

North Dakota

**Partnership for Success (PFS)**

Strategic Planning Workbook

Community Grantee:

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# Introduction

The Partnership for Success (PFS) grant (through the Substance Abuse and Mental Health Services Administration, [SAMHSA]) requires states to use the successful prevention systems and structures put in place through their completed (or almost completed) Strategic Prevention Framework State Incentive Grant (SPF SIG).

SAMHSA’s SPF-PFS grant goals:

* Prevent the onset and reduce the progression of substance abuse
* Reduce substance abuse-related problems
* Strengthen prevention capacity/infrastructure at the state and community levels
* Leverage, redirect and align funding streams and resources for prevention

The North Dakota SPF-PFS plans to address the following substance abuse prevention priority: underage drinking among persons aged 12 to 20.

The North Dakota Department of Human Services’ Behavioral Health Division was awarded the SPF-PFS in 2015.

## Strategic Prevention Framework

SAMHSA’s [Strategic Prevention Framework (SPF)](http://www.samhsa.gov/capt/applying-strategic-prevention-framework) is a planning process for preventing substance use and misuse. The five steps and two guiding principles of the SPF offer prevention professionals a comprehensive process for addressing the substance misuse and related behavioral health problems facing their communities. The effectiveness of the SPF begins with a clear understanding of community needs and involves community members in all stages of the planning process.

Five Steps of the Strategic Prevention (SPF) Framework



Source: Center for Substance Abuse Prevention, 2005

The SPF planning process has four distinctive features. The SPF is:

* **Data driven:** Good decisions require data. The SPF is designed to help practitioners gather and use data to guide all prevention decisions—from identifying which substance misuse issues problems to address in their communities, to choosing the most appropriate ways to address those problems. Data also helps practitioners determine whether communities are making progress in meeting their prevention needs.
* **Dynamic:** Assessment is more than just a starting point. Practitioners will return to this step again and again: as the prevention needs of their communities change, and as community capacity to address these needs evolve. Communities may also engage in activities related to multiple steps simultaneously. For example, practitioners may need to find and mobilize additional capacity to support implementation once an intervention is underway. For these reasons, the SPF is a circular, rather than a linear, model.
* **Focused on population-level change:** Earlier prevention models often measured success by looking at individual program outcomes or changes among small groups. But effective prevention means implementing multiple strategies that address the constellation of risk and protective factors associated with substance misuse in a given community. In this way, we are more likely to create an environment that helps people support healthy decision-making.
* **Intended to guide prevention efforts for people of all ages:** Substance misuse prevention has traditionally focused on adolescent use. The SPF challenges prevention professionals to look at substance misuse among populations that are often overlooked but at significant risk, such as young adults ages 18 to 25 and adults age 65 and older.
* **Reliant on a team approach:** Each step of the SPF requires—and greatly benefits from—the participation of diverse community partners. The individuals and institutions you involve will change as your initiative evolves over time, but the need for prevention partners will remain constant.

## Key Concepts of Planning

Planning is pivotal to prevention success—it helps to focus the energy of staff and other stakeholders, ensures that they are working toward the same goals, and provides the means for assessing, evaluating, and adjusting programmatic direction.

Good planning is also crucial to sustainability. It ensures the involvement and commitment of stakeholders beyond the initial funding period, establishes the organizational structure necessary to maintain program activities over time, and greatly increases the likelihood that expected outcomes will be achieved.

Planning typically involves the following tasks:

1. **Establish criteria for prioritizing intervening variables** (also referred to as risk and protective factors)associated with the identified priority problems (e.g., changeability, importance).
2. **Select prevention strategies** (also referred to as interventions) that are evidence based, most likely to influence the identified risk factors or intervening variables (conceptual fit), and feasible and relevant to the population the intervention will serve (practical fit).
3. **Develop a comprehensive, logical, and data-driven plan** that includes a logic model, strategies for addressing resource and readiness gaps, anticipated evaluation activities, and how issues of cultural competence have and will be addressed.

Keep in mind that good planning requires collaboration. Whether planning happens within a formal coalition or among a more informal group of partners, it cannot represent the thoughts and ideas of just one person. Decisions must reflect the ideas and input of individuals from various sectors within the community and, particularly, of the population group that the intervention will focus on.

A **logic model** is a visual tool that shows the logic, or rationale, behind a program or process. Like a roadmap, it tells you where you are, where you are going, and how you will get there. In the prevention field, planners often use logic models to:

* Visualize how the pieces of a prevention plan fit together
* Provide explicit rationale for selecting prevention programs, policies, and practices to address substance use problems

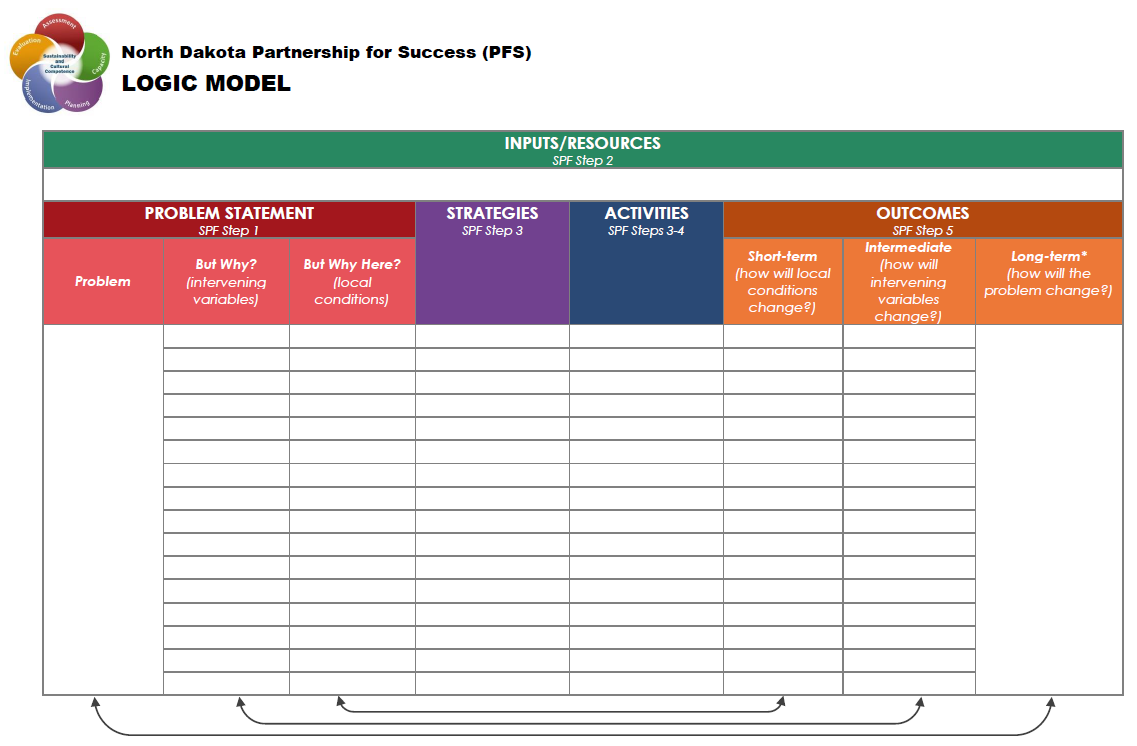
When used as part of applying the Strategic Prevention Framework (SPF), logic models show the relationship between the following four elements:

* Problems and Related Behaviors
* Intervening Variables/Risk and Protective Factors (including local conditions)
* Prevention Strategies/Interventions
* Expected Outcomes (short-term, intermediate and long-term)

Using a logic model ensures the strategies selected in the planning process are linked to the local condition(s) and intervening variable (or causal factor), which will lead to positive change. It is through positively influencing intervening variables through carefully selected environmental strategies that we achieve population-level changes in substance abuse consumption and consequences.

**Logic model** is our “road map”—the first stop is assessing problems and related behaviors.

#### PFS Logic Model



#### Considering Sustainability in Planning

The [sustainability](https://www.samhsa.gov/capt/applying-strategic-prevention-framework/sustainability) of prevention outcomes is often seen as the culmination of project planning and implementation. However, that assumption will place your project at a disadvantage. Effective projects plan for sustainability from the very beginning, which means considering sustainability at this early planning stage is vital to the future success of your community prevention efforts. In fact, sustainability should be revisited and revised throughout the life of a project.

The ultimate goal is to **sustain prevention outcomes, not programs or strategies**. Strategies that produce positive outcomes should be continued. Strategies that are ineffective should not be sustained. Key activities involved in ensuring sustainability involve building support, showing results, and obtaining continuing funding. All of these activities require time, people, and ongoing planning and evaluation. The SPF emphasizes sustaining the prevention process itself, recognizing that prevention practitioners and coalitions will return to each step of the process, again and again, as communities face evolving problems.

## **Build Ownership Among Stakeholders**

Stakeholders represent a diverse group of people, who may include community members, state health department officials, other prevention professionals, and government officials. Involve them early on and find meaningful ways to keep them involved. Stakeholders who are involved in initial assessment activities are more likely to support prevention efforts that stem from the assessment.

## **Outcome Evaluation Leads to Funding**

While data collection must be ongoing, the analysis and accurate interpretation of data represents a key step of the SPF. Even if your evaluation process reveals that you weren’t able to meet all of your goals, this information is still valuable. Failures and challenges that emerge from the evaluation process allow you to see what worked and what didn’t. This information will help you highlight problem areas in the project and where to make necessary changes. More importantly, this data can help you decide if the strategy or certain elements of your strategy should continue.

## **Track Outcomes and Communicate**

A well-designed and executed evaluation helps you determine which activities to keep and which to discontinue. Evaluating your outcomes can also help demonstrate the program’s effectiveness, and sharing these outcomes with the community encourages members to spread the word about the program and may increase public interest, participation, and potentially funding.

## **Identify Program Champions**

Find people on your team and in the community willing to speak about and promote your prevention efforts. These champions will help represent your program in the media, and help you develop promotional materials for the public and to attract officials as supporters. [Learn more about communication and education prevention approaches.](https://www.samhsa.gov/capt/practicing-effective-prevention/prevention-approaches#communication-education)

## **Invest in Capacity**

This investment begins with participation in all available training and technical assistance opportunities. Training and technical assistance can provide your organization with information on how to assess needs, build resources, and effectively plan and implement prevention programs as you move through your project. These tools can also be used to create the systems necessary to continue prevention activities over time.

## **Identify Diverse Resources**

You’ve assessed your human, financial, material, and technological resources in your Assessment Workbook, but it’s important to continue assessing available resources throughout the course of your project. The availability of resources can change and utilizing these resources can directly impact the sustainability of your project strategies over time.

#### Considering Cultural Competency in Planning

Practicing [cultural competence](https://www.samhsa.gov/capt/applying-strategic-prevention/cultural-competence) throughout the planning process ensures that all members of a community are represented and included. It can also prevent wasteful spending on programs and services that a community can’t or won’t use. Every community and coalition’s planning for cultural competence will also look different because each community is unique. Review Section 4 of your Community Assessment Workbook as you build your strategic plan, ensuring efforts are sensitive to the diverse cultures in your community.

As you consider how to incorporate cultural competence into your strategic plan, ask: “***Does our coalition…***

* Ensure broad community participation in planning process?
* Review and discuss our planning process with the community to increase understanding of planning?
* Encourage community members to see themselves in a multicultural perspective, and encourage skills building in cross-cultural interactions and communication?
* Have mutually acceptable goals and objectives identified?
* Consider programs and strategies that fit with:
* Community culture
* Existing prevention efforts
* Past history
* Broaden work and action plans to reflect input and outreach by diverse populations, cultures, ethnicities, and age groups to include in data gathering?
* Incorporate the community in selection of strategies and seek methods to assure buy-in is present?

#### A Note on Capacity Building

Increasing [capacity](https://www.samhsa.gov/capt/applying-strategic-prevention-framework/step2-build-capacity) involves building and mobilizing local **resources** and **readiness** to address identified prevention needs. Specific capacity building steps during this phase of the SPF process will include the following:

1. Increasing your capacity to complete the planning process.
2. Increasing your coalition’s and key stakeholder’s knowledge of the planning process.
3. Involving people in the process of planning.
4. Building capacity around each strategy both within the coalition and community.

There is tremendous value in capacity-building activities such as: what partners need to be involved, who in the coalition needs to be involved, and do we have the right people for the problem. Not only will they improve effectiveness of your prevention efforts in the short-term, they will also help ensure sustainability over time if they feel they have involvement in the issue.

# Completing This Strategic Planning Workbook

The purpose of this workbook is to walk through the steps necessary to complete the third step of the Strategic Prevention Framework, “Planning”. Planning involves developing a comprehensive, logical and data‐driven plan to address the problems identified in your Community Assessment Workbook with the current and future capacity assessed and developed through the Capacity Building Workbook of the Strategic Prevention Framework.

Strategic planning makes it possible to carry out the mission and vision of an organization or group in an effective, orderly way. It keeps the group on track, helps people develop and implement a prevention plan that is meaningful to their community, and outlines what everyone involved should be doing to move toward the group’s chosen goals. Moreover, the strategic plan will provide the tools for successfully recruiting the funding that will be needed to carry out future work.

There are multiple components of a **comprehensive strategic plan**, including:

* **Strategic Plan outline**
* **Logic Model**
* **Action Plans**
* **Evaluation Plan**

The table below summarizes the various factors/terminology that are a part of each component of a comprehensive Strategic Plan. Throughout this workbook, you will be asked to develop these different components which may seem duplicative; however, are for different components of the comprehensive strategic plan. The four columns represent the four components of a comprehensive strategic plan. First, review each of the four columns from top to bottom. Then, examine how each component is connected by reviewing the rows from left to right.

|  |  |  |  |
| --- | --- | --- | --- |
| **Logic Model** | **Strategic Plan** | **Action Plans** | **Evaluation Plan** |
| Problem Statement | Goal |  |  |
| Intervening Variable | Objective |  |  |
| Local Condition |  |  |  |
| Strategy | Strategy | Strategy |  |
| Activities (summary) |  | Activities (detail) | Process measures |
| Short-term outcome |  |  | Short-term outcome |
| Intermediate-term outcome |  |  | Intermediate-term outcome |
| Long-term outcome |  |  | Long-term outcome |

This Strategic Planning Workbook is broken up into the following three sections:

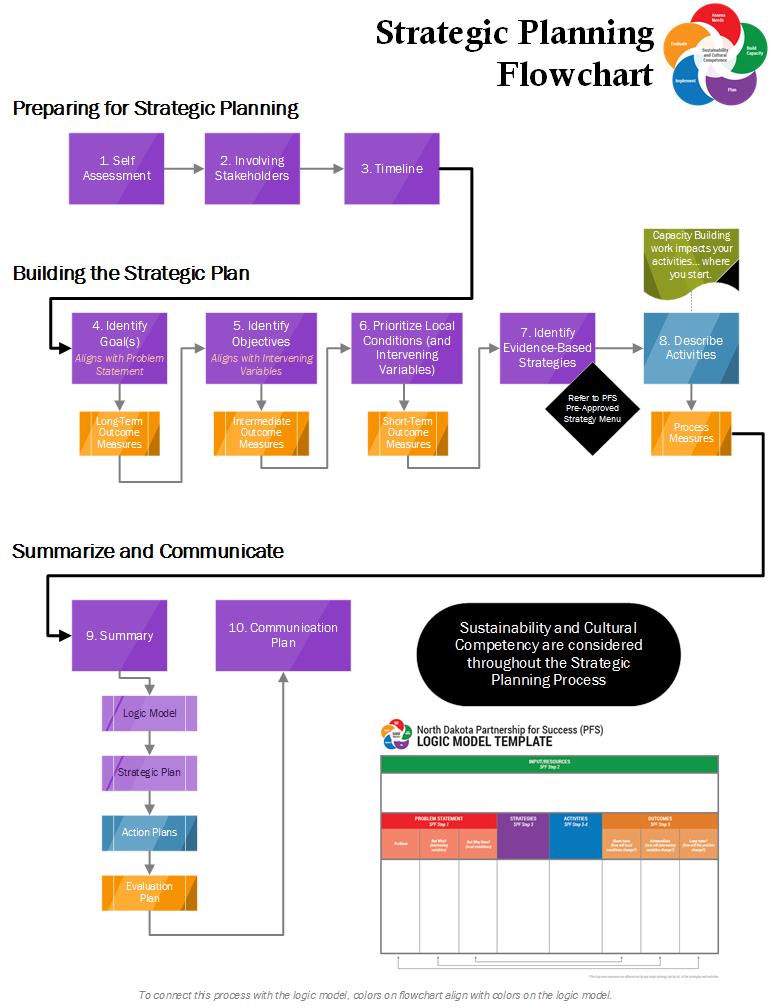
1. **Preparing for Strategic Planning**
2. **Building the Strategic Plan**
3. **Summarize and Communicate**

The flowchart on the next page walks through the steps you and your community will be taking in these four sections.

**A final copy of the Community Assessment Workbook should be submitted electronically no later than June 15, 2017 to** [**lauranderson@nd.gov**](mailto:lauranderson@nd.gov)**.**

Be sure to include the following in your submission:

* Strategic Planning Workbook
  + Including an Appendix A for each strategy in table 7.2
* Comprehensive Action Plan PFS (excel document)



Preparing For Strategic Planning

# Self-Assessment

In order to begin completing this workbook, it is important to check in on the understanding and knowledge you have gained since beginning the SPF process with your Community Assessment Workbook. This self-assessment will assist in determining areas where you can continue to increase your own capacity. Please reach out to the Training and Technical Assistance staff to connect you with resources and tools. Also, resources are available at [www.prevention.nd.gov](http://www.prevention.nd.gov).

* 1. **In the table below, please rate the level of your knowledge (that of the primary PFS coordinator) in each of the areas listed. Please place an “X” in the boxes to indicate your responses.** This tool will help you identify your level of capacity and readiness, and identify where your capacity needs to be increased.

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| --- | --- | --- | --- |
| ***1 = Not very knowledgeable*** | ***2 = A little knowledgeable*** | ***3 = Somewhat knowledgeable*** | ***4 = Very knowledgeable*** |

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| --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** |
| **The Strategic Prevention Framework** |  |  |  |  |
| **Substance abuse prevention** |  |  |  |  |
| **Ensuring cultural competence in implementation** |  |  |  |  |
| **Evidence-based prevention strategies** |  |  |  |  |
| **Adaptation of strategies** |  |  |  |  |
| **Action planning for implementation** |  |  |  |  |
| **Ensuring sustainability in implementation** |  |  |  |  |
| **Logic models** |  |  |  |  |
| **Identification of indicators for evaluation** |  |  |  |  |
| **Identification of data sources for evaluation** |  |  |  |  |
| **Data collection for evaluation** |  |  |  |  |
| **Data analysis** |  |  |  |  |
| ***NEW (not in Community Assessment Workbook)*** | | | | |
| **Reporting evaluation data** |  |  |  |  |
| **Planning process facilitation** |  |  |  |  |
| **Structure of a comprehensive strategic plan** |  |  |  |  |
| **Writing goals, objectives, and outcomes** |  |  |  |  |
| **Prioritizing Strategy Selection** |  |  |  |  |

* 1. **Review the items above the red line in the table above. In a paragraph or more, summarize the areas where you continue to excel and areas you still need to build your knowledge. Reference this table in Table 1.1 of your Community Assessment Workbook and make note of any changes in knowledge below.**

|  |
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* 1. **Review the items below the red line in the table above. In a paragraph or more, summarize the areas where you excel and areas you need to build your knowledge. Identify the steps you will take to enhance your knowledge in these areas. These areas are specific to the work you will be doing in this workbook.**

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# Involving Stakeholders in Strategic Planning

Involving members of your coalition as well as the various community groups in the strategic planning process increases the likelihood of overall success. This encourages both trust in the process and community buy-in and support, not only of the strategic plan, but of whatever actions are taken as a result of it. Full community participation in planning and carrying out a plan that also promotes leadership from within the community, gives voice to those who may feel they have none, and increases the likelihood of sustainability.

Studies have shown coalitions that effectively engage residents and partners in the strategic planning process develop more resources and achieve more results. In considering the partners you want to have assist in this planning process, it will be important that membership is diverse, and that the individuals involved are knowledgeable of the results of the assessment process. Encouraging participation of diverse populations, cultures, ethnicities, gender, sexual orientation, disability and age groups to support the development and implementation of your plan is vital to ensure cultural relevance. Also, it is important to consider who might have a stake in this effort.

Please reach out to the Training and Technical Assistance staff to connect you with resources and tools if you would like assistance in connecting with stakeholders ([www.prevention.nd.gov/pfs](http://www.prevention.nd.gov/pfs)).

* 1. **Complete the table below, identifying individuals/groups to involve in the strategic planning process.**

|  |  |  |
| --- | --- | --- |
| **Community Group/Individual** | **Involve in Planning?** *(Yes or No)* | **If yes, provide contact information.**  **This is for your records.** |
| **Law Enforcement Community** |  |  |
| **Judicial Community (judges, probation, attorneys, etc.)** |  |  |
| **Government (mayor, elected officials)** |  |  |
| **Alcohol industry** |  |  |
| **Local businesses** |  |  |
| **Civic organizations** |  |  |
| **Media (newspaper, radio stations, etc.)** |  |  |
| **Faith organizations** |  |  |
| **Education (principal, superintendent, teacher, counselor, coach, etc.)** |  |  |
| **Healthcare (physician, nurse, etc.)** |  |  |
| **Behavioral Health treatment (counselors, social workers, Licensed addiction counselors)** |  |  |
| **Youth and Youth Organizations (SADD, Boys and Girls Club, 4-H, etc.)** |  |  |
| **Other:** |  |  |

* 1. **In a paragraph or more, summarize your findings from the table above. What partners have you identified as being important to assist in the planning process? Summarize your plans for reaching out and recruiting these partners to be a part of the planning process.** These partners may be the same as with the assessment process, or new additions for this planning process.

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* 1. **In a paragraph or more, discuss the general level of knowledge among the stakeholders you identified relating to strategic planning. Reference Table 1.1 as you think about this. Discuss areas your stakeholders excel and areas where knowledge may need to be increased. Identify the steps you will take to enhance their knowledge in these areas. These areas are specific to the work you will be doing in this workbook.**

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# Timeline for Completing Strategic Planning

Once you have identified and brought together stakeholders to assist in the planning process, one of your first agenda items should be to determine a timeline for completing this Strategic Planning Workbook. You will need to establish roles and articulate who will be responsible for making sure each portion of the workbook gets completed.

Reference the flowchart on page 9 when completing the “Planning Section” column. Identify the specific action steps required to complete for each planning section. The more specific your action steps are, the more successful you will be. There should be multiple action steps for each section of this workbook. Try to divide the action steps up as equally as possible among the identified stakeholders, considering the experience, and “stake” of each stakeholder.

Keep in mind the final copy of the Strategic Planning Workbook should be submitted electronically no later than June 15, 2017 to [lauranderson@nd.gov](mailto:lauranderson@nd.gov).

* 1. **Complete the table below with the Planning Stakeholders identified in Tables 2.1 and 2.2.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Planning Section | Action Step | Responsible Person | Deadline | Resources Needed | Date Completed |
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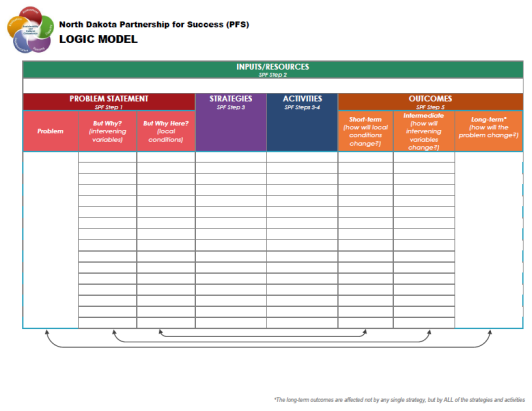
Building a Strategic Plan

In the following sections, you will work on creating your **comprehensive strategic plan**, including the following components:

* **Strategic Plan outline**
* **Logic Model**
* **Action Plans**
* **Evaluation Plan**

# Identify Goal(s)

By now, you have a pretty good idea of which consequences and consumption patterns specific to underage drinking are the most imperative in your community based on the information you have collected in the Community Assessment Workbook. And, you summarized these consequence and consumption patterns at the end of your Community Assessment Workbook (Table 10.1) to be a problem statement, which was entered into the first column of your logic model (see highlighted in the image to the right). One of the first steps to complete a strategic plan is to develop goal statements aligning with the problem statements you already developed.



Goals, in their most basic form are **broad general statements describing what the project or group wants to accomplish**. In writing the goal(s) for your project, you are essentially reversing the language of your problem statement to reflect what you want to accomplish by the end of the PFS project (or in the long-term).

For example:

***Problem Statement:*** High incidence of non-medical use of prescription drugs among youth and young adults in North Dakota.

***Goal:*** Reduce non-medical use of prescription drugs among North Dakota youth and young adults.



## Writing Goals

* 1. **Review Table 10.1 of your Community Assessment Workbook and the “Problem” column of your logic model. Enter this problem statement in the table below.**

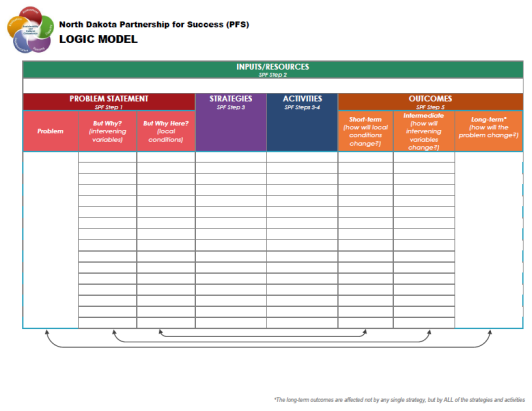
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* 1. **Write your goal statement(s) related to your problem statements in the table below.** This will be part of your Strategic Plan in section 9 of this Workbook.

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## Writing Long-Term Outcomes

It is important for you and your planning group to identify data and information from your Community Assessment that can be used over the next three to five years to measure the project’s impact on consequences and consumption (relating to your goal). These will be your long term outcomes on your PFS logic model and evaluation plan. **Long-term** outcomes are achieved only after the project has been in place for some time (e.g., changes in mortality, morbidity, quality of life). It could take years to reach your long-term outcomes. The long-term outcomes link to the problem column in your logic model.



These measures are necessary in order to determine whether your prevention efforts have made an impact on your identified problem, or whether you have achieved your goal. To select measurements for your goal, you will need to know what data indicators were used when writing your problem statement. These indicators can be found in sections 8 and 9 of your Community Assessment Workbook.

When writing outcomes, it is best to follow the SMART model. SMART outcomes are:

* **S**pecific: includes the “who”, “what”, and “where”. Use only one action verb to avoid issues with measuring success.
* **M**easurable: focuses on “how much” change is expected.
* **A**chievable: realistic given program resources and planned implementation.
* **R**elevant: relates directly to program/activity goals.
* **T**ime-bound: focuses on “when” the objective will be achieved.

Outcomes specify the intended effect of the program in the target population or end result of a program. The outcome focuses on what your target population(s) will know or will be able to do as a result of your program/activity.

**Example of a SMART outcome:** By (month/year), decrease the percentage from (X%) to (Y%) of Youth in County Z that report lifetime use of alcohol, or decrease or increase (blank) by (X%).

* 1. **Review section 8 of your Community Assessment Workbook. Describe which indicators (data sources and related questions) were used to illustrate underage drinking consumption patterns. Pick at least one data indicator and place it into the first column of the table below and then create a SMART outcome for each of your data indicators in the second column.** These will be the measures for your goal statement you created in Table 4.2.

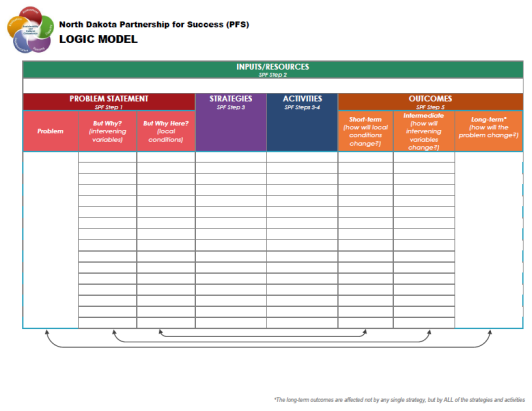
|  |  |
| --- | --- |
| Underage Drinking Consequences | |
| ***Data Source/Question*** | ***What change do you want to see?***  ***(SMART Long-Term Outcome)*** |
| *Example: 9.4% of ND high school students reported attempting suicide one or more times within the past 12 months (ND YRBS, 2015).* | *Example: Reduce the percentage of ND high school students who report attempting suicide one or more times within the past 12 months by 2% by June 2018 (ND YRBS, 2017).* |
|  |  |
|  |  |
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* 1. **Review section 9 of your Community Assessment Workbook. Describe which indicators (data sources and related questions) were used to illustrate underage drinking consumption patterns. Pick at least one data indicator and place it into the first column of the table below and then create a SMART outcome for each of your data indicators in the second column.** These will be the measures for your goal statement you created in Table 4.2.

|  |  |
| --- | --- |
| Underage Drinking Consumption | |
| ***Data Source/question*** | ***What change do you want to see?***  ***(SMART Long-Term Outcome)*** |
| *Example: 14.5% of ND high school students reported taking a prescription drug without a doctor’s prescription (ND YRBS, 2015).* | *Example: Reduce the percentage of ND high school students who report taking a prescription drug without a doctor’s prescription by 2% by June 2018 (ND YRBS, 2017).* |
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# Identify Objectives

Just as problem statements and goals relate to consequences and consumption, objectives equate with intervening variables. They describe the **intermediate steps that help accomplish broader goals**.



To write your objectives, change your high importance prioritized intervening variables into what you want to accomplish related to that specific intervening variable.

For example:

***Problem Statement:*** High incidence of non-medical use of prescription drugs among youth and young adults in North Dakota.

***Goal:*** Reduce non-medical use of prescription drugs among North Dakota youth and young adults.

***Intervening Variable:*** Social availability

***Objective 1:*** Reduce social availability of prescription drugs

***Intervening Variable:*** Perceived risk of harm

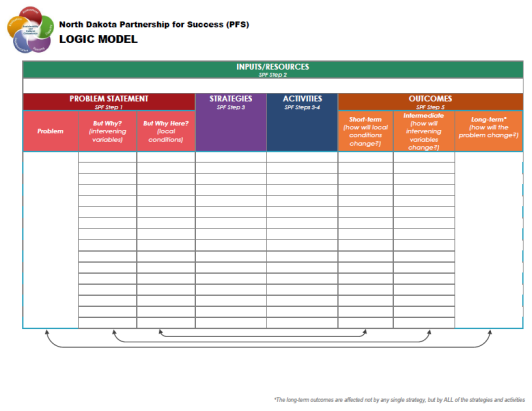
***Objective 2:*** Increase perceived risk of harm from non-medical use of prescription drugs.

## Writing Objectives

* 1. **Refer to Table 12.2 in your Community Assessment Workbook to identify your high importance prioritized intervening variables. Write objectives for each of these in the corresponding tables below.** If you did not prioritize one of the four intervening variables as high importance in your Community Assessment Workbook, write “Not Important” in its corresponding box.

|  |
| --- |
| Retail Availability  Ranked as “High Importance”  Yes or  No |
|  |
| Social Availability  Ranked as “High Importance”  Yes or  No |
|  |
| Enforcement  Ranked as “High Importance”  Yes or  No |
|  |
| Community Norms  Ranked as “High Importance”  Yes or  No |
|  |

## Writing Intermediate Outcomes



In this section, you will identify measures for the objectives you wrote above (Table 5.1) which will be your intermediate outcomes on your PFS logic model and evaluation plan. These measures are necessary in order to determine whether your prevention efforts have made an impact on your identified problem, or whether you have achieved your objective. To select measurements for your objectives, you will need to know what data indicators were used when prioritizing intervening variables. These indicators can be found in section 11of your Community Assessment Workbook.

**Intermediate** outcomes are those interim results that provide a sense of progress toward reaching the long-term outcomes (e.g., changes in behavior, norms, and policy). The intermediate outcomes link to your intervening variables column in your logic model.

When writing outcomes, it is best to follow the SMART model. SMART outcomes are:

* **S**pecific: includes the “who”, “what”, and “where”. Use only one action verb to avoid issues with measuring success.
* **M**easurable: focuses on “how much” change is expected.
* **A**chievable: realistic given program resources and planned implementation.
* **R**elevant: relates directly to program/activity goals.
* **T**ime-bound: focuses on “when” the objective will be achieved.

Outcomes specify the intended effect of the program in the target population or end result of a program. The outcome focuses on what your target population(s) will know or will be able to do as a result of your program/activity.

Example of a SMART outcome: By (month/year), decrease the percentage from (X%) to (Y%) of Youth in County Z that report lifetime use of alcohol, or decrease or increase (blank) by (X%).

\*In the following tables, only consider the intervening variables you ranked as “HIGH” importance in your Community Assessment Workbook. You do not need to fill out tables for the intervening variables you ranked as “LOW” importance.

* 1. **Review section 11.1 of your Community Assessment Workbook (Retail Availability).**  **If you ranked retail availability as “high” importance, describe which indicators (data sources and related questions) were used to illustrate whether or not retail availability is a problem in your service area. Select at least one data indicator and place it into the first column of the table below and then create a SMART outcome for each of these data indicators in the second column.** These will be the measures for the objective you created in Table 5.1.

|  |  |
| --- | --- |
| Retail Availability  Ranked as  High or  Low Importance (If high, complete data indicators) | |
| ***Data source/question*** | ***What change do you want to see?*** |
| *Example: 30% of high school students reported purchasing over the counter drugs without the use of an ID (Local Survey, 2016)* | *Example: Reduce the percentage of high school students reporting purchasing over the counter drugs without the use of an ID by 3% by June 2018. (Local Survey, 2019)* |
|  |  |
|  |  |
|  |  |

* 1. **Review section 11.2 of your Community Assessment Workbook (Social Availability).**  **If you ranked social availability as “high” importance, describe which indicators (data sources and related questions) were used to illustrate whether or not social availability is a problem in your service area. Select at least one data indicator and place it into the first column of the table below and then create a SMART outcome for each of these data indicators in the second column.**

These will be the measures for the objective you created in Table 5.1.

|  |  |
| --- | --- |
| Social Availability  Ranked as  High or  Low Importance (If high, complete data indicators) | |
| ***Data source/question*** | ***What change do you want to see?*** |
| *Example: 53.7% of people ages 12 or older who misuse pain relievers obtain them from a friend or relative (NSDUH, 2015)* | *Example: Decrease the number of people ages 12 or older who abuse pain relievers reporting they obtain their prescription pain relievers from a friend or relative by 5% by June of 2019 (NSDUH, 2018)* |
|  |  |
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* 1. **Review section 11.3 of your Community Assessment Workbook (Enforcement).**  **If you ranked enforcement as “high” importance, describe which indicators (data sources and related questions) were used to illustrate whether or not enforcement should be a focus area in your service area. Select at least one data indicator and place it into the first column of the table below and then create a SMART outcome for each of these data indicators in the second column.**

These will be the measures for the objective you created in Table 5.1.

|  |  |
| --- | --- |
| Enforcement  Ranked as  High or  Low Importance (If high, complete data indicators) | |
| ***Data source/question*** | ***What change do you want to see?*** |
| *Example: 22% of community members believe that prescription drug laws are enforced (Local Survey, 2015)* | *Example: Increase the number of people who report that prescription drug laws are enforced from 22% to 26% by June of 2019 (Local Survey, 2019)* |
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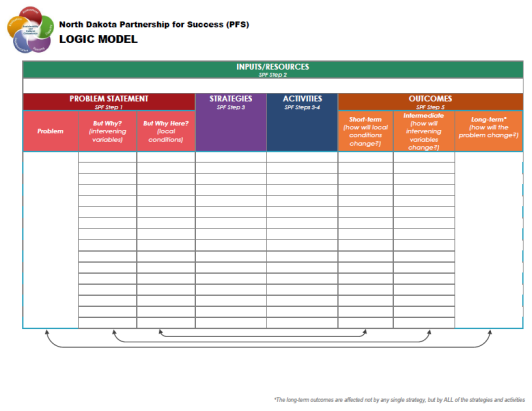
* 1. **Review section 11.4 of your Community Assessment Workbook (Community Norms).**  **If you ranked community norms as “high” importance, describe which indicators (data sources and related questions) were used to illustrate whether or not community norms should be a focus in your service area. Select at least one data indicator and place it into the first column of the table below and then create a SMART outcome for each of these data indicators in the second column.**

These will be the measures for the objective you created in Table 5.1.

|  |  |
| --- | --- |
| Community Norms  Ranked as  High or  Low Importance (If high, complete data indicators) | |
| ***Data source/question*** | ***What change do you want to see?*** |
| *Example: 85% of community members believe taking prescription medication without a doctor’s prescription is safe and does not lead to addiction (Local Survey, 2015)* | *Example: Decrease the percentage of community members who believe taking a prescription medication without a doctor’s prescription is safe and does not lead to addiction by 8% by June 2019 (Local Survey, 2019)* |
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# Prioritize Local Conditions (By Changeability)

In your Community Assessment Workbook (Section 12), you prioritized local conditions and related intervening variables by considering “Importance” only. This list illustrates the local conditions which you will – at some point – focus on in this PFS project. You will now rank these local conditions and related intervening variables previously identified as important considering “Changeability”.



Changeability describes a community’s capacity to influence a specific intervening variable or local condition. These questions can help you determine a factor’s changeability:

* Do we have the resources and readiness to address this factor?
* Does a suitable intervention exist to address this factor?
* Can we produce outcomes within a reasonable timeframe?

When considering changeability for each high importance local condition, it is important to refer back to the work you have already completed in Sections 5 and 6 of your Community Assessment Workbook and your Capacity-Building Workbook.

Remember, just because a local condition is ranked “low” on changeability, does not mean you cannot or should not focus in that area. A rank of “low” changeability will provide you with a starting point, and you may need to implement more capacity-building activities prior to implementing a strategy impacting that local condition. The work you complete in this section will assist you in determining when or what order you will address the various local conditions.

## Refer to section 12 of your Community Assessment Workbook. Place the local conditions identified as “High Importance” in the appropriate box in the matrix below. This activity is most beneficial if done with a core group of community stakeholders.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | **INTERVENING VARIABLES** | | | |
|  |  | **Retail Availability** | **Social Availability** | **Enforcement** | **Community Norms** |
| **CHANGEABILITY** | HIGH |  |  |  |  |
| LOW |  |  |  |  |

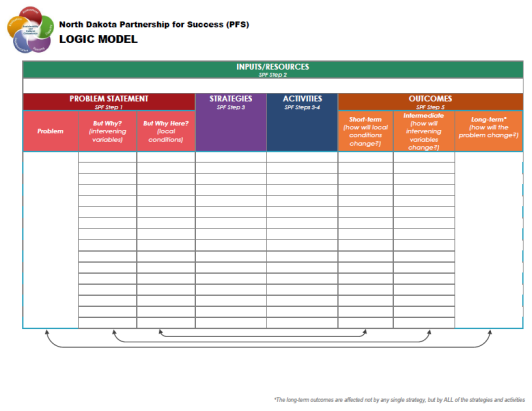
## In a paragraph or more, provide a summary of the local conditions for each intervening variable that were identified as HIGH changeability.

|  |
| --- |
|  |

## In a paragraph or more, provide a summary of the local conditions for each intervening variable that were identified as LOW changeability.

|  |
| --- |
|  |

## Writing Short Term Outcomes



In this section, you will identify measures for all of the local conditions you prioritized as high importance and these will be your short-term outcomes on your PFS logic model and evaluation plan. These measures are necessary in order to determine whether your prevention efforts have made an impact on your local condition. Be aware that how well the strategy is implemented (measured through process measures) can have an impact on short term outcomes. Considering all the local conditions in Table 6.1 were identified as “Important,” you will be developing short-term outcomes for each – regardless of the “high” or “low” changeability ranking.

**Short-term** outcomes are the initial expected changes in your target population(s) after implementing certain strategies and activities (e.g., changes in knowledge, skills, and attitudes). The short-term outcomes link to the local conditions column in your logic model.

These measures are necessary in order to determine whether your prevention efforts have made an impact on your identified problem, or whether you have made an impact on your local condition. To select measurements for your short-term outcome, you will need to know what data indicators were used when identifying the high importance local conditions.

When writing outcomes, it is best to follow the SMART model. SMART outcomes are:

* **S**pecific: includes the “who”, “what”, and “where”. Use only one action verb to avoid issues with measuring success.
* **M**easurable: focuses on “how much” change is expected.
* **A**chievable: realistic given program resources and planned implementation.
* **R**elevant: relates directly to program/activity goals.
* **T**ime-bound: focuses on “when” the objective will be achieved.

Outcomes specify the intended effect of the program in the target population or end result of a program. The outcome focuses on what your target population(s) will know or will be able to do as a result of your program/activity.

Example of a SMART outcome: By (month/year), decrease the percentage from (X%) to (Y%) of Youth in County Z that report lifetime use of alcohol, or decrease or increase (blank) by (X%).

Considering you will likely have limited to no data on your local conditions, do your best to determine what measure you might need and ways to collect the data. After completing the tables below, reach out to the evaluation team. The evaluation team can work with you to brainstorm measures and ways to collect the data needed to evaluate your local conditions. They will also assist in developing a comprehensive evaluation plan (including data collection tools) surrounding one specific local condition identified by you as being most important and changeable.

\*In the following tables, only consider the intervening variables you ranked as “HIGH” importance in your Community Assessment Workbook. You do not need to fill out tables for the intervening variables you ranked as “LOW” importance.

* 1. **Place each local condition for Retail Availability from Table 6.1 in the first column. Next, list at least one data indicator associated to the local condition and place it into the second column. Create a SMART outcome for each of these data indicators in the third column.**

|  |  |  |
| --- | --- | --- |
| Retail Availability  Ranked as  High or  Low Importance (If high, complete data indicators) | | |
| ***Local Conditions*** | ***Data source/question*** | ***What change do you want to see?*** |
| *Example: Youth are purchasing over-the-counter medications at local pharmacies without having to show an ID.* | *Example: 60% of youth who reported abusing over-the-counter medication in the past 30 days obtained them from John’s Pharmacy without the use of an ID (High School Focus Group, 2016).* | *Example: Reduce the percentage of high school students reporting purchasing over the counter drugs without the use of an ID by 20% by June 2017. (High School Focus Group, 2017).* |
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* 1. **Place each local condition for Social Availability from Table 6.1 in the first column. Next, list at least one data indicator associated to the local condition and place it into the second column. Create a SMART outcome for each of these data indicators in the third column.**

|  |  |  |
| --- | --- | --- |
| Social Availability  Ranked as  High or  Low Importance (If high, complete data indicators) | | |
| ***Local Conditions*** | ***Data source/question*** | ***What change do you want to see?*** |
| *Example: Youth are obtaining and consuming prescription drugs at house parties.* | *Example: 40% of people ages 12 or older who misuse pain relievers consumed them at house parties (High School Focus Group, 2016).* | *Example: Decrease the number of people ages 12 or older who abuse pain relievers reporting they consumed them at house parties by 5% by June of 2018 (High School Focus Group, 2018).* |
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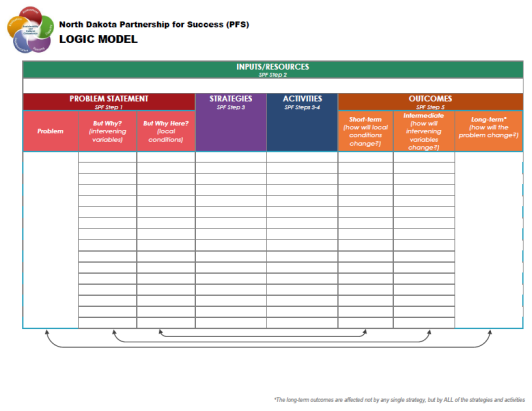
* 1. **Place each local condition for enforcement from Table 6.1 in the first column. Next, list at least one data indicator associated to the local condition and place it into the second column. Create a SMART outcome for each of these data indicators in the third column.**

|  |  |  |
| --- | --- | --- |
| Enforcement  Ranked as  High or  Low Importance (If high, complete data indicators) | | |
| ***Local Conditions*** | ***Data source/question*** | ***What change do you want to see?*** |
| *Example: Community members don’t know if the Police Department is doing anything to enforce the laws around prescription drugs.* | *Example: 85% of people in Lawson County are unaware of what the Lawson County Police Department is doing to enforce prescription drug laws (Local Survey, 2016).* | *Example: Increase awareness of what Lawson County Sheriff’s Department is doing to enforce the prescription drug laws by 5% by June of 2018 (Local Survey, 2018).* |
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* 1. **Place each local condition for community norms from Table 6.1 in the first column. Next, list at least one data indicator associated to the local condition and place it into the second column. Create a SMART outcome for each of these data indicators in the third column.**

|  |  |  |
| --- | --- | --- |
| Community Norms  Ranked as  High or  Low Importance (If high, complete data indicators) | | |
| ***Local Conditions*** | ***Data source/question*** | ***What change do you want to see?*** |
| *Example: Community members are saying they are seeing a lot of ads for prescription drugs from the six pain clinics in the service area which make Rx drugs sound safe.* | *Example: There are 6 pain clinics in the service area who are providing pain medication to patients and advertising their services in local media outlets (Environmental Scan, 2016).* | *Example: Decrease the number of pain clinics in the service area and pass policy to restrict advertising by June of 2018 (Environmental Scan, 2019).* |
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# Identifying Evidence-based Strategies

Finally, we are at the point of identifying evidence-based strategies! Sometimes people want to select strategies that are popular, that worked well in a different community, or that they are familiar with. However, it is more important that the strategy effectively addresses the priority substance use problem and associated intervening variables and local conditions, and it is a good fit for your broader community. When choosing appropriate strategies, it is important to select those that are:

Effective,

Relevant, and

Appropriate.

## Identifying *Best Fit* Strategies

Because substance abuse problems are complex, multiple factors and conditions will be implicated, some more strongly than others. You are encouraged to identify a comprehensive set of strategies directed to the most significant intervening variables and related local conditions.

|  |  |
| --- | --- |
| ***WHAT*** | ***HOW*** |

*PFS Pre-Approved Strategy Menu AND “PFS Request for Evidence-Based Strategy” form*

*Refer to your “High Importance” local conditions and intervening variables from your Community Assessment Workbook AND the PFS Pre-Approved Strategy Menu*

Refer to the capacity assessment sections of your *Community Assessment Workbook* as well as your *Capacity-Building Workbook*.

|  |  |  |
| --- | --- | --- |
| Effective? | Relevant? (Conceptual Fit) | Appropriate? (Practical Fit) |
| A strategy can be considered evidence-based if it fulfills one of the following three conditions:   * Inclusion in Federal registries of evidence-based interventions; * Reported (with positive effects on the primary targeted outcome) in peer-reviewed journals; or * Documented effectiveness supported by other sources of information and the consensus judgment of informed experts | To assess conceptual fit of a strategy, consider whether it clearly fits with your logic model by asking the following questions:   * Does it address the problem? * Does it address the conditions associated with the problem? * Does it target a relevant population and/or context (e.g., youth, parents, retailers, law enforcement, etc.)? | Ask yourself the following questions to help determine practical fit:   * Is the strategy feasible? (Does the community have the resources needed for the strategy?) * Is there synergism? (Does the intervention add to or reinforce other prevention strategies or efforts?) * Is the community ready? (Will stakeholders and the community support the strategy?) * Is the intervention culturally relevant? (Will the focus population be impacted by the strategy and will they be receptive to it? Are people who will be impacted by the strategy involved in the planning?) |

For more information on identifying “best fit” strategies, review: <https://store.samhsa.gov/shin/content/SMA09-4205/SMA09-4205.pdf>

#### North Dakota PFS Pre-Approved Strategy Menu

The North Dakota PFS project staff developed the PFS Pre-Approved Strategy Menu, identifying strategies that are evidence-based (Effective?) and linking those strategies to intervening variables and related local conditions (Relevant?).

If you choose to select a strategy that is not on this Pre-Approved Strategy Menu, you need to submit a request by completing the following form found in Appendix B: “Request for Evidence-Based Strategy” and submitting to [lauranderson@nd.gov](mailto:lauranderson@nd.gov).

#### Identifying *Best Fit* Strategies For Your PFS Project

* 1. **Consider the three factors of best fit (effectiveness, relevance and appropriateness) and complete the table below identifying evidence-based strategy(s) which link to the local conditions (and intervening variables) you prioritized as “High Importance” in your Community Assessment Workbook.** When completing this table, consider the entire implementation time of the PFS project, through August of 2020. Also, refer to the PFS Pre-Approved Strategy menu.

|  |  |  |  |
| --- | --- | --- | --- |
| *Local Condition to Address* | *High or Low Changeability* | *Evidence-Based Strategy (s)* | *Why (discuss practical fit)* |
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## Prioritizing and Selecting a Comprehensive Set of Strategies

The strategies you identified in Table 7.1 represent a set of strategies which address the local conditions (and related intervening variables) you prioritized as “high importance” in your Community Assessment Workbook. The next step is reviewing this, taking into consideration resources, readiness, changeability, and timing to identify the strategies you plan to address “***Now***” (during the first year of implementation – August 2017 through August 2018) and those you plan to address “***Later***” (during the subsequent years of implementation – September 2018 through August 2020).

The strategies you place in the “Now” Table 7.2 are what will be placed in the “Strategy” column of your PFS Logic Model in this workbook. This list of strategies is what you will focus on implementing during the first year of implementation (August 2017 – August 2018). And, these are the strategies you will build your action plans for in Section 8 of this workbook.

* 1. **Review Table 7.1 and complete the table below identifying strategies you plan to implement in the first implementation year of the PFS (August 2017 through August 2018).** You will reference this table when completing your Logic Model and Strategic Plan at the end of this workbook.

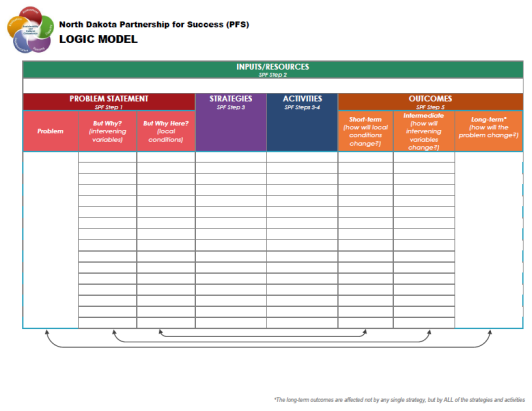
|  |  |  |  |
| --- | --- | --- | --- |
| *NOW – Strategies to implement August 2017 – August 2018* | | | |
| *Local Condition to Address* | ***High or Low Changeability*** | ***Evidence-Based Strategy*** | ***Why (discuss practical fit)*** |
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The strategies you place in the “Later” Table 7.3 will not be placed in your logic model in this workbook. However, the information in this table must not be lost. You will refer back to this list as you implement the “Now” strategies in upcoming years of this project. At very least, we will come back to these strategies at the end of the first year of implementation or if you complete a “Now” strategy more quickly than you anticipated/planned for. These are still important.

* 1. **Review Table 7.1 and 7.2 and complete the table below identifying strategies you plan to implement in subsequent implementation years of the PFS.**

|  |  |  |  |
| --- | --- | --- | --- |
| *LATER – Strategies to implement September 2018 – August 2020* | | | |
| *Local Condition to Address* | ***High or Low Changeability*** | ***Evidence-Based Strategy*** | ***Why (discuss practical fit)*** |
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# Describe Activities



Before jumping in to identify and describe activities for each of the strategies you identified in the “NOW” Table 7.2, there are a few things to consider. In this section, you will address the following three questions to develop your action plan:

What is the strategy?

What is my starting point?

What am I going to do?

## What is the Strategy?

* 1. **For each of the strategies you identified in the “NOW” Table 7.2 of this workbook, describe YOUR (that of the PFS Coordinator) level of knowledge surrounding this strategy and identify any capacity needs.**

|  |  |
| --- | --- |
| ***Strategy*** | ***Assessment of INDIVIDUAL Knowledge*** |
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* 1. **For each of the strategies you identified in the “NOW” Table 7.2 of this workbook, describe your COALITION’s level of knowledge surrounding this strategy and identify any capacity needs.**

|  |  |
| --- | --- |
| ***Strategy*** | ***Assessment of COALITION Knowledge*** |
|  |  |
|  |  |
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|  |  |

* 1. **Identify steps you plan to take to increase YOUR OWN or your COALITION’S level of knowledge surrounding the strategies you identified in the “NOW” Table 7.2.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Evidence-based strategy:*** | ***What do you want to do (action step) in order to BUILD CAPACITY?*** | ***Who will do it?*** | ***When will it be done?*** | ***What resources/ information will you use/share?*** |
| *Example: Retail Compliance Checks* | *Provide training opportunities to the police department and coalition on the strategy and how to implement it.* | *PFS Coordinator* | *By June 2017* | *WIFM, PowerPoint, handouts, and success stories* |
|  |  |  |  |  |
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## What is My Starting Point?

# Throughout this PFS project, you have assessed and built capacity. This is another point where the work you have done will come together and help you make informed decisions when creating your action plan. Remember, capacity is defined as increasing resources and improving readiness to address the prevention needs of the community. In this section, you will be looking at your coalition and community’s capacity to implement the specific strategies you identified in the “NOW” Table 7.2.

# Some questions you will need to answer for each strategy are:

# What resources are needed to implement the strategy (coalition and community)?

# Who needs to be involved in implementing the strategy?

# Who needs to be knowledgeable on the strategy and how to implement it?

# Who can provide training on each strategy?

# What steps are involved for implementing each strategy? Is there a local leader or champion?

# When answering the questions below, refer to the following information:

# Capacity assessment sections of your Community Assessment Workbook

# Capacity-Building Workbook

# Table 6.1 of this Strategic Planning Workbook (prioritization based on changeability)

* 1. **For each of the strategies you identified in the “NOW” Table 7.2 of this workbook, describe the resources needed to effectively implement the strategy.**

|  |  |
| --- | --- |
| ***Strategy*** | ***Resources Needed to Implement (coalition and community)*** |
|  |  |
|  |  |
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* 1. **For each of the strategies you identified in the “NOW” Table 7.2 of this workbook, describe any needs to increase readiness of your community in order to effectively implement the strategy.**

|  |  |
| --- | --- |
| ***Strategy*** | ***READINESS Needed to Implement (community)*** |
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## What am I Going to Do?

Now with all this information in mind, you will develop an action plan for each of the strategies you identified in the “NOW” Table 7.2 which will outline action steps.An action step (or activity) is a specific event or occurrence; therefore, action planning is creating the details of the work that needs to be done.

The purpose of action planning is to **pinpoint the specific activities required to achieve your project’s outcomes.**It addresses this question: “What do we have to do to meet our goal (reduce underage drinking)?”

A good action plan:

* Can help turn a vision into reality.
* Increases efficiency and accountability.
* Describes the way your coalition will meet its objectives through detailed action steps that describe how and when these steps will be taken.

Each action step should include the following information:

* What actions or changes will occur (What)
* Who will carry out these changes (Who)
* By when they will take place, and for how long (When)
* What resources (i.e., money, staff) are needed to carry out these changes
* What communication is needed (who should know what?)

Your action plan is a working document, which means it is not something you can write, save in your files, and forget about. It should be kept in a visible place and updated frequently to fit the changing needs, barriers, or milestones of your group and community.

#### Comprehensive Action Planning

You can be more successful in achieving community-level change related to preventing underage drinking when your strategies and specific action steps are part of a comprehensive plan. CADCA has created the *Seven Strategies for Effective Community-Level Change* as a way to assist with developing this comprehensive action plan. When creating your action plans, you will be using these seven CADCA strategies, which will ensure your action plans are comprehensive and will lead to success.

These strategies include:

1. Providing Information
2. Enhancing Skills
3. Providing Support for Prevention Activities
4. Enhancing Access / Reducing Barriers
5. Changing Consequences (Incentives / Disincentives)
6. Changing Physical Design / Making Environmental Changes
7. Modifying / Changing / Developing Policies

#### Writing Process Measures

While there are no specific outcomes for measuring strategy implementation (activities), process evaluation is equally important to the success of your project. Process evaluation is the continuous quality improvement process for your project; it is how you monitor the progress of your project, identify any necessary adjustments to implementation, and identify useful measurements for communicating with stakeholders. **Process evaluation involves analyzing and documenting how strategies are implemented (by following through with identified activities).**

Process evaluation answers the question: “Did we do what we said we would do?” Process evaluation should help you determine the following:

* Were the interventions implemented as planned?
* Who participated and for how long?
* How is the strategy received by the community and stakeholders?
* What adaptations were made?
* Were the resources sufficient?
* What barriers were encountered?

Process measures can include the details connected to your activities on your action plan. They also help keep yourself and coalition members accountable to the activities on the action plan and to your community.

Examples of process measures include, but are not limited to:

* Number of physical materials disseminated (brochures, posters, flyers, data books, etc.)
* Number of ads created or disseminated (radio, newspaper, online, etc.)
* Number of website hits
* Number of Facebook posts
* Number of program participants / attendees
* Number of compliance checks implemented
* Number of compliance check failures
* Number of meetings held with stakeholders
  1. **Refer to Appendix A of your Strategic Planning Workbook. Fill out one Appendix A form for each evidence-based strategy identified in Table 7.2 (“NOW” strategies). Enter activities for the first implementation year (August 2017 through August 2018).** Consider the information you completed in tables 8.1 – 8.5 as you are completing your action plans. Copy and paste the Appendix A tables as you need to complete for each strategy in Table 7.2.

Finalize and Communicate

# Summary *(Strategic Plan, Logic Model, Action Plan, Evaluation Plan)*

Strategic planning makes it possible to carry out the mission and vision of an organization or group in an effective, orderly way. It keeps the group on track, helps people develop and implement a prevention plan that is meaningful to their community, and outlines what everyone involved should be doing to move toward the group’s chosen goals.

There are multiple components of a **comprehensive strategic plan**, including:

* **Strategic Plan outline**
* **Logic Model**
* **Action Plans**
* **Evaluation Plan**

Together, these four documents (strategic plan, logic model, action plan, and evaluation plan) all have a meaningful purpose for your project. Your strategic plan outline and/or logic model are the front-end/external documents that can shared with stakeholders and used to broadly guide prevention efforts. The action plan and evaluation plan are the internal/administrative documents used to monitor detailed and ongoing implementation, ensure necessary adjustments are made, and measure effectiveness/outcomes.

## Completing Your Strategic Plan

Before completing your strategic plan, you will first complete your planning model, which depicts the decisions you have made at each step of this workbook and shows how each step relates to one another. It is used as a guide for writing your strategic plan outline.

**Sample Planning Model**

|  |  |  |  |
| --- | --- | --- | --- |
| **Problem Statement** | **Priority Goal or Expected Outcome** | **Objectives** | **Strategies** |
| What are the consumption and consequences for underage drinking? | What changes do you wish to see in consequences and consumption patterns for underage drinking? | What intervening variables contribute to the underage drinking consequences and consumption patterns you wish to change? | What strategies can positively impact the intervening variables and their related local conditions? |

**Planning Model Example (Prescription Drugs)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Problem Statement** | **Priority Goal or Expected Outcome** | **Objectives** | **Strategies** |
| High incidence of non-medical use of prescription drugs among youth and young adults in North Dakota. | Reduce non-medical use of prescription drugs among North Dakota youth and young adults. | Reduce social availability of prescription drugs. | Increase Prescription Drug Take Back Locations  Implement media campaign to general public about safe medication storage |
| Increase perceived risk of harm. | Implement curriculum about prescription drugs in schools |

* 1. **Enter your problem statement, identified project goal, project objectives, and corresponding prioritized strategies found in tables 4.1, 4.2, 5.1, and 7.2 of this workbook in the boxes below.** Be careful to ensure your prioritized strategies match your identified objectives (see planning model example above). Use the merge/split function to combine or separate rows in the table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Problem Statement** | **Priority Goal or Expected Outcome** | **Objectives** | **Strategies** |
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Your strategic plan must first identify your problem statement identified above, accompanied by supporting consequence and consumption data. **Use the same data sources and related questions identified in tables 4.3 and 4.4 to illustrate the problem on your strategic plan.** **Reference sections 8 and 9 of your Community Assessment Workbook to identify the specific consequence/consumption data points for your service area.**

Following the problem statement, your strategic plan will include the project goal, identified objectives, and prioritized strategies identified in table 9.1. to be written in outline format.

**Example Strategic Plan Outline:**

***Problem Statement:*** There is a high incidence of non-medical use of prescription drugs among youth and young adults in North Dakota.

* 14.5 percent of North Dakota high school students reported using prescription drugs without a prescription one or more times during their lifetime (YRBS, 2015).
* Overdose deaths in North Dakota increased from 20 deaths in 2013 to 61 deaths in 2015 (CDC/NCHS, National Vital Statistics System, Mortality).

***Goal 1:*** Reduce non-medical use of prescription drugs among North Dakota youth and young adults.

***Objective 1.1:*** Reduce social availability of prescription drugs

***Strategy 1.1.1:*** Increase prescription drug take back locations.

***Strategy 1.1.2:*** Implement media campaign to general public about safe medication storage

***Objective 2:*** Increase perceived risk of harm from non-medical use of prescription drugs.

***Strategy 1.1.1:*** Implement curriculum about prescription drug abuse in schools

* 1. **Following the “Example Strategic Plan Outline” above, write your PFS strategic plan outline referencing your completed table 9.1.** Be sure to include at least one supporting consequence data point and one consumption data point when stating your problem.

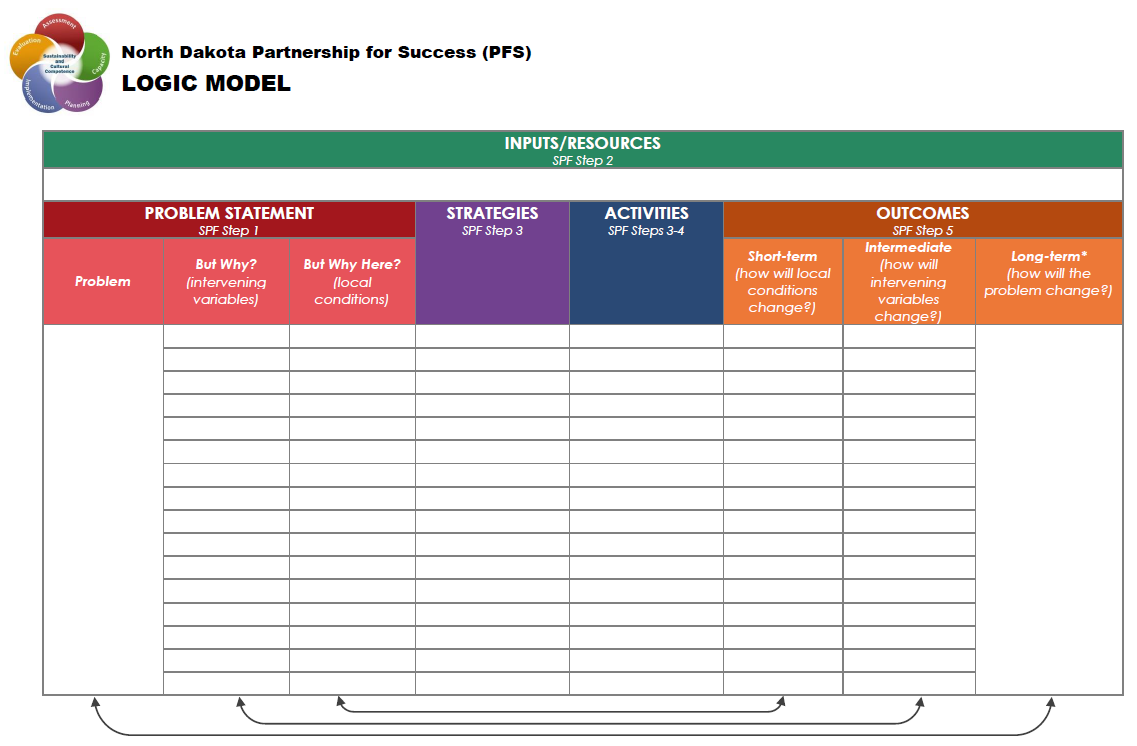
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## Completing Your Logic Model

Your logic model is the visual tool that illustrates the rationale behind your PFS project. Like a roadmap, it tells you where you are, where you are going, and how you will get there. The logic model illustrates how the pieces of the comprehensive prevention plan fit together.

Your logic model illustrates the relationship between the following areas:

* Problem (consequences and consumption).
* Intervening variables and local conditions.
* Prevention Strategies and key activities.
* Expected Outcomes (short-term, intermediate and long-term).



Using your logic model helps ensure your prioritized strategies are linked to the local conditions and intervening variables, leading to more positive outcomes. It also can be used as a visual guide to your PFS project that can be shared with stakeholders and other invested in your project.

* 1. **Reference the different resources sections found in your Assessment and Capacity Workbooks. Summarize a few key resources that will be vital to the successful implementation of your PFS project on the INPUTS/RESOURCES section at the top of your logic model.** Some resources might include key stakeholders, meeting space, PFS funding, etc.
  2. **Reference table 4.1 of this workbook to complete the PROBLEM column of your logic model.**
  3. **Reference tables 4.3 and 4.4 of this workbook to complete the LONG-TERM OUTCOMES column of your logic model.**
  4. **Reference the evidence-based strategy column of table 7.2 of this workbook to complete the prioritized STRATEGIES column of your logic model. These strategies are those you intend to address in the first implementation year of the PFS (August 2017 through August 2018).**
  5. **Reference the Appendix A form completed for each of your prioritized strategies identified in table 7.2 of this workbook. Identify 1-2 of the most important activities for each prioritized strategy and insert them into the ACTIVITIES column of your logic model.**
  6. **Reference the local conditions column of table 7.2 of this workbook to complete the BUT WHY HERE (local conditions) column of your logic model. These local conditions are those that will link directly to your prioritized strategies.**
  7. **Reference the third column (what change do you want to see) of tables 6.1, 6.2, 6.3, and 6.4 of this workbook to complete the SHORT-TERM OUTCOMES column of your logic model. Be sure to enter ONLY those short-term outcomes that relate to the prioritized strategies and local conditions identified in table 7.2 of your workbook.**
  8. **Reference the four intervening variables for the PFS project and enter ONLY those intervening variables that relate directly to the prioritized strategies and local conditions identified in table 7.2 of this workbook to complete the BUT WHY (intervening variables) column of your logic model.**
  9. **Reference the second column (what change do you want to see) of tables 5.2, 5.3, 5.4, and 5.5 of this workbook to complete the INTERMEDIATE OUTCOMES column of your logic model. Be sure to enter ONLY those short-term outcomes that relate to the prioritized strategies and local conditions identified in table 7.2 of your workbook.**

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| Inputs/Resources  *SPF Step 2* | | | | | | | |
|  | | | | | | | |
| Problem Statement  *SPF Step 1* | | | **Strategies**  *SPF Step 3* | **Activities**  *SPF Steps 3-4* | **Outcomes**  *SPF Step 5* | | |
| *Problem* | ***But Why?***  *(intervening variables)* | ***But Why Here?***  *(local conditions)* | ***Short-term***  *(how will local conditions change?)* | ***Intermediate***  *(how will intervening variables change?)* | ***Long-term\****  *(how will the problem change?)* |
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## Completing Your Comprehensive Action Plan

To complete your comprehensive action plan, you will combine your Appendix A forms completed for each of your prioritized strategies as part of section 8 of this workbook into one working action plan that can be changed and adapted as your needs and priorities also change. This working action plan is an Excel document titled: *“Comprehensive Action Plan PFS”*. Once all activities are entered into the working Excel document, you will have a comprehensive action plan for the first year of implementation *(August 2017 through August 2018)* that allows for column to be sorted based on prioritized strategy, who is responsible, date, etc.

* 1. **Copy the content from the action planning tables you completed in each Appendix A form and paste them into their corresponding columns in Excel document titled: “**Comprehensive Action Plan PFS”.

## Completing Your Evaluation Plan

Once your outcome measures have been identified for your project, it is important to combine them into an evaluation plan, which serves as the *action plan* specific to the evaluation steps you will take throughout implementation. These steps will assist with measuring the success of your project.

Your evaluation plan is an internal/administrative document primarily used for those working on project activities to monitor implementation, ensure necessary adjustments are made, and measure effectiveness/outcomes of the project. It is a vital component to any comprehensive strategic plan and its outputs are valuable when seeking support and considering sustainability.

**Review tables 6.1, 6.2, 6.3, and 6.4 of this workbook to identify the data sources/questions and short-term outcomes relating to your local conditions.** Considering you will likely have limited to no data on your local conditions, do your best to determine what measure you might need and ways to collect the data. It’s important to reach out to the evaluation team so they can assist with brainstorming measures and ways to collect the data needed to evaluate your local conditions. Your evaluation team can also assist in developing a comprehensive evaluation plan (including data collection tools) surrounding one specific local condition identified as being most important and changeable. Your state TTA team can also assist with brainstorming other activities, if needed.

**Review tables 5.2, 5.3, 5.4, and 5.5 of this workbook to identify the data sources/questions and intermediate outcomes relating to your intervening variables and tables 4.3 and 4.4 of this workbook to identify the data sources/questions and long-term outcomes relating to your project’s problem and goal.** The majority of the data sources and related questions connected to your intervening variables and problem/goal derive from various surveys or available data provided by other entities.

**On your evaluation plan below, enter ONLY evaluation activities relating the local conditions that align with the prioritized strategies in table 7.2 of this workbook.**

**On your evaluation plan below, enter the data/question and corresponding dates you plan to collect and evaluate**, keeping in mind you may review specific data consistently or multiple times, especially with regard to your intervening variables (e.g. law enforcement data; compliance check data, etc.).

* + 1. **Enter all activities or data sources/questions to be measured during the first implementation year of the PFS (August 2017 through August 2018) in the evaluation planning template below.**

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| --- | --- | --- |
| **What (activity/outcome to be measured)** | **Who** | **When** |
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# Communication plan

Once you’ve completed the planning activities for your community, it’s time to share it with others. Putting together a communication plan ensures you are targeting your messaging accurately and provides structure to determine whom you need to reach and how.

Communication can take on many formats and methods, and will depend on your target audience.

You’ll want to be able to explain the planning process, why you chose certain strategies and activities, explain your prioritized strategies, etc. by using everyday language accompanied by easy-to-understand charts, pictures, and/or graphics. Your communication doesn't have to be complicated or use technical language in order to be compelling. In fact, the more you can use the words of the community members who contributed their concerns and experiences, the more powerful your communication will be. Review the table below to assist you in identifying the methods appropriate for various audiences.

Keep in mind that your strategic plan outline and/or logic model are the front end documents that can be more easily shared with stakeholders and used to guide efforts. The action plan and evaluation plan are the internal/administrative documents used to monitor implementation and effectiveness/outcomes, but may be useful and relevant to communicate and share widely with certain groups like your coalition.

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| **Choosing Appropriate Communication Methods** | | | | | | | | |
| **AUDIENCE** | **METHODS** | | | | | | | |
| **Town Meetings** | **Press Conference** | **Press Release** | **Abstracts & Briefings** | **Annual/ Evaluation Reports** | **Fact Sheets** | **Brochures & Posters** | **Exhibits** |
| **Current/ Future Funder** |  |  |  | ★ | ★ |  |  |  |
| **Administrator** | ★ |  |  | ★ | ★ |  |  |  |
| **Board Members** | ★ |  |  | ★ | ★ | ★ |  |  |
| **Community Groups** | ★ |  |  |  |  | ★ | ★ |  |
| **General Public** | ★ |  | ★ |  |  | ★ | ★ | ★ |
| **Organizations** |  |  |  |  |  | ★ | ★ | ★ |
| **Media** | ★ | ★ | ★ |  |  | ★ |  |  |

*Source:* [*http://docs.sumn.org/SUMN\_Toolkit/Know\_Your\_Audience\_9-09.pdf*](http://docs.sumn.org/SUMN_Toolkit/Know_Your_Audience_9-09.pdf)

* 1. Complete the following table outlining your plan to communicate your comprehensive strategic plan during between June 2017 and August 2018.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Target Audience | “WHY”  What is Your Message and Purpose *(what do you want the target audience to know/do?)* | “WHAT”  Method(s) of communication | “WHO”  Individual Responsible | “WHEN”  Frequency; Timeline |
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# Assessment Contributions

* 1. Complete the table below by adding all individuals who contributed to the completion of this Community Assessment Workbook.

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| --- | --- | --- | --- |
| Name | Organization | City | Contributions Made |
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* 1. Provide the date the completed plan was reviewed by your community coalition/workgroup:

Click here to enter a date.

Appendix A

# Action Plan

CADCA’s Seven Strategies for Creating Effective Community Change will assist you in developing a comprehensive action plan for strategy implementation. Each of the seven CADCA strategies listed below includes an action planning table that will guide your comprehensive action plan. **You will complete this worksheet (Appendix A) for each one of the prioritized evidence-based strategies identified in table 7.2 of your Planning Workbook (“NOW” strategies).** After completing this form for each of your prioritized strategies, you will have action plans that when combined, will result in your comprehensive action plan for section 9 for your Planning Workbook.

***Enter the prioritized strategy identified in the “NOW” table in section 7.2 of your workbook in the space below:***

|  |  |
| --- | --- |
| **Evidence-Based Strategy**  *(Strategy from Table 7.2)* |  |

***Enter the action steps you plan to take to implement this strategy for each of the seven strategies below. Enter activities for the first implementation year (August 2017 through August 2018). P****lease add additional rows as needed.*

***If you feel you are unable to address any of the seven strategies, provide justification in the “Notes” section below the action planning table.***

1. **Providing Information**

*Educational presentations, workshops or seminars or other presentations of data (e.g., public announcements, brochures, dissemination, billboards, community meetings, forums, web-based communication).*

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| --- | --- | --- | --- | --- |
| **Strategy**  *(Strategy from Table 7.2)* | **What** | **Who** | **When** | **Process Measure(s)** |
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| ***Notes:*** |
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1. **Enhancing Skills**

*Workshops, seminars or other activities designed to increase the skills of participants, members and staff needed to achieve population level outcomes (e.g., training, technical assistance, distance learning, strategic planning retreats, curricula development).*

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| **Strategy**  *(Strategy from Table 7.2)* | **What** | **Who** | **When** | **Process Measure(s)** |
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| ***Notes:*** |
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1. **Providing Support for Prevention Activities**

*Creating opportunities to support people to participate in activities/strategies that reduce risk or enhance protection.*

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| --- | --- | --- | --- | --- |
| **Strategy**  *(Strategy from Table 7.2)* | **What** | **Who** | **When** | **Process Measure(s)** |
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| ***Notes:*** |
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1. **Enhancing Access/Reducing Barriers**

*Improving systems and processes to increase the ease, ability and opportunity to utilize those systems and services (e.g., assuring healthcare, childcare, transportation, housing, justice, education, safety, special needs, cultural and language sensitivity). This can include identifying barriers and possible strategies to overcome.*

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| **Strategy**  *(Strategy from Table 7.2)* | **What** | **Who** | **When** | **Process Measure(s)** |
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| ***Notes:*** |
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1. **Changing Consequences (Incentives/Disincentives)**

*Increasing or decreasing the probability of a specific behavior that reduces risk or enhances protection by altering the consequences for performing that behavior (e.g., increasing public recognition for deserved behavior, individual and business rewards, taxes, citations, fines, revocations/loss of privileges).*

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| --- | --- | --- | --- | --- |
| **Strategy**  *(Strategy from Table 7.2)* | **What** | **Who** | **When** | **Process Measure(s)** |
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| ***Notes:*** |
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1. **Changing Physical Design/Making Environmental Changes**

*Changing the physical design or structure of the environment to reduce risk or enhance protection (e.g., parks, landscapes, signage, lighting, outlet density).*

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| --- | --- | --- | --- | --- |
| **Strategy**  *(Strategy from Table 7.2)* | **What** | **Who** | **When** | **Process Measure(s)** |
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| ***Notes:*** |
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1. **Modifying/Changing/Developing Policies**

*Formal change in written procedures, by-laws, proclamations, rules or laws with written documentation and/or voting procedures (e.g., workplace initiatives, law enforcement procedures and practices, public policy actions, systems change within government, communities and organizations).*

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| **Strategy**  *(Strategy from Table 7.2)* | **What** | **Who** | **When** | **Process Measure(s)** |
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| ***Notes:*** |
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Appendix B

# Request for Evidence-Based Strategy

ND PFS Community Grantees should first consider strategies from the Pre-Approved Strategy Menu. If there are no strategies available to address your identified local conditions and you find a different strategy to implement, this form must be completed and approved.

One form must be completed for each requested strategy that is not pre-approved.

**Submit completed form to** [**lauranderson@nd.gov**](mailto:lauranderson@nd.gov)**.**

*Review the following document as a resource – “Identifying and Selecting Evidence-Based Interventions Revised Guidance Document for the Strategic Prevention Framework State Incentive Grant Program”* [*https://store.samhsa.gov/shin/content/SMA09-4205/SMA09-4205.pdf*](https://store.samhsa.gov/shin/content/SMA09-4205/SMA09-4205.pdf)

1. **What strategy are you seeking approval for?**

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### Demonstrate Evidence of Effectiveness: ***Is the strategy effective?***

According to SAMHSA, the three definitions of “evidence-based” are as follows:[[1]](#footnote-1)

1. Inclusion in Federal registries of evidence-based interventions;
2. Reported (with positive effects on the primary targeted outcome) in peer-reviewed journals; or
3. Documented effectiveness supported by other sources of information and the consensus judgment of informed experts, as described in the following set of guidelines, all of which must be met:
   1. Guideline 1: The strategy is based on a theory of change that is documented in a clear logic or conceptual model; and
   2. Guideline 2: The strategy is similar in content and structure to strategies that appear in registries and/or the peer-reviewed literature; and
   3. Guideline 3: The strategy is supported by documentation that it has been effectively implemented in the past, and multiple times, in a manner attentive to scientific standards of evidence and with results that show a consistent pattern of credible and positive effects; and
   4. Guideline 4: The strategy is reviewed and deemed appropriate by a panel of informed prevention experts that includes: well-qualified prevention researchers who are experienced in evaluating prevention strategies similar to those under review; local prevention practitioners; and key community leaders as appropriate, e.g., officials from law enforcement and education sectors or elders within indigenous cultures.

Provide and summarize documentation supporting effectiveness of requested strategy.

1. **Does requested strategy meet one of the definitions for evidence-based programs above? Provide credible sources, such as peer-reviewed journal articles, when applicable. If the strategy is an innovative or promising approach, describe support and justification.**

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Demonstrate Conceptual Fit: ***Will the strategy impact the identified local condition?***

Conceptual fit considers how relevant a type of intervention is at doing the following:

* Addressing the priority intervening variable and problem
* Producing positive outcomes with the substance abuse problem or intervening variables
* Targeting multiple contexts (e.g., individual, family school/community). For example, some types of strategies, like media campaigns and merchant education, occur in the community, whereas parental education occurs within the family context.

To assess the conceptual fit of a strategy, consider whether it clearly fits with your logic

model by asking the following questions:

* Does it address the problem (e.g., underage drinking)?
* Does it address the intervening variables and local conditions associated with the problem (e.g., social norms that accept or encourage youth drinking, low perceived risk of alcohol among youth, easy access to alcohol among youth, low enforcement of alcohol laws)? Does it target a relevant population and/or context (e.g., youth, parents, retailers, law enforcement)?

1. **What prioritized local condition will this strategy address?**

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### Demonstrate Practical Fit: ***Is the strategy feasible for the community?***

1. **Complete Section 8 of your Strategic Planning Workbook, including an action plan using Appendix A.**

1. <https://store.samhsa.gov/shin/content/SMA09-4205/SMA09-4205.pdf> [↑](#footnote-ref-1)