

2019

COMMUNITY
HEALTH
IMPROVEMENT PLAN

6TH ANNUAL PROGRESS REPORT

Suicide | ACEs & Trauma | Opioids

A photograph of a paved path or bike lane stretching away from the viewer, lined with dry grass and shrubs on either side. In the background, a range of mountains with snow-capped peaks is visible under a clear blue sky.

DAVIS 4
HEALTH

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Background

Davis4Health

Davis4Health is Davis County's health improvement collaboration with partners from many organizations and sectors working together to improve population health in our community. Partners follow the steps of the County Health Rankings and Roadmaps Take Action Cycle, a model to guide community health improvement processes. The five steps are: 1) Assess needs & resources; 2) Focus on what's important; 3) Choose effective policies and programs; 4) Act on what's important; and 5) Evaluate actions.

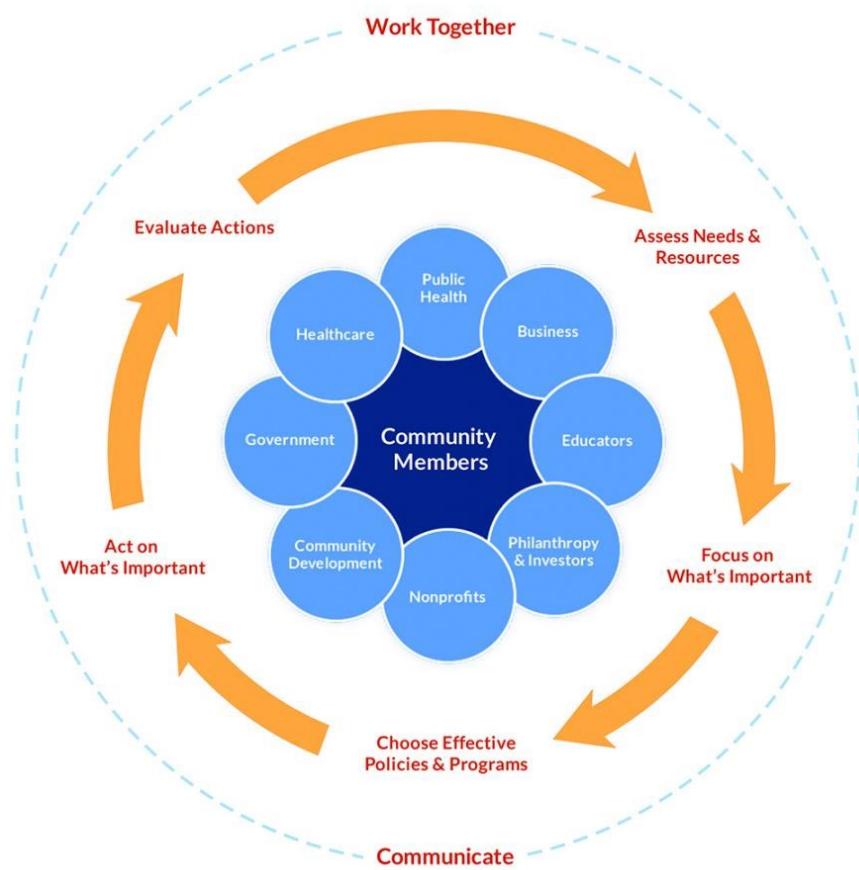
Community Health Improvement Plan

The purpose of the 6th annual progress report is to document progress toward three newly updated county health priorities included in the 2019-2023 Davis4Health Community Health Improvement Plan also known as the CHIP.

The three priorities are:

- 1. Suicide**
- 2. Adverse Childhood Experiences & Trauma**
- 3. Opioids**

Partners work together to implement the community health improvement plan. Each year objectives and outcomes are reviewed to determine if any revisions or updates are needed. Progress is monitored throughout implementation and this annual report is prepared to document partners' cumulative effort. This report documents that we are acting on what's important and evaluating our actions.



Annual CHIP Progress Celebration

Each year an annual celebration is held for community leaders and partners. It is an opportunity to acknowledge partners for their contributions and recognizes the community's progress toward improving health. Partners are proud of their accomplishments.

Annual Davis4Health progress reports can be found at this link: <http://www.daviscountyutah.gov/health/about-dchd/reports-and-assessments>.

Priority 1: SUICIDE

Davis HELPS

Davis Health Education and Law Enforcement ProgramS (HELPs) is a coalition dedicated to helping Davis County be a healthy place to live. This long-standing coalition takes the lead on coordinating prevention efforts throughout the county. The coalition's current focus is on preventing suicide. Davis County Health Department and Davis Behavioral Health provide administrative support to the coalition. The group meets on the first Thursday of each month in Farmington.

Outcome Goal

Reduce suicide deaths in Davis County from 14.5 (2014-2016) deaths per 100,000 to 10.2 deaths per 100,000 by the year 2030. (National Healthy People 2020 Target)

Accomplishments

Meetings & Dates: 11—1/3, 2/7, 3/7, 5/2, 6/6, 7/11, 8/8, 9/5, 10/3, 11/7, 12/5

Participants: 30

Grant Applications Linked to CHIP Priority: 4

New Funding: \$289,152

Community Partners

- ◊ Centerville Cares
- ◊ Children's Service Society
- ◊ Continue Mission
- ◊ Davis Behavioral Health
- ◊ Davis County Health Department
- ◊ Davis Hospital & Medical Center
- ◊ Davis School District
- ◊ Head Start
- ◊ Hill Air Force Base
- ◊ Intermountain Healthcare
- ◊ Juvenile Court
- ◊ Layton Community Action Council
- ◊ Live Strong House
- ◊ MountainStar Healthcare
- ◊ North Davis CTC
- ◊ Safe Harbor
- ◊ Sheriff's Office
- ◊ Survivors
- ◊ The Church of Jesus Christ of Latter-day Saints
- ◊ USU Extension
- ◊ YMCA



Partner Responsibility for Suicide Strategies

Strategies/Activities	Agencies with Responsibility
1. Maintain capacity/trainers to offer evidence-based suicide prevention programs in the community (QPR, SafeTalk, Working Minds, Connect, ASIST, YMHFA, MHFA)	Davis Behavioral Health, Davis County Health Department, Davis HELPS, Davis School District, Davis Technical College, Intermountain Healthcare, USU Extension
2. School-based suicide prevention efforts (SOS, Botvin LifeSkills Training, Mindful Schools, Learning to Breathe, Hope Squads)	Centerville Cares, Davis Behavioral Health, Davis Education Foundation, Davis Head Start, Davis School District, Intermountain Healthcare, NUHOPE, YMCA
3. Reduce access to lethal means (prescription drug take back events, safe storage of firearms).	Centerville Cares, Davis Behavioral Health, Davis County Health Department, Davis Head Start, Davis HELPS, Davis School District, Intermountain Healthcare, NUHOPE
4. Healthy relationships initiatives (bullying prevention, bystander intervention, smart dating, relationship attachment model)	Davis HELPS, Davis School District, Davis Technical College, Layton Community Action Council, Livestrong House, Open Doors, Protective Factors for Utah Families, Safe Harbor, USU Extension, YMCA
5. Safe messaging to promote hope & healing & reduce shame. Targeted messaging for high risk populations	Centerville Cares, Davis Behavioral Health, Davis County Health Department, Davis HELPS, Davis School District, Davis Technical College, Hill Air Force Base, Layton Community Action Council, Open Doors, YMCA,
6. Increase access to quality behavioral health services & treatment (See Access Strategies)	Davis Behavioral Health Network, Davis County Health Department, Davis Technical College, Intermountain Healthcare, Lakeview Hospital, Davis School District, Livestrong House, YMCA
7. Zero Suicide in health & behavioral healthcare—continuous quality improvement initiative to prevent suicides for individuals under the care of health & behavioral health systems (See Access Strategies)	Centerville Cares, Davis Behavioral Health, Davis Behavioral Health Network, Davis County Health Department, Davis School District, Intermountain Healthcare, Lakeview Hospital, Livestrong House

Suicide Prevention Objectives Progress

Short-term Objectives	Target Date	Status
Maintain database to track evidence based suicide prevention courses and trainers.	Annually	On Track
Implement Botvin LifeSkills curriculum in DSD secondary health classes.	12/31/2019	Complete 5/2019
Identify LifeSkills champions in the DSD and the community that can share success stories.	12/31/2021	On Track
Complete Hope Squad evaluation.	12/31/2021	On Track
Promote Counseling on Access to Lethal Means (CALM) training to at least 200 Davis County Healthcare professionals.	12/31/2019	Complete 6/2019
All Davis County Human Services providers offering in-home services will be informed about appropriate Firearm Safety Campaigns to implement within their agency.	12/31/2020	On Track
Conduct a healthy relationship initiative assessment to identify evidence-based curriculum and programs be implemented and which Davis County agencies are involved. (Use findings to establish baselines and set targets for healthy relationship programs).	12/31/2020	On Track
Pilot a public education campaign (online print ads) targeting suicide prevention in men.	12/31/2019	Complete 12/2019
Conduct focus groups or use other methods to gather feedback from men to guide suicide prevention efforts.	12/31/2020	On Track
Addition of podcasts to the public education campaign targeting men.	12/31/2020	On Track

Suicide Prevention Objectives Progress

Long-term Objectives	Target Date	Status
15% increase in DSD school and student participation in mindfulness initiatives.	12/31/2023	On Track
Review the state suicide Postvention Toolkit helping to ensure quality care for our community and serve as a pilot community to share and distribute the toolkit.	12/31/2022	On Track
Advocate for funding for the assessment/evaluation and parent components of Botvin LifeSkills program in schools.	12/31/2023	On Track

Population Measures	Baseline	Current Measure	Target Measure
Decrease the percent of Davis County youth experiencing feeling sad or hopeless for more than two weeks in the past year from 26.0% (2017) to 23.4%** by 2023. (SHARP)	26.0% (2017)	25.9% (2019)	23.4% (2023)
Decrease the percent of students that experience family conflict in Davis County from 30.5% (2017) to 27.45%** by 2023. (SHARP)	30.5% (2017)	25.2% (2019)	27.45% (2023)
Decrease bullying on school property in Davis County in past 12 months from 25.0% (2017) to 22.5%** by 2023. (SHARP)	25.0% (2017)	17.6% (2019)	22.5% (2023)
Decrease cyber bullying in Davis County in the past 12 months from 25.7% (2017) to 23.13%** by 2023. (SHARP)	25.7% (2017)	20.1% (2019)	23.13% (2023)
Decrease the percent of youth suicide attempts in Davis County from 7% (2017) to 6.3%** by 2023. (SHARP)	7.0% (2017)	6.0% (2019)	6.3% (2023)
Decrease adult suicide attempts in Davis County. (Waiting for ICD 10 code data to establish baseline & target.)	—	—	—
Reduce suicide deaths in Davis County from 14.5 (2014-2016) deaths per 100,000 to 10.2* deaths per 100,000 by the year 2030. (IBIS)	14.5 deaths per 100,000 (2014-2016)	18.95 deaths per 100,000 (2016-2018)	10.2 deaths per 100,000 (2030)

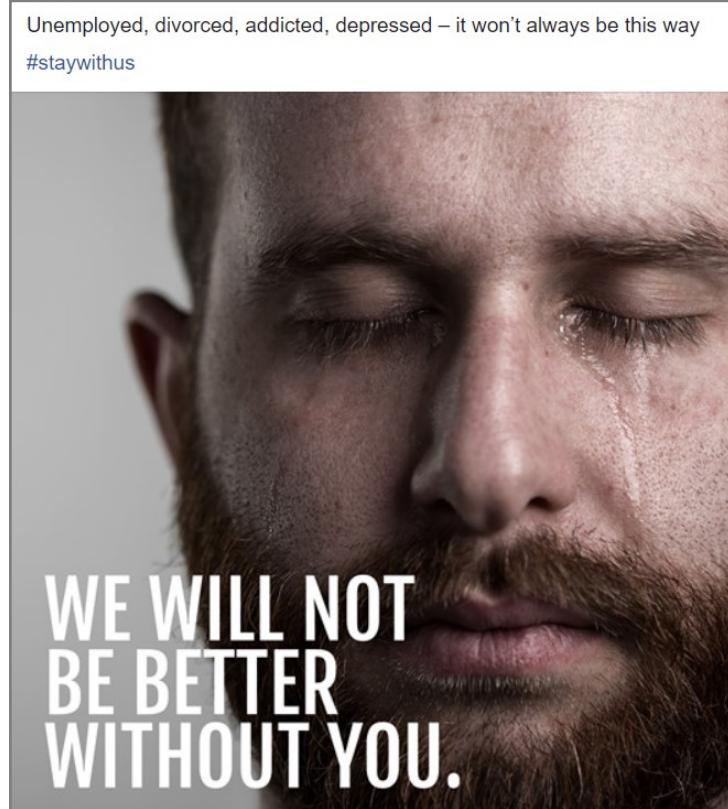
*Healthy People 2020 Target

**A 10% reduction from baseline

Suicide Prevention Highlights

Men's Suicide Prevention Campaign

- ◊ Social media campaign using imagery of men's emotions, to show it's okay to be a man AND have feelings
- ◊ Based on research that men who believed in a version of manhood associated with being tough, not talking about their problems, & bottling up their emotions were twice as likely to have considered suicide
- ◊ Results
 - Reach: 53,000+ views
 - Link clicks: 1,800
 - Shares: 223
 - Davis HELPS followers: 367 (Aug 1) to 426 (Dec 4)
 - Most popular with men ages 25-34 & men ages 45-54; Most popular with women ages 35-44
 - Average cost: 80 cents/click
- ◊ Billboard on Antelope Drive in Clearfield



Training & Awareness

- ◊ 1,527 participants trained in Question, Persuade, Refer (QPR)
- ◊ 7 QPR trainings for cities
- ◊ 9 new instructors trained in Working Minds (worksite suicide prevention)

Suicide Prevention Highlights

Youth Mental Health

- ◊ 4th Annual Children's Mental Health Awareness Day event in conjunction with Davis County's Safe Kids Day; 2,000 parents & youth participated
- ◊ Botvin Lifeskills Training implementation (evidence-based prevention curriculum in all DSD secondary school health classes & in 50 elementary schools)
- ◊ Hope Squads in all secondary schools; expanded Junior Hope Squads from 17 to 37 Elementary Schools
- ◊ Snow Horse Elementary Hope Week video: <https://youtu.be/S2hq5glUzh4>
- ◊ Mindful Schools Training & Participation
 - Mindful Schools Foundation - 750
 - Mindful Schools Curriculum - 184
 - Mindfulness-based Stress Reeducation (MBSR) Foundation - 158
 - Learning to Breathe Curriculum - 56
 - Mindful Schools parent videos—<https://davismindfulness.org/access-parent-videos/>



Suicide Prevention Highlights

Youth Mental Health First Aid (YMHFA), USU Extension

- ◊ 9 new YMHFA instructors trained
- ◊ 20 YMHFA trainings taught; 575 participants (First Aiders) trained
- ◊ Evaluations show First Aiders were able to retain their knowledge, skills, & confidence in being able to reach out to young people who are experiencing mental health problems
- ◊ 600 adolescents were referred by First Aiders to professional mental health services, self-help strategies, or other supports in their lives
- ◊ 70 youth received mental health & resilience education
- ◊ Coordinated community resource tables at youth mental health screening nights
- ◊ 45 attendees a Mental Health First Aid "er" night on Anxiety at the Davis Mindfulness Center



Suicide Prevention Highlights

Reducing Access to Lethal Means

- ◊ 1,270 gun locks distributed by community partners
- ◊ 200 gun locks distributed through Davis County Intermountain Healthcare community pharmacies
- ◊ Promoted Counseling on Access to Lethal Means (CALM) Training; 153 helping professionals completed the course; link: www.train.org/utah
- ◊ New Intermountain Healthcare firearm safety education & gun lock brochure

If you or someone you know is in immediate crisis call 911.



OTHER RESOURCES:

The National Suicide Prevention Lifeline:
1-800-273-TALK (8255)

The Trevor Project for LGBTQ individuals:
1-866-488-7386
<https://www.thetrevorproject.org/>

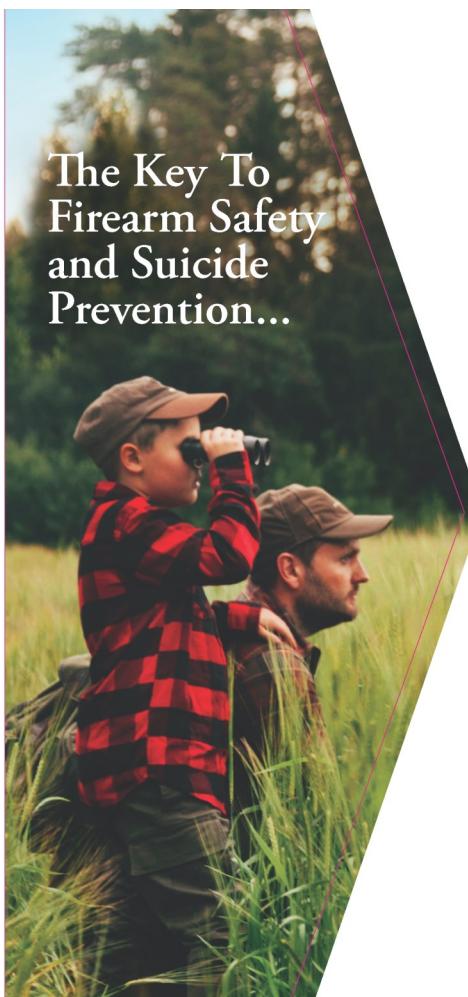
Idaho Suicide Prevention Hotline:
1-208-398-4357

LEARN MORE ABOUT SUICIDE PREVENTION & FIREARMS

American Foundation for Suicide Prevention
<https://afsp.org/>

Utah Suicide Prevention Coalition
<https://utahsuicideprevention.org/>

Intermountain Zero Suicide:
<http://intermountainhealthcare.org/suicideprevention>



- ◊ Given the frequency and fatality with which guns are used in suicides, the Utah Shooting Sports Council advises: no person in suicidal crisis should ever have access to a gun.
- ◊ Since suicidal crises usually arise in just minutes, putting space and time between a person who is struggling and a firearm can save a life by allowing the crisis period to subside and the person to get help.
- ◊ Safe firearm storage is one of the simplest & most effective things to do to prevent suicide.
- ◊ Have a conversation & take all warning signs seriously. Encourage the at-risk person to seek help from a professional behavioral health service.
- ◊ Safest Storage Option: Off Site. Ask a trusted friend or relative to store your firearm offsite. Enlist your local gun shop or shooting range for storage services.
- ◊ Second Safest Storage Option: In the Home. Gun safes & lock boxes are the best in-home option. Lock ammunition separately.
- ◊ This applies to the self-defense gun, too. When a household member is struggling, many families decide that protecting against suicide takes priority until the person recovers.

Suicide Prevention Highlights

NUHOPE

- ◊ 257 school suicide prevention presentations (7,364 students reached)
- ◊ 10 QPR presentations (298 participants)
- ◊ Participation in all Davis School District Parent Nights & Davis County town hall meetings
- ◊ Support to Davis School District HOPE Squads
- ◊ NUHOPE 12th Annual Suicide Awareness Walk (over 3,000 participants) with Alex Boye performing & Casey Scott as the keynote speaker

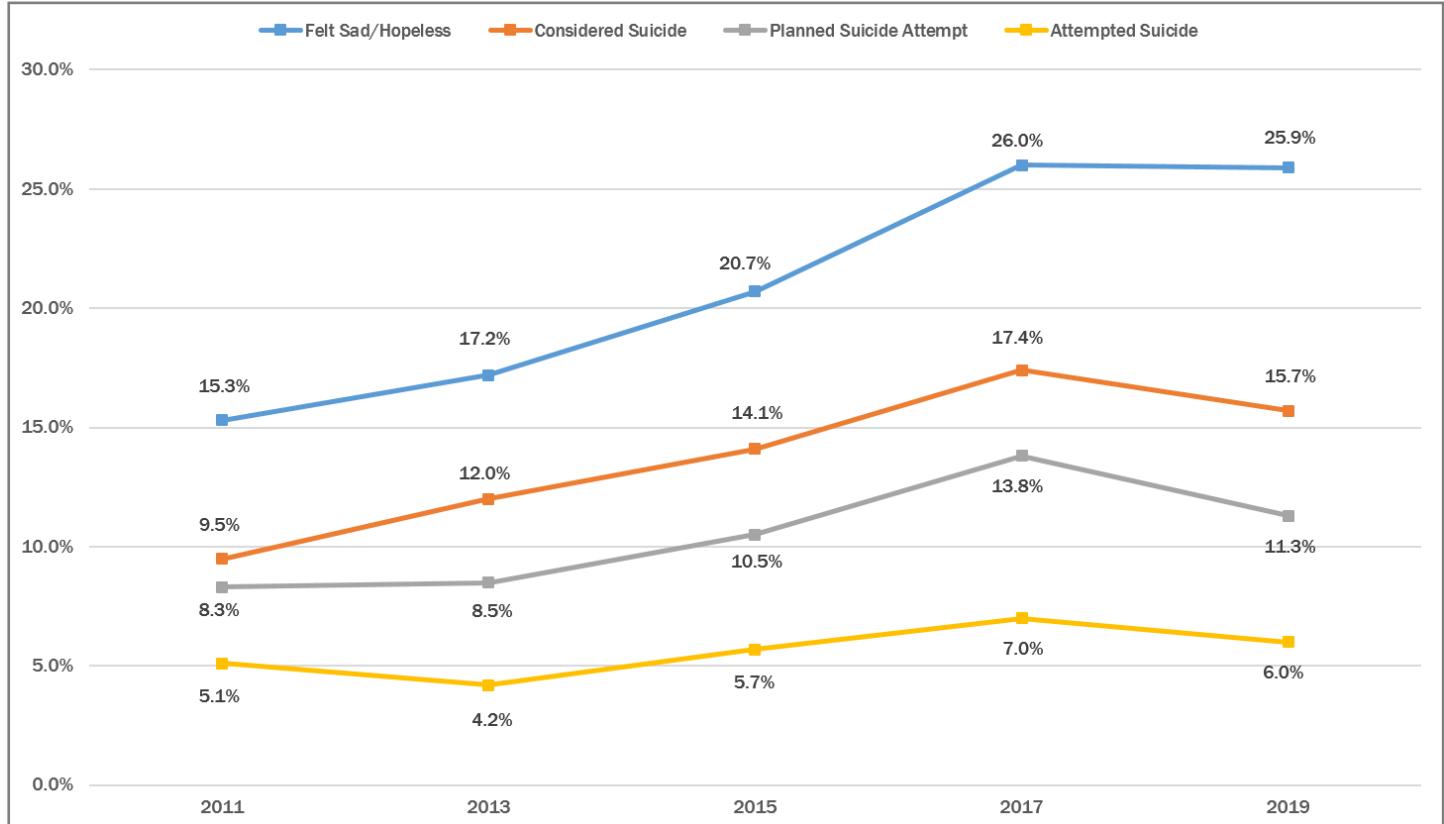
Continue Mission (CM)—No Veteran Left Behind (continuemission.org)

- ◊ 3,535 veterans & support members served
- ◊ 169 events held for veterans & support members
- ◊ 61 meetings & events attended in support of suicide prevention & mental health awareness
- ◊ 2019 Year-end Report: <https://conta.cc/2SR2d44>



Suicide Prevention Highlights

Davis County Youth Suicide Indicator Trends (SHARP, 2011-2019)



Source: Davis County Student Health and Risk Prevention (SHARP) Survey

Future Plans

- ◊ Healthy relationship program & curriculum assessment
- ◊ Evaluation of suicide prevention programs (HOPE Squads & Prevention Curriculum)
- ◊ Men's suicide prevention campaign focus groups
- ◊ Promote & raise awareness of 3 digit mental health crisis line

SUICIDE PREVENTION RESOURCES

DAVIS BEHAVIORAL HEALTH 24-HOUR CRISIS RESPONSE LINE

801-773-7060, dbhutah.org

NATIONAL SUICIDE PREVENTION HOTLINE:

1-800-273-TALK (8255) —A free 24-hour service, connects individuals to trained crisis workers from the University of Utah Neuropsychiatric Institute. suicidepreventionlifeline.org



SAFE UT

The SafeUT Crisis Text and Tip Line service provides real-time crisis intervention to youth through texting and a confidential tip program right from a smartphone. Download the App. healthcare.utah.edu/uni/clinical-services/safe-ut

NATIONAL ALLIANCE ON MENTAL ILLNESS (NAMI) UTAH

801-323-9900 —Free education classes and peer support for those who struggle with mental illness, and separate education and peer support for family members. www.namium.org

CONTINUE MISSION—No Veteran Left Behind

801-560-9889, continuemission.org

UTAH SUICIDE PREVENTION COALITION

Dedicated to suicide prevention, the promotion of resiliency, and supporting those impacted by suicide. utahsuicideprevention.org

AMERICAN FOUNDATION FOR SUICIDE PREVENTION (AFSP)

Resources for those who have lost a loved one to suicide. Training for survivors who wish to facilitate survivor support groups or to get involved in education and advocacy. www.afsp.org

NATIONAL ACTION ALLIANCE FOR SUICIDE PREVENTION

The public-private partnership advancing the National Strategy for Suicide Prevention. theactionalliance.org

THE TREVOR PROJECT

1-866-488-7386 —This free 24-hour service is geared toward LGBT teens in crisis. thetrevorproject.org

THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS

Suicide Prevention and Ministering, churchofjesuschrist.org/get-help/suicide

COMMUNITY SUICIDE PREVENTION TRAINING

www.dbhprevention.org/trainings

MAN THERAPY CAMPAIGN

mantherapy.org

#BETHEONETO

Save a life from suicide campaign, bethe1to.com

Priority 2: ADVERSE CHILDHOOD EXPERIENCES & TRAUMA

Human Services Directors Committee

The Davis County Human Services Directors Committee provides direction and input for the Adverse Childhood Experiences (ACEs) & trauma priority. The committee is chaired by a county commissioner. The Davis County Health Department provides administrative support.

Outcome Goal

Davis County is a trauma informed community that prevents ACEs; builds resilience in individuals, families & communities; provides a safe, supportive & connected environment; & provides access to treatment for those who have experienced trauma.

Accomplishments

Meetings: 6—2/13, 4/21, 6/12, 9/14, 10/9, 12/11

Participants: 29

Grant Applications Linked to CHIP Priority: 3

New Funding: \$11,000

Community Partners

- ◊ Bountiful Food Pantry
- ◊ Children's Service Society
- ◊ Davis Behavioral Health
- ◊ Davis Community Housing Authority
- ◊ Davis Community Learning Center
- ◊ Davis County Commission
- ◊ Davis County Health Department
- ◊ Davis Hospital
- ◊ Davis School District
- ◊ Davis Technical College
- ◊ Davis County Domestic Violence Coalition
- ◊ Department of Workforce Services
- ◊ Friends for Sight
- ◊ Head Start
- ◊ Intermountain Healthcare
- ◊ Logistic Specialties, Inc.
- ◊ Open Doors
- ◊ Pioneer Adult Rehab Center
- ◊ Roads To Independence
- ◊ Safe Harbor
- ◊ United Way of Salt Lake
- ◊ USU Extension
- ◊ Weber State University



Partner Responsibility for ACEs & Trauma

Strategies/Activities	Agencies with Responsibility
1. Raise awareness of the impact of childhood trauma on individuals, families & communities.	Bountiful Community Food Pantry, Children's Service Society, Davis County Domestic Violence Coalition, Davis County Health Department, Davis County Human Service Directors, Davis Head Start, Davis Technical College, Davis School District, Open Doors, YMCA
2. Build protective factors & resilience in individuals, families & the community.	Centerville Cares, Children's Service Society, Davis Behavioral Health, Davis County Domestic Violence Coalition, Davis County Health Department, Davis Head Start, Davis HELPS, Davis School District, Open Doors, Protective Factors for Utah Families, Safe Harbor, YMCA
3. Encourage organizations to become trauma informed.	Children's Service Society, Davis Chamber, Davis County Domestic Violence Coalition, Davis County Health Department, Davis County Resilience Symposium Planning Team, Davis Head Start, Davis School District, Open Doors, YMCA
4. Promote early identification of childhood trauma.	Children's Service Society, Davis County Domestic Violence Coalition, Davis Head Start, Davis School District, Open Doors, YMCA
5. Promote evidence-based treatment interventions for childhood trauma.	Children's Service Society, Davis County Health Department, Davis Head Start, Livestrong House, Open Doors, Protective Factors for Utah Families
6. Build capacity among professionals to qualify as trainers & instructors for ACES, trauma & resilience.	Davis County Health Department, Davis Head Start, Davis School District, Livestrong House, Open Doors, Protective Factors for Utah Families, YMCA
7. Identify funding for the prevention & treatment of trauma	Davis Behavioral Health Network, Davis School District
8. Increase access to behavioral health services & treatment (See Access Strategies)	Davis Behavioral Health Network, Davis County Health Department, Davis School District, Davis Technical College, Intermountain Healthcare, Lakeview Hospital, Livestrong House, YMCA

ACEs & Trauma Objectives Progress

Short-term Objectives	Target Date	Status
Complete a county violence, abuse, and trauma assessment.	12/31/2020*	On Track
Organize an annual Community Resilience Symposium to address ACEs, trauma, and resilience.	Annually	On Track
Develop a county resource directory for ACEs, trauma, and resilience.	12/31/2020	On Track
Assess the number of trauma-informed organizations in Davis County based on SAMHSA's six key principles of a trauma-informed approach.	12/31/2020	On Track
Two grant applications will be submitted from Davis County organizations related to the prevention and treatment of trauma.	12/31/2020	On Track
Long-term Objectives	Target Date	
Assess the number of evidence-based interventions, programs, and promising practices currently being implemented in the community to prevent ACEs, build resilience, and treat trauma.	12/31/2021	On Track
Increase the number of evidence-based interventions, programs, and promising practices currently being implemented in the community to prevent ACEs, build resilience, and treat trauma. (Establish baseline & target).	12/31/2023	On Track
Increase the number of trauma-informed organization based on SAMHSA's six key principles of a trauma-informed approach. (Establish baseline & target).	12/31/2023	On Track
Three organizations will pilot an ACEs & resilience screening tool.	12/31/2023	On Track

*Extended from 2019 to 2020 to give more time to ensure an accurate and useful final assessment report.

ACEs & Trauma Objectives Progress

Population Measures	Baseline	Current Measure	Target Measure
Decrease prevalence of interpersonal violence in Davis County from 12.4% (2016) to 11.16%** by 2023. (UDOH VIPP IPV factsheet)	12.4% (2016)	12.4% (2016)	11.16% (2023)
Decrease the percent of Davis County youth that have been hit or injured by a dating partner in the past 12 months from 5.3% to 4.77%** by 2023. (SHARP)	5.3% (2017)	3.9% (2019)	4.77% (2023)
Decrease the percent of students that experience family conflict in Davis County from 30.5% (2017) to 27.45%** by 2023. (SHARP)	30.5% (2017)	25.2% (2019)	27.45% (2023)
Decrease the percent of Davis County youth experiencing feeling sad or hopeless for more than two weeks in the past year from 26.0% (2017) to 23.4%** by 2023. (SHARP)	26.0% (2017)	25.9% (2019)	23.4% (2023)
Reduce suicide deaths in Davis County from 14.5 (2014-2016) deaths per 100,000 to 10.2* deaths per 100,000 by the year 2030. (IBIS)	14.5 deaths per 100,000 (2014-2016)	18.95 deaths per 100,000 (2016-2018)	10.2 deaths per 100,000 (2030)
Increase Davis County's 80.5 (2015-2017) year life expectancy at birth by 2023. (CHR)	80.5 (2015-2017)	80.5 (2015-2017)	Greater than 80.5 (2023)
Decrease child abuse victims in Davis County from 808.6 (2015-2017) victims per 100,000 children under 18 to 727.7** victims per 100,000 children under 18 by 2030. (DCFS)	808.6 victims per 100,000 children (2015-2017)	812.5 victims per 100,000 children (2016-2018)	727.7 victims per 100,000 children (2030)

*Healthy People 2020 Target

**A 10% reduction from baseline

ACEs & Trauma Highlights

Community Resilience Symposium: Growing a Trauma Informed Community

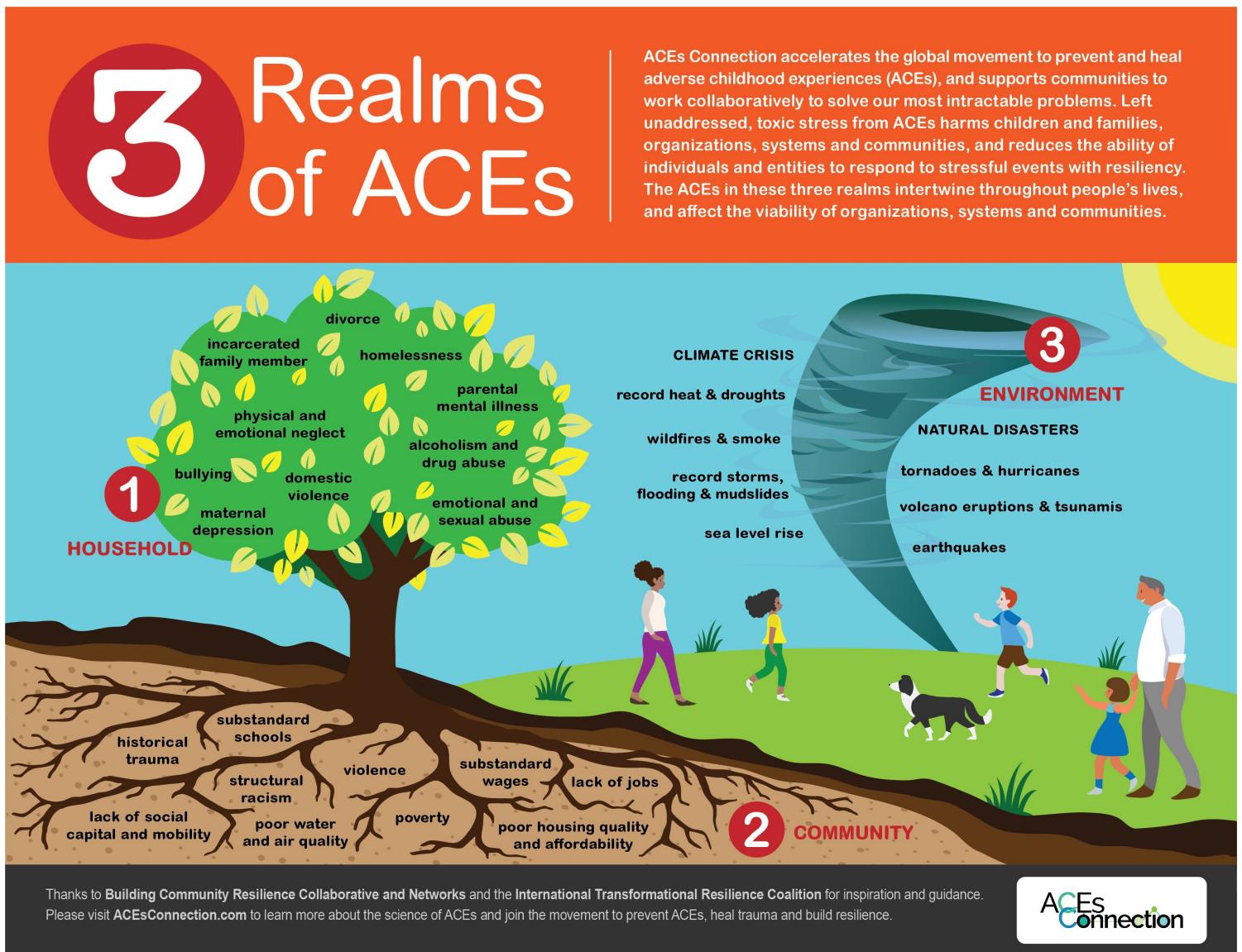
- ◊ Planned by a subgroup of the Davis County Human Services Directors Committee
- ◊ Held January 25, 2019 at the McKay Dee Hospital Auditorium
- ◊ Three-fold purpose: (1) learn about the effects of adverse childhood experiences and trauma; (2) understand what it means to be trauma informed; & (3) recognize the importance of self-care
- ◊ Invitees included health & human service providers, educators, administrators, childcare providers, law enforcement, youth-serving organizations, juvenile justice, faith-based organizations, healthcare, victim advocates & community members
- ◊ 210 people attended
- ◊ Presenters included experts in trauma informed care, ACEs, resilience & self-care
- ◊ Resilience documentary shown
- ◊ The overwhelming majority indicated the symposium provided valuable information that benefited their work & personal lives
- ◊ Many community agencies contributed funds & resources to make the symposium possible



ACEs & Trauma Highlights

Domestic Violence Fatality Review

- ◊ Organized by the Davis County Domestic Violence Coalition July 2019
- ◊ Facilitated by Joey Thurgood, Domestic Violence Fatality Review Coordinator from Utah Department of Health
- ◊ 45 attendees reviewed a Domestic Violence (DV) scenario & identified real or possible intersections for prevention to improve the way DV situations are approached
- ◊ Next Steps: Increase communication across DV response disciplines to develop common language & understand the issue; Broaden the discussion about primary prevention of intimate partner & family violence in Davis County; Identify & promote awareness activities of DV in conjunction with ACE & Trauma objectives & outcomes



ACEs & Trauma Highlights

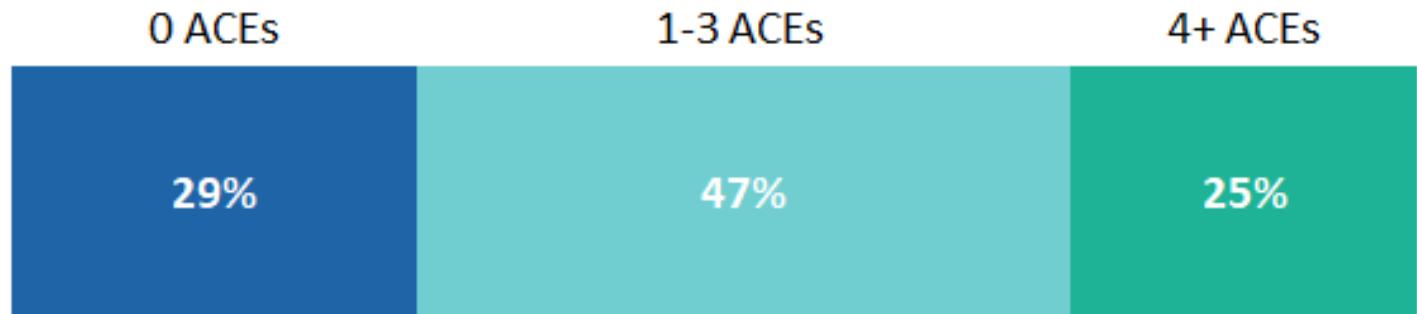
Trauma Sensitive Schools Training, Davis School District

- ◊ Davis School District held a Trauma Sensitive Schools Training on November 2019
- ◊ Training purpose: help participants understand sources of trauma, its impact on brain functioning and behavior, & what it means for schools
- ◊ 47 participants including teachers, administrators, counselors, school psychologists & community representatives
- ◊ 2020 trainings scheduled for January &

ACEs Screening

- ◊ Piloted ACEs screening tool at youth mental health screening event
- ◊ Used Center for Youth Wellness ACEs questionnaire
- ◊ Screening completed for 73 youth ages preK-6 grade
- ◊ 25% of participants with an ACE score of 4+
- ◊ Participants as young as age 7 identified with 8 ACEs

PreK-6th Grade ACE Scores



Source: Oct 1, 2019 Davis HELPS Youth Mental Health Screening

ADVERSE CHILDHOOD EXPERIENCES



DAVIS COUNTY 2020

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HEALTH

What are Adverse Childhood Experiences (ACEs)?

ACEs are major childhood trauma (before age 18) that includes neglect, abuse and household challenges. This trauma can result in changes in brain development and may affect a child's social skills and ability to learn. ACEs can also result in long-term health problems. Experts believe ACEs are a major health issue in the 21st century.

The 10 ACEs

- Emotional abuse
- Physical abuse
- Sexual abuse
- Emotional neglect
- Physical neglect
- Mother treated violently
- Household substance abuse
- Household mental illness
- Parents separated or divorced
- Household member incarcerated

ACEs Are Linked To:

- Suicide
- Depression
- Early death
- Substance abuse
- Smoking
- Cancer
- Heart disease
- Intimate partner violence
- Unemployment
- Financial stress
- Stroke
- Sexually transmitted diseases
- Diabetes
- Sexual violence
- Poor academic performance
- Asthma
- Frequent headaches
- Obesity
- Autoimmune diseases
- Teen pregnancy

Source: 1998 CDC-Kaiser Adverse Childhood Experiences Study

% of Adults Who Report ACEs



	DAVIS COUNTY	UTAH
<u>0 ACEs</u>	41.3%	38.6%
<u>1-3 ACEs</u>	43.3%	44.4%
<u>4+ ACEs</u>	15.4%	17.1%

Source: Utah Behavioral Risk Factor Surveillance System, 2013, 2016 & 2018

For more information contact the Davis County Health Department at 801-525-5072

% of Adults Who Report Abuse



	DAVIS COUNTY	UTAH
Physical	17.7%	19.0%
Sexual	12.7%	13.1%
Verbal	34.5%	36.9%

Source: Utah Behavioral Risk Factor Surveillance System, 2013, 2016, & 2018

% of Adults Who Report Household Challenges



	DAVIS COUNTY	UTAH
Mental Illness	23.9%	22.3%
Criminal Household Member	5.5%	7.7%
Mother Treated Violently	13.9%	15.2%
Substance Abuse	20.9%	23.0%
Divorced/Separated	20.7%	22.2%

Source: Utah Behavioral Risk Factor Surveillance System, 2013, 2016, & 2018

Definitions

Emotional abuse: A parent, stepparent, or adult living in your home swore at you, insulted you, put you down or acted in a way that made you afraid that you might be physically hurt.

Physical abuse: A parent, stepparent, or adult living in your home pushed, grabbed, slapped, threw something at you or hit you so hard that you had marks or were injured.

Sexual abuse: An adult, relative, family friend, or stranger who was at least 5 years older than you ever touched or fondled your body in a sexual way, made you touch his/her body in a sexual way or attempted to have any type of sexual intercourse with you.

Criminal household member: A household member went to prison.

Mother treated violently: Your mother or stepmother was pushed, grabbed, slapped, had something thrown at her, kicked, bitten, hit with a fist, hit with something hard, repeatedly hit for over at least a few minutes or ever threatened or hurt by a knife or gun by your father (or stepfather) or mother's boyfriend.

Household substance abuse: A household member was a problem drinker or alcoholic or a household member used street drugs.

Mental illness in household: A household member was depressed or mentally ill or a household member attempted suicide.

Parental separation or divorce: Your parents were ever separated or divorced.

Emotional neglect: No one in your family loved you or thought you were important or special. Your family didn't look out for each other, feel close to each other or support each other.

Physical neglect: You didn't have enough to eat, had to wear dirty clothes and had no one to protect you. Your parents were too drunk or high to take care of you or take you to the doctor if you needed it.

*While the validated BRFSS module addresses ACEs, no questions are included that measure physical or emotional neglect.

ACEs & Trauma Highlights

State Highlights

- ◊ Utah awarded CDC's Essentials for Childhood Framework Grant—Creating Safe, Stable, Nurturing Relationships & Environments for All Children
- ◊ Utah Coalition for Protecting Childhood (UCPC) organized 3 workgroups: Adverse Childhood Experiences & Opioids; Economic Policy; & Social Norms Change Parenting/Corporal Punishment
- ◊ Prevent Child Abuse Utah reached 12,068 students, 839 faculty, & 457 community members in Davis County through their School & Community Based Program which includes child abuse prevention, internet safety, bullying prevention, etc., pcautah.org

National Highlights

- ◊ Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence Report—<https://www.cdc.gov/violenceprevention/pdf/preventingACES-508.pdf>
- ◊ VetoViolence Campaign & App—<https://vetoviolence.cdc.gov/apps/main/home>

ACEs can have lasting effects on...



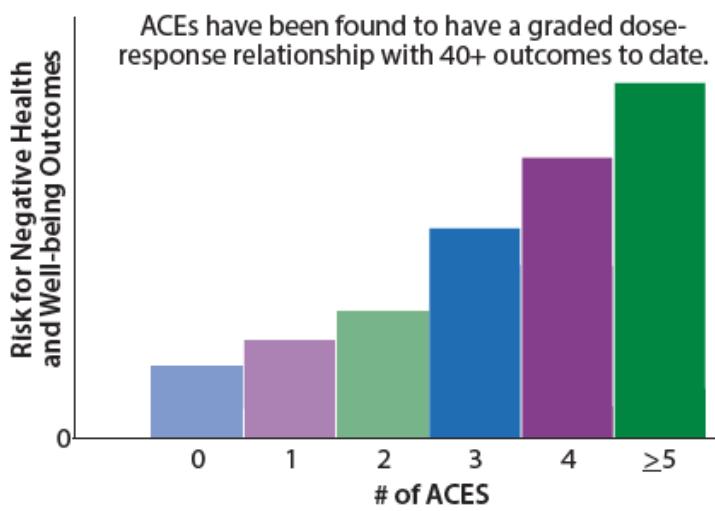
Health (obesity, diabetes, depression, suicide attempts, STDs, heart disease, cancer, stroke, COPD, broken bones)



Behaviors (smoking, alcoholism, drug use)



Life Potential (graduation rates, academic achievement, lost time from work)



*This pattern holds for the 40+ outcomes, but the exact risk values vary depending on the outcome.

Source: CDC

ACES & TRAUMA RESOURCES

ACE Study, CDC—www.cdc.gov/violenceprevention/acestudy

Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence Report—<https://www.cdc.gov/violenceprevention/pdf/preventingACES-508.pdf>

Resilience: The biology of stress & the science of hope (documentary, 60 min)
—kpjrfilms.co/resilience

Ted Talk: How Childhood Trauma Affects Health Across A Lifetime, Nadine Burke Harris (15 min)—ted.com

ACEs Connection—<https://www.acesconnection.com/>

Davis Mindfulness Center—<https://davismindfulness.org/>

Mindful Schools—www.mindfulschools.org

Mindfulness Utah—www.mindfulnessutah.com

Prevent Child Abuse Utah—pcautah.org

EveryDay Strong—<https://www.unitedwayuc.org/get-involved/everyday-strong>

VetoViolence Campaign & App—vetoviolence.cdc.gov

Uplift Families—<https://www.upliftfamilies.org/>

Center on the Developing Child—<https://developingchild.harvard.edu/science/key-concepts/>

Strong Parents, Stable Children—<https://ctf4kids.org/about-prevention/protective-factors-training/>

Trauma Informed Approaches and Interventions, SAMHSA—www.samhsa.gov/nctic/trauma-interventions

Priority 3: OPIOIDS

Opioid Prevention Workgroup

The Davis County Opioid Prevention Workgroup was formed in 2019 to bring together the many partners touched by and responding to the opioid epidemic. The Davis County Health Department provides administrative support to the group.

Outcome Goal

Reduce poisoning deaths in Davis County from 16.9 (2013-2015) deaths per 100,000 to 13.2 deaths per 100,000 by the year 2030.
(National Healthy People 2020 Target)

Accomplishments

Meetings: 4—2/21, 5/16, 8/27, 11/14

Participants: 38

Grant Applications Linked to CHIP Priority: 3

New Funding: \$73,275

Community Partners

- ◊ Antelope Animal Hospital
- ◊ Bountiful Police Department
- ◊ Centerville Police Department
- ◊ CVS Pharmacy
- ◊ Davis Behavioral Health
- ◊ Davis County Dispatch
- ◊ Davis County Health Department
- ◊ Davis County Sheriff's Office
- ◊ Davis Hospital and Medical Center
- ◊ Davis School District
- ◊ Intermountain Layton Hospital
- ◊ Lakeview Hospital
- ◊ Midtown Clinic
- ◊ North Davis Fire Department
- ◊ Oral and Maxillofacial Surgeons of Utah
- ◊ Smith's Pharmacy
- ◊ South Davis District Dental Society
- ◊ South Davis Metro Fire Department
- ◊ South Weber Fire Department
- ◊ USU Extension
- ◊ Walmart Pharmacy



Partner Responsibility for Opioids

Strategies/Activities	Agencies with Responsibility
1. Increase community awareness to prevent opioid-related overdoses & deaths (opioid risks & addiction, signs of overdose, non-opioid therapies for pain, stigma reduction, DEA 360, naloxone standing order, Talk to Your Pharmacist campaign).	Davis Behavioral Health, Davis County Health Department, Davis County Sheriff's Office, Davis Head Start, Davis HELPS, Fire Departments, Northern Utah Coalition, USU Extension-HEART, Walmart
2. Develop & distribute community opioid crisis response plan	Davis County Health Department, Davis County Opioid Workgroup, Davis HELPS
3. Education for healthcare professionals (prescribers, pharmacies), promote use of controlled substance database	Davis County Health Department, Davis Hospital, Davis Technical College, Intermountain Healthcare, Lakeview Hospital, Walmart
4. Increase naloxone availability & education.	Children's Service Society, Davis Behavioral Health, Davis County Health Department, Davis Head Start, Davis School District, Fire Departments, Intermountain Healthcare, Lakeview Hospital, Northern Utah Coalition, USU Extension-HEART, Walmart
5. Safe use, storage & disposal initiatives	Communities that Care, Davis Behavioral Health, Davis County Sheriff's Office, Davis HELPS, Davis Hospital, Intermountain Healthcare, Lakeview Hospital, USU Extension-HEART, Walmart
6. Increase access to behavioral health services & medication assisted treatment (See Access Strategies)	Davis Behavioral Health, Davis Behavioral Health Network, Davis County Sheriff's Office, Davis Hospital, Intermountain Healthcare
7. Engage partners to develop substance abuse prevention assessment & strategic plan	Communities that Care, Davis Behavioral Health, Davis County Health Department, Davis HELPS, Davis School District
8. Actively participate in state-wide Utah Coalition for Opioid Overdose Prevention (UCO-OP)	Bountiful Police Department, Davis County Health Department

Opioid Prevention Objectives Progress

Short-term Objectives	Target Date	Status
Distribute community opioid toolkit to community leaders, emergency responders, education/prevention partners, human services directors, and the public.	12/31/2020	On Track
Engage residents, families, and service providers that have been involved in or affected by an opioid overdose in stigma-reducing community education campaigns. Share stories through a media campaign.	12/31/2020	On Track
Complete opioid crisis response plan.	12/31/2019	Complete 8/2019
Develop opioid crisis response situational awareness communication process.	12/31/2020	On Track
Conduct drill to exercise opioid crisis response plan.	12/31/2020	On Track
Develop and conduct an assessment of education campaigns and healthcare system policies impacting prescribing practices.	12/31/2020	On Track
Distribute Utah Opioid Toolkit for dentists to providers throughout the county.	12/31/2020	On Track
Report number of residents, agencies, and groups trained to administer naloxone.	Annually	On Track
Report number of naloxone kits distributed by partner agencies in Davis County.	Annually	On Track
Report number of naloxone doses dispensed by pharmacies in Davis County.	Annually	On Track
Report naloxone administered/opioid overdose reversals in Davis County.	Annually	On Track
Support national and local drug/medicine take back events.	Annually	On Track
Complete Davis County substance abuse prevention strategic plan.	12/31/2021*	On Track
At least one city or CTC will complete a local substance abuse prevention plan.	12/31/2021	On Track
Educate about availability and use of community and provider data dashboards.	12/31/2021	On Track
Pilot substance abuse diversion program giving law enforcement the ability to divert those using drugs to a receiving center for treatment instead of issuing a charge or arrest.	12/31/2020	Complete 12/2019

* Extended from 2019 to 2021 due change in agency taking the lead on this project.

Opioid Prevention Objectives Progress

Long-term Objectives	Target Date	Status
Increase number of providers authorized to treat opioid dependency with buprenorphine by 10% each year. (Baseline: 32, 2019)	12/31/2023	On Track
Provide recovery support following a crisis within 24 hours of an overdose.	12/31/2023	On Track
Establish county-wide diversion program for residents experiencing substance abuse crisis to receive treatment and services.	12/31/2023	On Track

Population Measures	Baseline	Current Measure	Target Measure
Decrease number of opioid prescriptions dispensed from 753.9 (2014-2016) opioid prescriptions dispensed per 1,000 population to 678.5** opioid prescriptions dispensed per 1,000 population by 2023. (Opioid dashboard) †	753.9 opioid prescriptions dispensed per 1,000 population (2014-2016)	715.3 opioid prescriptions dispensed per 1,000 population (2016-2018)	678.5 opioid prescriptions dispensed per 1,000 population (2023)
Reduce the average number of opioid tablets in each prescription. (Identify data source. Establish baseline & target.)	—	—	—
Decrease high risk prescribing—daily MME \geq 90 from 124.7 (2014-2016) opioid prescriptions dispensed per 1,000 population to 112.2** opioid prescriptions dispensed per 1,000 population by 2023. (Opioid Dashboard)	124.7 opioid prescriptions \geq 90 MME dispensed per 1,000 population (2014-2016)	111.2 opioid prescriptions \geq 90 MME dispensed per 1,000 population (2016-2018)	112.2 opioid prescriptions \geq 90 MME dispensed per 1,000 population (2023)
Decrease opioid overdose deaths in Davis County from 13.9 (2014-2016) deaths per 100,000 population to 12.5** deaths per 100,000 population by 2023. (Opioid Dashboard) †	13.9 deaths per 100,000 population (2014-2016)	13.6 deaths per 100,000 population (2015-2017)	12.5 deaths per 100,000 population (2023)
Reduce poisoning deaths in Davis County from 16.9 (2013-2015) deaths per 100,000 to 13.2* deaths per 100,000 by the year 2030. (IBIS)	16.9 deaths per 100,000 population (2013-2015)	17.7 deaths per 100,000 population (2016-2018)	13.2 deaths per 100,000 population (2030)

* Healthy People 2020 target

** A 10% reduction from baseline

† Baseline & target measure changed due to availability of a more accurate source

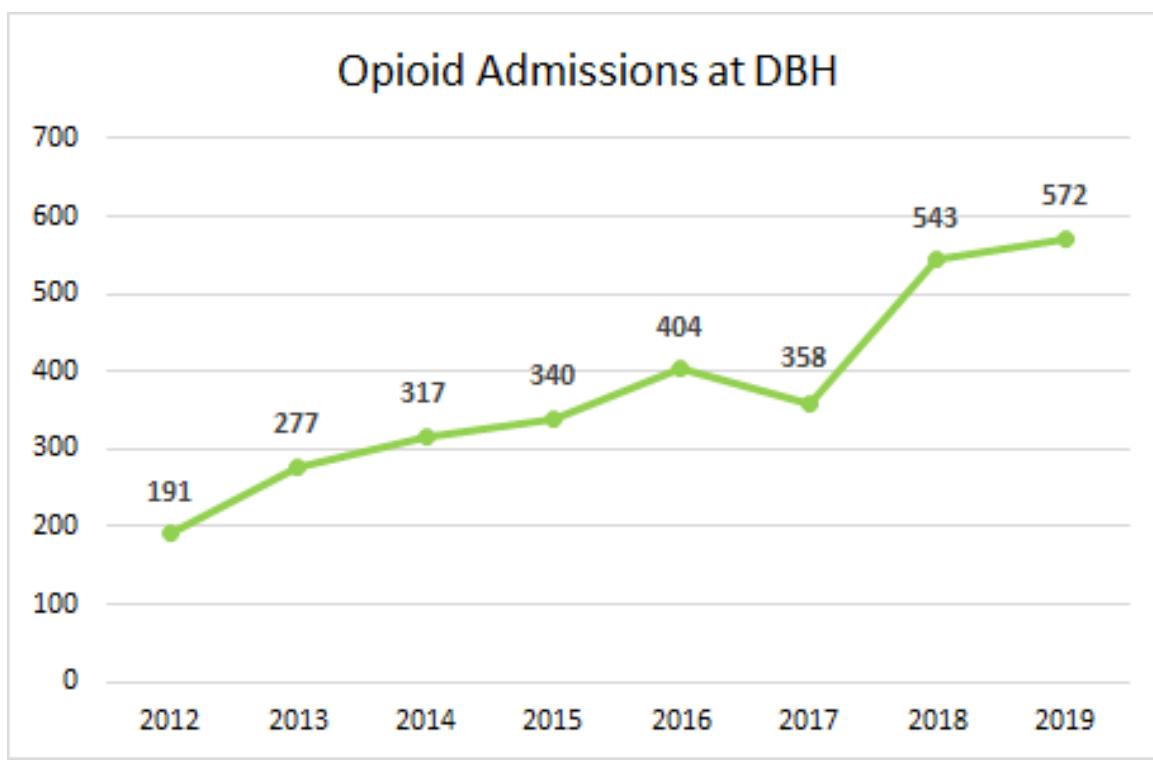
Opioid Death Prevention Highlights

Opioid Community Collaborative

- ◊ 394 clients served
- ◊ Provided medication-assisted treatment, therapy & case management
- ◊ Provided access to treatment within 1.1 days
- ◊ 93% of participants remain abstinent of opioids at 16 months
- ◊ 78% retention rate in treatment for 6 months
- ◊ 61% of participants report improved housing situation
- ◊ 74% of participants report improved employment situation
- ◊ Partners include: Davis Behavioral Health (DBH), Intermountain Healthcare, Weber Human Services & Utah Department of Health

Medication Assisted Treatment (MAT) Provider Outreach, Davis Behavioral Health

- ◊ 55 providers participated in one-on-one discussion regarding MAT
- ◊ 25 providers received MAT materials who were not available for one-on-one discussions
- ◊ 12 Davis County Family Practice Offices visited (others in Weber County)
- ◊ 2 waivered providers not currently seeing MAT clients previously will start doing so in partnership with DBH
- ◊ Provider education about prescribing naloxone any time they prescribe opiates to patients
- ◊ Increased awareness of the benefits of MAT and nature of addiction
- ◊ 2019 MAT provider baseline: 32



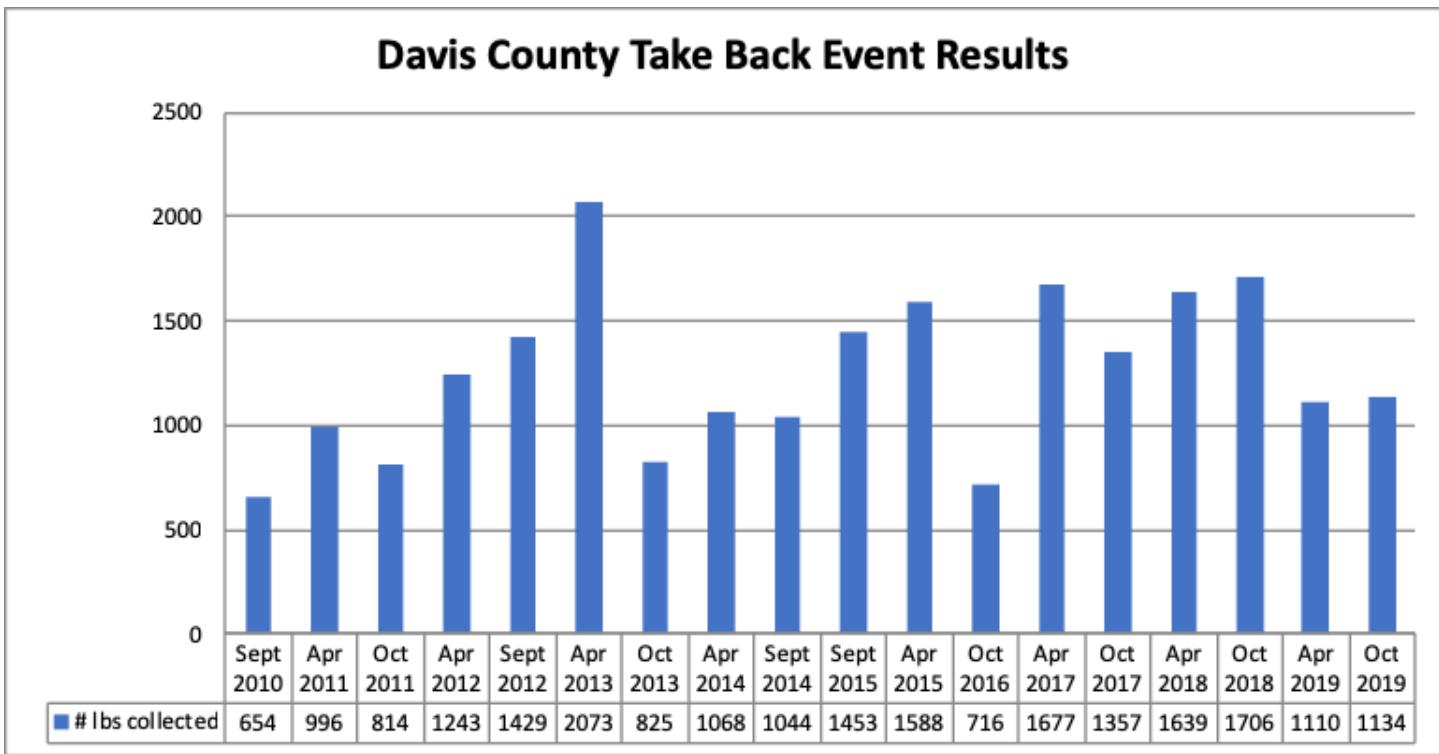
Opioid Death Prevention Highlights

Safe Use, Storage & Disposal

- ◊ 2 prescription drug take back events—
2,244 lbs. collected in 2019
- ◊ 22 permanent prescription drug drop off
locations in Davis County found at
useonlyasdiredcted.org

Future Plans

- ◊ Distribute Use Only As Directed campaign
resources throughout the community,
<https://useonlyasdiredcted.org/resources/>



Opioid Death Prevention Highlights

Davis County Health Department

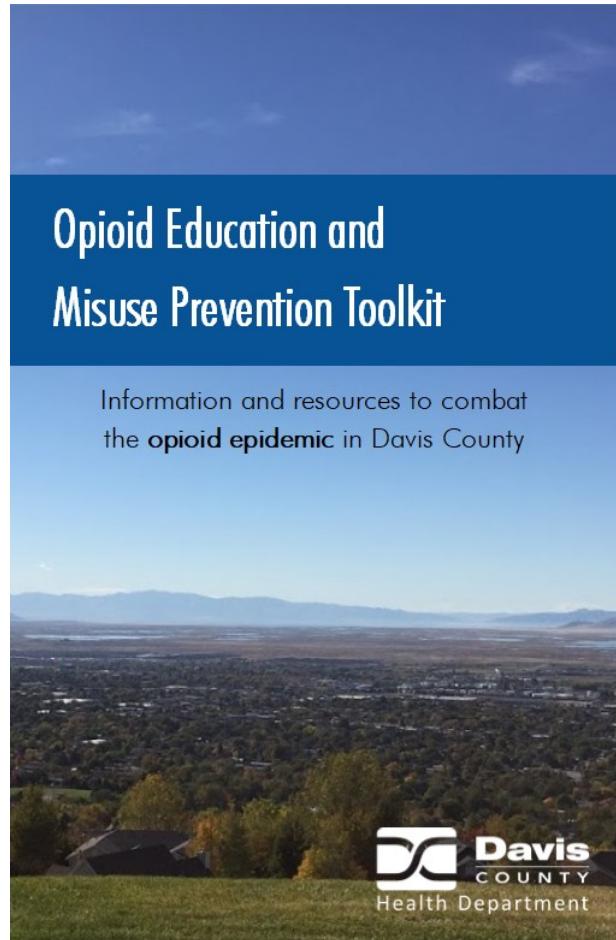
- ◊ Participated in & supported the Utah Coalition for Opioid Overdose Prevention (UCO-OP)
- ◊ Participated on workgroup developing state-wide opioid media best practices in consultation with a national evaluation firm
- ◊ Participated on review & feedback workgroup for new community opioid data dashboard
<https://dashboard.health.utah.gov/opioid/>
- ◊ Developed first community education toolkit on preventing opioid overdoses in Davis County
bit.ly/opioideducationtoolkit
- ◊ Facilitated process with community partners to develop an opioid crisis response plan
- ◊ Secured naloxone for 52 high risk patients in Davis County
- ◊ Provided naloxone education to patients & family members

Future Plans

- ◊ Identify naloxone funding for correction & treatment centers releasing individuals at-risk for overdose back to the community

Lakeview Hospital

- ◊ Provide care to overdose patients
- ◊ Educated physicians/providers on CDC Prescribing Guidelines
- ◊ Improved prescribing practices
- ◊ Patient education about the dangers & proper use of narcotic pain medication
- ◊ Increasing community awareness through discharge paperwork
- ◊ Shared the Davis County Opioid Education & Misuse Prevention Toolkit



<https://vimeo.com/352389380>

Opioid Death Prevention Highlights

USU Extension HEART

- ◊ Provided the community with 400 naloxone kits
- ◊ Naloxone training provided to 200 community members
- ◊ Provided community education, developed factsheets & website with resources: <https://extension.usu.edu/heart/resources>
- ◊ Helped promote opioid overdose prevention media campaigns
- ◊ Hosted A Light to Remember in conjunction with Diamond Tree Recovery, a community overdose awareness event
- ◊ Recorded interviews/stories from 4 Davis County residents for a campaign to reduce stigma

Future Plans

- ◊ Promote Community Opioid Stories — Informing the National Narrative: Stories of Utah's Opioid Crisis, <https://digital.lib.usu.edu/digital/collection/p16944coll134>

Walmart

- ◊ Distributed naloxone
- ◊ Educated physicians/providers on CDC Prescribing Guidelines
- ◊ Addressed healthcare system policies impacting prescribing practices
- ◊ Reduced opioid prescriptions

OPIOID OVERDOSE AWARENESS



Parents participating in A Light to Remember lost their daughter to overdose. She was a beautiful, bright soul who is greatly missed.

Photo Credit: Diamond Tree Recovery Facebook Page

DEA 360 Strategy in Utah

- ◊ [DEA 360 STRATEGY REACH AND IMPACT REPORT: SALT LAKE CITY](#)
- ◊ Opioid Community Awareness Event, at Centerville Police Department
- ◊ Outreach Campaign <https://www.wakeup-utah.com/>



COUNTY, STATE & NATIONAL OPIOID RESOURCES

Davis Behavioral Health—Opioid Community Collaborative, www.dbhutah.org/prescription-drug-misuse

Davis County Receiving Center—907 Clark Lane, Farmington, 801-773-7060

Davis County Opioid Education & Misuse Prevention Toolkit—bit.ly/opioideducationtoolkit

Davis County Health Department—Davis County Opioid Overdose Prevention Information, <https://go.usa.gov/xVEQu>

USU Extension, HEART Program—<https://extension.usu.edu/heart/resources>

Stop the Epidemic Campaign—www.opidemic.org

Use Only As Directed Campaign, permanent prescription drug drop off locator—useonlyasdirected.org

Utah Opioid Data Dashboard—<https://dashboard.health.utah.gov/opioid/>

Utah Naloxone—utahnalaxone.org

The Church of Jesus Christ of Latter-Day Saints, Addiction Recovery Program—<https://addictionrecovery.churchofjesuschrist.org>

Utah Violence & Injury Prevention Program, Opioid Overdoses—www.health.utah.gov/vipp/topics/prescription-drug-overdoses

Talk to Your Pharmacist Toolkit—<https://health.utah.gov/vipp/pdf/RxDrugs/TalkToYourPharmacistToolkit.pdf>

Utah Controlled Substance Database—<https://dopl.utah.gov/programs/csdb/>

Centers for Disease Control & Prevention—CDC Guideline for Prescribing Opioids for Chronic Pain, www.cdc.gov/drugoverdose/prescribing/guideline.html

U.S. Department of Health & Human Services, The U.S. Opioid Epidemic—hhs.gov/opioids/

Coordinated PREVENTION

Davis HELPS

Davis HELPS is the lead coalition working to implement the Davis4Health coordinated prevention plan. Davis HELPS purpose and partners can be found on page 2.

Outcome Goals

1. Move prevention efforts upstream
2. Ensure coordinated, effective & targeted prevention programs
3. Advocate for the best prevention possible

Accomplishments

- ◊ Grant Applications Linked to CHIP Priority: 3
- ◊ New Funding: \$303,400



Coalition partners attended the Utah Prevention Coalition Summit, June 2019 in Bryce Canyon, Utah

Partner Responsibility for Prevention

Strategies/Activities	Agencies with Responsibility
1. Conduct prevention curriculum & program inventory assessment & evaluate effectiveness	Children's Service Society, Davis Behavioral Health, Davis County Health Department, Davis Head Start, Davis School District, Davis Technical College, NUHOPE, Open Doors, Protective Factors for Utah Families, Safe Harbor Crisis Center, YMCA
2. Engage partners to develop substance abuse prevention assessment & strategic plan	Davis Behavioral Health, Davis County Health Department, Davis HELPS, Davis School District, Intermountain Healthcare, USU Extension, YMCA
3. Conduct teen & young adult focus groups	Centerville Cares, Layton Community Action Council, Weber State University, USU Extension, Davis HELPS, Davis School District, YWCA, Livestrong House, Davis County Health Department, Children's Service Society
4. Develop youth prevention advocates & leaders	Davis County Health Department, Davis HELPS, Davis School District, Layton Community Action Council, Livestrong House, USU Extension, Weber State University, YWCA,
5. Increase community awareness & use of SAFEUT app	Children's Service Society, Davis Chamber of Commerce, Davis County Health Department, Davis HELPS, Davis School District, Davis Technical College, NUHOPE, Open Doors, Weber State University, USU Extension, YWCA
6. Advocate for SHARP data improvements & use (ensure questions accurately reflect community issues & risks, develop SHARP data experts, community & school data presentations)	Davis Behavioral Health, Davis County Health Department, Davis HELPS, Davis School District, YMCA
7. Develop prevention messaging & increase public awareness (include messages about shame, connectedness & stigma)	Centerville Cares, Davis Behavioral Health, Davis County Health Department, Davis HELPS, Davis School District, Protective Factors for Utah Families, Safe Harbor Crisis Center, YMCA
8. Incorporate media literacy, positive digital citizenship, screentime & use of technology in prevention efforts.	Davis County Health Department, Davis County Libraries, Davis Head Start, Davis School District, YWCA
9. Prevention education for community decision makers & religious leaders	Centerville Cares, Davis Chamber of Commerce, Davis County Health Department, Davis HELPS, Davis School District, NUHOPE, Protective Factors for Utah Families, Safe Harbor Crisis Center
10. Develop online prevention toolkit (ensure access via public libraries, etc.)	Davis Behavioral Health, Davis HELPS
11. Establish evidence-based community prevention coalitions	City Leaders, Davis Behavioral Health, Davis County Health Department, Davis School District, Layton Community Action Council, Parent Advocacy Councils

Prevention Objectives Progress

Short-term Objectives	Target Date	Status
Develop prevention curriculum and program evaluation plan. Conduct assessment and inventory to evaluate effectiveness. (Includes HOPE Squad evaluation. See suicide plan)	5/31/2021	On Track
Provide SHARP (youth health survey) data training to partners in Davis County as updated measures become available. (2019, 2021 & 2023)	Every Other Year	On Track
Complete Davis County substance abuse prevention strategic plan. (Also in Opioid plan)	12/31/2021*	On Track
At least one city or CTC will complete a local substance abuse prevention plan. (Also in Opioid plan)	12/31/2021	On Track
Involve youth in community health assessment process.	12/31/2019	Complete 6/2019
Provide leadership and prevention training for youth.	Every Other Year	On Track
Establish Davis Youth Leadership Team.	12/31/2019	Complete 9/2019
Increase number of professionals trained as substance abuse prevention specialist. (Establish baseline & target)	12/31/2021	On Track
Provide prevention education for decision makers.	1/31/2020	On Track
Establish Davis Mindfulness Center.	12/31/2019	Complete 04/2019
Advocate for SHARP data improvements to ensure questions accurately reflect community issues and risk.	01/31/2021	On Track
Establish at least one evidence-based community prevention coalition.	12/31/2019	Complete 12/2019

* Extended from 2019 to 2021 due change in agency taking the lead on this project.

Prevention Objectives Progress

Long-term Objectives	Target Date	Status
Establish an additional 2 evidence-based community prevention coalitions.	12/31/2023	On Track
Develop and establish online prevention education toolkit.	12/31/2023	On Track
Develop methods to gather feedback from teens and young adults to dive deeper into adolescent health data themes including risk and protective factors.	12/31/2023	On Track
Develop county prevention messages and talking points.	12/31/2023	On Track
Advocate for app safety/ratings and safe tech initiatives.	12/31/2023	On Track
Establish a community based wellness center that focuses on mindfulness, prevention, and support services.	12/31/2023	On Track

Prevention Population Measures	Baseline	Current Measure	Target Measure
Decrease the percent of students that experience family conflict in Davis County from 30.5% (2017) to 27.45%** by 2023. (SHARP)	30.5% (2017)	25.2% (2019)	27.45% (2023)
Decrease youth in need of substance abuse treatment in Davis County from 2.9% (2017) to 2.61%** by 2023. (SHARP)	2.9% (2017)	2.7% (2019)	2.61% (2023)
Decrease the percent of Davis County youth experiencing feeling sad or hopeless for more than two weeks in the past year from 26.0% (2017) to 23.4%** by 2023. (SHARP)	26.0% (2017)	25.9% (2019)	23.4% (2023)
Reduce suicide deaths in Davis County from 14.5 (2014-2016) deaths per 100,000 to 10.2* deaths per 100,000 by the year 2030. (IBIS)	14.5 deaths per 100,000 (2014-2016)	18.95 deaths per 100,000 (2016-2018)	10.2 deaths per 100,000 (2030)

*Healthy People 2020 Target

**A 10% reduction from baseline

Prevention Highlights

Educational Awareness (EA) Course:

E-cigarettes & Marijuana

- ◊ Partnership between Davis School District & Davis County Health Department in response to vaping epidemic
- ◊ Rationale: vape products are the most commonly used devices for youth substance abuse in Davis County, increased numbers of students using e-cigarettes to vape nicotine and marijuana at school; safe school violations are expensive and time consuming; too much time away from school due to suspension required by policy
- ◊ Goals of EA course: increase student knowledge of harms related to e-cigarettes; increase student knowledge of harms related to marijuana; increase parental/guardian education about youth e-cigarette & marijuana use; increase student perception of parental disapproval of e-cigarette use; increase student perception of parental disapproval of marijuana use
- ◊ Course includes: 7 required student modules, parent module, badge to return to school, educational & quit resources
- ◊ 138 students completed the pre/post tests (Aug-Dec 2019)



- ◊ Evaluation: pilot period; pre/post tests measuring changes in knowledge, attitudes, beliefs; reduction in 2nd violations
- ◊ E-cigarette/Vape resources added to DSD Student & Family Services Prevention website: <https://www.davis.k12.ut.us/departments/student-family-resources/preventioncommunity>

Future Plans

- ◊ Expand audience beyond those with safe school violations
- ◊ Increase primary prevention at the elementary & secondary levels
- ◊ Work with Davis County Youth Council to develop primary prevention messages



Prevention Highlights

YOUth Matter: Teen Health Leadership Summit

- ◊ Free event for youth grades 7-12
- ◊ The event tag line "Your health. Your voice. Your future." highlighted goal of the event to engage youth in county health improvement efforts & empower them to make a difference in their circles of influence
- ◊ 250 youth attended the day long health summit June 12, 2019 to learn about & discuss important issues facing young people in Davis County
- ◊ Applied social development strategy to provide youth with opportunities, skills, and recognition. Strong bonds with family, friends, school, and community were encouraged. The program contained motivation to have clear standards and choose healthy behaviors.
- ◊ Speakers & sessions included adolescent health data and topics directly related to risk & protective factors of most concern in students (Fight For Not With Your Family; Happiness; Effects of Technology on the Brain; Mindfulness & Resiliency/Coping Skills; Tobacco, E-Cigarettes, Nicotine; Substance Abuse/Opioids; and Suicide Prevention)
- ◊ Youth voted on & identified top priorities: anxiety & depression; screen time; sleep
- ◊ Final session allowed small group discussion to reflect on ways to address these priorities in their own schools & communities



Youth Leadership Team

- ◊ Council formed to plan initiatives that aim to address youth selected priorities, as well as foster leadership skills, and personal growth
- ◊ 12 youth from a variety of schools & backgrounds started participating in monthly meetings beginning September 2019
- ◊ Community partners from 6 agencies support the council
- ◊ Focusing on Mental Health & Substance Use



Prevention Highlights

SAFEUT

- ◊ SAFEUT Crisis Chat & Tip Line is a statewide service that provides real-time crisis intervention to youth through live chat & confidential tip program right from smartphone
- ◊ Licensed clinicians in 24/7 CrisisLine call center respond to all incoming chats & calls by providing: supportive or crisis counseling; suicide prevention; & referral services
- ◊ Will help anyone with emotional crises, bullying, relationship problems, mental health, or suicide-related issues



2018-2019 School Year Davis District Data

Tips

1,961

Chats

2,228

Users

Students
4,098
Parents
70
Educators
15

Tip Topics

Suicide
Bullying
Depression
Drugs
Cutting
Harassment

Prevention Highlights

Student Health & Risk Prevention (SHARP) Survey

- ◊ Administered Spring 2019, data released October 2019
- ◊ 135+ questions
- ◊ 2019 survey largest sample ever (census), includes 13,199 completed from youth grades 6, 8, 10, 12
- ◊ New questions added in 2019 about gender identity, sexual orientation, social isolation, vaping, technology, guns
- ◊ Davis report link: dsamh.utah.gov/pdf/sharp/2019/Davis%20County.pdf
- ◊ State SHARP data trainings attended by 11 Davis County professionals from 4 organizations
- ◊ New Utah SHARP Web Tool— www.bach-harrison.com/utahsharpwebtool
- ◊ Davis County Adolescent Health Infographic & Adolescent Health Profile developed to summarize data

Future Plans

- ◊ SHARP data presentations available for community stakeholders
- ◊ Advocate for additional SHARP survey questions to address current community youth issues including: screen-time, digital safety, pornography/sexting, sleep & childhood trauma



Davis County Adolescent Health Profile 2019

Demographics

Ages 10-19*	61,630
Percent of Population Ages 10-19*	17.6%
Heterosexual (straight)†	89.8%
Uninsured (under 19 years old)*	2.9%
Below Poverty Level (under 18 years old)*	6.4%
Children Participating in Free/Reduced Price Lunch*	22.0%
Disability (ages 5-17)*	3.6%
High School Graduation Rates (population over 25 years old)*	94.7%
Birth Rate of Females (per 1,000 population 15-19)*	10.26

Lifestyles

Physical Activity (met recommended activity guidelines)‡	18.3%
Obesity (BMI greater than the 95th percentile for age and sex)‡	8.0%
Family Meals (\geq 1 meal with their family on \geq 5 days in the past week)†	64.4%
Exposed to Smoking at Home‡	10.3%

Mental and Emotional Wellbeing

Screen Time (\geq 2 hours per school day, for non-school activities)†	64.6%
Disconnected Youth (% ages 15-19 who are not working or in school)(2013-2017)	3.6%
Felt Sad or Hopeless (for two weeks or more weeks in a row in the past year)†	25.9%
Depressive Symptomst	33.0%
High Need for Mental Health Treatment†	17.7%
Self-Harm (during last 12 months did something to purposely hurt self)†	14.5%
Suicide Ideation (during last 12 months seriously considered)†	15.7%
Suicide Plan (during last 12 months)†	11.2%
Attempted Suicide (during last 12 months)†	6.0%
Can Access Gun and Bullets in the Home†	19.9%
Felt That People are Around Me But Not With Me (often/always in the past 7 days)†	18.5%
Low Commitment to School†	41.9%
Anti-Social Behaviort	30.9%

Violence, Abuse, & Trauma

Seat Belt Use (always/most of the time when riding in the car)†	95.3%
Teenage Driver Crashes, % of All Crashes (ages 15-19)(2017)	24.2%
Drinking and Driving†**	2.0%
Texting or Emailing While Driving (\geq 1 times in the past 30 days)†**	33.4%
Talked on the Phone While Driving (\geq 1 times in the past 30 days)†**	47.3%
Hit or Injured on Purpose by a Dating Partner (during the last 12 months)‡	3.9%
Have Experienced Dating Violence‡	11.6%
Bullied on School Property (during last 12 months)†	17.6%
Electronic Bullying (during the last 12 months)†	20.1%
Family Conflict†	25.2%
Child Abuse (per 100,000 population 0-17)*	823.2

Substance Use

Cigarette Smoking (past 30 days)†	0.7%
E-cigarette/Vaping (past 30 days)†	7.4%
Alcohol Use (past 30 days)†	3.3%
Marijuana Use (past 30 days)†	3.8%
Prescription Drug Abuse (past 30 days)†	1.8%

Chronic & Infectious Disease

Current Asthma‡	12.2%
Diabetes‡	1.1%
Children Adequately Immunized at 7th Grade Entry (2017)	93.1%
Chicken Pox (per 100,000 population 10-19)*	16.2
Pertussis (per 100,000 population 10-19)*	14.6
Chlamydia (per 100,000 population 15-19)(2017)	1219.5
Gonorrhea (per 100,000 population 15-19)(2017)	142.8

*2018 data

† 2019-Percentages are based on 6th, 8th, 10th, and 12th graders responses.

‡ 2017-Percentages are based on 8th, 10th, and 12th graders responses.

** Percentages are based on respondents that reported they drive.

The data included is from Utah's Indicator-Based Information System (IBIS) for Public Health, Student Health and Risk Prevention (SHARP)-Prevention Needs Assessment Survey (PNA), Census Bureau, Highway Safety, Division of Child and Family Services, Voices for Utah Children, and the Davis County Health Department

State Comparison

	Better
	Same
	Worse
	Not a comparable measure

Strengths

- Some of the lowest alcohol, tobacco, and other drug use rates in the nation.
- Some of the lowest rates of children living in poverty and of children living in single parent households in the nation.
- Top adolescent protective factors are family attachment, opportunity for positive social involvement (the opportunity to have your voice be heard and effect decisions), and belief in the moral order (the belief in right and wrong).

Challenges

- Suicide is the leading cause of death in youth ages 10-17.
- E-cigarettes and vaping products were the most commonly used substances among youth.
- Sexually transmitted infection rates continue to increase in adolescents and are the most common reportable diseases for youth ages 15-19.
- Priority risk factors include depressive symptoms, low commitment to school, family conflict, and antisocial attitudes (how wrong a student feels that criminal/violent activity is).
- Anxiety/depression, screen time, and sleep were voted as top youth health issues by young people at the YOUTH Matter Summit (2019).
- Challenges exist in relation to current community youth issues including: screen-time, digital safety, pornography/sexting, sleep, and childhood trauma. Davis4Health highly recommends that questions regarding these topics be added to the SHARP survey.

Question regarding this information can be directed to:

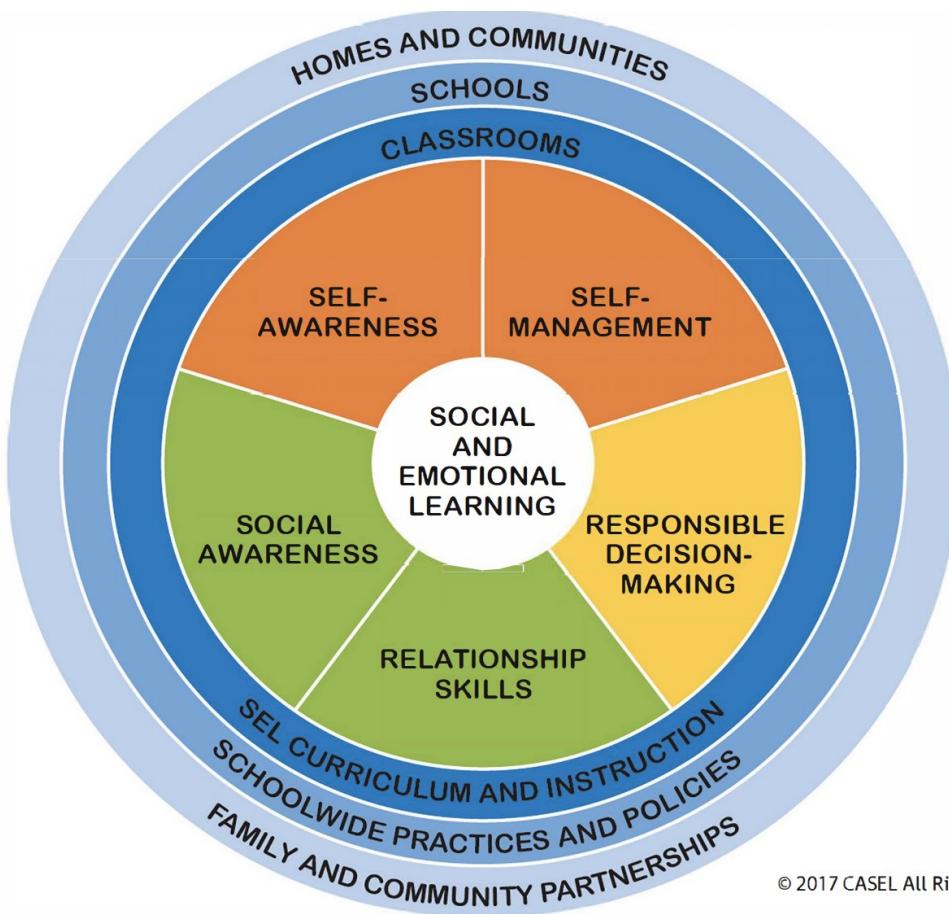
Maggie Matthews 801-525-5091,
mmatthews@daviscountyutah.gov

**DAVIS 4
HEALTH**

Prevention Highlights

Social & Emotional Learning Initiative, Davis School District

- ◊ DSD hired Social & Emotional Learning Director
- ◊ 2 Day Summer Social & Emotional Learning Symposium, 200 participants, link to video: <https://youtu.be/MCTyAIRsIE>
- ◊ Vision Developed: Employees & students acquire & effectively apply personal & social attitudes, behaviors, & skills necessary to lead happy & fulfilling lives.
- ◊ PureEdge Inc. Educator Self-Care & Brain Breaks Training (10 trainings, over 600 participants so far)
- ◊ 4 Focus Schools Developing Models: Northridge High, North Layton Jr High, Hill Field Elementary School, South Weber Elementary
- ◊ Monthly Advisory Team meetings
- ◊ Formed Community SEL Workgroup



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Prevention Highlights

Davis Mindfulness Center

- ◊ Davis Mindfulness Center opens, 476 Heritage Park Blvd, Suite 120, Layton, davismindfulness.org
 - ◊ Aims to cultivate community resilience through mindfulness training & wellness education
 - ◊ 100 Days of Mindful Self-care leading up to grand opening
 - ◊ Parent Mindful Child, class for parents & children (ages 6-11)
 - ◊ Learning to Breathe, course for adolescents (ages 13-17) & young adults (ages 18-22)
 - ◊ Mindfulness-Based Stress Reduction (MBSR) course, research based approach to managing symptoms of anxiety, depression & chronic pain for adults
 - ◊ Other initiatives: Mindful Book Club; Taste of Mindfulness; Anxiety Workshop
 - ◊ 626 participants
- Future Plans
- ◊ EveryDay Basics Podcast, <https://anchor.fm/davis-mindfulness-center>



Prevention Highlights

North Davis Communities that Care (CTC)

- ◊ Newly formed evidence-based community prevention coalition
- ◊ Coalition orientation held in August 2019
- ◊ Based on local data, aiming to prevent vaping & suicides among adolescents
- ◊ Focus on predictors of the problems/risk factors & protective factors that help buffer or protect against risks
- ◊ Priorities risk factors identified: low commitment to school & depressive symptoms
- ◊ 6 organized workgroups

Future Plans

- ◊ Invite West Point, Clinton & Sunset to join
- ◊ Develop an action plan to address priorities through evidence-based programs, practices & policies



CTC's Social Development Strategy promotes positive youth development using knowledge on what protects young people from developing health & behavior problems into an easy-to-use strategy.



Prevention Highlights

Centerville Cares

- ◊ Offered Spring & Fall sessions of Dr. Nedley's Depression and Anxiety Recovery course, 100 participants
- ◊ Powerful Brain, Healthy Body, a course for personal lifestyle empowerment for health & longevity, 68 participants
- ◊ Launch of Facebook page
- ◊ City Youth Council Question, Persuade, Refer (QPR) Training
- ◊ Participation in City July 4th Celebration parade & activities
- ◊ Received firearm safety training for suicide prevention
- ◊ Sponsor of Community Resilience Night Program at Viewmont High
- ◊ Articles in city newsletter
- ◊ Centerville Cares representative attending county prevention coalition meetings
- ◊ Shared resources with 35 interfaith leaders
- ◊ Centerville Foundation provided \$10,000 from the community donations for Centerville Cares initiatives



Prevention Highlights

Mentes Sanas (Healthy Minds) —Latino Advisory Committee

- ◊ 7 youth members
- ◊ 5 youth attended state 4H Teen Winter Retreat which focused on relationships education
- ◊ Compiled list of mental health service providers offering services in Spanish
- ◊ 25 attended Family Night: mental health workshop, speaker, & dinner
- ◊ 5 LIA (Latinos in Action) classes taught mental health resilience education (Clearfield HS, Westpoint Jr HS, Syracuse Jr HS)
- ◊ 6 youth attended 2 day retreat (Nov 2019) learning about mental health, advocacy & coalition work
- ◊ Funding received to replicate Mentes Sanas Latino Advisory Counsel in one more area within Davis County



COUNTY, STATE & NATIONAL PREVENTION RESOURCES

Davis HELPS

facebook.com/davishelps

Davis Behavioral Health—Prevention Programs

dbhprevention.org

Davis Mindfulness Center

davismindfulness.org

Davis County Health Department—Community Health Services

daviscountyutah.gov/health/about-dchd/divisions/community-health-services-division

Davis School District—Student & Family Prevention Resources

davis.k12.ut.us/departments/student-family-resources/preventioncommunity

North Davis Communities that Care

www.facebook.com/SyracuseClearfieldCTC

Centerville Cares

centervilleut.net/government/mayor/centerville-cares

Communities that Care

communitiesthatcare.net

Unleashing the Power of Prevention

nam.edu/perspectives-2015-unleashing-the-power-of-prevention

Collaborative for Academic, Social, and Emotional Learning (CASEL)

casel.org

Student Health and Risk Prevention (SHARP) Statewide Survey/Utah Prevention Needs Assessment Survey

dsamh.utah.gov/reports/sharp-survey

Utah SHARP Web Tool

www.bach-harrison.com/utahsharpwebtool

Davis4Health Resource Locator

Davis4Health.org

National Strategic Prevention Framework

<https://www.samhsa.gov/sites/default/files/20190620-samhsa-strategic-prevention-framework-guide.pdf>

Improving ACCESS to Behavioral Health Services

Davis Behavioral Health Network

The Davis Behavioral Health Network (formerly Community Access Committee) was formed in 2013 to bring service providers, community-based organizations and other interested partners together to work on improving access to behavioral health services in Davis County. The Davis County Health Department and Davis Behavioral Health provide administrative support to the group which meets quarterly.

Outcome Goal

Behavioral health services become more accessible in Davis County through promotion of existing resources, new screening and referral tools, an increase in effective prevention programs, and better trained helping professionals.

Accomplishments

- ◊ Meetings: 3—3/25, 6/24, 10/28
- ◊ Workgroups: Mental Health Screening Events, Behavioral Health Networking Events

- ◊ Participants: 25
- ◊ Grant Applications Linked to CHIP Priority: 2
- ◊ New Funding: \$708,000

Community Partners

- ◊ Davis Behavioral Health
- ◊ Davis Community Learning Center
- ◊ Davis County Health Department
- ◊ Davis Hospital & Medical Center
- ◊ Davis School District
- ◊ Family Counseling Service of Northern Utah
- ◊ Head Start
- ◊ Intermountain Healthcare
- ◊ Live Strong House
- ◊ MountainStar Healthcare
- ◊ Midtown Community Health Center
- ◊ NAMI
- ◊ The Church of Jesus Christ of Latter-day Saints
- ◊ USU Extension



Partner Responsibility for Access

Strategies/Activities	Agencies with Responsibility
1. Coordinate & fund network to serve unfunded/underinsured individuals (Davis Behavioral Health Network)	Davis Behavioral Health, Family Counseling Service of Northern Utah, Intermountain Healthcare, Livestrong House, Midtown Community Health Center
2. Increase access to crisis services for mental health conditions (Stabilization & Mobile Response Team)	Davis Behavioral Health, Davis School District, 211
3. Youth mental health screening & treatment	Davis Behavioral Health, Davis Community Learning Center, Davis County Health Department, Davis School District, Davis Technical College, Davis Head Start, Intermountain Healthcare, Livestrong House, NUHOPE, USU Extension, YWCA
4. Networking events for behavioral health providers	Davis Behavioral Health, Davis Community Learning Center, Davis County Health Department, Diamond Tree Recovery, Intermountain Healthcare, LifeLine for Youth, Livestrong House, Mountaintop Healthcare, USU Extension
5. Zero Suicide in health & behavioral healthcare—continuous quality improvement initiative to prevent suicides for individuals under the care of health & behavioral health systems	Centerville Cares, Davis Behavioral Health Network, Davis County Health Department, Davis School District, Intermountain Healthcare, Lakeview Hospital, Livestrong House
6. Increase access to prevention messages, programs & activities (See Prevention Strategies)	Centerville Cares, Davis Behavioral Health, Davis County Health Department, Davis Head Start, Davis School District, Intermountain Healthcare, Livestrong House, Safe Harbor Crisis Center, USU Extension, YMCA, 211

Access Objectives Progress

Short-term Objectives	Target Date	Status
Establish referral process to serve unfunded/underinsured individuals through Davis Behavioral Health Network (DBHN).	12/31/2019	Complete 10/19
Develop an electronic referral form to refer patients into the DBHN.	12/31/2020	On Track
DBHN reports including number of individuals served, encounters, agencies referring, etc. will be provided to partners quarterly.	Quarterly	On Track
Conduct annual mental health screening events for youth.	Annually	On Track
Pilot a mental health screening events for elementary aged children.	12/31/2019	Complete 10/19
Provide technical assistance to other school districts, funders and communities interested in implementing mental health screening events for youth.	12/31/2019	Complete 3/19
Sponsor annual networking event for behavioral health providers in Davis County.	Annually	On Track
Promote Utah Zero Suicide Summit as well as other healthcare and behavioral health system/provider training to at least 200 health professionals.	12/31/2020	On Track
Long-term Objectives	Target Date	Status
Increase the number of clients served by the DBHN by 10% each year. (Baseline: 32, 2019)	12/31/2023	On Track
Increase timely (within 7 days) access to follow-up care for individuals with behavioral health concerns. (DBHN baseline: 100%, 2019)	12/31/2023	On Track
Three Davis County hospitals will have well established referral systems & follow-up for behavioral health patients who present to emergency departments.	12/31/2023	On Track
Increase number of clients served by local substance abuse & mental health authority, Davis Behavioral Health. (Baseline 2018: 4,673 adults; 2,415 children, DSAMH)	12/31/2023	On Track

Access Objectives Progress

Long-term Objectives	Target Date	Status
Increase number of individuals with behavioral health concerns who have a regular primary care medical home. (No current measure)	12/31/2023	Not Available
Increase number of residents experiencing mental health or substance abuse crisis that receive services outside hospital emergency department or jail. (Establish baseline & target)	12/31/2023	On Track

Population Measures	Baseline	Current Measure	Target Measure
Reduce suicide deaths in Davis County from 14.5 (2014-2016) deaths per 100,000 to 10.2* deaths per 100,000 by the year 2030. (IBIS)	14.5 deaths per 100,000 (2014-2016)	18.95 deaths per 100,000 (2016-2018)	10.2 deaths per 100,000 (2030)
Decrease the percent of Davis County youth experiencing feeling sad or hopeless for more than two weeks in the past year from 26.0% (2017) to 23.4%** by 2023. (SHARP)	26.0% (2017)	25.9% (2019)	23.4% (2023)
Reduce the prevalence of adolescents with high mental health treatment needs in Davis County from 19.4% (2017) to 17.46%**. (SHARP)	19.4% (2017)	17.7% (2019)	17.46% (2023)
County prevalence of frequent mental distress is best in the state. (CHR Baseline 2016: 10%; Best in state: 9%)	10% (2016)	10% (2016)	9% (2023)

* Healthy People 2020 target

** A 10% reduction from baseline

Access Highlights

Davis Behavioral Health Network

- ◊ Network to serve unfunded/underinsured individuals
- ◊ Expanded to include referrals for youth
- ◊ 32 individuals seen
- ◊ 80 total visits: 62 for mental health therapy; 4 for substance abuse counseling; 14 for medication management

Stabilization & Mobile Response

- ◊ Davis Behavioral Health implementation of Mobile Crisis Outreach Team
- ◊ Behavioral health professionals deployed to home & community to stabilize crisis situations
- ◊ 5,960 crisis services provided

1-833-SAFE-FAM or 1-833-723-3326

MOBILE RESPONSE SERVICES

Provided in-home to ease an immediate crisis & provide support

- ◆ Minimize the impact of crisis on individuals & families
- ◆ Create safety plans
- ◆ Connect individuals & families to other helpful resources

STABILIZATION SERVICES

Short-term services may be provided in addition to mobile response for 6-8 weeks to help ensure family's long-term success

- ◆ Teach skills to improve family functioning
- ◆ Create plans that prepare for & prevent future crisis
- ◆ Prevent the need for out-of-home services
- ◆ Arm with ongoing resources & support

Source: hs.utah.gov/soc-smr

Access Highlights

Youth Mental Health Screening

- ◊ 145 youth served; PreK-12th; Charter, Online, Home School & DSD; 14/15 Davis County cities represented
- ◊ Added screening questions about resilience, screen time, sleep, pornography, adverse childhood experiences (ACEs)
- ◊ Youth Services Directory provided to all participants containing nearly 150 local services such as medical treatment, counseling, self-care, support groups, classes, crisis lines, etc.
<https://go.usa.gov/xn4FK>
- ◊ 21 participants with follow-up appointments; 36 Davis Behavioral Health referrals; 7 Davis Behavioral Health Network referrals
- ◊ Volunteers: 60+

- ◊ Coordinated by Davis County Health Department & Davis School District
- ◊ Planning Team: DSD, DCHD, DBH, Head Start, Midtown Community Health Center, USU Ext, Intermountain Healthcare, & Davis Community Learning Center
- ◊ Funding Provided by: Intermountain Healthcare & USU Extension
- ◊ Media Coverage by Channel 4, KSL Radio, Davis Clipper, Standard Examiner, & Deseret News



Access Highlights

Grow Your Network

- ◊ 2nd Annual Event — Helping professionals provide quality referrals for families in Davis County by becoming more aware of local services
- ◊ Sponsored by 8 community agencies
- ◊ 59 behavioral health professionals attended
- ◊ 19 providers identified to be added to county resource directory
- ◊ 4 providers identified that are willing to donate or offer reduced cost services



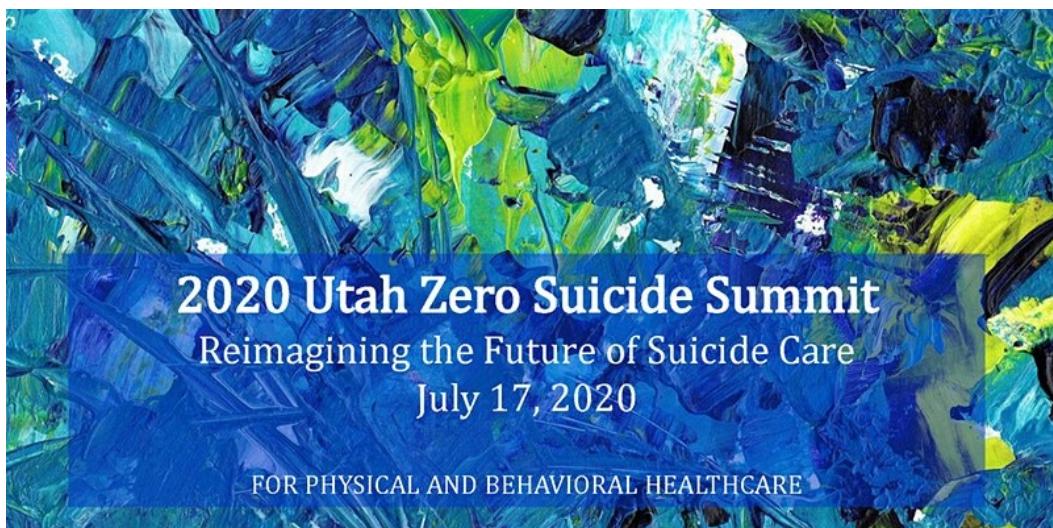
Zero Suicide

- ◊ Framework for system-wide organizational commitment to safer suicide care in health & behavioral healthcare systems
- ◊ Davis County providers participate in the Utah Zero Suicide Learning Collaborative
- ◊ Davis County providers participate in Utah Zero Suicide Summit

2020 Utah Zero Suicide Summit

Save the Date: July 17

Registration Link: utahzerosuicidessummit.eventbrite.com



Access Highlights

Davis Behavioral Health

- ◊ Provided services to 9,346 residents
- ◊ Served 2,158 uninsured residents
- ◊ Implemented Peer Support program in Davis County hospitals emergency departments to work with individuals experiencing a behavioral health emergency & link individuals to treatment
- ◊ Granted \$100,000 to Discovery House to provide Medication Assisted Treatment to uninsured individuals they treat with an opioid disorder
- ◊ Opening of the Davis County Receiving Center, 907 Clark Lane, Farmington, 801-773-7060 (social media coverage, <https://www.facebook.com/pages/Davis-County-Receiving-Center/111726993652940>)

Statewide Highlights

- ◊ Full Medicaid expansion to individuals under 138% of poverty
- ◊ Utah's Mental Health System, August 2019 report in partnership with Kem C. Gardner Policy Institute & the Utah Hospital Association

Future Plans

- ◊ Receiving Center funding & sustainability



ACCESSING BEHAVIORAL HEALTH SERVICES COUNTY, STATE & NATIONAL RESOURCES

Davis Behavioral 24-Hour Crisis Response Line—801-773-7060, dbhutah.org

Stabilization & Mobile Response—1-833-SAFE-FAM (723-3325), Services are free, available 24/7. and provide support in times of crisis. For any child, parent, or caregiver. <https://hs.utah.gov/soc-smr>

Midtown Community Health Center—22 South State Street, Suite 1007, Clearfield, 801-393-5355, www.midtownchc.org

Davis County Receiving Center (for behavioral health emergencies)—907 Clark Lane, Farmington, 801-773-7060

Davis Mindfulness Center—davismindfulness.org

Centerville Cares—<http://centervilleut.net/government/mayor/centerville-cares>

Davis County Youth Services Directory—<https://go.usa.gov/xn4FK>

Davis4Health Resource Locator—Davis4Health.org

Psychology Today—psychologytoday.com/us/therapists/utah

Medicaid (Online Application)—medicaid.utah.gov/apply-medicaid

Postpartum Support International - Utah—psiutah.org—Utah's Maternal Mental Health Collaborative

Mindweather 101—alloflife.org/course/mindweather-101

Utah's Mental Health System Report (2019)—<https://gardner.utah.edu/wp-content/uploads/MentalHealthReportAug2019.pdf>

Make the Connection (Veterans Mental Health Resources)—maketheconnection.net

HelpGuide (for mental health & wellness)—helpguide.org

WE CAN ALL DO SOMETHING TO HELP OUR COMMUNITY.

- ◆ Build strong, positive relationships with family and friends.
- ◆ Write down a family and individual mental health or self-care plan.
- ◆ Limit screen time for you and your family.
- ◆ Be consistent with your sleep patterns.
- ◆ Have meals as a family as often as you can.
- ◆ Have clear rules that are consistent and age appropriate.
- ◆ Safely store firearms and opioids.
- ◆ Provide support for education by helping with homework and encouraging school attendance.

Suicide

- ◆ Lock unloaded firearms and ammunition separately.
- ◆ Learn how to discuss suicide in an appropriate way.
- ◆ Ask someone you are concerned about if they are considering suicide.
- ◆ Seek professional help if suffering from anxiety or depression.

Childhood Trauma

- ◆ Show children and other adults that conflicts can be resolved without yelling or hitting.
- ◆ If you are feeling overwhelmed, reach out for help. Seek professional help, if necessary.
- ◆ Let children know they are loved through your actions, words, time and attention.
- ◆ Be responsive to the signals and needs of children.

Opioids

- ◆ Ask your doctor about non-opioid methods of pain management.
- ◆ Don't share prescription opioids.
- ◆ Properly dispose of prescription opioids that are no longer being used or that have expired.
- ◆ If you or a family member are taking opioids, have naloxone (opioid overdose reversal) readily available.