Planning and Evaluation for the Prevention Workforce

A CHC Training for The North Carolina DHHS Prevention Leaders Academy – Session 1

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NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

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Our Thanks

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Our Presenters

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Why Plan?

Why Evaluate?

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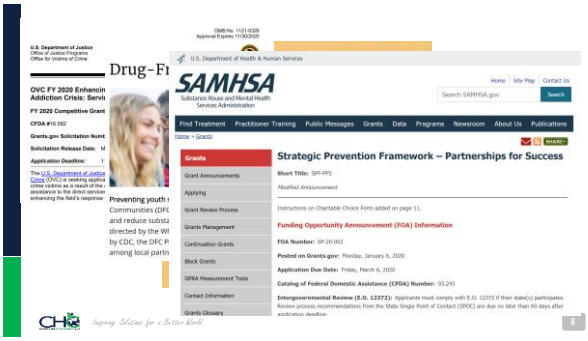

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Prevention Workforce Development is Needed Now

We all know that to be successful and sustainable coalitions and prevention providers must be able to plan and implement prevention strategies that are data-driven and evidence-based.

Developing and maintaining a well-trained prevention workforce equipped to reduce the impact of substance misuse and related behavioral health problems is challenging but has emerged as a key priority for State of North Carolina.

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Planning and Evaluation - Training Objectives

Participants will be able to:

- Describe how planning and evaluation are addressed in the Strategic Prevention Framework
- Write SMART Objectives to guide strategic planning based on assessment data and logic models
- Explore processes and tools for developing strategic and action plans
- Ensure health equity considerations are included in prevention planning
- Understand components of evaluation as it applies to program- and community-level change
- Network with prevention providers, community coalitions and community partners in community change efforts

Session 1:

Planning and Evaluation

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Planning and Evaluation - Agenda

I. Welcome, Introductions and Objectives
II. Establishing Priorities
III. Planning
- SMART Objectives
- Strategies / Action Planning
- Health Equity

IV. Evaluation
V. Next Steps

Session 1:

Planning and Evaluation

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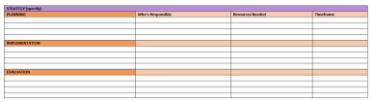
Planning and Evaluation in North Carolina

North Carolina COVID 19 Supplemental Block Grant Application Logic Model and Workplan



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Introductions - Chatbox

Please type in the chatbox:

- Name
- Community
- Organization
- Experience: How long have you been in this field?

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Establishing Priorities

OUR COMMUNITY. OUR WELL-BEING.

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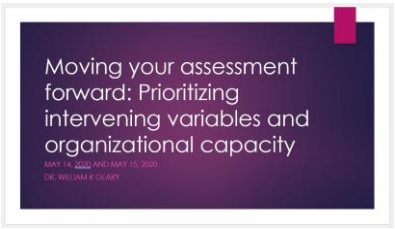
NC Assessment and Prioritization Training



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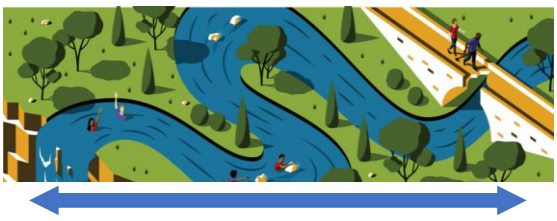
The River Story



https://www.dhs.wisconsin.gov/publications/p02695a.pdf

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The Strategic Prevention Framework

A Planning Process

- The SPF includes these five steps:
  1. Assessment
  2. Capacity
  3. Planning
  4. Implementation
  5. Evaluation
- The SPF is guided by two principles that should be integrated into each of the steps:
  1. Cultural competence
  2. Sustainability

Workbook Page 18

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

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Community Assessment & Prioritization

Community Description → Needs Assessment / Resource Assessment / Readiness Assessment (Data Collection) → Prioritization → Logic Model

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Prioritize the Problem – Chatbox Response

In your community which **drug problem for youth** would you prioritize?

A. Alcohol
B. Marijuana / Cannabis
C. Rx Drugs
D. Tobacco / Nicotine
E. Methamphetamines
F. Inhalants
G. OTC Drugs
H. Other – describe in chatbox

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Prioritize Intervening Variables – Chatbox Response

In your community which **Intervening Variable for youth underage drinking** would you prioritize:

A. Availability of alcohol
B. Favorable youth attitudes – low perception of harm
C. Parental attitudes favorable toward alcohol use
D. Community norms accepting of alcohol use and misuse
E. Price and Promotion of alcohol in the community
F. Community enforcement of alcohol laws and policies
G. Other – describe in chatbox

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Prioritize Community Conditions – Chatbox Response

In your community which is the biggest **source of alcohol (availability) for youth underage drinking**:

A. Retailers sell alcohol to minors
B. Parents provide alcohol at family events
C. Youth ask strangers to buy alcohol for them
D. 21-year-old friends and siblings provide alcohol
E. Youth attend college parties where alcohol is available
F. Youth obtain alcohol at community events
G. Other – describe in chatbox

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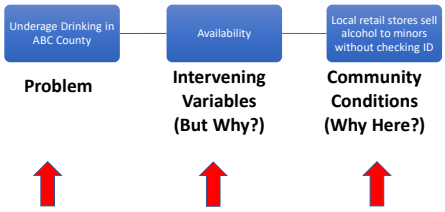
Logic Model



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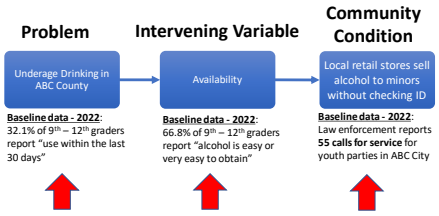
Mapping Data to the Logic Model



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North Carolina Logic Model

Problem?	Why?	Why here?
17% high school students drank alcohol in the past 30 days.	49% of high school students say it is easy to get alcohol.	40% of households report that they have alcohol, and it is unsecured. 33% of households report that alcohol in the home is not monitored.

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Planning

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Planning in North Carolina

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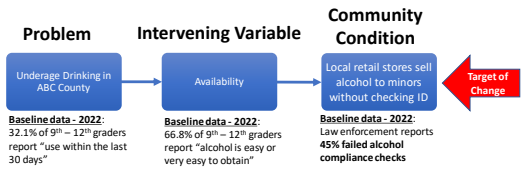
Logic Model – Targets of Change



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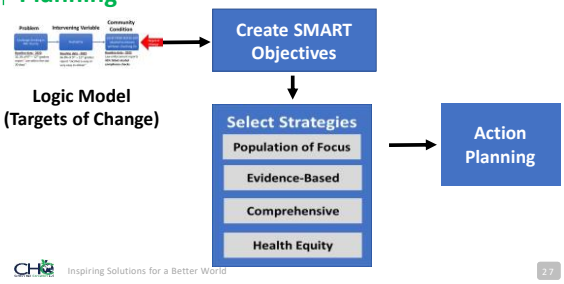
Planning



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SMART Objectives

SMART Objectives are:

- **S**pecific
- **M**easurable
- **A**chievable
- **R**ealistic
- **T**ime-bound

SMART Objectives are based on your logic model.

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SMART Objectives

SMART Objectives are:

- **S**pecific
- **M**easurable
- **A**chievable
- **R**ealistic
- **T**ime-bound

SMART Objectives use the format:

Increase / decrease _____ by ___ % from ___% in 2022 to ___% in 202X as measured by _____.

Increase North Carolinians who like chocolate ice cream by 5% from 55% in 2022 to 60% in 2024 as measured by NC residents reporting "I like chocolate" on the NC Ice Cream Survey.

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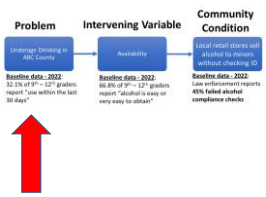
SMART Objectives

Long-term Objectives based on the Problem:

Decrease ***underage drinking*** in ABC county by 5% from 32.1% in 2022 to 27.1% in 2028 as measured by 9th – 12th graders reporting "use within the last 30 days" on the ABC Youth Survey.



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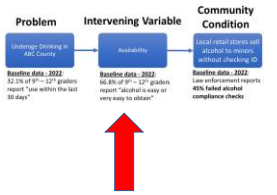
SMART Objectives

Intermediate-term Objectives based on the Intervening Variable :

Decrease ***perceived availability of alcohol*** in ABC county by 10% from 45.2% in 2022 to 35.2% in 2026 as measured by 9th – 12th graders reporting "alcohol is easily available" on the ABC Youth Survey.



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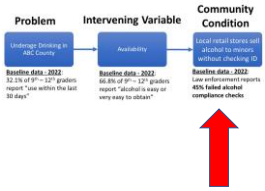
SMART Objectives

Short-term Objectives based on the Community Conditions:

Decrease ***retail stores in ABC County selling alcohol to minors*** by 50% from 45% in 2022 to 22.5% in 2024 as measured by failed Compliance Checks reported by the ABC County Sherriff.



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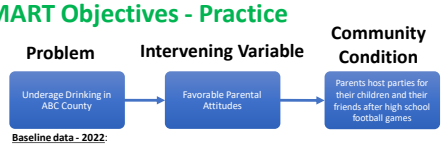
SMART Objectives - Practice



Baseline data - 2022:
32.1% of 9th – 12th graders report "use within the last 30 days"

Target - 2028:
???% of 9th – 12th graders report "use within the last 30 days"

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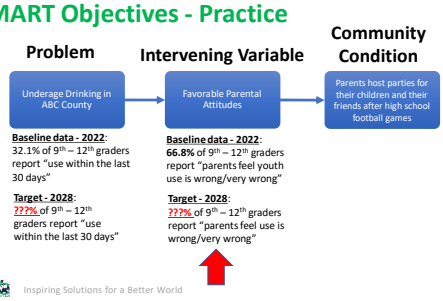
SMART Objectives - Practice



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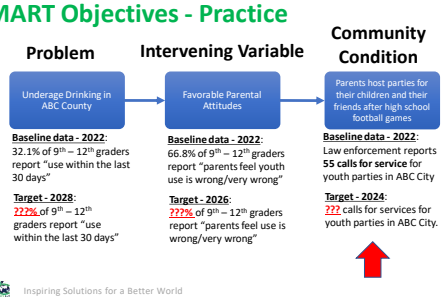
SMART Objectives - Practice



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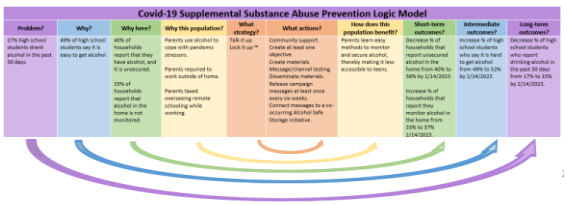
North Carolina SMART Outcomes



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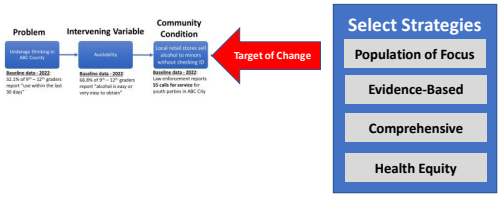
Select Strategies To Address Community Conditions



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Population of Focus – Why this population?

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How does this population benefit?

Benefits

- Trained Staff
- Less staff turnover
- Passed compliance checks
- Decreased liability
- No loss of profitability

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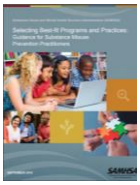
Evidence-based Strategies

- Evidence-based practices (EBP) generally refer to approaches that are validated by documented evidence. Evidence is generally based on:
- Research design
- Internal validity
- Independent replication.
- External and ecological validity



Source: SAMHSA: Selecting Best-fit Programs and Practices: Guidance for Substance Misuse Prevention Practitioners
https://www.samhsa.gov/sites/default/files/ebp_prevention_guidance_document_241.pdf

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Alcohol Interventions

DMH/SAS BLOCK GRANT EDUCATION AND ENVIRONMENTAL STRATEGY/ INTERVENTION GUIDANCE Updated for FY21

Alcohol Interventions

Strategy/Intervention	Description
Alcohol Education/Enforcement Strategies	
Retailer Alcohol Compliance Checks	This strategy is focused on reducing underage retail access to alcohol. This strategy includes: Support for Alcohol Compliance Checks: Enforcement effort to identify, educate and potentially penalize alcohol establishments that sell alcohol products to underage youth Alcohol Purchase Surveys: Educational activity to identify alcohol establishments that sell alcohol to youthful-appearing adults without checking for proper identification
Social Host	Local ordinance holding adults responsible for "hosting" (knowingly providing) a place for underage drinking to occur. "Social host" is a term for an adult allowing underage drinking on property he/she owns, leases or controls.
Responsible Beverage Service Training	Training to educate owners, managers, servers and sellers at alcohol establishments about strategies to avoid illegally selling alcohol to underage youth and/or intoxicated patrons (Responsible Alcohol Sales Training (RAST) and Be a Responsible Server/Seller (BARS) Training) Ideally, this is done in connection with compliance checks.
Publicized Sobriety Checkpoints	Publicized sobriety checkpoint programs are a form of high visibility enforcement where law enforcement officers stop drivers systematically to assess whether they are alcohol-impaired. Media efforts are critical to publicize programs. The program goal is to reduce alcohol-impaired driving by increasing the public's perceived risk of arrest while also arresting alcohol-impaired drivers identified at checkpoints. Publicized sobriety checkpoints are allowable in NC and must be conducted with law enforcement.
Talk it up, Lock it up	Campaign to promote communication about alcohol use and alcohol storage through a combination of media messages, print materials and efforts to increase the availability of alcohol locking mechanisms; must be combined with Alcohol Safe Storage Initiatives.
Alcohol Safe Storage Initiatives	Strategies focused on reducing access to alcohol through secure storage. Methods for implementing this strategy could include Lock Distribution or Locking Cabinet Installation

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Comprehensive Strategies

INDIVIDUAL

- Target knowledge, attitudes, skills of individuals and groups of people

ENVIRONMENTAL

- Target broader physical, social, cultural, and institutional forces

Comprehensive behavior-change strategies include both.

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Individual-focused Strategies

Examples:	Setting or Domain
• Good Behavior Game	School
• Life Skills Training	School and Community
• Strengthening Families	Family
• Big Brothers/Sisters Mentoring	Community

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Environmental-focused Strategies

Environmental strategies	Type of Strategy
Restrict alcohol at community events	*Policy*
Require a permit for alcohol at community events	*System Change*
Enforce school policies on tobacco and vaping use	*Enforcement*
Rx Drug Take Back Program	*Community-based Process*
Public Awareness Campaigns	*Communication / Education**
Alcohol Warning Signs and Posters	*Communication / Education**

* Sometimes referred to as Individual-focused strategies.

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Comprehensive Strategies – SAMHSA / CSAP

	Strategy
1	Environmental Strategies
2	Community-based Processes
3	Information Dissemination
4	Problem Identification and Referral
5	Education Strategies
6	Alternative Strategies

Sources: SAMHSA / CSAP

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Comprehensive Strategies

Individual strategies

- Providing information
- Enhancing skills
- Enhancing services and support

Environmental strategies

- Modify access, barriers
- Change the consequences
- Change the physical design of the environment
- Modify policies

Source: CADCA, ONDCP, CDC

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Comprehensive Strategies-Example

Local Community Condition:

Locally-owned retail stores sell to minors without checking ID

1. **Providing information**-Provide information to store managers on consequences of selling to a minor
2. **Enhancing skills**-Provide training class to clerks on civil liability or selling alcohol to a minor
3. **Enhancing services and support**-Provide point-of-sale materials to retailers
4. **Modify access, barriers**-Utilize point-of-sale software at check-out; collaborate with Law Enforcement to conduct regular compliance checks
5. **Change the consequences**-Institute tiered sanctions for non-compliant retailers
6. **Change the physical design of the environment**-Place all alcoholic beverages inside a cooler, behind a door, and separate from non-alcoholic products
7. **Modify policies**-Pass local ordinance to mandate Responsible Alcohol Sales training for all store clerks

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The River Story – Disparities: Who is Downstream…. and why them?

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Strategies to Address Health Equity & Disparities

Without a deliberate focus on health equity in the strategy development process, strategies may unintentionally widen health equities.

Well-designed strategies can include supportive activities to **address barriers or unintended consequences** underserved populations may face during implementation.

Source: CDC Health Equity Guide : https://www.cdc.gov/nccdphp/dnpao/health-equity/health-equity-guide/

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Action Planning

Action Planning:
- Ensures that the vision becomes concrete
- Describes the action steps for each strategy
- Delineates responsibilities for achieving the outcomes in the logic model
- Give organization to the process
- Promotes accountability
- In the long run, it will save time, energy and resources

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Action Plan - *Example*

Community Condition: Retailers are selling alcohol to minors.

Strategy #1: Educate retailers on using Point of Sale ID Checks

STRATEGY (specify): Educate Retailers on using Point of Sale ID Checks			
PLANNING	Who's Responsible	Resources Needed	Timeframe
Provide point-of-sale materials to retailers	Education Committee	$4,200 for print materials, mileage Labor – in-kind (volunteers)	Complete by September 1, 2022
Conduct 4 Responsible Beverage Server Trainings with Retailers – 1 in Vietnamese	Alcohol Retail Access Committee	$5,000 (trainer fee, print materials) Training site – in-kind	Completed by December 31,2022

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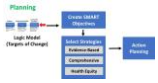
Planning – *Summary*



- Planning addresses targets of change identified in the Assessment
- SMART Objectives:
  - Based on assessment data
  - Drive the identification of comprehensive strategies
- Strategies must be:
  - Evidence-based
  - Comprehensive
  - Address health disparities

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Implementation and Evaluation

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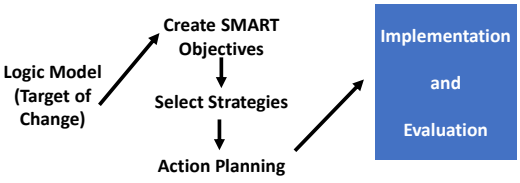
Implementation and Evaluation



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Implementation

Effective implementation Involves:

- Fidelity – implementing the strategy as it was intended to the audiences it was intended
- Adaptation – enhancing strategies to ensure relevance for specific target audiences, culture and environments

Source: CDC Program Evaluation,

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Implementation Fidelity

Ensure adaptations do not compromise effectiveness:

- **Preserve the setting**. It may challenging to make an EBPP designed for one setting (e.g., schools) appropriate for a different setting (e.g., health clinics).
- **Maintain the dosage**, including the number, length, and spacing of sessions. Sufficient participant exposure may be essential for effectiveness.
- **Add…not subtract,** Add new content if the need for content changes arise, rather than subtract existing content… retain core content.
- **Consult developers.** Work closely with the developers, coalition members, leaders from the target populations, and others when making adaptations.

Source: SAMHSA – Substance Abuse and Mental Health Services Administration

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Cultural Adaptations

Ensure adaptations do not compromise effectiveness:

- Changing **language** – Translating and/or modifying vocabulary
- Replacing **images** to show youth and families that look like the target audience
- Replacing cultural **references**
- Modifying some aspects of **activities** such as physical contact, access to resources
- Adding relevant, evidence-based **content** to make the program more appealing to participants.

Source: SAMHSA – Substance Abuse and Mental Health Services Administration

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Fidelity and Adaptation - Practice

A "best practice" curriculum for 12-15 year-olds calls for 20 sessions to be conducted in a school setting – you only have time for 15 session and will implement in a community center. *Your recommendation*:

Options – select only 1:

A. Find another program that has been tested in a community center
B. Find a school that can provide 20 sessions for 12-15 year-olds
C. Combine sessions to 15 and adapt for the community center
D. Hire a consultant with expertise in the program to lead the mods
E. Other – describe in chat box

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Evaluation

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What are all the uses of an evaluation?

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Process & Outcome Evaluation

PROCESS Evaluation
- Tells you if and how a program/strategy was implemented as intended.

OUTCOME Evaluation
- Tells you whether a program/strategy achieved its goals within the target population.

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Process Evaluation in North Carolina

Process Evaluation –
Did we deliver what we said we would deliver?

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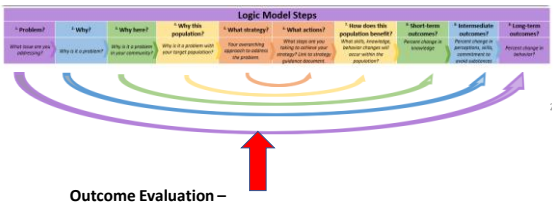
Outcome Evaluation in North Carolina



Outcome Evaluation –
What changed in the long-, intermediate- and short-term?

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Types of EVALUATION - Example

Local Community Condition: Retailers Selling Alcohol To Minors
Strategies: Increase Compliance Checks and Retailer Trainings

Process Evaluation	Outcome Evaluation
• # of compliance checks conducted within 6 months • # of retailers fined for failure to comply • # of trainings conducts • # of retailers trained	**Short-term** • Decrease in the # of retailer selling to minors **Intermediate-Term** • Decrease in perceived availability of alcohol **Long-Term** • Decrease in underage drinking in the community

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Implementation and Evaluation Summary

Implementation and Evaluation:

- Are based on the logic model
- Guided by strategies and action plans
- Strategies can be adapted before and during implementation
- Measure short-, intermediate, and long-term changes

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Q & A

Next Steps

Workshop Evaluation

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Q&A

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NC DHHS Prevention Leaders Academy

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Course Evaluation

Quick link to Evaluation

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