



ALPINE COUNTY  
BEHAVIORAL HEALTH SERVICES

---

Substance Use Disorder Services  
**STRATEGIC PREVENTION  
PLAN**

Fiscal Years 2023-24 through 2027-28

FINAL  
JULY 18, 2023

Misty Dee, AOD Program Specialist  
Alpine County Behavioral Health Services  
40 Diamond Valley Road, Markleeville, CA 96120  
Phone: 530-694-1816

## Table of Contents

Introduction.....	1
Overview of Alpine County.....	1
SPF Step 1: Needs Assessment.....	5
SPF Step 2: Capacity Building .....	14
SPF Step 3: Planning .....	16
SPF Step 4: Implementation .....	20
SPF Step 5: Evaluation .....	24
Appendix A: Glossary of Acronyms and Abbreviations .....	27
Appendix B: SUD Prevention Community Needs Survey Results (2023) .....	28
Appendix C: ACBHS Organizational Chart.....	40

## Introduction

### Overview of Planning Process

Federal Substance Abuse Prevention and Treatment Block Grant (SABG) funds are awarded to counties through the California Department of Health Care Services (DHCS). These funds are provided to plan, implement, and evaluate activities to prevent and treat substance use disorders (SUD). A portion of the SABG funds must be spent on primary prevention. Through a contract with DHCS, Alpine County Behavioral Health Services (ACBHS) receives SABG for delivering SUD primary prevention services in Alpine County. A requirement of the SABG funding is the development of a Strategic Prevention Plan (SPP).

In preparing this five-year SPP, ACBHS utilized the federal Strategic Prevention Framework (SPF), a planning and program design tool developed by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA). The SPF consists of five (5) steps (assessment, capacity, planning, implementation, and evaluation), which enables Alpine County to build the infrastructure necessary for effective and sustainable prevention activities through a community-based and collaborative approach.

To implement the SPF in Alpine County, ACBHS reviewed local data on SUD needs and existing programs and strategies, as well as stakeholder input provided through community surveys. This data collection incorporated input from diverse stakeholders who represented various populations within the community.

## Overview of Alpine County

### County Characteristics

Alpine County is geographically the tenth smallest and the least populated county in the State of California. It is located in the Sierra Nevada mountain range between Lake Tahoe and Yosemite National Park. The State of Nevada borders Alpine County to the east; Mono and Tuolumne Counties lie to the south; Amador and Calaveras Counties border to the west; and El Dorado County meets Alpine's northern boundary. The main routes in Alpine County are state highways 88, 89, and 4.

Alpine County covers only 739 square miles, with less than two (2) residents per square mile. The County is entirely rural, with no incorporated cities. Most of the population is concentrated around a few mountain communities: Markleeville, Woodfords, Hung-A-Lel-Ti, Bear Valley, and Kirkwood. Each community has distinctly different profiles and needs. Residents have a rural lifestyle, with several city areas in the neighboring counties. Markleeville is the County seat and home to many of the County's offices. There are no incorporated cities within Alpine County; as a result, most public services are provided by County agencies.

Alpine County was created in 1864 during the Silver Boom. Over the years, the population of the county has varied from as many as 11,000 people to as few as 200 people. Today the County has the smallest population of California's 58 counties, with 1,175 residents (2010 US Census). As a tourist area, the County's population can swell to over 6,000 people during peak recreational periods.

Of the 1,175 residents who live in Alpine County, 18.7% are children ages 0-14; 9% are TAY ages 15-24; 48.8% are adults ages 25-59; and 23.5% are older adults ages 60 years and older. The majority of persons in Alpine County identify as White (72.5%) and 17.9% identify as American Indian/ Alaskan Native. There are a comparable number of males (51.6%) and females (48.4%) in the county.

During the 2022-2023 school years, 40 students were enrolled in the Diamond Valley Elementary School and Bear Valley Elementary School, which serves children living throughout Alpine County from kindergarten through the eighth grade. There are currently (7) adolescents living in Alpine County who attend high school, located outside of Alpine County. These students are spread across three different high schools: one school in Douglas County, NV; one school in South Lake Tahoe within El Dorado County, CA, and one school in Arnold, CA in Calaveras County. The majority of these students are enrolled in high school in Douglas County, NV. By the time students reach middle school, most participate in afterschool activities and sports outside of Alpine County as part of transitioning to a high school located in another region. This situation presents barriers to serving the substance use prevention needs of youth living in Alpine County.

Today, Alpine County is largely dependent on tourism as most of the County's income is derived from visitors who seek out the county for its year-round outdoor recreation opportunities. Fishing, camping, hiking, rafting, skiing and winter snow sports all contribute to the economy. There are no fast food restaurants, banks, professional medical providers or hospitals, manufacturing sites, or other industries within the County boundaries.

### County Behavioral Health Department

ACBHS is a small department within the Alpine County Human Services Agency. ACBHS is comprised of administrative and clinical staff, who provided integrated mental health and SUD services to Alpine County residents. Through various contracts with DHCS, ACBHS offers Medi-Cal Specialty Mental Health Services; Drug Medi-Cal and SABG SUD services; and programs and activities related to the Mental Health Services Act. An AOD Program Specialist oversees the prevention activities outlined in this Five-Year SPP. Refer to the ACBHS Organizational Chart in Appendix B.

ACBHS also works closely with other County agencies and community organizations to meet the needs of Alpine County residents. ACBHS partners include Alpine County Human Services; Alpine County Office of Education; Alpine County Unified School District; Tribal Healing Center; and Washoe Indian Education Center. Many of these agencies and organizations are also part of the Alpine County Health and Wellness Coalition (HWC).

## Partnership with Health and Wellness Coalition

To promote interagency collaboration aimed at fostering healthy living in Alpine County, Alpine County Human Services (ACHS) partners with other agencies to form the Health and Wellness Coalition (HWC).

The HWC is comprised of 19 members who represent the following sectors:

- Substance Use Disorder Services
- Mental Health Services
- Clinic Nurse
- Early Childhood Services
- Emergency Preparedness
- Environmental Health
- Health Education/Tobacco Control
- Law Enforcement
- Live Violence Free
- MHS/Native Wellness
- Native Temporary Assistance to Needy Families (TANF)
- Office of Education
- Outdoor Recreation
- Public Health Officer
- Social Services
- Suicide Prevention Network
- Woodfords Community Council
- Workforce Services

The HWC meets monthly to review progress against objectives, recruit new members, and inform participants of events. The HWC is open to any staff, provider, or community leader who would like to contribute and whose strengths can be leveraged in achieving the objectives of the HWC. Typically, 10 to 12 HWC members who represent multiple sectors regularly attend the monthly meetings.

The HWC plans to address multiple components that make up the social determinants of health, including chronic illness; substance use; aging; healthcare; employment; inequality; childcare; and other factors. The HWC approach to promoting community health is by advocating for “Health in All Policies.” Through a collaborative, cross-departmental, and interdisciplinary approach, the HWC acts in partnership with the County to conduct planning, implementation, and evaluation for initiatives within tobacco control, SUD, and Supplemental Nutrition Assistance Program Education (SNAP-ED).

The HWC has identified 3 objectives:

- 1. Outdoor Recreation:** Promote partnerships to support work currently underway to create and enhance hiking trails, and to promote utilization of healthy outdoor recreation.
- 2. Nutrition:** Promote the concept of “creating connections around healthy eating” in an effort to increase positive social norms around nutrition.
- 3. School-Based Prevention:** Support ongoing prevention programs, enhance existing prevention events, and promote the positive message “Live Healthy – Community health is ageless!”

The HWC will help promote County SUD prevention education and information dissemination at community events and through programs targeting youth/adolescents and their parents. The HWC is an excellent resource in strategies that can leverage HWC events, input, and efforts to conduct SPP activities.

## Community Philosophy

### ***Mission of ACBHS***

It is the mission of ACBHS to provide safe, ethical, and accessible services that inspire personal growth and development through strength-based behavioral health programs and supportive connections. Through outreach and engagement in surrounding and outlying areas of the county, we are integrated and accessible to all community members.

### ***Vision of ACBHS***

The vision of ACBHS includes providing effective, equitable, understandable, and respectful services that are responsive to diverse cultural beliefs and practices and preferred languages. This vision is reflected in our world view, informing materials, and client treatment plans. Integration of these values creates a forum for ensuring that we continually assess and enhance our services in an effort to be culturally and linguistically relevant for our youth and adult clients and their families. Our strength-based model of treatment is being utilized in both our program and our treatment modalities. Our vision is to be responsive to community needs.

### ***Mission of HWC***

It is the mission of the HWC to build strong community partnerships promoting healthy living through outreach, advocacy and education.

## SPF Step 1: Needs Assessment

### Overview

The first step in the SPP planning process involves assessing the community needs around SUD issues. The purpose of the assessment process is to:

- Identify environmental, social, underlying, and individual factors that contribute to alcohol and other drug problems;
- Identify the priority SUD issues in the community;
- Evaluate the existing SUD prevention programs and services and its capacity to mitigate the priority issues;
- Develop objectives, policies, and activities that will help to mitigate the priority issues; and
- Establish baseline information to track progress toward prevention objectives.

### Data Sources

- Alpine County Community Needs Survey – SUD Prevention (2023)
- California Outcomes Measurement System for Prevention (CalOMS Pv)
- California Healthy Kids Survey (CHKS) <http://chks.wested.org/>

### Data and Analysis

#### ***Alpine County Community Needs Survey – SUD Prevention (2023)***

In spring 2023, ACBHS administered an online and paper-based survey within the entire community. Nine (9) individuals completed the survey, sharing their awareness of SUD prevention services in Alpine County. Those who completed the survey were asked to rate their satisfaction with the availability of services and the extent to which the services meet their needs. Survey participants were also asked to identify populations in the county who were in particular need of SUD services.

The majority of respondents (78%) were aware of SUD services offered by ACBHS. 34% have accessed SUD services in Alpine County. Of those who received services, 100% reported being satisfied with the services that they received through ACBHS. 100% of respondents indicated Transition Age Youth as the population in particular need of SUD services. Respondents also favored services for adults (85.7%) and older adults (71.4%). 87.5% of respondents indicated that alcohol is the substance that is of most concern in Alpine County. Fentanyl (at 62.5%) and marijuana (at 37.5%) were other substances of concern. The full survey results are included in Appendix B.

#### ***CalOMS Pv and Treatment data (Fiscal Years 2020/21 through 2022/23)***

ACBHS SUD data was analyzed to help determine priority areas of need. ACBHS completed 28 assessments for SUDs during FYs 2020/21 through 2022/23. 27 clients were adults, ages 21-70 years old. One assessment was completed for a youth, age 16-18. The primary substance use reported across all clients was alcohol, followed by methamphetamine and opiates.

### ***California Healthy Kids Survey (CHKS) (School Year 2018/19)***

Below are the results from the School Year 2018-19 California Healthy Kids Survey (CHKS) for schools within Alpine County Unified School District. The California Department of Education has funded the CHKS since 1997 to provide data to assist schools in: (1) fostering safe and supportive school climates, social-emotional competencies, and engagement in learning; (2) preventing youth health-risk behaviors and other barriers to academic achievement; and (3) promoting positive youth development, resilience, and well-being.

#### Alpine County Unified School District, 2018-2019 Elementary School data, 5th Grade

- 0% of respondents have had one or two sips of alcohol
- 10% of respondents have had a full glass of alcohol
- 0% of respondents have used inhalants (to get “high”)
- 60% of respondents believed that the health risk of consuming alcohol is “a little bad”
- 40% of respondents believed that the health risk of consuming alcohol is “very bad”
- 0% of respondents believed that the health risk of consuming marijuana is “not bad”
- 0% of respondents believed that the health risk of consuming marijuana is “a little bad”
- 50% of respondents believed that the health risk of consuming marijuana is “very bad”
- 50% of respondents don’t know what marijuana is
- 10% of respondents reported ever smoking a cigarette or part of a cigarette
- 20% of kids agreed that the health risk of cigarette smoking is “a little bad”
- 80% of kids agreed that the health risk of cigarette smoking is “very bad”

#### Alpine County Unified School District, 2018-2019 Secondary School data, 7th Grade

- 10% of respondents reported being offered, sold, or given an illegal drug (at least 1 time)
- 10% of respondents reported alcohol or drug use at some point in their lifetime
- 10% of respondents reported current alcohol or drug use
- 90% of respondents had consumed one full drink of alcohol 0 times
- 0% of respondents had consumed one full drink of alcohol 1 time
- 0% of respondents had consumed one full drink of alcohol 2 – 3 times
- 10% of respondents had consumed one full drink of alcohol 4 or more times
- 100% of respondents had used inhalants (to get “high”) 0 times
- 90% of respondents reported having been very drunk or sick after drinking alcohol 0 times
- 10% of respondents reported having been very drunk or sick after drinking alcohol 1 to 2 times
- 90% of respondents reported having been “high” (i.e. “loaded”, “stoned”, or “wasted”) from using drugs 0 times
- 10% of respondents reported having been “high” (i.e. “loaded”, “stoned”, or “wasted”) 1 to 2 times

**California School Climate Survey (School Year 2018/19)**

This survey captures data on teacher perceptions of substance use at school, and school policies and practices around substance use prevention. In School Year 2018-2019, 10 Alpine County Unified Elementary school staff and teachers responded to the School Climate survey. 76% of respondents indicated that student alcohol and drug use is a “mild problem,” while 22% indicated that it is a “severe problem.” 2% of respondents indicated other responses that were not recorded.

**Risk and Protective Factors**

ACBHS analyzed its system and available data, and identified the one (1) priority area for the SPP. Over the next 5 years, ACBHS will focus on **alcohol use and abuse**. Figure 1 illustrates the priority issue; common risk factors associated with the issue; and common protective factors that help to prevent or mitigate the identified issue.

**Figure 1: Priority Area and Common Risk and Protective Factors**

Priority Area	Risk Factors	Protective Factors
<b>Alcohol</b>	<ul style="list-style-type: none"> <li>• Ease of access to alcohol</li> <li>• Normalization of alcohol use in the community</li> <li>• Low perception of risk by community</li> <li>• Family history of alcohol use/abuse</li> <li>• Family issues (lack of clear parental expectations; lack of supervision; neglect; abuse)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental involvement</li> <li>• Clear and consistent expectations from family, school, and the community about alcohol use/abuse</li> <li>• Strong bonds with family, school, and the community</li> <li>• Opportunities for positive social involvement</li> <li>• Personal resiliency (being able to adapt to change and stressful events)</li> <li>• Personal, religious, and/or cultural beliefs that support healthy decisions</li> <li>• High self-esteem and problem-solving skills</li> </ul>

Figure 2 shows additional risk and protective factors that are significant in Alpine County.

**Figure 2: Risk and Protective Factors in Alpine County**

Priority Area	Risk Factors	Protective Factors
<b>Alcohol</b>	<ul style="list-style-type: none"> <li>• Limited community activities and resources, due to county size, location, and geography</li> <li>• Isolation due to county location and geography</li> <li>• Privacy issues in small county</li> <li>• Low perception of risk by community, youth, and parents</li> <li>• Generational abuse</li> <li>• Engaging in alcohol use at a young age</li> </ul>	<ul style="list-style-type: none"> <li>• An effective system of care through ACBHS that supports BH disorders</li> <li>• Washoe Indian Education Center at Hung-A-Lel-Ti</li> <li>• Supportive community</li> <li>• Isolation from large urban areas; fewer opportunities for engaging in substances and high-risk behaviors</li> </ul>

**Problem Statement**

Through analysis of the above data, ACBHS developed the following problem statement for the SPP:

*Community isolation, combined with limited positive engagement activities and a low perception of risk, result in high alcohol use in Alpine County. The County has high levels of alcohol use and abuse among youth (ages 16-25), adults (ages 26-59), and older adults (ages 60+).*

**SUD Prevention Priority Area**

Alpine County will focus prevention activities on the alcohol use and abuse among its community members, as well as the use of alcohol in youth.

## Resource Assessment

To determine if Alpine County has the resources to address the Prevention priority area, an inventory of existing relevant resources was conducted (Figure 3).

**Figure 3: Resource Inventory**

Priority Area: Alcohol use and abuse among youth, adults, and older adults		
Needed Resources		Available in Alpine County
Community Resources	Community involvement and connections	Yes
	Community awareness of the priority issue	Yes
	Political/policy knowledge and interest within the community	Yes
Fiscal Resources	Sustainable funding sources	Yes
	Existing equipment; capacity to purchase needed	Yes
	Promotional and marketing resources and materials	Yes
Human Resources	Competent BH organizational and provider staff	Yes
	Consultants	Yes
	Community volunteers	Not available
	Interested stakeholders	Yes
	Support of agency partners and providers	Yes
	Support of community leaders	Yes
Needed Resources		Available in Alpine County
Organizational Resources	Established organizations and providers	Yes
	Existing collaborative relationships between organizations, providers, partners, and the community	Yes
	Technological resources	Yes
	Specialized knowledge about Prevention research and practice. Staff trained to identify Prevention resources.	Yes
	Training opportunities for staff and community	Yes
	Practical experience; existing efforts to address the issue	Yes

ACBHS identified challenges and gaps related to the identified resources (Figure 4). This gap analysis helps to focus the activities and services of the Prevention Program.

**Figure 4: Resource Assessment**

Priority Area: Alcohol use and abuse among youth, adults, and older adults		
Type of Resource	Available Resources	Challenges/Gaps
Community	<ul style="list-style-type: none"> <li>• Involvement and connections</li> <li>• Awareness of the priority issue</li> <li>• Political/policy knowledge and interest</li> </ul>	<ul style="list-style-type: none"> <li>• Varied awareness of the SPP and available services</li> <li>• Varied stakeholder participation</li> <li>• Isolation and individual disengagement from community</li> <li>• Limited community education about substance use issues and risks</li> </ul>
Fiscal	<ul style="list-style-type: none"> <li>• Sustainable funding sources</li> <li>• Existing equipment; capacity to purchase needed</li> <li>• Promotional and marketing resources and materials</li> </ul>	<i>No gaps identified at this time</i>
Human	<ul style="list-style-type: none"> <li>• Competent BH organizational and provider staff</li> <li>• Consultants</li> <li>• Interested stakeholders</li> <li>• Support of agency partners and providers</li> <li>• Support of community leaders</li> </ul>	<ul style="list-style-type: none"> <li>• Limited BH providers</li> <li>• Some partners and providers lack capacity</li> <li>• Limited knowledge among community leaders</li> <li>• Lack of volunteers</li> </ul>
Organizational	<ul style="list-style-type: none"> <li>• Established organizations and providers</li> <li>• Collaborative relationships between organizations, providers, partners, and the community</li> <li>• Technological resources</li> <li>• Specialized knowledge about Prevention research and practice.</li> <li>• Training opportunities for staff and community</li> <li>• Practical experience; existing efforts to address the issue</li> </ul>	<ul style="list-style-type: none"> <li>• Limited SUD and prevention training</li> </ul>

## Current Prevention Services

The ACBHS AOD Program Specialist arranges for or directly provides the following Prevention services and activities:

- Dissemination of prevention information and educational materials throughout the county
- Keeping It Real – a prevention program for 7/8<sup>th</sup> graders at Diamond Valley school in Markleeville
- Through a partnership with Bear Valley Parents Group, Prevention activities in the southern part of the county. This partnership expands Prevention services to the elementary school in Bear Valley, and provides lesson plans for SUD education (social-emotional learning). This provider helps ACBHS to address the substance use prevention needs of children and youth living in Alpine County.
- SUD representation in community stakeholder groups (e.g., MHSA)

Additional services and events that support Prevention efforts in Alpine County:

- Children:
  - Red Ribbon Week
  - Bear Valley Summer Day Camp
  - Positive Behavioral Interventions and Supports/PBIS (MHSA)
  - Primary Intervention Program (MHSA)
- Adolescents:
  - Washoe Native Youth Programs
  - Red Ribbon Week
  - Opioid awareness program (Washoe Indian Education Center)
- Adults/Older Adults:
  - Health and Wellness Coalition activities (ACBHS and ACHS)
  - Prevention Education in MHSA & SABG funded programs
  - Targeted outreach to Bear Valley, Kirkwood, and Hung-A-Lel-Ti communities

## Current System Strengths

### ***Enhanced Provision of Integrated Behavioral Health Services***

Alpine County has an integrated behavioral health services department, to ensure care coordination and to better serve its small community. ACBHS delivers mental health and substance use disorder treatment and prevention services. ACBHS works closely with Public Health, convening a bi-monthly Integrated Healthcare Team meeting between ACBHS and Public Health. As the only two providers of health care services in Alpine County, the integration of these services are essential to continued and growing community wellness, especially for high users of these services. Community-based providers and staff from other agencies have commended ACBHS for its ability to innovate to meet the needs of County residents given the challenges of providing behavioral health services in small and remote counties.

### ***Increased Cohesion among Service Providers and County Departments***

County agency employees and community-based providers expressed that there is strong cohesion between ACBHS, ACHS (which includes Public Health), and community-based service providers. Interagency communication and collaboration are strong within the county due to the small size of the county and the commitment of County leadership and staff. Several coalitions and meetings facilitate collaboration and support interagency approaches to addressing the needs of Alpine County residents, including the Mental Health Board (MHB), the HWC, and the Child Abuse Prevention Council (CAPC).

### ***Integrated Cultural Competence***

Due to the small size and several geographically-isolated communities in Alpine County, service providers tend to be geographically based and imbedded in the community where they serve. This approach ensures that service providers are highly accessible to community members and are in touch with the needs and experiences of the communities that they support. This accessibility and familiarity helps facilitate strong relationships between community members, service providers, and ACBHS staff, while promoting welcoming entry points for participation in SUD prevention services. For example, the Bear Valley Parents Group that receives funding from ACBHS to run a summer camp to support children and families through SUD prevention education and life skill building activities. The MHSA Wellness Center is located at Hung-A-Lel-Ti; and being embedded in the Native American community allows ACBHS to create programs and identify cultural needs. Cultural competence is considered when planning all community activities. In consideration of the community disparities, ACBHS offers transportation, meals, and activities that will encourage stakeholders to get involved in community.

It is the value, mission and practice of ACBHS to deliver services in a culturally-competent manner that is responsive to diverse cultures, reflects the health beliefs and practices of the communities we serve and demonstrates cultural humility. This approach includes providing effective, equitable, understandable, and respectful services that are responsive to diverse cultural beliefs and practices and preferred languages. ACBHS strives to deliver culturally, ethnically, and linguistically appropriate services to behavioral health clients and their families. In addition, ACBHS recognizes the importance of developing services that are sensitive to other cultures, including Native Americans, Hispanic, and other racial and ethnic groups; persons with disabilities; clients in recovery (from mental illness or substance use disorders); LGBTQ+ community; various age groups (Transition Age Youth/TAY and older adults); faith-based; and persons involved in the correctional system.

Developing a culturally and linguistically competent system requires the commitment and dedication from leadership, staff, and the community to continually strive to learn from each other. This goal also requires ongoing training and education at all staff levels. The Cultural and Linguistic Competence Plan (CLCP) reflects the ongoing commitment of ACBHS to improving services and expanding access to services, quality care, and improved outcomes. The CLCP addresses the requirements from DHCS for both mental health and SUD services, including the national Culturally and Linguistically Appropriate Services (CLAS) standards.

### ***Increased Staffing Capacity***

ACBHS has restructured its Behavioral Health department to be part of the Alpine County Human Services Agency. This restructuring has increased staffing capacity. In addition, the new agency structure may allow the opportunity to hire additional BH staff to address the unmet community health needs of Alpine County residents. ACBHS has an AOD Program Specialist to provide SUD prevention and treatment services to Alpine County. ACBHS has also hired an MHSA Program Specialist who coordinates MHSA activities and services to residents in the Kirkwood, Markleeville, Woodfords, Bear Valley and Hung-A-Lel-Ti communities. By increasing staffing capacity, ACBHS is in a better position to outreach to geographically-isolated communities; provide SUD prevention education; and disseminate information regarding the SUD prevention services to all geographic areas within Alpine County.

### **Resource Readiness**

As indicated by the assessment of data and existing resources and services, Alpine County is ready to address community alcohol use through its Prevention program. The integrated infrastructure of the county departments and community partners allows ACHS, ACBHS, Alpine County School District, Tribal Healing Center, and the Washoe Indian Education Center to collaborate their efforts and address any gaps in resources and meet the needs of the community.

## SPF Step 2: Capacity Building

### Overview

The second step in the SPP planning process is to build and mobilize local resources. This step determines the resources needed to tackle the priority issue and produce a positive change.

#### *Engage Diverse Community Stakeholders*

Alpine County is fortunate to have several agencies, committees, and organizations that collaborate on community issues and communicate on issues of importance to stakeholders. There is cooperation between county and community based agencies to develop and implement activities for youth.

#### *Develop and Strengthen a Prevention Team*

The inclusion of behavioral health services in the Alpine County Human Services agency enables an expansion of Prevention services through additional staff and fiscal support. Strategies for strengthening the Prevention team over the next five years include training key staff to conduct Prevention activities, and educating key stakeholders about Prevention needs and interventions. ACBHS staff and other Prevention providers have the capacity to implement this SPF. The ACBHS AOD Program Specialist continuously worked to build awareness of primary prevention strategies, the availability of service providers, and the community's SUD prevention needs.

#### *Increase Community Awareness*

The AOD Program Specialist stays up to date with developments in evidence-based programming and training for programs to support contracted providers in their primary prevention efforts. The AOD Program Specialist also works closely with the HWC to increase member capacity for understanding primary prevention, while collaborating on co-branding the coalition to broadcast its role in substance abuse prevention to the community.

ACBHS continues to focus on developing the HWC to integrate Prevention efforts with other strategically-aligned activities across the continuum of health and wellness services. The AOD Program Specialist will also increase the County's ability to monitor and evaluate Prevention programs and their effectiveness.

#### *Mobilize Communities*

The AOD Program Specialist selects and implements specific trainings and education tools to increase the HWC knowledge of primary prevention topics and practices. Beginning in FY 2023/24, HWC members will be surveyed bi-annually for potential learning and training topics that will enhance their understanding of primary prevention. ACBHS and ACHS will work together to inventory current programs and services related to the HWC strategies to identify the best tools to report on Prevention. According to these outcomes, the AOD Program Specialist will work with the HWC to identify further prevention priority areas to address in subsequent years. This process of developing data collection tools and expanding prevention priority areas will be carried out with the assistance of external evaluators who are familiar with the County's health and human services programs and Prevention strategies.

To outline a course of action to address challenges/gaps in resources and capacity, ACBHS developed a Capacity Building Plan (Figure 5).

**Figure 5: Capacity Building Plan**

Priority Area: Alcohol use and abuse among youth, adults, and older adults			
Type of Resource	Gaps	Action Steps to Mitigate	Anticipated Date of Implementation
Community	<ul style="list-style-type: none"> <li>• Varied awareness of the SPP and available services</li> <li>• Varied stakeholder participation</li> <li>• Isolation and individual disengagement from community</li> <li>• Limited community education about substance use issues and risks</li> </ul>	<ul style="list-style-type: none"> <li>• Provide community education services throughout the year, especially to parents and youth.</li> <li>• Expand school-based substance use education</li> <li>• Campaign to increase community involvement in activity planning and participation</li> </ul>	End of FY 2023/24, then ongoing
Fiscal	<i>No gaps identified at this time</i>	<i>Not applicable</i>	<i>N/A</i>
Human	<ul style="list-style-type: none"> <li>• Limited BH providers</li> <li>• Some partners and providers lack capacity</li> <li>• Limited knowledge among community leaders</li> <li>• Lack of volunteers</li> </ul>	<ul style="list-style-type: none"> <li>• Work to identify additional BH providers; or to expand capacity/services of existing</li> <li>• Educate community leaders through targeted efforts</li> <li>• Campaign to increase community involvement in activity planning and participation</li> </ul>	End of FY 2023/24, then ongoing
Organizational	<ul style="list-style-type: none"> <li>• Limited SUD and prevention training</li> </ul>	<ul style="list-style-type: none"> <li>• Identify Prevention training for staff and relevant stakeholders</li> </ul>	End of FY 2023/24, then ongoing

## SPF Step 3: Planning

### Overview

The third step in the SPP planning process is to develop a specific Prevention Plan. To develop a solid prevention plan, ACBHS must:

- Prioritize the risk and protective factors associated with the substance use issue that was identified in Step 1 of the SPF process (the assessment)
- Select appropriate strategies that address the priority area and the risk factors, and that leverage the protective factors
- Build a logic model and share it with stakeholders

### Strategies for Prevention Plan

**Figure 6: Strategies for Prevention Plan**

Priority Area	Top Risk Factors	Top Protective Factors	Strategies to Address Risks and Leverage Protections
<b>Alcohol Abuse</b>	<ul style="list-style-type: none"> <li>• Normalization of alcohol use in the community</li> <li>• Low perception of risk by community, youth, and parents</li> <li>• Limited community activities and resources, due to county size, location, and geography</li> <li>• Isolation due to county location and geography</li> <li>• Engaging in alcohol use at a young age</li> </ul>	<ul style="list-style-type: none"> <li>• Clear and consistent expectations from family, school, and the community about alcohol use/abuse</li> <li>• Parental involvement</li> <li>• Opportunities for positive social involvement</li> <li>• An effective system of care through ACBHS that supports BH disorders</li> <li>• Washoe Indian Education Center at Hung-A-Lel-Ti</li> <li>• Supportive community</li> </ul>	<ul style="list-style-type: none"> <li>• Environmental impacts</li> <li>• Parent education</li> <li>• Prevention education</li> <li>• Information dissemination</li> <li>• Youth mentoring</li> <li>• Youth social-emotional learning</li> <li>• Community events and activities</li> <li>• Referrals to BHS</li> </ul>

## Identified Programs, Interventions, and Activities

ACBHS has identified the following programs, interventions, and activities that encompass the selected strategies to address the highest risk factors in the county, while leveraging the highest protective factors in the Alpine County community. These programs will help to mitigate the alcohol use and abuse among youth, adults, and older adults. Providers of these services include the ACBHS AOD Program Specialist, as well as contracted SUD providers and local organizations.

**Figure 7: Strategies, Prevention Programs, and Providers**

Strategies	Prevention Program/Intervention	Provider
<ul style="list-style-type: none"> <li>• Parent education</li> </ul>	Partnership to End Addiction	ACBHS
<ul style="list-style-type: none"> <li>• Prevention education</li> <li>• Information dissemination</li> <li>• Youth mentoring</li> <li>• Youth social-emotional learning</li> <li>• Community events and activities</li> </ul>	Opioid Awareness Program	Washoe Indian Education Center
	CHARACTER COUNTS! (at Youth Summer Camp)	Bear Valley Parents Group
	BOTVIN Life Skills Training (during BVPG Youth Summer Camp)	ACBHS
	Red Ribbon Week; Keepin' it REAL	ACBHS
<ul style="list-style-type: none"> <li>• Environmental impacts</li> </ul>	Responsible Beverage Service Program	ACBHS
<ul style="list-style-type: none"> <li>• Referrals to BHS</li> </ul>	SUD services	ACBHS

All of the Prevention programs are proven evidence-based practices for addressing alcohol perception, use, and abuse among youth, adults, older adults, and the community at large. A description of each selected program follows.

- **Partnership to End Addiction:** Formerly *Partnership for Drug-Free Kids*. An alternative-based parent education that provides parent education and resources to support families dealing with youth substance use. This program engages parents in educational classes and pro-social community activities. In Alpine County, this program is implemented and supported by the ACBHS AOD Program Specialist.
- **Opioid Awareness Program:** This new program will be by the Washoe Indian Education Center to educate the community about the dangers of opioid and other substance use (including alcohol), the scope of the issue in Alpine County, and treatment options. The Washoe Indian Education Center will collaborate with ACBHS to provide a variety of behavioral health services and activities, including support groups, culturally-guided recovery services, and resilience building. Education and

information dissemination will occur through White Bison and Families of Tradition meetings, Native Fatherhood programs, and Native Youth activities.

- **CHARACTER COUNTS!:** A character education and social-emotional learning curriculum designed to motivate youth, teach responsible decision-making, and instill foundations of respect and responsibility. In Alpine County, this program is provided by the Bear Valley Parents Group during its youth summer camp.
- **Botvin Life Skills Training:** An evidence-based practice that helps to promote resilience among youth to resist substance use and associated problems. Botvin is a full social-emotional learning curriculum for ages groups in 3<sup>rd</sup> to 12<sup>th</sup> grade. This program teaches communication skills, decision making, self-esteem, dealing with stress and awareness of social media issues. In Alpine County, this program will be provided by the AOD Program Specialist, during the Bear Valley Summer Camp.
- **Red Ribbon Week:** Red Ribbon Week is an alcohol, tobacco, smoking, and other drug and violence prevention awareness campaign observed annually in October in the United States. In Alpine County, this campaign is overseen by the ACBHS AOD Program Specialist and delivered in schools, grades 5-8.
- **keepin' it REAL (kiR):** kiR is a school-based scientifically proven substance use prevention and social/emotional program designed to focus on the competencies linked to preventing substance use and abuse in youth. In Alpine County, this program is implemented by the ACBHS AOD Program Specialist and delivered in schools, grades 7-8.
- **Responsible Beverage Service (RBS) Program:** Alcohol control information is provided to business owners who serve alcohol or conduct retail alcohol sales. RBS is designed to prevent intoxication, underage drinking, and drunk driving. Alpine County AOD Specialist provides awareness of a training available from the California Alcoholic Beverage Control (ABC) through an informative flyer that is sent out to businesses. This information is disseminated once a year to all relevant Alpine County businesses, and to new businesses when they open in the county. This information ensures that local alcohol beverage service locations are trained in the laws and regulations regarding alcohol sales.
- **Substance Use Disorder Services:** Additional SUD prevention services are available through ACBHS for youth, adults, and older adults. Treatment services are also available and provided by a licensed SUD Counselor.

**Figure 8: SPP Logic Model**

<b>Priority Area:</b> Alcohol use and abuse <b>Problem Statement:</b> Community isolation, combined with limited positive engagement activities and a low perception of risk, result in high alcohol use in Alpine County. The County has high levels of alcohol use and abuse among youth (ages 16-25), adults (ages 26-59), and older adults (ages 60+).			
RESOURCES / INPUTS	ACTIVITIES / OUTPUTS / STRATEGIES	GOALS / OUTCOMES	IMPACTS
<ul style="list-style-type: none"> <li>• Funding: SABG</li> <li>• Collaborative community partners and providers (Bear Valley Parents Group; HWC; Washoe Indian Education Center)</li> <li>• Active stakeholders, including parents, school staff</li> <li>• Experienced providers and ACBHS staff</li> <li>• Staff and provider experience delivering EBPs</li> <li>• Time</li> <li>• Research and training</li> <li>• Experienced, culturally-competent services agencies and resources</li> </ul>	<ul style="list-style-type: none"> <li>• ACBHS conducts parent education activities through Partnership to End Addiction.</li> <li>• ACBHS provides Prevention education and information dissemination to the schools through Botvin Life Skills and Keepin' it REAL.</li> <li>• Washoe Indian Education Center provides Prevention education and information dissemination through its Opioid Awareness Program.</li> <li>• Bear Valley Parents Group provides social-emotional learning, youth mentoring, and positive community events through Character Counts!, Botvin, and Youth Summer Camp.</li> <li>• ACBHS oversees Red Ribbon Week, providing positive community events and Prevention education.</li> <li>• ACBHS spreads awareness of alcohol sales and resale laws through RBS.</li> <li>• ACBHS provides additional prevention activities and SUD treatment services.</li> </ul>	<ul style="list-style-type: none"> <li>• Increased parental, youth, adult, and community awareness of alcohol use and abuse</li> <li>• Reduced alcohol use and abuse among youth, adults, and older adults</li> <li>• Increased youth self-esteem, responsible decision making, and positive social involvement</li> <li>• Increased community connections and positive social involvement of adults and older adults</li> <li>• Increased business understanding and practice of laws and regulations around alcohol sales</li> <li>• Increased awareness of county SUD prevention and treatment services</li> <li>• Increased enrollment in needed SUD services</li> </ul>	<ul style="list-style-type: none"> <li>• Parents, youth, and community have awareness of the risks of alcohol use and abuse.</li> <li>• Parents, schools, and community have clear and consistent expectations around alcohol use and abuse.</li> <li>• Youth are aware of the expectations around alcohol use and abuse.</li> <li>• Parents are involved with their youth's school and social activities.</li> <li>• Youth develop strong bonds with family, schools, and community through parental involvement, school curricula, and positive social events.</li> <li>• Youth develop self-esteem, decision-making skills, and positive social bonds and engagements.</li> <li>• Adults and older adults develop strong bonds with community through awareness and positive social events.</li> <li>• Businesses comply with laws and regulations around alcohol sales.</li> <li>• Alcohol use and abuse is reduced.</li> <li>• Individuals of all ages have increased awareness of and access to SUD Prevention and treatment services.</li> </ul>

## SPF Step 4: Implementation

### Overview

The fourth step in the SPP planning process is to implement the Prevention Plan by delivering identified services. The implementation step illustrates the specific tasks and activities that the County will complete in order to achieve the identified goals and objectives.

### Implementation Plan

A detailed implementation plan is provided below, and includes program details; major activities; anticipated timelines; and the responsible provider(s).

**Figure 9: Implementation Plan**

Program/Intervention	<b>Partnership to End Addiction</b>		
<b>Goals/Outcomes</b>	Increased parental awareness of alcohol use and abuse among youth. Reduced alcohol use and abuse among youth.		
<b>Impacts</b>	Parents and youth have awareness of the risks of alcohol use and abuse. Parents have clear and consistent expectations around alcohol use and abuse. Parents are involved with their youth’s school and social activities. Parents have increased awareness of and access to SUD services.		
	Major Activities	Completion Dates	Provider
	Outreach to engage parents (newsletter; flyers; mailings)	Ongoing	ACBHS <i>(in collaboration with community &amp; agency partners)</i>
	Conduct 2 parent education sessions each year	Ongoing	
	Conduct evaluation through surveys	After each session	
Program/Intervention	<b>Opioid Awareness Program</b>		
<b>Goals/Outcomes</b>	Increased parental, youth, adult, and community awareness of alcohol/substance use and abuse. Reduced substance/alcohol use and abuse among youth, adults, and older adults.		
<b>Impacts</b>	Parents, youth, and community have awareness of the risks of substance/alcohol use and abuse. Youth develop strong bonds with family, schools, and community through parental involvement, school curricula, and positive social events. Adults and older adults develop strong bonds with community through awareness and positive social events.		
	Major Activities	Completion Dates	Provider
	Conduct BH services & activities in the community	Several times per year	Washoe Indian Education Center <i>(in collaboration with community &amp; agency partners)</i>
	Disseminate information about substance & alcohol use	Ongoing	
	Conduct evaluation through surveys and focus groups	Post events and annually	

<b>Program/Intervention</b>	<b>Character Counts!</b> <i>(at Youth Summer Camp)</i>		
<b>Goals/Outcomes</b>	Increased youth self-esteem, responsible decision making, and positive social involvement. Increased youth awareness of alcohol use and abuse. Reduced alcohol use and abuse among youth.		
<b>Impacts</b>	Youth develop self-esteem, decision-making skills, and positive social bonds and engagements. Youth are aware of the expectations around alcohol use and abuse. Youth develop strong bonds with community through positive social events.		
<b>Major Activities</b>		<b>Completion Dates</b>	<b>Provider</b>
Conduct youth summer camp, using EBPs to engage and teach youth		Summer camp sessions, each summer	Bear Valley Parents Group
Conduct evaluation through surveys		Annually, end of each session	<i>(in collaboration with community &amp; agency partners)</i>
<b>Program/Intervention</b>	<b>Botvin Life Skills Training</b>		
<b>Goals/Outcomes</b>	Increased youth self-esteem, responsible decision making, and positive social involvement. Increased youth awareness of alcohol use and abuse. Reduced alcohol use and abuse among youth.		
<b>Impacts</b>	Youth develop self-esteem, decision-making skills, and positive social bonds and engagements. Youth are aware of the expectations around alcohol use and abuse. Youth develop strong bonds with family, schools, and community through parental involvement, school curricula, and positive social events.		
<b>Major Activities</b>		<b>Completion Dates</b>	<b>Provider</b>
Conduct interactive, curriculum-based sessions with campers		Summer camp sessions, each summer	ACBHS
Conduct evaluation through surveys		Annually, end of each session	<i>(in collaboration with community &amp; agency partners)</i>

<b>Program/Intervention</b>	<b>Red Ribbon Week; keepin' it REAL</b>		
<b>Goals/Outcomes</b>	Increased youth self-esteem, responsible decision making, and positive social involvement. Increased youth awareness of alcohol use and abuse. Reduced alcohol use and abuse among youth.		
<b>Impacts</b>	Youth are aware of the expectations around alcohol use and abuse. Youth develop strong bonds with family, schools, and community through parental involvement, school curricula, and positive social events.		
<b>Major Activities</b>		<b>Completion Dates</b>	<b>Provider</b>
Implement Red Ribbon Week activities in the schools		October each year	ACBHS <i>(in collaboration with community &amp; agency partners)</i>
Conduct kiR activities in the schools		Ongoing	
Conduct evaluation through surveys		After events & annually	
<b>Program/Intervention</b>	<b>Responsible Beverage Service Program</b>		
<b>Goals/Outcomes</b>	Increased business understanding and practice of laws and regulations around alcohol sales. Reduced alcohol use and abuse among youth, adults, and older adults.		
<b>Impacts</b>	Businesses comply with laws and regulations around alcohol sales. Alcohol use and abuse is reduced.		
<b>Major Activities</b>		<b>Completion Dates</b>	<b>Provider</b>
Provide laws and training information to local businesses		Once annually	ACBHS <i>(in collaboration with community &amp; agency partners)</i>
Provide alcohol awareness signage and other materials to local business		Ongoing	

<b>Program/Intervention</b>	<b>SUD Services</b>		
<b>Goals/Outcomes</b>	Increased awareness of county SUD prevention and treatment services. Increased enrollment in needed SUD services		
<b>Impacts</b>	Individuals of all ages have increased awareness of and access to SUD Prevention and treatment services. Alcohol use and abuse is reduced.		
	<b>Major Activities</b>	<b>Completion Dates</b>	<b>Provider</b>
	Conduct outreach efforts in collaboration with other Prevention and community activities and events	Ongoing	ACBHS <i>(in collaboration with community &amp; agency partners)</i>
	Train and work with community partners and other agencies on referrals to ACBHS	Ongoing	
	Deliver SUD services to clients of all ages	Ongoing	
	Conduct evaluation through service data analysis, client perception of care surveys, and focus groups	Annually	

## SPF Step 5: Evaluation

### Overview

This section describes the evaluation process and methods that will be used to measure progress toward achieving the goals identified throughout this Plan. ACBHS will conduct evaluation activities to measure progress in implementation and understand program outcomes in order to refine and continuously improve the County's Prevention services.

### Program Evaluation Plan

ACBHS will evaluate the effectiveness of the selected Prevention programs, to ensure that activities and services are meeting the needs of the community and the goals of the SPP. If the evaluation findings indicate that program changes are needed to better serve the community, ACBHS will make necessary adjustments to ensure that program goals are met. ACBHS will also evaluate the implementation of the SPP.

Figure 10 outlines the Program Evaluation Plan. Programs will be evaluated by service data, surveys, and focus groups, to ensure that the indicated outcomes are being met. Service data will include client-level utilization data. Surveys may include pre and post-surveys; standardized surveys relevant to the program model or EBP delivered; and those developed by ACBHS (or its consultant). Surveys will be administered by the schools, Bear Valley Parents Group, and ACBHS, based on the type of program and the target population.

Surveys and other data collection tools will be developed in SPP Year 1. Data collection will be conducted per the frequency indicated in the Evaluation Plan. Data analysis will occur annually, and results will be disseminated to ACBHS staff and clients; partner agencies; community organizations; and other stakeholders through social media, email and newsletter distribution, and at community events.

**Figure 10: Program Evaluation Plan**

<b>Program</b>	<b>Outcomes</b>	<b>Data Collection</b>	<b>Responsible Entity</b>
Partnership to End Addiction	Increased parental awareness of alcohol use and abuse among youth.	Program survey, pre and post parent education sessions. Parent/community surveys, annually.	ACBHS
	Reduced alcohol use and abuse among youth.	CHKS, every 2 years. Community surveys, annually.	Schools; ACBHS
Opioid Awareness Program	Increased parental, youth, adult, and community awareness of alcohol/substance use and abuse.	Surveys and focus groups, post events and annually.	ACBHS
	Reduced substance/alcohol use and abuse among youth, adults, and older adults.	CHKS, every 2 years. Community surveys, annually.	Schools; ACBHS
Character Counts!	Increased youth self-esteem, responsible decision making, and positive social involvement. Increased youth awareness of alcohol use and abuse.	Program surveys, end of each session	BVPG
	Reduced alcohol use and abuse among youth.	CHKS, every 2 years. Community surveys, annually.	Schools; ACBHS
Botvin Life Skills Training	Increased youth self-esteem, responsible decision making, and positive social involvement. Increased youth awareness of alcohol use and abuse.	Program surveys, end of each session	ACBHS
	Reduced alcohol use and abuse among youth.	CHKS, every 2 years. Community surveys, annually.	Schools; ACBHS
Red Ribbon Week; keepin' it REAL	Increased youth self-esteem, responsible decision making, and positive social involvement. Increased youth awareness of alcohol use and abuse.	Program surveys, end of each session	ACBHS
	Reduced alcohol use and abuse among youth.	CHKS, every 2 years. Community surveys, annually.	Schools; ACBHS

<b>Program</b>	<b>Outcomes</b>	<b>Data Collection</b>	<b>Responsible Entity</b>
Responsible Beverage Service Program	Increased business understanding and practice of laws and regulations around alcohol sales.	Surveys and focus groups, annually.	ACBHS
	Reduced alcohol use and abuse among youth, adults, and older adults.	CHKS, every 2 years. Community surveys, annually.	Schools; ACBHS
SUD Services	Increased awareness of county SUD prevention and treatment services. Increased enrollment in needed SUD services	Client and service data analysis, annually. Client perception of care surveys, annually. Focus groups, annually.	ACBHS

### Evaluation of SPP Implementation

ACBHS will evaluate process implementation of this SPP through PPSDS data collection and reporting. Evaluation activities will also include analysis of County records, such as Coalition and planning meeting sign-in sheets, material distribution lists, and event logs.

## Appendix A: Glossary of Acronyms and Abbreviations

The following abbreviations are used in this report:

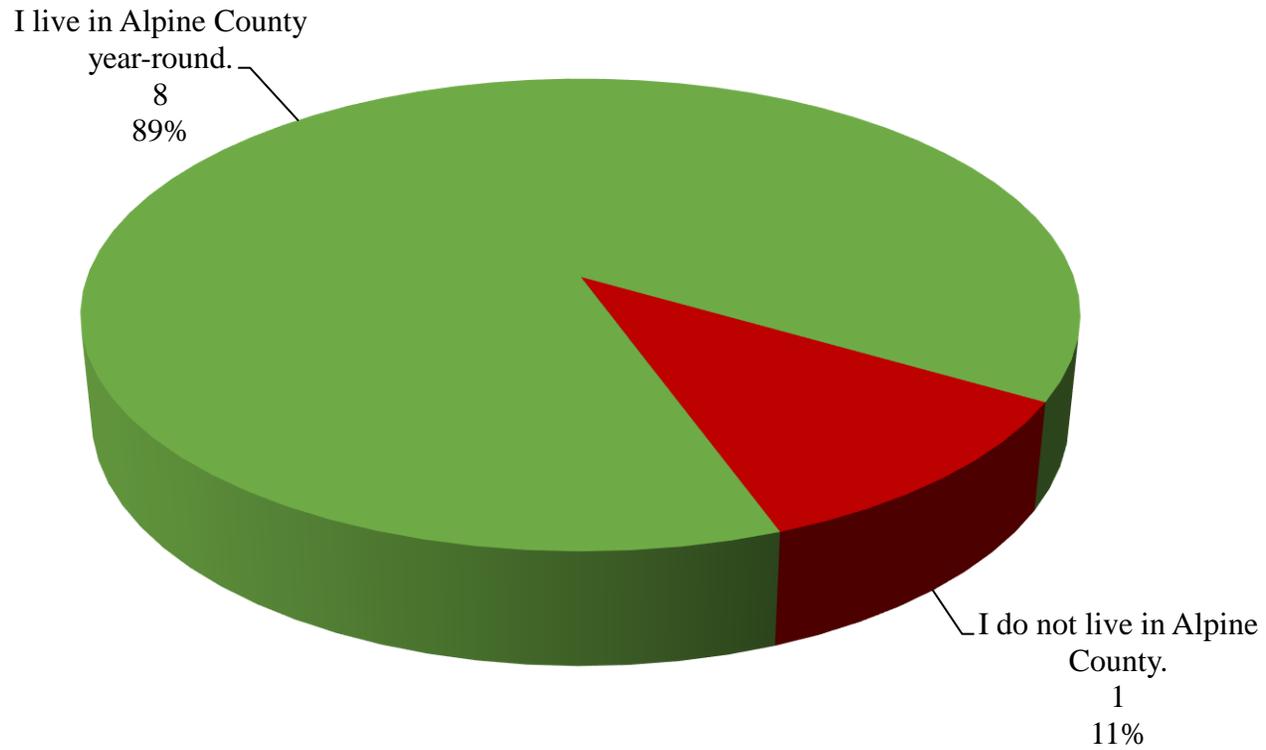
<b>ACBHS</b>	Alpine County Behavioral Health Services
<b>ACHS</b>	Alpine County Human Services
<b>AOD</b>	Alcohol and Other Drugs
<b>BH</b>	Behavioral Health
<b>CHKS</b>	California Healthy Kids Survey
<b>CSCS</b>	California School Climate Survey
<b>CSTS</b>	California Student Tobacco Survey
<b>DHCS</b>	California Department of Health Care Services
<b>FY</b>	Fiscal Year
<b>HWC</b>	Health and Wellness Coalition
<b>PPSDS</b>	Primary Prevention SUD Data Service
<b>SPF</b>	Strategic Prevention Framework
<b>SUD</b>	Substance Use Disorder
<b>SPP</b>	Strategic Prevention Plan

## **Appendix B: SUD Prevention Community Needs Survey Results (2023)**

Please refer to the next pages for the complete results of the ACBHS SUD Prevention Community Needs Survey, administered throughout April 2023.

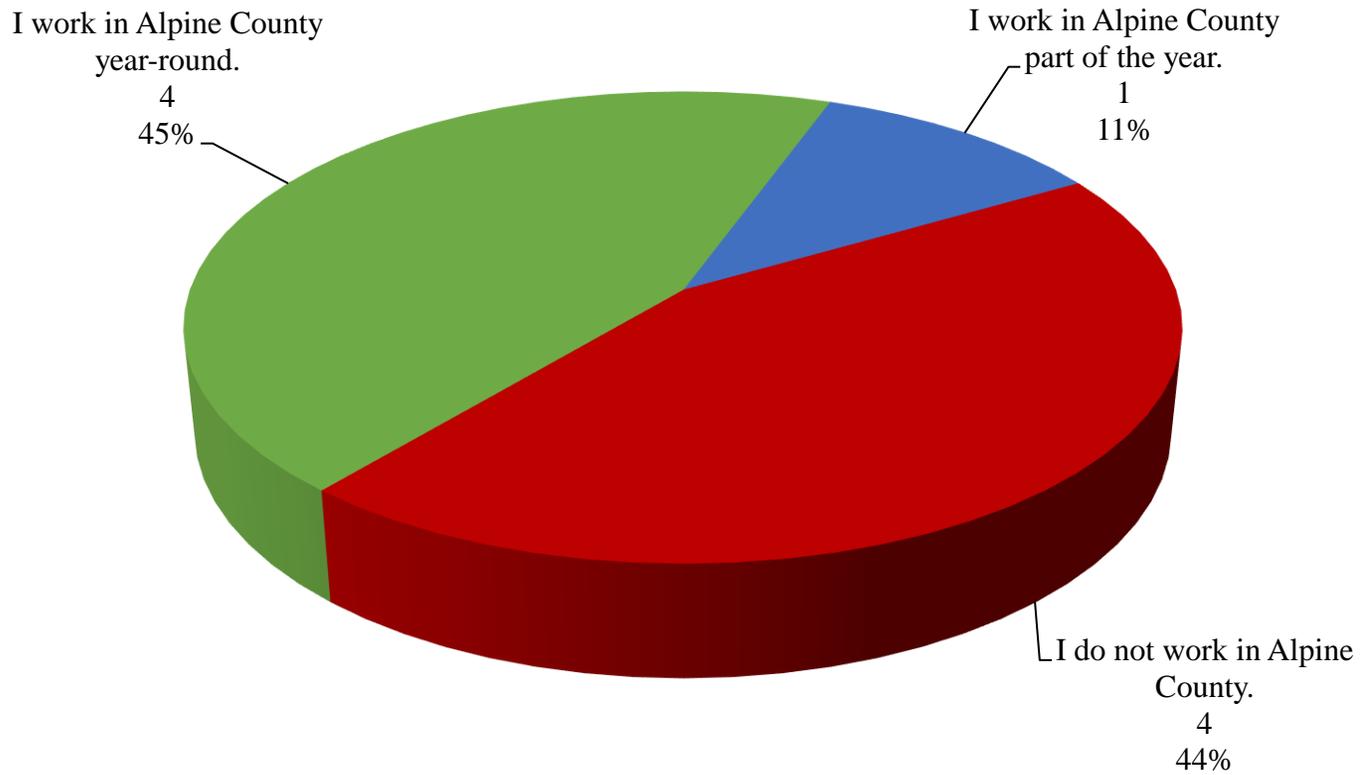
**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

*Which best describes your current Alpine County resident status? (N=9)*



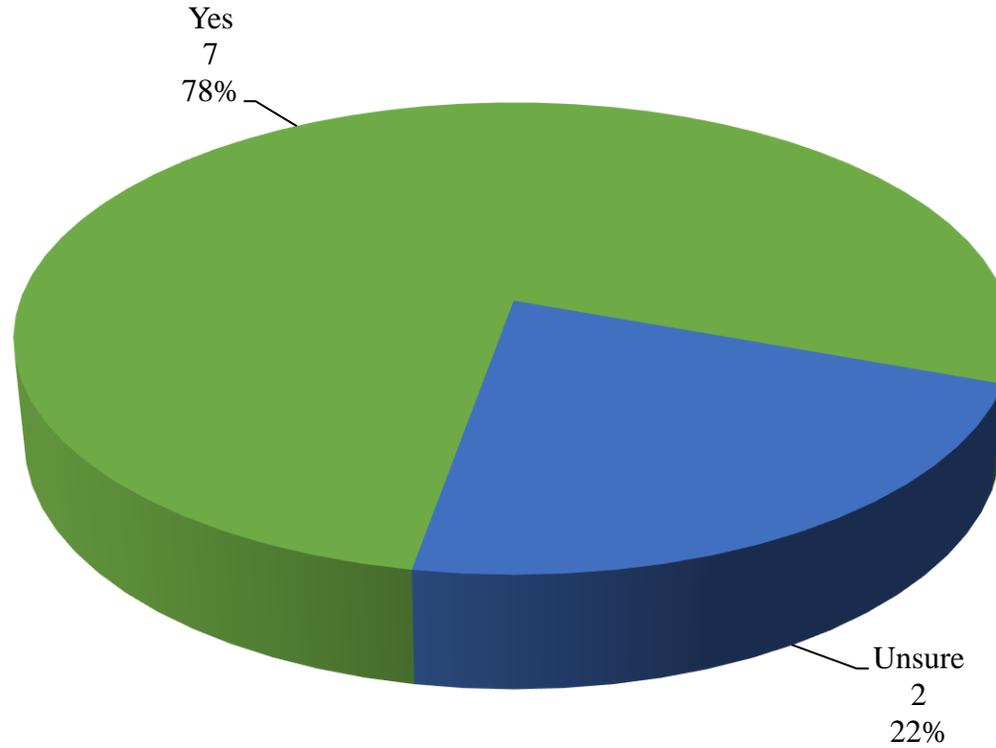
**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

*Do you work in Alpine County? (N=9)*



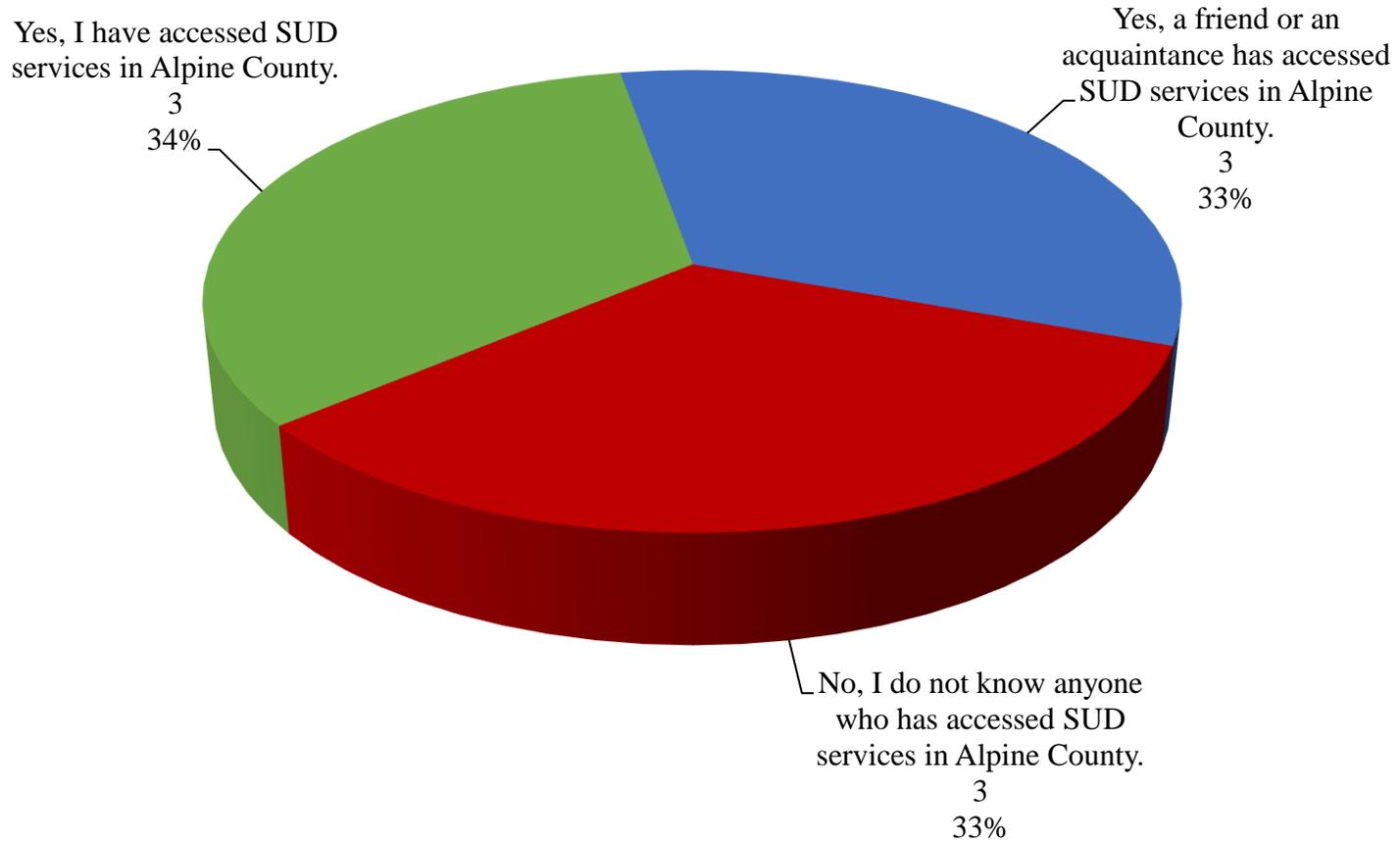
**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

*Are you aware of the ACBHS SUD services that are available in Alpine County? (N=9)*



**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

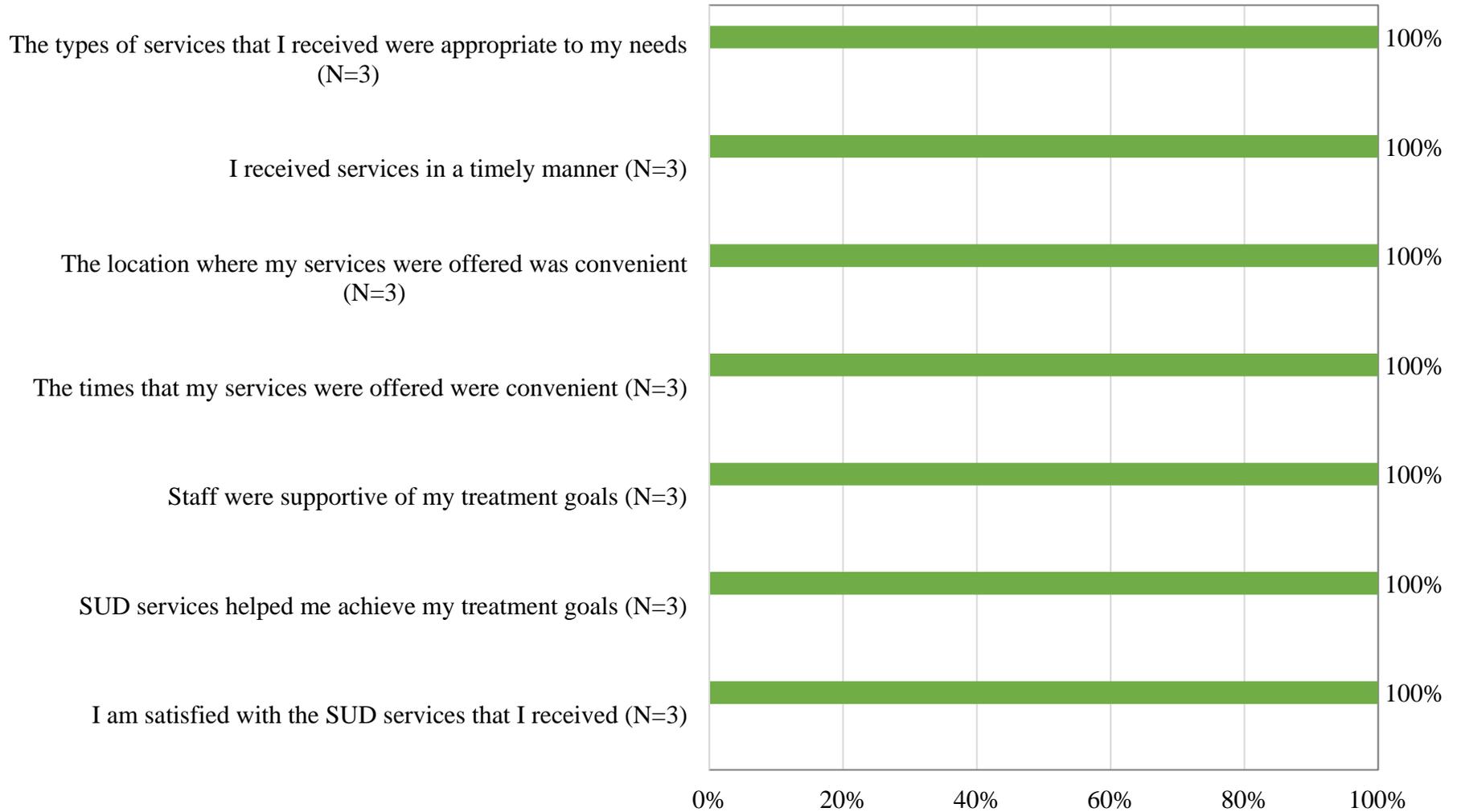
*Have you or someone you know received SUD (alcohol and/or drug abuse) treatment, programs, activities, or services in Alpine County? (N=9)*



**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

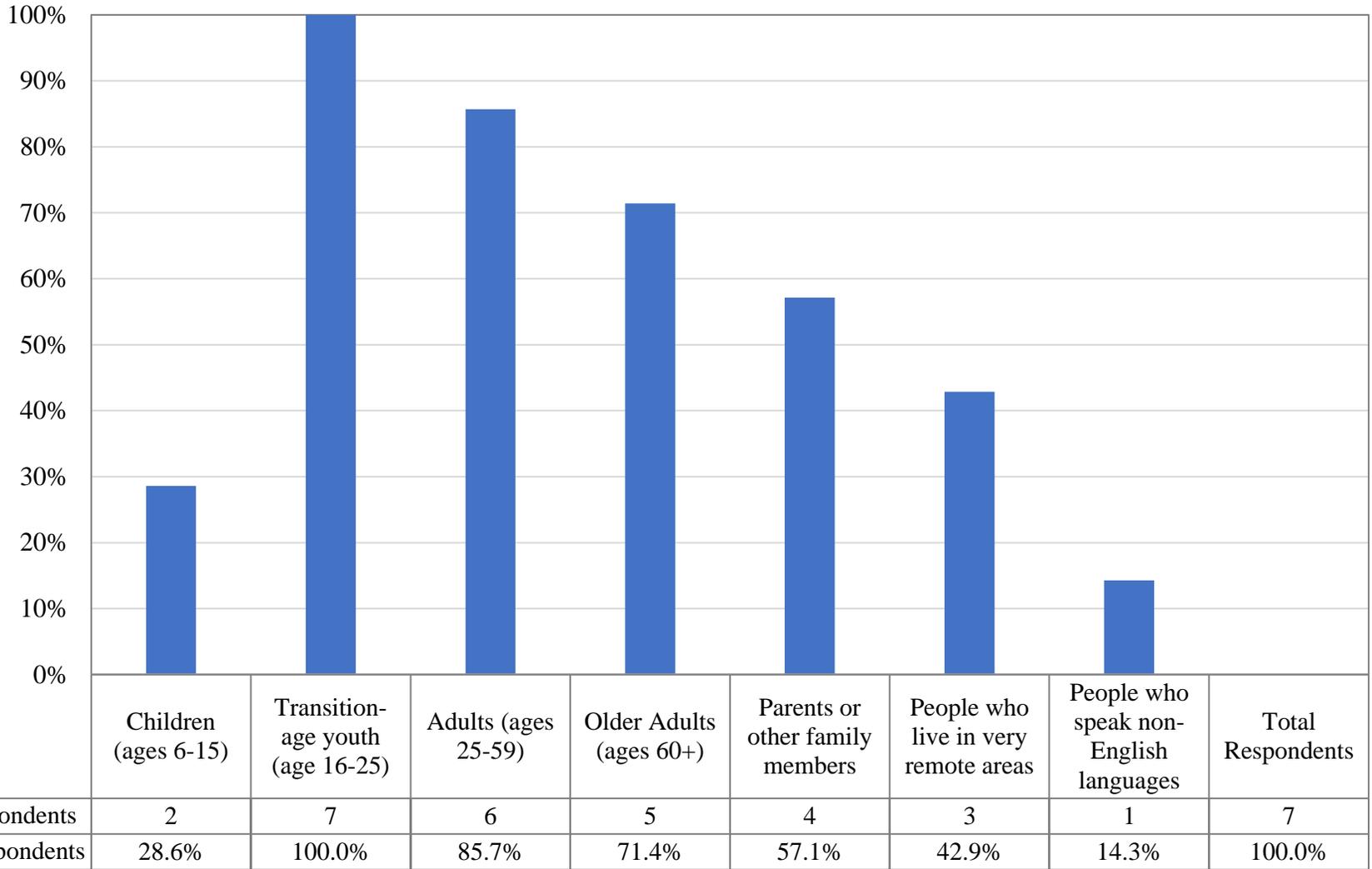
*If you have personally received SUD services from ACBHS, please complete the following:*

■ Agree ■ Neutral ■ Disagree



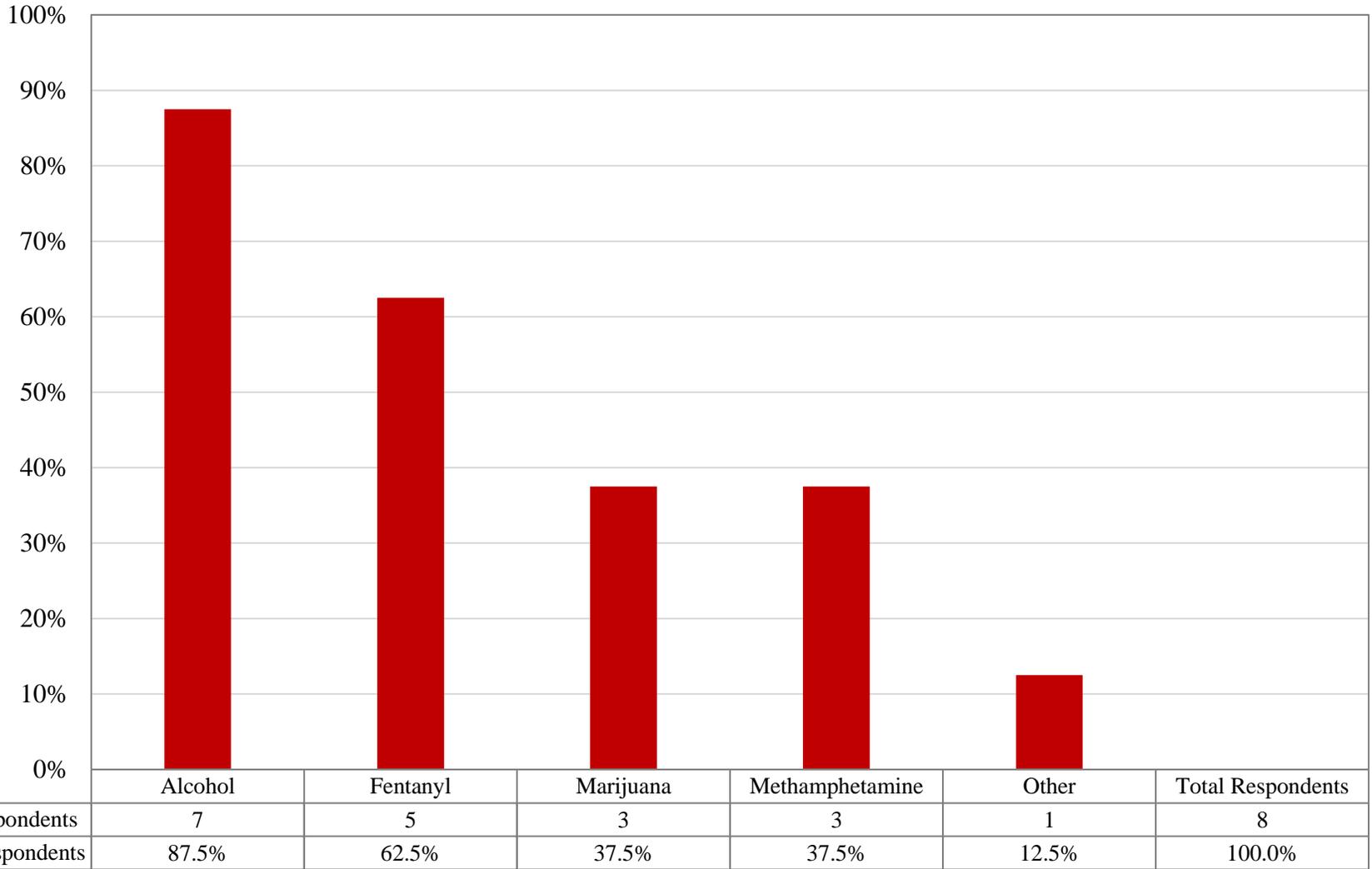
**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

*In your opinion, are there specific groups of people in Alpine County who are in particular need of SUD services? (N=7)*

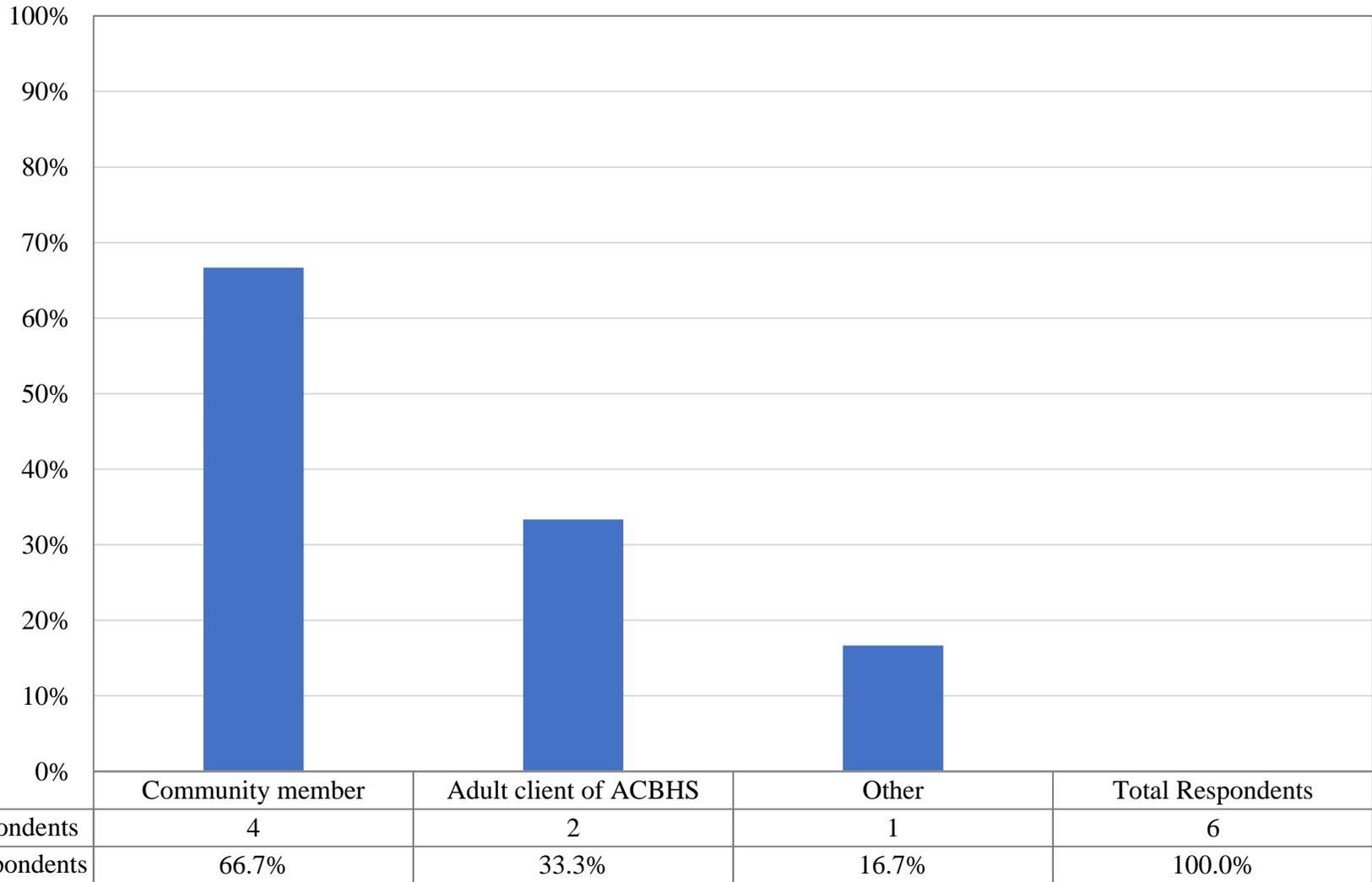


**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

*In your opinion, which substances are of most concern in Alpine County? (N=8)*

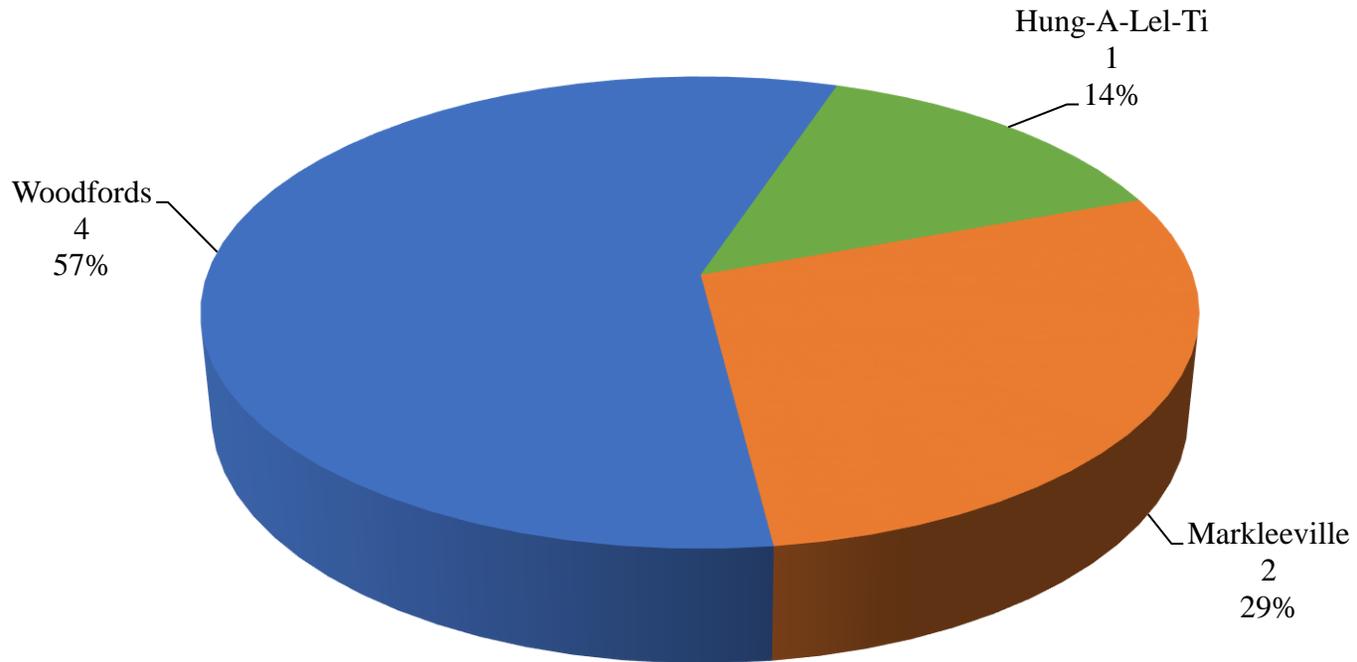


**Alpine County Behavioral Health Services  
 Substance Use Disorder Prevention  
 Community Needs Survey 2023**  
*What is your role in the community? (N=6)*



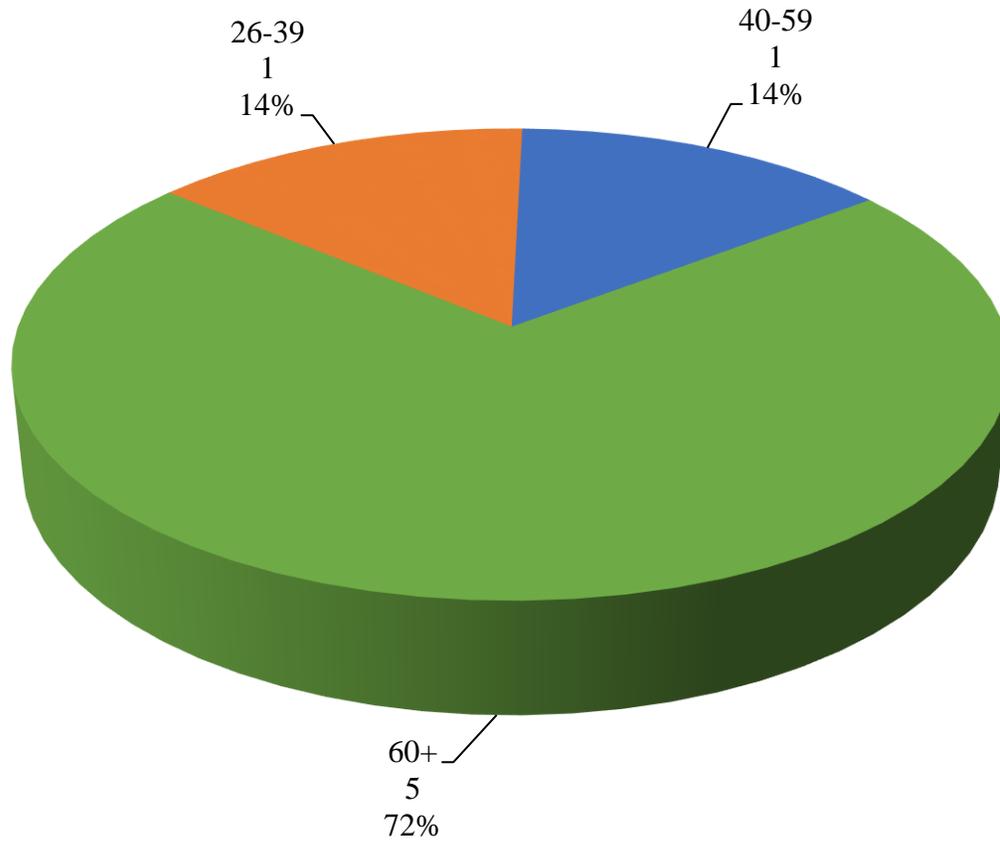
**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

*Area of Residence (N=7)*



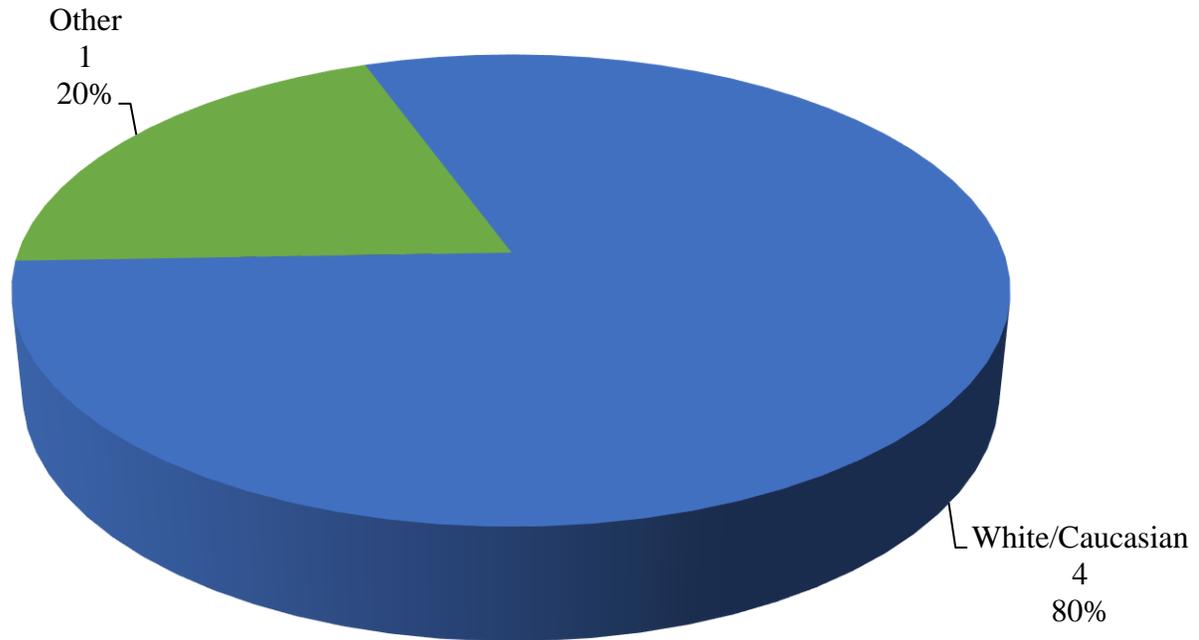
**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

*Age Group (N=7)*



**Alpine County Behavioral Health Services  
Substance Use Disorder Prevention  
Community Needs Survey 2023**

*Race/Ethnicity (N=5)*



## **Appendix C: ACBHS Organizational Chart**

Please refer to the next page for Alpine County Behavioral Health Organization Chart, current at the time of publication of this SPP.

# BHS Department Organization Chart

(as of 5/12/23)

