING SURVEY & ANALYSIS CENTER
**Figure 15: Prescription Drug Misuse - Friend Perception, by Grade and Gender**

*How wrong or not wrong do your friends feel it would be for you to use prescription drugs not prescribed to you?*

Note: Gender results combine all grades

**Wyoming Survey & Analysis Center**

**Figure 16: Prescription Drug Misuse - Parent Perception, by Grade and Gender**

*How wrong or not wrong do your parents feel it would be for you to use prescription drugs not prescribed to you?*

Note: Gender results combine all grades

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