COMMUNITY PREVENTION AND WELLNESS INITIATIVE

CPWI

COMMUNITY COALITION GUIDE

Building a Culturally Competent and Sustainable Substance Abuse Prevention Coalition in Your Community



Division of Behavioral Health & Recovery (DBHR)

Updated September 2017

Washington State Department of Social & Health Services

Transforming lives

Last revised: 09/28/2017

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CHAPTER 1:
CPWI GENERAL INFORMATION

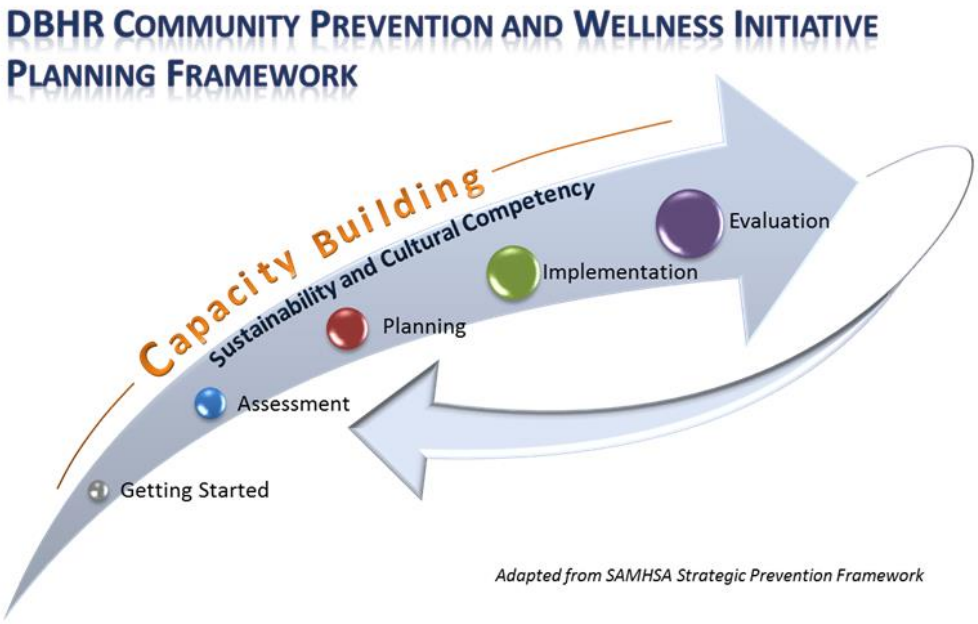
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CPWI General Information

The Community Prevention & Wellness Initiative (CPWI) uses the Strategic Prevention Framework (SPF) for planning, with two enhancements. Based on our learning from the Strategic Prevention Framework State Incentive Grant (SPF-SIG) process, we have added a "Getting Started" section and expect "Capacity Building" to be ongoing throughout the process. All tasks associated with CPWI planning must be conducted in a culturally competent manner, and include sustainability planning and implementation.



Using this Guide

The purpose of this guide is to provide guidance for CPWI coalitions in planning and implementing CPWI required tasks. This guide includes the following five main sections:

- **Chapter 1: General Information** – provides general information about the CPWI planning framework.
- **Chapter 2: Key Objectives** – provides an overview of the intent of CPWI and the established milestones and benchmarks.
- **Chapter 3: Implementing CPWI** – identifies the required tasks and provides guidance, definition, and clarification on each task category grouped by the CPWI Planning Framework steps.
- **Chapter 4: Strategic Plan Requirements** - provides the CPWI requirements for completing the coalition's Strategic Plan.
- **Appendix** – provides templates and samples for use in writing your Strategic Plan and implementing CPWI.

Note: This guide is not intended to be a comprehensive handbook for community organizing. Furthermore, as additional funding is made available to support CPWI efforts, this guide may be updated to include additional requirements and information.

Resources for Implementing CPWI

- DBHR has created the following primary guidance documents and templates referenced in this Community Coalition Guide available on Athena Forum. They can be found at www.TheAthenaForum.org ; from the homepage, click on the link in the bottom right corner under "CPWI Guides." **Community Coalition Guide** – includes requirements for tasks to be completed as part of CPWI.

Resources for Implementing CPWI

- **County Risk Profile** – full reports are sent to each County to be used to identify and select high-risk communities within each county. Summary reports by county are available on Athena Forum.
- **CPWI News/Media Release Template** – this template includes the general information and layout for the required press release. Included within this Guide and available on Athena Forum.
- **Coalition Assessment Tool** – this annual survey is to gather information from the coalition members about the organization and functioning of the coalition. Available on the Minerva site..
- **Community Survey** – this survey includes the required questions to gather local data from the community to be used as part of the needs assessment. Community specific surveys are sent to each coalition by DBHR.
- **Strategic Plan Requirements and related templates** – includes guidance on requirements, formatted outline with section headings document, budget, List of Coalition Members table, 'Community Survey' Results, Action Plan, and Plan-on-a-Page. Included within this Guide and available on Athena Forum.
- **Community Profile Brochure**– the template provides the layout for this one-page handout. Each community can add local information. A sample can be seen within this Guide.

Many other helpful resources can also be found at **www.TheAthenaForum.org**. We encourage you to review the information available in the CPWI Training section found under the "training tab" link from the top menu (www.TheAthenaForum.org/training/cpwi_trainings). We have developed resources to guide Community Coalition Coordinators and coalitions through the steps and provide samples for coalition discussions and workgroups.

Technical Assistance

We are here to help! We encourage you to actively engage your DBHR Prevention System Manager and the CPWI training team for assistance as the coalition is working through each step of the Community Coalition Guide as well as the Strategic Plan Requirements.

DBHR will provide guidance to assist the Community Coalition Coordinator in working with the coalition for completion of the CPWI Implementation Tasks and each section of the Strategic Plan. We encourage you to use the training materials developed to assist the coalition in completing each step and building a Strategic Plan. For technical assistance, please contact your DBHR Prevention System Manager.

You can also consult the online courses that have been recorded and posted in the OWL E-learning. For more information check out this page: www.TheAthenaForum.org/owl. A list of self-guided training plan is located on the Athena forum and in ***Appendix 18.***

Sources:

Primary sources of information used in developing this Guide: Communities That Care, CADCA, DFC grantee workshops. Coalitions and Partnerships in Community Health (Frances Dunn Butterfoss), DBHR, preliminary evaluation information from Washington and national SPF-SIG project, Substance Abuse Mental Health Services Administration / Center for Substance Abuse Prevention (SAMHSA/CSAP), and the following publications:
www.communitiesthatcare.net/research-results/;
www.TheAthenaForum.org/collective_impact;
www.TheAthenaForum.org/collective_impact_part_ii;
www.TheAthenaForum.org/understanding_the_value_of_backbone_organizations_turner_et_al_2012; and
www.TheAthenaForum.org/community_responsibility_for_child_protection_possibilities_and_challenges_daro_and_dodge_2009.

What is a Coalition?

A coalition is a formal arrangement for cooperation and collaboration between groups or sectors of a community. Each group retains its identity, but all agree to work together toward a common goal of building a safe, healthy, and drug-free community.

Who is a Coalition?

- Members bring the perspective of the group of people/sector they represent to the coalition and function on behalf of those they represent to carry out strategies for the local community.
- Members act within their own sphere of influence, thus enlarging the coalition's ability to create needed change and implement multiple strategies. Members act as leaders to promote and gather support for the coalition's information, strategies, and activities from the sector they represent.
- New members are invited to join to expand the coalition's sphere of influence and increase capacity to address additional root causes. *For more information see pages 12 and 24.*

Members Represent Community Sectors

Required 8 of the following 12 sectors:

1. Youth
2. Parent
3. Law Enforcement
4. Civic/Volunteer Groups
5. Business
6. Healthcare Professionals
7. Media
8. School
9. Youth-serving Organizations
10. Religious/Fraternal Organizations
11. State/Local/Tribal Governments
12. Other Substance Abuse Organization

We encourage partnerships and coalition collaboration with Chemical Dependency Treatment Professional and Mental Health Service Professionals.

Role of the Coalition Members

The role of the coalition members is to engage in the planning and implementation of the coalition's Strategic Plan by participating in workgroups, reviewing plan drafts, developing strategies, and leading/facilitating the implementation of strategies and activities in the Plan. In addition, the coalition members determine the functioning of the coalition, priority problems, goals and objectives, strategies and activities, and evaluation measures and reporting.
For more information see page 24.

Coalition member tasks include:

- Participate in coalition workgroups and meetings.
- Participate in Community Coalition Orientation.
- Organize and participate in an annual Key Leader Event.
- Recruit and retain membership.
- Confirm partnerships to get the work done.
- Create/update and submit the coalition's Strategic Plan which includes the coalition's process, decisions, and plan for each of the following steps:
  - Conduct needs and resource assessments.
  - Set goals, objectives, and strategies.
  - Establish implementation steps and timelines.
  - Plan for reporting and evaluating progress on outcomes.
- Lead and oversee the implementation of direct services, environmental strategies, and media campaigns.
- Report coalition outputs and outcomes to DBHR.
- Implement and support evaluation designed by DBHR. This includes:

- Support the Healthy Youth Survey (HYS).
- Monthly Minerva reporting.
- Participate in the annual Coalition Assessment Tool (CAT) survey.
- Conduct the annual 'Community Survey.'

Role of the Community Coalition Coordinator (Coordinator)

The Community Coalition Coordinator's role is to provide staff support to the coalition. As staff, the Coordinator manages the processes of strategic planning and implementation. The Coordinator and other coalition staff are not members of the coalition and should not serve as elected officers. The Coordinator and other coalition staff assist with support for planning, problem solving, and information management (evaluation, deadlines, reporting, etc.). The job of the Coordinator is to understand the framework, process, and requirements; keep track of the overall process to guide the coalition through the process and ensure the coalition is moving forward; keep records of the work and decisions of the coalition; ensure reporting is completed; and distribute meeting information prior to meetings (agendas, decisions to be made, and minutes). *(See page 18 for a detailed task list of CPWI coalition responsibilities.)*

Community Coalition Coordinator staff support includes:

- Recruitment assistance for new coalition membership.
- Efforts to increase community awareness of coalition and strategies.
- Building capacity among members to carry out the above roles.
- Being well versed and comfortable with prevention science and theory.
- Being a resource to the coalition as they develop their strategic plan.
- Assistance to the coalition to implement environmental strategies.
- Supporting the executive leadership of the coalition to be effective and complete tasks.
- Supporting the coalition and member-driven workgroups to be effective and complete tasks.

Role of Prevention-Intervention Specialist

- The role of the Prevention-Intervention Specialist (also known as the P-I or Student Assistance Specialist) is to work in partnership with the coalition to implement the school-based strategy and activities of the Student Assistance Prevention-Intervention Service Program (SAPISP). The P-I should not be the identified Sector representative for the School. P-I voting and leadership roles should be determined locally by Coalition to avoid a conflict of interest.

Prevention-Intervention Specialist (P-I) tasks include:

- Provide screening and referral information to students (parents) involved in the SAPISP.
- Conduct early intervention educational support groups for selected and indicated students.
- Attend and participate in local community coalition meetings.
- Provide Prevention Education Series to one grade level per year.
- Provide information and increase awareness of available prevention, intervention, and treatment services to school staff, parents, and students.
- Participate as integral member of the multi-disciplinary team at assigned school(s).
- Assist in developing alcohol, tobacco, and other drug related policies at school(s) when needed.
- Implement and maintain methods of program evaluation.
- Additional tasks to support the Coalition are at the discretion of their supervisor.

Role of County

In areas where the County is involved in the provision of prevention services the role of the County is to work with the Educational Service District (ESD) to review the 'County Risk Profile' provided by DBHR, jointly agree on the community selected, submit community selection packet to DBHR, establish or identify coalition, and then continue working with the community coalition while allowing the local community coalition to make decisions and fulfill CPWI requirements. County staff may be non-voting members of the coalition but, should not serve as elected officers.

County staff tasks include:

- Ensure that all provisions of CPWI are met in a timely manner.
- Participate in monthly CPWI Learning Community Meetings (County prevention staff).
- Work with their ESD partner in the community selection process.
- Participate in annual meetings and training as required.

Note: Other roles and responsibilities may be negotiated with DBHR.

Role of the Contractor for CPWI Coalition Services (if applicable)

Coalitions work with a County or a Non-County Contractor (Contractor) to serve as a pass-through agency for CPWI funding for staff, strategies and activities. While the Contractor provides fiscal oversight and limited administrative management, the Coalition retains discretion and control over fiduciary decision making within the laws and regulations related to the funding source.

The role of the Contractor is to work with the Community Coalition while allowing them to make decisions that fulfill CPWI requirements. The Coalition Coordinator is not a member of the Coalition, and shall not serve as an elected officer.

Contractor tasks include:

- Ensure that all provisions of CPWI are met in a timely manner.
- Serve as the Coalition's Contractor for grant management.
- Provide the Coalition with regular budget expenditure reports.
- Fiscal oversight and limited administrative management.
- Provide human resources support in hiring coalition staff.
- Supervise Coalition Coordinator.
- Ensure Coalition Coordinators participates in required and non-required training to increase knowledge and skills in prevention theory, community organizing, and the Strategic Prevention Framework.

Role of Educational Service District (ESD)

The role of the ESD is to work with the county to review the 'County Risk Profile' provided by DBHR, jointly agree on the community selected, provide community selection paperwork to county, and establish and/or identify the school contacts and their roles with the coalition; and then continue working with the P-I and community coalition while allowing the local community coalition to make decisions and fulfill CPWI requirements. ESD Supervising Staff may be non-voting members of the coalition but, should not serve as elected officers.

ESD tasks include:

- Supervise Prevention-Intervention Specialist.
- Participate in monthly CPWI Learning Community Meetings.
- Participate in annual meetings and training as required.
- Work with their county partner in the community selection process.
- Manage the Match contribution for P-I services.

Note: Other roles and responsibilities may be negotiated with DBHR.

Role of School District

- The role of the school district is to host the Prevention-Intervention Specialist at the identified school. The school district should provide a confidential space for the P-I Specialist to conduct intervention individual and group services as identified through work with youth in the school. The school district should participate on the community coalition and support coalition efforts. In some instances, the school district is the fiscal agent.

School District tasks include:

- Provide confidential office space for P-I Specialist to conduct intervention for individual and group services as

identified through work with youth.

- Support efforts of the coalition by attending meetings or sending representative to attend coalition meetings on behalf of the School District.
- Assign a Healthy Youth Survey Coordinator and do all things necessary to implement the Healthy Youth Survey every biennium. Ensure School District is registered to take the Healthy Youth Survey. Deliver HYS in October of even years. Data can be available for planning and implementing CPWI.

Coalition Meetings

Successful coalitions have action-driven meetings which focus on decision-making, strategic planning, and action steps. Coalition meetings are typically 1½ to 2 hours. The meetings include items related to the priorities and outcomes of the coalition and focus on the action to be taken to achieve those priorities or outcomes. Coalitions often use workgroups to support detailed work and then engage the full coalition in key decisions and action to facilitate broader reach for implementation action.

Hosting effective meetings sometimes requires coalitions to make strategic transitions in how they manage time together. See the grid below for suggestions.

Strive for engaged action-focused coalition meeting agendas:	**Avoid less effective coalition meetings:**
Agenda items are related to the priorities and outcomes of the coalition	Agenda items are committee or agency updates
Agenda items list the person who will be leading the discussion, the time allotted and the action to be taken	Agenda items are introduced by the chair and discussed by the paid staff
Coalition progress is evident by new and emerging items on the agenda	Agenda items are stagnant or cut and pasted from month to month
Action planning and delegation happens in the meeting	Members advise staff on action to be taken before the next meeting
New members and partners are recruited to the meeting based on the agenda items	The same five or six people at the meeting every month
Adults as partners in completing the work	New members attend only one or two meetings and then never come back

For additional information about coalition building please see training materials "Enhancing Coalition Impact" at www.TheAthenaForum.org/training/cpwi_trainings.



CHAPTER 2:
CPWI KEY OBJECTIVES

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CPWI History

The following Division of Behavioral Health and Recovery (DBHR) Community Prevention and Wellness Initiative (CPWI) Key Objectives were developed through discussions and negotiations with Counties, Office of Superintendent of Public Instruction representation, Educational Service Districts, and other community stakeholders in 2009-2010. The objectives were designated as "community" or "state" responsibilities in order to clarify roles. This process was an effort to move toward a *Prevention Redesign Initiative* (PRI) for the Washington State Prevention System in order to incorporate the guidance and lessons learned from the Washington Strategic Prevention Framework-State Incentive Grant (SPF-SIG).

The Key Objectives identified through the redesign process were developed to set standards and benchmarks to demonstrate community impact on behavioral health long term outcomes. Each objective includes the minimum requirements to participate as a CPWI Community Coalition and target benchmarks for the state and coalitions to achieve. The Key Objectives were developed on the findings from the WA SPF-SIG, Office of National Drug Control Policy/Drug Free Communities Support Program, Community Anti-Drug Coalitions of America, Communities that Care, CADCA, Coalitions and Partnerships in Community Health, and SAMHSA.

With each cohort of the CPWI, the guidance documents have been refined for utility. However, the *Key Objectives* section of the Community Coalition Guide remains as it was originally developed by the stakeholder group in order to preserve the history of the development of the Community Prevention and Wellness Initiative (formerly the Prevention Redesign Initiative).

Key themes received (highlighted below) are general comments received by DBHR during CPWI planning sessions in the fall of 2009.

CPWI Key Objectives

Establishment of a community coalition (community)

- Specific substance abuse prevention focus.
- Minimum: Eight (8) out of the twelve (12) following sectors represented. Sectors include youth under the age of 18, parents, law enforcement, civic/volunteer groups, businesses, health care professionals, media, schools, youth-serving organizations, religious/fraternal organizations, state/local/tribal government, and other substance abuse organizations.
- *Benchmark:* All 12 sectors are represented by different people for each sector, and will include chemical dependency treatment, mental health, and primary health care providers.

Key Themes Received

- Challenging for some communities to identify and engage all of the sectors required by the Drug-Free Community Grant application.
- Training needed to support coalition development.
- Need clear roles for coalition membership and leadership.
- Encourage broad representation and participation.

Identification of a community coordinator (community)

- Coordinator must be identified for each community selected.
- Minimum .5 FTE community coordinator.
- *Benchmark:* 1.0 FTE community coordinator.

Key Themes Received

- Need to allow for leveraged funds to support coordinator position.
- Resources not adequate to support 1.0 FTE for each community.
- Job descriptions need to be clear and reasonable.

Define and select communities (community)

- Communities must be described in geographic terms or at-risk populations which can be described demographically.
- Communities must have baseline data describing the extent of the substance abuse problem that places their residents at risk for substance abuse issues. The identified communities must also have the ability to measure change in risk/protection as well as prevalence of substance abuse.
- Communities are not expected to be county-wide as they need to be small enough to measure community-wide change with limited resources. Examples include: towns, small cities, communities surrounding a rural school district or urban school building.
- Schools within the community will participate in the Washington State Healthy Youth Survey (HYS) on a biennial basis.
- *Benchmark:* Community risk and protective factors, as well as substance abuse prevalence rates can be measured with existing databases including Washington State Healthy Youth Survey, and archival data collected in the CORE GIS.

Key Themes Received

- Need to consider allowing for defined communities that are not geographic in nature.
- The defined community needs to have access to baseline and on-going measurements.
- May need to consider neighborhoods in large urban settings.
- Schools, law enforcement, and places of worship are all considered important elements of a community.
- Need to find ways of identifying traditionally underserved communities.

Implementation of environmental, public awareness, direct service, and capacity building strategies (community)

- Each community will have some level of capacity building with an environmental strategy, as well as a public awareness and direct service evidence-based approaches.
- *Benchmark:* Identified communities will invest in capacity building activities, a minimum of two environmental strategies per year, one public awareness campaign relating to a priority drug issue in their community, and multiple direct service evidence-based approaches.

Key Themes Received

- Need a balance between community capacity building, environmental strategies, and direct service work.
- Evidence-based programs do not meet the needs of all populations.
- Need to leverage resources within the community in order to have a comprehensive plan – DBHR resources are limited.

School-based Prevention-Intervention Specialist (community)

- A minimum of 1.0 FTE school-based Prevention-Intervention (P-I) specialist is employed in the identified community.
- Student Assistance Prevention-Intervention Service Program (SAPISP) model developed by OSPI will be followed.
- P-I specialist will be actively involved in the community coalition.
- *Benchmark:* A minimum of 1.0 FTE P-I specialist is employed for every 1,000 middle and high school students in the identified community.

Key Themes Received

- DBHR funds do not need to pay for the entire FTE, leveraged funds by local schools and the ESDs are critical. What is important is the FTE is located in the defined community.
- It is important to have the ESDs supervise the assigned P-I specialists.
- P-I specialist needs to be an active member of the community coalition.

Participating communities are distributed statewide (community)

- Each county will identify a minimum of one community. In counties with larger populations, more than one community is expected to be identified.
  - Counties under 195,000 people = 1 community
  - Counties between 195,000 and 700,000 people = 2 communities
  - Counties between 700,000 and 1,500,000 people = 3 communities
  - Counties over 1,500,000 people = 4 communities
- Counties/ESDs were phased into the CPWI in three cohorts. Cohort 1 began on July 1, 2011, Cohort 2 began on July 1, 2012 and Cohort 3 began July 1, 2013.
- *Benchmark:* All counties/ESDs will be actively participating by the beginning of FY2013.

Key Themes Received

- Flexibility is needed to continue some countywide environmental and capacity building efforts.
- Need to leverage other state and local resources in defined communities.
- Important to reach as many communities as possible, and still maintain sufficient programming and policy work to realize community-level change.

Resources match outcomes (community/state)

- Performance-based contracts will be tied to community prevention planning and program implementation outputs.
- *Benchmark:* Performance-based contracts will be tied to community substance abuse outcomes.

Key Themes Received

- Limiting the number of communities funded by fully resourced comprehensive plans with DBHR funds is not necessary, leverage funds need to be counted on more.

DBHR technical assistance/support (state)

- Community coalition development.
- Strategic planning, evaluation, and reporting.
- Social marketing/public awareness.
- Substance abuse prevention/mental health promotion.
- *Benchmark:* DBHR staff will have the technical expertise to support providers in their efforts to organize communities, develop strategic plans, select programs/practices/policy development work, and report/market their progress and incorporate mental health promotion strategies where appropriate.

Key Themes Received

- Access to community technical assistance was a key element in the SPF/SIG Project.

Evaluating program and community-level change (community)

- All programs will need to report into the Substance Use Disorder Prevention and Mental Health Promotion Online Reporting System (Minerva); those serving individuals age 10 and older will report into Minerva using assigned measures tied to their program/practice objectives.
- Environmental strategies will be reported in the Minerva.
- Community level change will be tracked using HYS and Core GIS Data.
- HYS will be implemented in all schools within the identified community.
- *Benchmark:* All program/practice/policy efforts supported by DBHR funds will be reported in Minerva which will generate real-time reports.

Key Themes Received

- Measuring progress and success is important.

Workforce development (community/state)

- Prevention certification offered in Washington State.
- Substance abuse prevention specialists training offered in Washington State.
- Annual Prevention Summit.
- Athena website for prevention professionals in Washington State.
- *Benchmark:* Direct-service providers are trained in the programs they are offering. Each agency receiving DBHR prevention funds will have at least one Certified Prevention Professional (CPP) on staff.

Key Themes Received

- Training and workforce development is important.

"What Works" (community/state)

- A minimum percentage of programs/practices/policies must be evidence-based per the contract requirements.
- Principles of prevention for all programs.
- *Benchmark:* 75% of program groups of programs/practices/policies must be evidence-based, based on the Washington State specific list.

Key Themes Received

- It is important to keep some flexibility for innovation and adaptation.
- Field needs to continue to follow research and principles being adopted nationally and learn from our work in Washington State.

Compliance with Synar (community/state)

- Communities will support Synar compliance activities locally.
- *Benchmark:* All counties will support their local health departments in Synar compliance activities, such as; retail compliance checks and retailer education.

Key Themes Received

- If counties are expected to continue to support the local Synar work, they will need some flexibility to maintain level of work at a countywide level.

Other

*Seek opportunities in Healthcare Reform (community/state)

- DBHR staff and providers will establish a workgroup, or use the Cohort 1 learning community to study potential collaborative opportunities between substance abuse prevention, mental health promotion, and primary health care.
- *Benchmark:* At least one co-developed/selected and co-funded substance abuse prevention/mental health promotion project in each community on an annual basis will be implemented.

*Healthcare reform was passed by Congress since the CPWI stakeholder workgroup met in the fall of 2009. It is essential that the CPWI follow the direction currently being formulated at the state and federal level.

Key Themes Received

- This is a new item and will be discussed at future meetings.

Note: Previous Performance Based Prevention Services (PBPS) Online reporting system referenced in previous versions. References to this system have been replaced with the current DBHR Substance Use Disorder Prevention and Mental Health Promotion Online Reporting System, or (Minerva).



CHAPTER 3: IMPLEMENTING CPWI IN YOUR COMMUNITY

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Implementing CPWI in Your Community

Purpose of this Section of the Community Coalition Guide

The purpose of this section is to identify the required tasks and provide guidance, definition, and clarification on each task category grouped by the CPWI Planning Framework steps. Please note: this Guide is not intended to be a comprehensive handbook for community organizing.

Task items marked "*required*" are due according to the Task Category Timeline Overview. As indicated in the following pages, some items will be submitted to DBHR via electronic files or reported into the Substance Use Disorder Prevention and Mental Health Promotion Online Reporting System (also called Minerva), while other items will be documented during site visits. Please note, as additional funding is made available to support CPWI efforts, this Guide may be updated to include additional requirements and information.

Quick Reference Timeline Overview display on the following pages is categorized by Tasks and does not indicate sequence to follow. This is not expected to be linear process. The timeline is based on annual schedule starting at the beginning of the fiscal year. Complete timeline will be negotiated with DBHR based on individual coalition readiness.

New coalitions starting on an alternate timeline will be reviewed on a case-by-case basis to establish starting time and timeline to follow will be negotiated with DBHR.

A Microsoft Word template of the Timeline Overview has been prepared for your use at:www.TheAthenaForum.org/strategic_planning_templates.

Quick Reference Timeline Overview

Tasks ***Start date: July 1, [ ]*** **Community Name: [ ]**	Frequency	Due Date *Negotiate complete timeline with DBHR based on individual coalition readiness.*
Getting Started		
1. Register and participate in The Athena Forum website	*Ongoing*	Within 2 weeks of start
2. Select CPWI Community	---	---
a. Submit selection packet	*First Year only*	*Due date TBD for new communities*
b. Issue media release	*First Year only*	Within 60 days from DBHR approval
3. Community Coalition Coordinator (.5 FTE) for each CPWI community	---	---
a. Review Coordinator job description with DBHR	*First Year & As needed*	Prior to posting
b. Ensure new hire Coordinator has office space in CPWI community	*First Year & As needed*	Upon new hire
c. Review new hire Coordinator qualifications with DBHR	*First Year & As needed*	Upon new hire
d. Submit new Coordinator training plan if necessary	*First Year & As needed*	Upon new hire
e. Ensure Coordinator is working with coalition	*Ongoing*	Starting July 1 *[Start date TBD for new communities]*
f. Ensure Coordinator spends at least 80 hours per month on community	*Ongoing*	Starting July 1 *[Start date TBD for new communities]*
g. Ensure Coordinator is Certified Prevention Professional (CPP)	*Ongoing*	According to current status
4. Confirm SAPISP and P-I services	*Annually*	Within 30 days prior to start of school
Capacity		
1. Recruit and retain membership	---	---
a. 8 of 12 sectors participating	*Ongoing*	Starting July 1 *[Start date TBD for new communities]*
b. Membership section in Strategic Plan	*Ongoing & Update 2019*	*[enter date]*
c. Conduct 'Coalition Assessment Tool' (CAT) Coalition member survey	*Annually*	October
d. Complete 'Community Profile'	*First Year & Update 2019*	Within 45 days of Plan/ Action Plan Approval
2. Sector Representation Monthly Meetings	---	---
a. Min. 8 sectors participating at least 9 months of the year	*Ongoing*	*Starting July 1* *[Start date TBD for new*

Quick Reference Timeline Overview, *continued*

Tasks	Frequency	Due Date
		communities]
3. Community coalition member orientation	*First Year & As needed*	*[enter date]*
4. Establish and maintain coalition structure	*Ongoing & Update 2019*	*[enter date]*
5. Engage key leaders in coalition's CPWI efforts	*Annually*	*[enter date]*
6. Gather community information and feedback	*Ongoing*	*[enter date]*
7. Participate in training and technical assistance	*Ongoing*	---
Assessment		
1. Conduct Needs Assessment	---	---
a. Establish process for assessment	*First Year & Update Oct 2018*	*[enter date]*
b. Conduct Assessment	*First Year & Update 2019*	*[enter date]*
c. Conduct 'Community Survey'	*First Year & Annually*	September-December
d. Prioritize outcomes and write into Strategic Plan	*First Year & Update 2019*	*[enter date]*
2. Conduct Resources Assessment	---	---
a. Establish process for assessment	*First Year & Update Oct 2018*	*[enter date]*
b. Conduct Assessment	*First Year & Update 2019*	*[enter date]*
c. Prioritize outcomes and write into Strategic Plan	*First Year & Update 2019*	*[enter date]*
Planning		
1. Select goals, objectives, strategies, & programs/activities	---	---
a. Coalition determines goals and objectives	*First Year & Update 2019*	Update June 15, 2019
b. Coalition determines strategies, and programs/activities	*First Year & Annually*	Update June 15, 2019
2. Develop and update Prevention Strategic Plan	*First Year & Update 2019*	Update June 15, 2019 *[Start date TBD for new communities*
3. Confirm implementation partnerships for strategies & programs & activities	*First Year & Annually*	*[enter date]*
Implementation		
1. Maintain active community coalition	*Ongoing*	Starting July 1 *[Start date TBD for new communities]*
a. Coordinator support Coalition	*Ongoing*	Starting July 1 *[Start date TBD for new communities]*
b. Monthly full Coalition meetings	*Ongoing*	Starting July 1

Quick Reference Timeline Overview, *continued*

Tasks	Frequency	Due Date
		[Start date TBD for new communities]
c. Review and revised as needed Coalition structure	*Annually*	*[enter date]*
d. Complete tasks in Community Coalition Guide	*Ongoing*	Starting July 1
2. Participate in monthly meetings with DBHR	*Ongoing*	Within 30 days
a. Participate in monthly CPWI Learning Community Meetings	*Ongoing*	Starting July 1
b. Participate in monthly CPWI/DBHR check-in meetings	*Ongoing*	*[enter date]*
3. Implement media strategies	*Ongoing*	*[enter date]*
4. Implement strategies and programs/activities according to Strategic Plan	---	---
a. Organize and implement P-I services	*Ongoing*	September - June
b. Implement capacity building strategies & activities	*Ongoing*	*[enter date]*
c. Implement cultural competency strategies & activities	*Ongoing*	*[enter date]*
d. Implement sustainability strategies & activities	*Ongoing*	*[enter date]*
e. Implement public awareness campaign(s)	*Ongoing*	*[enter date]*
f. Implement environmental strategy(ies)	*Ongoing*	*[enter date]*
g. Implement selected direct prevention strategy(ies)	*Ongoing*	*[enter date]*
Reporting and Evaluation		
1. Develop reporting and evaluation strategies	---	---
a. Determine coalition's intended major outcomes, impacts	*First Year & Update 2019*	*[enter date]*
b. Determine how evaluation information will be shared	*First Year & Update 2019*	*[enter date]*
2. Complete Minerva reporting	---	---
a. Coalition & community organization functioning including Coalition Coordinator Hours	*Ongoing*	*Monthly by the 15th of each month*
b. CPWI Quarterly Report	*Ongoing*	Quarterly
b. 'Coalition Assessment Tool' (CAT) (Coalition member survey)	*Annually*	October
c. Report public awareness, media & environmental strategy(ies)	*Ongoing*	*[enter date]*
d. Report direct prevention strategy(ies)	*Ongoing*	*[enter date]*
3. Review and analyze output and outcome information with coalition according to Strategic Plan.	---	---
a. Use the 'CAT' report to evaluate coalition capacity building efforts	*Annually*	October
b. Review effectiveness of message dissemination	*Annually*	*[enter date]*
c. Will use the Minerva reports, state data, & other local reports to monitor & evaluate progress	*Annually*	*[enter date]*
4. Participate in statewide evaluation	---	---
a. Ensure participation in the Healthy Youth Survey (HYS)	*Every 2 years*	October In even years (2018, 2020 etc.)
b. Annual 'Coalition Assessment Tool' (CAT)	*Annually*	*October*
c. Achieve response rates for the 'Community Survey'	*Annually*	September-December

GETTING STARTED

A. Register and participate in The Athena Forum.

- ❑ *(Required - Ongoing)* County, ESD, and Community Coalition Coordinators register and actively participate in The Athena Forum.

Definitions: "Register" means to become a member of the www.TheAthenaForum.org within two weeks of staff participation in CPWI. "Actively participate" means to go to site to access materials posted by DBHR.

B. Select CPWI community.

- ❑ *(Required - New only)* When opportunities arise to add new CPWI communities, the process for selection will be determined and notifications with timeframes will be disseminated by DBHR.
  - DBHR will determine eligible high-need communities.
  - County and ESD will collaborate to work with eligible community(ies) to participate in selection process.
  - Determine willingness of eligible communities and school district to participate and engage in CPWI.
  - Review community and school readiness in eligible communities.
    - *Note: Lower stages of community readiness may help indicate communities that are of higher-need for services, therefore being an optimal CPWI community choice.*
    - Identify resources available to address readiness challenges.
- ❑ *(Required -New only)* County/Contractor and/or coalition will issue media release, within 60 days following approval of community selection, to outlets serving the CPWI community using 'CPWI News/Media Release Template' provided by DBHR.
  - Send a copy of the local release and notification of any media coverage to DBHR.
- ❑ If needed, sign a Memorandum of Understanding (MOU) between County/Contractor and coalition.

C. Community Coalition Coordinator (.5 FTE) for each CPWI community.

- ❑ *(Required - New and As needed)* County/Contractor reviews Community Coalition Coordinator job description and hiring/designation process with DBHR for initial hire and as needed to fill vacancies.

- ❑ *(Required – New and As needed)* County/Contractor will ensure new hire Community Coalition Coordinator meets required qualifications below.

- ❑ *(Required – New and As needed)* County/Contractor shall submit a CPWI Community Coalition Coordinator Qualifications Checklist for all newly hired Community Coalition Coordinators to DBHR for review. (See ***Appendix 16*** of this Guide for sample template.) If new hire does not meet all qualifications, a training plan must be submitted by the Contractor with the Qualifications Checklist.

- ❑ *(Required – New and Ongoing)* County/Contractor will ensure Community Coalition Coordinator(s) works in the community with coalition to help organize and maintain the community substance abuse prevention coalition, provide assistance to the community coalition, and to help guide the continuous development and implementation of a community substance abuse prevention Strategic Plan. Coordinator shall be in place within one month of contract execution/ new community selection the first year and ongoing for the duration of participation in CPWI.

- ❑ *(Required- Ongoing)* County/Contractor will ensure that at least 80 hours of Community Coalition Coordinator(s) time per month is spent on each selected CPWI community. (See ***Appendix 14*** for menu of Community Coalition Coordinator Hours categories to be reported.)

- ❑ *(Required- Ongoing)* County/Contractor will ensure that all new hires have a physical office space within the CPWI community boundaries.

- ❑ *(Required- Ongoing)* County/Contractor will ensure Community Coalition Coordinator(s) is a Certified Prevention Professional (CPP):
    - Ensure currently certified Community Coalition Coordinators maintain CPP credential status, and
    - Ensure Certified Prevention Professional certification within 18 months of new Community Coalition Coordinator start date.

- Community Coalition Coordinator will:
    - Work in community to fulfill requirement of minimum .5 FTE time dedicated to each CPWI community.
    - Serve as staff support for the coalition to plan, implement, and report on task categories.
    - Function as the liaison among the coalition members, DBHR and other state partners, and with the community.
    - Serve as a liaison between CPWI coalition and DBHR.
    - Participate in CPWI learning community meetings, monthly DBHR check-in meetings, and required training.
    - Help recruit and retain membership on the coalition and support from local key stakeholders/leaders.
    - Provide staff support to the coalition; coordinate regular meetings to ensure implementation on the Strategic Plan and Action Plan.
    - Coordinate the regular review of coalition budget by the coalition.
    - Assist coalition members in navigating CPWI Prevention Planning Framework and guide coalition to develop a comprehensive Action Plan based on Needs Assessment and Strategic Planning.
    - Work with individual coalition member organizations to help them align and integrate their work with the goals and strategies of the coalition and CPWI Prevention Planning Framework-focused work.
    - Report to the coalition on progress toward the goals and objectives of the Strategic Plan and Action Plan.
    - Provide or coordinate services, implement activities and manage coalition trainings with the guidance of the coalition members.
    - Work with the coalition and projects to develop and monitor outcomes.
    - Coordinate community outreach efforts (i.e., presentations, newsletter, volunteer recruitment, etc.).

- Required Community Coalition Coordinator Qualifications:
    - Bachelor's Degree in Education, Health Education, Communications, Social Sciences, or closely related field.
    - Certified Prevention Professional.
    - Two years of work experience in community organizing, program coordination, or community-based programs involving youth, drug/alcohol/tobacco abuse, or other related community health prevention or counseling.
    - Working knowledge of substance abuse prevention and prevention science, community development and mobilization, youth development principles, and community organizing approaches.
    - Ability to create and sustain effective relationships with community partners, foster and share leadership among individuals in the community, and build bridges among diverse community members and organizations.

- Desired Skills and Knowledge:
    - Work skills: Organized; excellent oral and written communication; public speaking and training; group and meeting facilitation; word processor, spreadsheet, and internet skills; good sense of humor; ability to learn new concepts quickly; and self-motivated with ability to work independently.

- Knowledge of local organizations, services, the community to be served**, and prevention frameworks**.

D. Confirm Student Assistance Prevention-Intervention Service Program (SAPISP) and Prevention-Intervention Specialist services (P-I services).

- ❑ *(Required – Annually)* County/Contractor will coordinate with ESD to confirm school district and school building participation in CPWI and implementation of SAPISP and P-I services within 30 days prior to start of school each year.

CAPACITY BUILDING

A. Recruit and retain membership. Coalition will recruit and maintain membership and participation consistent with CPWI requirements, strategic plan, demographics, and culture of the community.

- ❑ *(Required - Ongoing)* Ensure coalition members and sector representatives maintain active participation in the coalition. Locally develop an "active participation" standard that is agreed to by members and followed by coalition.

- ❑ *(Required – Ongoing and Update every 2 years)* Develop and implement membership recruitment and retention strategies including minimum participation rules. Include plan for 'membership recruitment and retention' in Strategic Plan, update as needed but at a minimum every two years. Recruitment and retention must include elements of cultural competency.

- ❑ *(Required - Annually)* Administer the Annual Coalition Survey "Coalition Assessment Tool" (CAT) among all current coalition members in October, analyze and discuss results at coalition meeting(s).

- ❑ *(Required – New and Update Annually)* Coalition will complete 'Community Profile' brochure with DBHR within 45 days following approval of Strategic Plan. Update 'Community Profile' as needed but at a minimum every year within 45 days following approval of annual Action Plan updates. A template is provided.

B. Sector Representation Monthly Meetings. Required sector representatives must be present and participate concurrently in monthly meetings.

- ❑ *(Required - Ongoing)* Monthly full-coalition meetings shall be attended by at least eight (8) sector representatives at least nine (9) months of the calendar year from the list provided on page 6. (Variation in sectors participating monthly is acceptable.)

C. Community coalition member orientation. Coalition will ensure that coalition members have clear understanding of CPWI goals and objectives, CPWI/Strategic Prevention Framework planning model, and coalition structure and capacity building plan. This can be done annually as an established coalition and/or individually when new members join.

- ❑ *(Required – New and As needed)* Coalition will conduct a training/meeting to meet the following goals:
  - Review CPWI goals.
  - To increase the understanding for the coalition members in the CPWI/Strategic Prevention Framework planning model, related local data, goals, and activities of coalition.
  - Develop coalition membership's understanding of their role.
  - Develop coalition structure.
  - Develop capacity building plan.
  - Further engage members in implementing Action Plan.

D. Establish and maintain coalition structure.

- ❑ *(Required - Ongoing and Update every 2 years)* Coalition will establish and maintain, at a minimum, the following:
  - A meeting schedule and structure to achieve components required for strategic planning and implementation. Once the schedule and structure are established, the coalition shall demonstrate adherence to the structure through attendance reporting in the Minerva.
  - A mission statement. Include 'mission statement' in Strategic Plan.
  - A decision-making model to be used. Include 'decision-making processes' in Strategic Plan.
  - Procedures for communication. Include 'communication procedures' in Strategic Plan.

- Develop job descriptions for coalition members (including school representatives), "leadership team," and coalition staff.
- A coalition orientation for new coalition members on an ongoing basis.

❑ *(Required – New and Update Annually)* Coalition will review mission, goals, activities, budget and strategies annually to decide if revisions are needed.
- Establish work groups as necessary.
- Address how the coalition will ensure inclusion and participation of members, address cultural competency, and implementation of National Culturally and Linguistically Appropriate Services (CLAS) Standards.

E. Engage key leaders in coalition's CPWI efforts. Any community key leader who is not already participating as a member of the coalition will be invited to participate in an annual event to discuss the coalition.
Definition: "Key leader" means local influential people who can influence decisions, funding, and resources for the local community (For example, Mayor, Superintendent, County Executive, County/City council members, Business Owners, PTS President, Sheriff, Police Chief, etc.)

❑ *(Required - Annually)* Coalition will host Key Leader event annually that will meet the following goals:
- Bring selected key leaders and coalition members together.
- Provide necessary training to increase the understanding for the key leaders in the CPWI/Strategic Prevention Framework planning model, related local data, goals, and activities of coalition.
- Celebrate successes to date.
- Develop 'buy-in' for coalition by key leaders.
- Provide opportunity to hear perspective of key leaders on the goals, activities, and coalition efforts.
- Commitment/re-commitment from key leaders to support the goals, activities, and efforts of the coalition.
- (Re) energize coalition members.

Note: Key Leader event may be integrated with other local currently established annual event.

- Set up and maintain communication updates with key leaders.

F. Community involvement and input in the strategic planning process.

❑ *(Required - Ongoing)* Coalition will gather information and feedback from the community as they develop their strategic plan and update annual Action Plans. Coalition will incorporate the community feedback into its decision-making at each step of the planning framework. (For example, the coalition works to better understand and listen to the community members to identify local conditions while they are in the Needs Assessment phase. Methods may include focus groups and key informant interviews.)
Definition: In this process, "Community" should be defined as individuals who are part of the community but are not coalition members.

G. Participate in training and technical assistance.

❑ *(Required)* Participate in the following trainings:
- **Participants: ESD staff, County prevention staff** (if applicable)**/ Community Coalition Coordinator or their designee.**
  - *(Annually)* Training in coordination with All Provider Meeting.
  - *(Annually)* Prevention Summit/ or designated DBHR-supported Prevention Conference.
  - *(Annually)* Summer Coalition Leadership Institute.
  - *(Annually)* 1 additional DBHR training as announced.
- **Participants: Community Coalition Coordinator.**
  - *(New and As needed)* Community Coalition Coordinator Orientation.
  - *(New only)* Substance Abuse Prevention Skills Training (SAPST) within six months (if not previously completed).
  - *(Monthly)* Technical Assistance and Monitoring Calls with DBHR Prevention System Manager.

- **Participants: Coalition members and Community Coalition Coordinator.**
  - *(New and As needed)* Community Coalition Orientation.
- **Participants: Key leaders, coalition members and Community Coalition Coordinator.**
  - *(Annually)* Key Leader Event.

ASSESSMENT

Note: Priorities determined through the needs and resources assessment should not to be limited to the funding resources currently available. Plan should consider strategies for generating resources to support the unmet needs of the community.

A. Conduct Needs Assessment. The coalition will make data-informed decisions and define problem statements using archival, Healthy Youth Survey, and local indicator data. The needs assessment is completed by the coalition, with support from the community coalition coordinator, using workgroups as needed to review and discuss data in detail. The coalition will regularly update the needs assessment to make adjustments based on progress towards meeting goals and objectives and to meet the needs of the community. Assessment will be updated as needed but at a minimum every two-years.

- ❑ *(Required – New and Updated every 2 years)* Coalition will establish a process to compile data, review the information, and ensure data is reflective of community demographics. Include 'explanation of process' in Strategic Plan.

- ❑ *(Required – New and Updated every 2 years)* Coalition (or workgroup) will collect, compile, and review data.
  - Review data provided in 'Community Needs Assessment ***Data Book***' provided by DBHR. Discuss implications for the community and the work of the coalition.
  - Identify gaps in the data, and possible sources of more precise local data to fill those gaps.
  - Collect those local data and add to assessment.
  - Identify important and/or significant data that demonstrates areas to focus substance abuse efforts to include in Strategic Plan. Include 'significant data' in Strategic Plan.

  Note: The coalition may choose to use a workgroup for this part of the needs assessment. It is recommended to have 3-5 people for the workgroup. There should be some members from the coalition to help guide the work of the workgroup but not all members need to be coalition members. Invite people in the community who have expertise and/or interest in data relating to youth risk and protective factors, substance use, and related community indicators of problem behaviors to join workgroups.

- ❑ *(Required– New and Annually)* Conduct 'Community Survey' provided by DBHR with community annually between September and December. Coalition will review results of the survey. To ensure data from the survey reflects the attitudes of the community, respondents of Community Survey should reflect the population of the community in age, race, ethnicity, education, and socio-economic status; for best results, the coalition should develop a plan to recruit representative survey participation from the community for a representative sample in their data.
  Definition: "Community" means individuals from within the community who are not already participating as members of the coalition.

- ❑ *(Required – New and Updated every 2 years)* Coalition will prioritize outcomes for long-term consequences, behavioral health problems, intervening variables/risk and protective factors, and contributing factors to include in Strategic Plan. Include 'priorities' in Strategic Plan.

B. Conduct Resources Assessment. Following the Needs Assessment, the Resources Assessment is completed by the coalition, with support from the Community Coalition Coordinator, using workgroups as needed to review and discuss information in detail. The coalition will regularly update the Resources Assessment to make adjustments based on progress towards meeting goals and objectives and to meet the needs of the community. Assessment will be updated as needed but at a minimum of every two-years.

- ❑ *(Required – New and Updated every 2 years)* Coalition will establish a process to collect, compile, and review resource data. Include 'explanation of process' in Strategic Plan.

- ❑ *(Required – New and Updated every 2 years)* Coalition (or workgroup) will collect, compile, and review resource data.
  - Collect and compile information about the providers and prevention-related services in the community related to the prioritized outcomes for long-term consequences, behavioral health problems, intervening variables/risk and protective factors, and contributing factors.
  - Identify important and/or significant information that demonstrates areas to focus substance abuse efforts to include in Strategic Plan. Include 'significant information' in Strategic Plan.
  - Identify gaps in services, prevention resources, capacity following review of needs assessment and resources assessment.

  Note: *The coalition may choose to use a workgroup for this part of the resources assessment. It is recommended to have 3-5 people for the workgroup. There should be some members from the coalition to help guide the work of the workgroup but not all members need to be coalition members. Invite members of the coalition who have knowledge of a wide range of providers of prevention related services to participate.*
- ❑ *(Required – New and Updated every 2 years)* Coalition will review results of the resources information and integrate results into strategies and activities. Include 'results' in Strategic Plan.

PLANNING

A. Select and update goals, objectives, strategies, and programs/activities.

- ❑ *(Required – New and Updated every 2 years)* Coalition determines goals, and objectives. Include 'goals and objectives' in Strategic Plan.

- ❑ *(Required – New and Updated annually)* Coalition determines 'strategies, and programs/activities' and identifies who will receive services and what services they will receive. Include 'Action Plan' in Strategic Plan. See ***Appendix 9*****,** pages 60-61.

B. Develop and update Prevention Strategic Plan.

- ❑ *(Required – New and Updated every 2 years)* Coalition will develop, write, and submit a strategic plan, including a logic model, to DBHR for approval according to the schedule below, using the Strategic Plan Requirements. The coalition will regularly update strategic plan to make adjustments based on progress towards meeting goals and objectives and to meet the needs of the community. Plan will be updated as needed but at a minimum according to the schedule below. The Strategic Plan includes the coalition's process, decisions, and plan for each of the following steps:
    - Organization development and building capacity.
    - Conduct needs and resource assessments.
    - Set goals, objectives, and strategies.
    - Establish implementation steps and timelines.
    - Plan for reporting and evaluating progress on outcomes.

Timeline for Strategic Plan and Action Plan due dates

- Action Plan and Budgets required to be updated and submitted to DBHR Prevention System Manager **annually by June 15th** (***Appendix 9*** **and 10**)
- Comprehensive Full Update of Strategic Plan for all CPWI coalitions is **due June 15, 2022.**
- New Coalitions joining CPWI after July 1, 2015 follow Strategic planning update requirements and instructions as assigned by DBHR.

C. Confirm partnerships for implementation of strategies and programs/activities.

Coalition will ensure that necessary relationships are established and permissions obtained so that strategies can be implemented effectively. Coalition identifies partnership gaps and plans outreach and recruitment strategies to fulfill needs.

- ❑ *(Required – New and Updated annually)* Coalition will confirm lead organization/responsible party for implementation of activities/programs in Strategic Plan and date(s) services will commence. Include 'Action Plan' in Strategic Plan.

If needed, MOU is signed to ensure partnerships for implementation of services.

IMPLEMENTATION

A. Maintain active community coalition.

- ❑ *(Required – Ongoing)* Community coalition coordinator (.5 FTE) supports and maintains the community substance abuse prevention coalition, provides assistance to the community coalition, and helps guide the continuous development and implementation of a community substance abuse prevention plan. Beginning July of starting year and ongoing for the duration of the project.
- ❑ *(Required – Ongoing)* Coalition will regularly conduct monthly full coalition meetings, workgroup/sub-committee meetings as needed, and maintain a structure to achieve components required for strategic planning and implementation (as determined by coalition, see Capacity Building C. Establish and Maintain Coalition Structure).
- ❑ *(Required – Annually)* Coalition will review coalition structure at least annually and revise if needed, to ensure it still represents coalition's actions and intentions.
- ❑ *(Required – Ongoing)* Coalition will complete tasks included in 'Community Coalition Guide.'

B. Participate in monthly meetings with DBHR.

- ❑ *(Required – Ongoing)* ESD staff/county staff/community coalition coordinator attends monthly CPWI Learning Community meetings by phone, webinar, or in-person.
- ❑ *(Required – Ongoing)* DBHR and community coalition coordinator have check-in meetings at least once per month, or more frequently as needed, to discuss:
  - Timeline and upcoming due dates.
  - Progress on Strategic Plan.
  - Contract compliance.
  - TA/training needs.
  - Next steps.

- County/Contractor and ESD staff are invited to participate in monthly check-in meetings.

C. Implement DBHR Statewide media strategies.

- ❑ *(Required – Ongoing)* Coalition will promote statewide media campaign messages to the local news media and through social media, publications, and donated/paid advertising using professionally developed and tested materials from DBHR and its federal and national partners. These partners include:
  - The Substance Abuse and Mental Health Services Administration (such as the "Talk. They Hear You" campaign)
  - The Partnership for Drug Free Kids, provides ongoing media messages/materials and attitude tracking research.
  - The National Institute on Drug Abuse provides research and educational materials.
- ❑ Follow the guidance on www.TheAthenaForum.org/media_strategies_cpwi_guidelines_and_tools when developing/ localizing media strategies and campaigns.

- Coalition will encourage news media to announce coalition events, activities, resources and successes.

D. Implement strategy(ies) and programs/activities according to Strategic Plan.

- ❑ *(Required – Ongoing)* Organize and implement 1.0 FTE P-I services. ESDs in coordination with coalition will work with selected schools to implement SAPISP and P-I services. Annually September -June.
- ❑ *(Required – Ongoing)* Coalition will implement capacity building strategies and activities according to approved Strategic Plan, including coalition meetings and training and technical assistance.
- ❑ *(Required – Ongoing)* Coalition will implement cultural competency strategies and activities according to approved Strategic Plan.

- Coalition shall adopt and implement policies to address health disparities. Coalitions shall follow the National CLAS Standards, as they apply to coalition development and function. Standards are available at *minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53*, *www.hdassoc.org/wp-content/uploads/2013/03/CLAS_handout-pdf_april-24.pdf*

- ❑ *(Required – Ongoing)* Coalition will implement sustainability strategies and activities according to approved Strategic Plan.
- ❑ *(Required – Ongoing)* Coalition will implement locally developed public awareness campaign(s) according to approved Strategic Plan. Minimum of one required.
- ❑ *(Required – Ongoing)* Coalition will implement environmental strategy(ies) according to approved Strategic Plan. Minimum of one required. Environmental strategies on the Excellence in Prevention list as an evidence-based Practice (EBP), implemented to fidelity, can be included in the ratio of evidence-based program percentage requirements to meet contract deliverable for EBP's. Environmental Strategies NOT on the Excellence in Prevention list will not be counted *against* the EBP ratio requirement.
- ❑ *(Required – Ongoing)* Coalition will implement selected direct prevention strategy(ies) according to approved Strategic Plan. Minimum of one required. Must meet contractual requirements for percentage of evidence-based programs according to funding source.

REPORTING AND EVALUATION

A. Develop reporting and evaluation strategies.

Include 'evaluation strategies' in Strategic Plan.

- ❑ *(Required – New and Updated every 2 years)* Determine coalition's intended major outcomes, impacts, and changes expected for goals and objectives.

- ❑ *(Required – New and Updated every 2 years)* Determine how evaluation information will be shared within the coalition and used by the coalition to make adjustments as well as communicated with the community and key leaders.

B. Complete Program reporting.

Coalition will report outputs and outcomes to DBHR in the *in the Substance Use Disorder and Mental Health Promotion Online Reporting System (Minerva)*.

- ❑ *(Required – Ongoing)* Report coalition and community organization functioning including:
  - All coalition, community coordination hours, and training services according to guidance in beginning on page 67 of this Guide – ***Appendix 14***.
  - *Report the following Community Coalition Guide Deliverables (requirements)*
    - *Annual Key Leader Event*
    - *Annual Community Survey Completion*
    - Community Profile Brochure completion *(New Communities/ As Needed/ Every year)*
    - Community Coalition Orientation *(New Communities and As Needed)*
    - News Release submission to DBHR. *(New communities)*

- ❑ *(Required – Ongoing)* Report locally developed public awareness, media campaign and environmental strategy(ies) including:
  - All public awareness and environmental services.

- ❑ *(Required – Ongoing)* Report direct prevention strategy(ies) including:
  - All direct services.
  - Pre- and post-test assessments per contractual requirements.

  Note: SAPISP and P-I services will continue to be reported through the OSPI MIS. Ensure that services are not duplicate reported.

- ❑ *(Required – Every 6 months)* Community Level Instrument-Revised (CLI-R). Applies to all Partnerships for Success (PFS) grant sub-recipients. Report completion required annually in July and December.

C. Review and analyze process and outcome information with coalition according to Strategic Plan.

Coalition will make necessary changes based on data and performance.

- ❑ *(Required - Annually)* Coalition will use the 'Coalition Assessment Tool' report to evaluate coalition capacity building efforts.

- ❑ *(Required - Annually)* Coalition will review effectiveness summarized in the annual community survey results of locally-developed public awareness message dissemination into community.

- ❑ *(Required - Annually)* Coalition will use the Minerva reports, CLI-R reports, state data, and other local reports to monitor and evaluate progress towards goals and objectives.

D. Participate in statewide evaluation.

Coalition will implement evaluation designed by DBHR.

- ❑ *(Required - Every 2 years)* Support the local school district to ensure participation in the HYS.
- Target is 80% participation of eligible students in each grade that is surveyed.

- ❑ *(Required - Annually)* Work to achieve response rates for the annual 'Coalition Assessment Tool' (survey) *(conducted annually in October)*. Work with coalition leadership to use survey results in the on-going formative evaluation work.
- Requirement is 80% of the coalition membership participation in survey.

- ❑ *(Required - Annually)* Achieve participation rates for the 'Community Survey' *(conducted annually September through December)* according to sliding scale. The scale was developed using community population estimates reported in the community Data books. Work with coalition leadership to use survey results in the on-going planning and formative evaluation work.
- See ***Appendix 17*** for table of community names and the required minimum number of community surveys to be collected.
- Coalition shall work to collect surveys from a representative sample of the population in their community.

SLIDING SCALE SURVEY COLLECTION REQUIREMENTS

100 surveys: 0 – 3,999 population
140 surveys: 4,000 – 10,999 population
180 surveys: 11,000 – 29,999 population
215 surveys: 30,000 – 49,999 population
250 surveys: 50,000 + population



CHAPTER 4:
STRATEGIC PLAN REQUIREMENTS

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General Information for Writing Coalition's Strategic Plan

Purpose of this Section of the Guide:

The purpose of the CPWI Strategic Plan Requirements chapter is to provide the CPWI requirements for completing the coalition's Strategic Plan. It is meant to be helpful for communities and coalitions in developing a strategic plan. This first part is general information that applies to the overall development of your plan. Beginning on page 38, are specific instructions for each section of the coalition's Strategic Plan.

What is a Strategic Plan?

The coalition's Strategic Plan brings together in one place the process, findings, decisions, and plan for the future for each step of the planning framework. Strategic Plans create, confirm and provide documentation of the intended vision and goals of a coalition. A Strategic Plan should set the course for the work of the coalition with a long-term focus while also maintaining the immediate work that needs to be completed. Strategic Plans should be 'living documents' that provide direction but also are updated regularly to account for assessment and evaluation information.

CPWI Strategic Plan

The coalition should follow the guidance set forth in this document to develop and write their Strategic Plan.

The coalition's Strategic Plan should be for your community. We encourage coalitions to consider including all of the coalition efforts in the Plan; however, the coalition is only required to submit a Plan for the coalition's CPWI activities. The coalition may choose to do it either way, but you should note your choice in the beginning of the Plan and follow that choice consistently for each section throughout the entire Plan. If non-CPWI efforts are included in the Plan, the CPWI-specific (DBHR-funded) activities must be indicated throughout the Plan.

The Strategic Plan is intended to be a long-term document with frequent updates as new data and evaluation information are available. The coalition's Strategic Plan should be a vision for at least five years into the future and will include annual Action Plan updates and a two-year update as new HYS data is available. The coalition may choose to have the Strategic Plan vision extend beyond four years, however regular updates will be required as a course of doing good coalition work.

Annual Action Plan Updates

Each year by June 15th, coalitions submit an updated Action Plan and Budget for review and approval to their DBHR Prevention System Manager. This update should include changes needed to strategies, programs, and/or activities based on the coalition's review and discussion of evaluation information or enhanced/decreased capacity.

2019 Update of Strategic Plan

By June 15, 2019, coalitions submit an update of their Strategic Plan. This update should include changes to goals, objectives, strategies, programs, and/or activities based on the coalition's review and discussion of evaluation information, new assessment information, or enhanced/decreased capacity. Coalitions will need to do an update to their needs and resources assessment based on new HYS and other assessment data available. Coalitions will need to determine what other updates/revisions are needed in each section of their Plan to reflect changes made to coalition functioning, goals, objectives, strategies, programs, and/or activities. Coalitions are not expected to re-write their Plans at this time. They are simply to review new information and update the Plan as needed.

Timeline for Strategic Plan Due Dates

- Action Plan and Budget is required to be updated **annually by June 15th**.
- 2019 Update of Strategic Plan is **due June 15, 2019.**
- Comprehensive Update of Strategic Plan is **due June 15, 2022.**
- **Coalitions joining CPWI after July 1, 2017** will work with DBHR on a case-by-case basis for a timeline to follow.

Writing the Coalition's Strategic Plan:

Each section of the Plan should present a clear picture of:

1. The **coalition's process** for completing the step. (For example: the coalition formed a workgroup, which met weekly to review data presented in the data book and additional locally gathered data…)
2. The **results of the work**. (For example: the Data Workgroup found that the following three intervening variables are most present in our community…)
3. The **plan for the future** based on the results of the work. (For example: the coalition reviewed the workgroup's recommendations and decided to prioritize two of the three identified intervening variables. The coalition then developed strategies to address these behavioral health problems…)

Each section should be developed based on the information presented in the previous section and provide a logical link to the next section. (For example, the data highlighted as priorities in the assessment should be the data that is used to write the goals and objectives.) Similarly each strategy the coalition chooses should be directly linked to the goal and objective that the strategy is aimed at achieving.

The sections in this chapter of the Guide provide detailed requirements for each section of the coalition's Plan. The Strategic Plan must include the following sections:

I. Executive Summary
II. Strategic Plan
    A. Organizational Development *(Getting Started)*
    B. Capacity Building
    C. Assessment
    D. Plan for Action
    E. Implementation
    F. Reporting and Evaluation

III. Appendix
    1. Logic Model
    2. List of Coalition Members
    3. Needs Assessment
    4. Community Survey Results
    5. Resources Assessment
    6. Action Plan
IV. Attachment
    1. Budget

Steps for the Coalition in Developing the Plan

Below is a **suggested sequence** and steps for the coalition in developing a **NEW** Plan. See ***Appendix 2,*** page 50 for a suggested timeline overview.

Step 1. Start early! The #1 suggestion from previous Cohort participants was, "Start earlier!" Develop a timeline for drafting, reviewing, and revising the coalition's Plan. We suggest that as each step of the planning framework is completed, that section should be written. Developing and writing a good Strategic Plan will take, at minimum, six months. Work with your Prevention System Manager to establish a drafting schedule. Allow enough time to draft sections, submit them to the coalition for review, and incorporate multiple revisions as the coalition's Plan is being developed. Do not wait until March to start drafting the coalition's Plan that is due in June.

Step 2. Review this Strategic Plan Requirements chapter. In the main body of the chapter are descriptions of the content required for the Strategic Plan. The appendices provide other helpful information. **Note:** In addition to this guide, you will need to access the templates listed in the appendix. Templates are provided as separate editable documents so that you can use them for inclusion in the coalition's Plan. Templates can be found at www.TheAthenaForum.org. *(See page 5 for instructions.)*

Step 3. Get the coalition organized (Getting Started and Capacity Building).

Step 4. Document key decisions about how the coalition is organized; utilize decision making model throughout strategic planning process and anytime the coalition needs to make decisions (Capacity Building).

Step 5. Begin building the coalition's Cultural Competency and Sustainability. Cultural Competency and Sustainability are included in each section and are an essential part of the process; therefore, it is important to start discussing and developing these from the beginning.

Step 6. The coalition completes the Needs and Resource Assessments (Assessment).

Step 7. Begin writing summary reports from each of the Assessments.

Step 8. Write a first draft of the Plan with Introduction, Getting Started, Capacity, Assessments, Sustainability and Cultural Competency sections. Develop and fill in the first four columns of the coalition's Logic Model. We encourage the coalition to establish a writing team and designate a lead writer. It is important that the writing and reviewing is not completed by only one person or in isolation from the coalition.

Step 9. The coalition reviews the first draft of Plan that includes Introduction, Getting Started, Capacity, Assessments, Sustainability, and Cultural Competency sections.

Step 10. Send first draft of the Plan to your Prevention System Manager for feedback and guidance.

Step 11. Revise the draft based on feedback from your coalition and Prevention System Manager.

Step 12. The coalition develops strategies, activities, and action steps for implementation (Planning and Implementation).

Step 13. Write the coalition's Plan for Action and Implementation sections of the Plan. Update the coalition's Logic Model to include new information from these sections. Develop and fill in the coalition's Action Plan.

Step 14. **The coalition reviews** the revised draft of the Strategic Plan which now includes Planning and Implementation sections.

Step 15. Send updated draft of the Plan to your Prevention System Manager for feedback and guidance.

Step 16. Revise the updated draft based on feedback from your coalition and Prevention System Manager.

Step 17. The coalition develops an evaluation plan.

Step 18. Write the Evaluation section, finish the Logic Model, finish the Action Plan and write the Executive Summary of the Strategic Plan.

Step 19. **The coalition reviews** revised draft of Strategic Plan which should now include all sections.

Step 20. Send updated draft of the Plan to your Prevention System Manager for feedback and guidance.

Step 21. Make final revisions based on feedback from your coalition and Prevention System Manager.

Step 22. **Coalition reviews** the final draft for final approval.

Step 23. **Submit final Plan to DBHR for review**. The Plan must be submitted electronically via email to your Prevention System Manager. The Plan should be accompanied by a cover letter signed by the coalition chair.

Step 24. Once approved, disseminate Plan to coalition, partners, and community.

Step 25. Celebrate!

Review Process

The coalition submits the final Strategic Plan to DBHR for review and approval. DBHR will review each section of the Plan for clear and complete responses to each of the required items in each section listed in this Strategic Plan Requirements chapter. Your Prevention System Manager will provide feedback and discuss revisions needed. Please note, in an effort to have complete and working plans, multiple revisions may be required. Once all revisions have been submitted, reviewed, and approved, the coalition will receive approval for the Strategic Plan.

Resources for Writing Strategic Plan

DBHR has created the following documents which contain the templates referenced throughout this chapter for your use:

- Strategic Plan Template (Microsoft Word) - includes formatted document outline with section headings, List of Coalition Members table, Community Survey Results, and Action Plan.
- Coalition Budget (Microsoft Excel) – includes instructions and budget template.
- Logic Model (Microsoft PowerPoint) – includes template and sample.
- Suggested Timeline to Prepare and Write Coalition Strategic Plan (Microsoft Excel) – includes template of timeline.

These templates as well as this Plan Guide can be found at **www.TheAthenaForum.org** (from the homepage click on "CPWI Guides").

Many other helpful resources can also be found at **www.TheAthenaForum.org**. We encourage you to review the information available in the CPWI Training section found under the "training tab" link from the top menu (www.TheAthenaForum.org/training/cpwi_trainings). We have developed resources to guide you through the steps and provide samples for coalition discussions and workgroups.

EXECUTIVE SUMMARY/INTRODUCTION

For the coalition's Strategic Plan the following is required:

Overview of Plan

The executive summary provides readers with a brief description of the community, the coalition, and the underlying rationale or model for the coalition's approach, as well as highlights of the most pertinent parts of the coalition's Plan.

It is recommended that an executive summary is composed once the full narrative of the Strategic Plan is complete in order to simplify the details of the summary.

Be sure to include the following:

- Introductory paragraph that describes the coalition.
- Mission.
- Geographic area to be served (definition of community).
- Brief explanation of priorities identified.
- Brief description of the strategies and activities.
- Plan to implement and evaluate the strategies and activities.

Provide a brief paragraph of what is included in this document.

ORGANIZATIONAL DEVELOPMENT *(GETTING STARTED)*

For the coalition's Strategic Plan the following is required:

Mission Statement and Key Values

- Provide the coalition's mission statement.
- Briefly describe the risk and protective factor research framework and any other research frameworks which support the coalition's goals.
- Briefly describe the CPWI Planning Framework (Strategic Prevention Framework), which supports the coalition's planning process.

Coalition Structure and Organization

- Explain the coalition's organizational structure and how it supports coalition members as they accomplish the work of the coalition, including workgroups, subcommittees, and fiscal agency relationships.
- Describe the coalition's decision-making processes including financial decisions.
- Describe the procedures in place to ensure effective communication and coordination among coalition members, workgroups, staff, and administration.
- Describe the procedures in place to ensure effective communication and coordination among partners, the media, policymakers, and others.
- Include an organizational chart illustrating the relationship between the coalition, workgroups, fiscal agent, and staff. In the organizational chart, identify the individuals associated with the coalition's leadership, workgroups, and subcommittees.

Membership Recruitment and Retention

- Explain the "rules" for membership, including who is considered a member, what constitutes membership, who gets to vote, and (if applicable) bylaws related to membership.
- Describe the coalition strategies for maintaining involvement and how the coalition will monitor membership participation and involvement in meetings, strategies, and activities.
- Describe the coalition's plan for ensuring participation of at least 8 of the 12 required community sectors identified in the Key Objectives, see page 12.
- Explain how the coalition includes the Prevention-Intervention Specialist (P/I) in the coalition.
- Explain how the coalition will ensure participation of grassroots/non-fiduciary/volunteer citizens (people who are not there in relation to their job) in the coalition.
- Explain how the coalition will recruit and provide orientation for new members, partners, agencies, and stakeholders to support the coalition's efforts.
- Include a list of Coalition Members in the appendix of the Plan using the template provided in ***Appendix 7*****:** page 58, of this Guide.

Cultural Competency in Organizational Development

- Describe the demographic diversity of the community the coalition serves.
- Describe the norms, values, beliefs, practices, socioeconomic characteristics, risk and resiliency factors, cultural considerations, unique or special needs of your community.
- Explain the coalition's understanding of what it means to be a culturally competent coalition.
- Explain how the coalition will ensure cultural competency in your efforts.
- Describe the strategies the coalition uses to recruit and retain membership that significantly involves groups of individuals representative of your community and how decisions are made about strategies and activities that include individuals representative of your community.

Sustainability in Organizational Development

- Describe the coalition's policies and procedures that support the coalition efforts for the long-term.

CAPACITY BUILDING

For the coalition's Strategic Plan the following is required:

Outreach

- Describe how the coalition shares goals with other substance use disorder prevention programs or established alcohol and drug related policies in the community. Include how the coalition supports and makes use of collaboration and linkages with these other efforts (Public Health, DFC grantees, Community Networks, Accountable Communities of Health (ACHs), etc.). Include information on agency/coalition involvement with the community's other local substance use disorder prevention coalition(s) if such an entity exists.
- Describe the coalition's plans for seeking input from and involving the community in coalition efforts and initiatives.
- Explain how the coalition will involve Key Leaders who are not coalition members in planning and implementation.

Training/Technical Assistance (TA)

- For each of the following, coalition staff, coalition members, and the community identify:
    - The training/TA completed to date related to the coalition's Plan.
    - Future training/TA planned.
    - How the coalition will determine the need for future trainings.
    - Plan for Community Coalition Coordinator to obtain CPP within required timeframe, if applicable.
    - Training plan for new hire Community Coalition Coordinator, if applicable.

Cultural Competency in Capacity Building

- Describe the strategies and tools that the coalition will use to ensure that the outreach-efforts to gain community-wide input into decision making are inclusive of all populations receiving services.
    - Include what is currently needed in your community to develop partnerships with under-served populations in order to inform decision making and how the coalition will address those needs,
    - Include how the coalition promotes Culturally and Linguistically Appropriate Services and health equity through policy, practices and allocated resources.
- Based on current level of cultural competence, describe the specific aspects/focus of Cultural Competency training or technical assistance that the coalition staff and members will participate in and/or conduct to ensure culturally and linguistically appropriate policies and practices on an ongoing basis.
- Identify what coalition organizational policies are in place or needed to recruit, promote and support a culturally and linguistically diverse coalition membership that is responsive to the population in the service area (community). See The National CLAS Standards for more information.

Sustainability in Capacity Building

- Explain how the coalition will involve the key leaders and community members in promoting and continuing coalition efforts.

ASSESSMENT

*Note: CPWI is a community and state partnership and therefore, the **coalition's Assessment** includes information from the state assessment and the local assessment. The DBHR's priority is underage drinking, based on multiple and ongoing state-level needs assessments and alignment with the State Inter-agency Prevention Strategic Plan. For CPWI, consequence data and socio-demographic factors that are empirically related to the state's priority of underage drinking were incorporated to develop the **long-term consequences**, **behavioral health problems**, and **intervening variables**. These indicators were identified based on data quality, availability of data, and input from stakeholders as to relevance and interpretability. From these, a composite score was calculated. All of the school districts in each county were ranked according to level of risk based on the composite score. Selection of each community/school district is based on the highest need areas. The coalition should determine their priorities (behavioral health problems, intervening variables, and contributing factors) based on local assessment in congruence with the state's priorities.*

For the coalition's Strategic Plan the following is required:

Needs Assessment

Process:

- Provide a summary of the *process* used for collecting, compiling, and reviewing data including:
    - Describe who (coalition/workgroup) was involved in this review process, how they were involved, and how they were trained to do the work.
    - Describe what data was used in your Assessment and how it was collected and compiled. (For example, the epidemiological data, local community data, community survey and/or other information.)

Summary of Key Data:

- Provide a summary of the *results* of the coalition's review of the data including:
    - Provide a brief summary of key data (prevalence, trends, and contributing factors) from the Data Book, Community Survey, and other local sources that led to the coalition's priorities. Include charts and graphs of most important data to highlight in this section of the Plan.
    - Describe what helped the coalition understand the data and how the data was interpreted. (For example: reason for a 'spike' in data, change in the way data is reported into a system, focus groups, key informant interviews, etc.)
- Include detailed related data and Community Survey Results in the Appendix section of the Plan. Note: It is not necessary to include all data provided in the Data Book, just the pieces of data that the coalition used to determine priorities.

Needs Assessment Conclusions:

- Briefly describe the overall process used to determine/identify the coalition's conclusions and priorities. (i.e., what does the coalition care about and why? How did you decide this?) For example: prevalence rate, trends, economic impact, social impact, health disparities based on demographics, etc.)
- Explain how the identified priority **long-term consequences** impact your local community. If additional consequences are added, provide the specific data and other information that supports your choice for this priority.
- Explain how the identified priority **behavioral health problems** impact your local community. If additional behavioral health problems are added, provide the specific data and other information that supports your choice for this priority.
- Identify the coalition's prioritized **intervening variables/risk and protective factors** for each category (box) and provide the specific data and other information that supports your choice. The coalition must select at least one variable from the options provided per box. The coalition may add intervening variables.

- Identify the coalition's prioritized **contributing factors** and provide data and other information that supports your choice for these priorities. Based on the intervening variables and community survey results, the coalition will determine the local conditions and contributing factors.

Note: Logic Model

The Needs Assessment section identifies the information to complete the first four columns of the coalition's Logic Model: **red – consequences**; **purple – behavioral health problems**; **blue – intervening variables**; **orange – contributing factors**. Update the Logic Model to include the Assessment information using the instructions and template provided in beginning on page 55, of this Guide and posted on The Athena Forum for download.

Resources Assessment

Process:

- Provide a summary of the *process* used for collecting, compiling, and reviewing community resources (programs, policies, strategies, or initiatives) focused on the coalition's priority behavioral health problems and intervening variables including:
    - Describe who (coalition/workgroup) was involved in this review process and how they were involved.
    - Describe what information was collected, how it was compiled, and the criteria used to review the available local resources. (For example, service location, age of participants, costs, etc.)

Summary of Key Information:

- Provide a summary of the *results* of the coalition's review of the resources information including:
    - What are the significant community partnerships in-place or that need to be developed to support the coalition's priorities and efforts?
    - An overview of resources identified in your community that impact your prioritized intervening variables and/or contributing factors. Include the detailed information collected in the Appendix section of the Plan.
    - An overview of the gaps identified that demonstrate areas to focus substance abuse efforts. (For example, not enough classes provided to meet outcome; lack of fidelity of programs being implemented to address a specific local condition; lack of services being provided for a local condition.)

Resources Assessment Conclusions:

- Describe the coalition's conclusions based on the key information and briefly how these conclusions connect to the strategies described in the next section. (For example, "*After reviewing information collected from our needs and resources assessment we determined that we have significant and effective resources available for children ages 5-12 to address youth that think they would be 'viewed as cool if they drink'; however there are limited programs for youth ages 13-15, so we have decided that we need an evidence-based school curriculum at SuperStar Middle School…")*

Cultural Competency in Assessment

- Describe how the coalition ensures that membership and decision makers include diverse and underserved populations in order to best inform policy and programmatic decisions for participant recruitment and retention.

Sustainability in Assessment

- Describe the coalition's process for involvement and collaboration that was initiated through the assessment process that resulted in opportunities to strengthen or build partnerships for the future.

PLAN

For the coalition's Strategic Plan the following is required:

Process for Planning

- Provide a summary of how the coalition completed the entire planning process (For example, who did what, when?)
- Explain the process (who/how) for determining the coalition's goals, objectives, and strategies including who (coalition/workgroup) was involved and in what ways they were involved.

Goals, Objectives and Strategies

- Provide a summary of the goals, objectives and strategies chosen related to the priorities identified in your Assessment.
  - Be sure to include the coalition meetings, sustainability, cultural competence, renewal of assessments, and review of evaluation information as part of the coalition's strategies and activities.
  - *Note: A goal is a statement that explains what the community wishes to accomplish or change about the intervening variable. It sets the direction for the intermediate-outcome (2-5 years) to be achieved.* Provide at least one objective for each goal. (For example, "Reduce family management problems.")
  - *Note: An objective should address the local condition and break down the goal into smaller parts that provide specific, measurable actions through which the goal will be accomplished. Objectives define what the coalition expects to achieve through the coalition's efforts. Objectives are meant to set direction for the short-term (6 months-2 years) outcomes with realistic targets.* (For example, "Improve family management skills in at least half of the middle school parents attending the classes.")
    Note: It might be helpful to use the Understanding Survey Selection document to help you write out your objective related to your goal to include in this section.

Action Plan

- Provide a summary of programs and activities planned.
- Describe the amount of service being provided in relationship to the intended impact and available resources. If adequate resources are not available, describe what the coalition will do to seek additional resources.
- Complete and include in the Appendix to the Plan, the Action Plan using the instructions and template provided in ***Appendix 9*: -** beginning on page 60, of this Guide.
- Once approved with the Strategic Plan, the Action Plan is very important and is used to reconcile the programs that the County/Contractor enters into the Minerva for Contract implementation and monitoring.

Cultural Competency in Plan

- Describe how the coalition ensures that membership and decision makers include diverse and under-served populations in order to best inform policy and programmatic decisions for participant recruitment and retention."
- Briefly describe how the coalition's Plan addresses behavioral health disparities and the following: Demographics – race, ethnicity, religion, gender, age, geography, and socioeconomic status; Language and literacy; Sexual identity – sexual orientation and gender identity; disability; and the needs of veterans and military families, if applicable.

Sustainability in Plan

- Describe how the coalition will use the Strategic Plan, specifically goals; objectives; and review of strategies, in ongoing discussions to guide the work and efforts of the coalition.

Note: Logic Model - The Planning section identifies the information that allows you to complete the fifth column of the coalition's Logic Model: green - Strategies & Local Implementation.

IMPLEMENTATION

For the coalition's Strategic Plan the following is required:

Structural Support for Implementation

- Describe the key structures needed to support implementation of this Plan's strategies, programs, and activities including, the coalition's role, what will help the coalition succeed, and what needs to be in place for that to happen. (For example, training, partnerships, communication, data systems, reporting systems.)
- Provide a summary of how the activities/programs operate and identify features critical to implementation.
- Describe the role of coalition staff, members, volunteers, and partnering agencies in implementing the coalition's plan as described in the previous section.
- Explain the coalition's process for recruiting and confirming the partnerships needed to carry out these strategies and activities/programs.
- Explain how the coalition will actively engage media in the coalition's efforts.

Budget

- Provide a brief narrative summary of the resources allocated including DBHR funding and any other funding or in-kind resources that will support the coalition's implementation plan as described in the previous sections (Planning and Implementation). We encourage the coalition to think about the coalition's Plan as a document that encompasses all of the coalition work; however, the coalition is only required to submit a Plan for CPWI. Indicate if this is an overall coalition budget with all funding sources noted or if it only includes DBHR funding.
- Attach the coalition's budget detail using the template provided in ***Appendix 10*****:** page 62, of this Guide. *Note: The budget detail should be submitted as a separate excel document with your Plan and does not need to be included in the required Appendix of the Plan.*

Cultural Competency in Implementation

- Explain how the coalition will ensure initiatives, activities, and programs will appropriately meet the cultural needs of the diverse residents of the community.

Sustainability in Implementation

- Describe what needs to be sustained and what human, material, and social resources are required to support those needs. This should include (but not limited to) funding, staffing, physical space, and use of office supplies that are available to the coalition and how the coalition plans to maximize resources available.

REPORTING AND EVALUATION

For the coalition's Strategic Plan the following is required:

Expected Outcomes (Baseline and Target Data)

- Describe the coalition's intended long-term outcomes(impacts/changes) expected for goals and objectives and how those outcomes relate to the coalition's Plan including the prioritized intervening variables, local conditions, and strategies. (For example, What will be different in your community in four years as a result of the coalition's efforts? Why does the coalition believe this will work?)
- Process and Outcome Measures – For each strategy/program/activity, provide the process and outcome measures that are being tracked to ensure that the coalition is having an impact and reaching the intended priority audience. *(See optional table below.)*

  Process Measure: Did the coalition implement as planned? Did you achieve what you set out to do and was it effective?

  Tools/ Instrument: Data collection sheets: How were the program strategies delivered? What were the efforts to impact/reach your goal? Who delivers the program? How often? To what extent was the program implemented as planned? How is the program received by the target group and program staff? What are barriers to program delivery?

  Outcome Measure: What was the result of the program on the participant?

  Tools/ Instruments: Surveys or interviews that assess the impact/reach on the goal.

- Tools/Instruments used to collect information - for the strategy/program/activity, provide the tools/instruments the coalition will use to collect information on the process and outcome measures?

Sample Table: Happy People Coalition

Measures	*Tool/Instrument*
Process Measures:	
Participation	Program data collection sheets: *# families enrolled*
Strategy Implementation	Minerva reported: *Number of groups offered;* School District numbers compared to participant registration: *% of families enrolled in program for school district:* Program data collection sheets- data entered into Minerva*: # participants completed per group*
Community/ Public Awareness	Minerva reported aggregate or population level: *# events where information disseminated; # media postings; and # newsletters sent to parents*
Outcome Measures:	
Community readiness to address ATOD issues	Coalition involvement evaluation scores: Percentage of coalition members that have improved CAT scores overtime.

(Adapted examples from iom.edu and https://captus.samhsa.gov/access-resources/using-process-evaluation-monitor-program-implementation)

Plan for Tracking and Reviewing Evaluation Information

Use of Evaluation information

- Describe how evaluation information will be shared and used by the coalition including the following:
  - What evaluation information will be shared within the coalition?
  - How often will the coalition be updated on strategies/activities progress toward outcomes, and what is the process that will be used to approve revisions if needed?
  - How will it be used by the coalition to update and improve the overall Plan?
  - Describe how evaluation information will be shared with the community and key leaders including the following:

Who	What	Why	How
Who will want to know about the coalition's evaluations results?	*What will they want to know about the coalition's evaluation?*	*What will the coalition want them to know about the evaluation results?*	*How will the coalition provide them with this information?*
For example: coalition, city council, and/or DBHR.	For example: updated data on long-term outcomes, process information on programs, etc.	For example: for funding, support, and/or membership.	For example: Coalition Assessment Tool Survey report to be discussed with coalition at November meeting.

Minerva

- Provide a summary of how the coalition will ensure proper reporting to DBHR including the method that will be used for collecting information and how often the coalition will collect it.
- Describe how the coalition is ensuring strong implementation so that the coalition will meet performance-based contracting requirements based on the program(s) chosen.

Local evaluation (optional)

- Include anything else that the coalition plans to do beyond what is required by DBHR for evaluation.

Cultural Competency in Reporting and Evaluation

It is expected that all tasks associated with CPWI are conducted in a culturally competent manner.

- Explain the considerations the coalition has made in preparing the evaluation plan, including survey content and methods for conducting surveys that reflect sensitivity to and linguistic needs of diverse community members in understanding and responding to surveys.

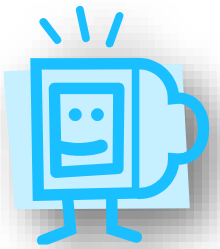
Sustainability in Reporting and Evaluation

It is expected that all tasks associated with CPWI include sustainability planning and implementation.

- Describe what relationships the coalition has developed that will ensure access to needed assessment and evaluation data (for example, HYS, pre/post-test, Coalition Assessment Tool, Community Survey, etc.).
- Explain what policies and procedures are in place to ensure ongoing evaluation efforts.

Note: Logic Model

The Reporting and Evaluation section identifies the information that allows you to complete the fifth column of the coalition's Logic Model: **gray - Evaluation Plan**. Update the Logic Model to include the Reporting and Evaluation information using the instructions and template provided in beginning on page 55, of this Guide - ***Appendix 6***.



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Appendix 19: Commonly Used Prevention Resources 74

Appendix 1: SAMPLE County Risk Profile

The picture below is for reference only. The County Risk Profiles are developed by DBHR and sent to counties to use when selecting CPWI community. Risk Profile Summaries can be found at www.TheAthenaForum.org. *(See page 5 for download instructions.)* www.dshs.wa.gov/sesa/research-and-data-analysis/community-risk-profiles

County Community Risk Profile (2017): Grays Harbor

		Risk Ranking		Risk Category Rank		Contextual Indicators	
School District	Population: Age 10-17	Risk Percentile	Risk Indicator with Data	Consumption (ATOD)	Consequence	Economic Deprivation	Troubled Family
Aberdeen	2,028	93	21	High	Very High	Very High	High
North Beach	517	92	20	High	Very High	Average	High
Hoquiam	1,068	77	21	Average	High	Very High	High
Elma	958	62	21	Average	Average	High	Average
Ocosta	425	50	21	Average	Average	High	High
Montesano	763	25	21	Low	Average	Average	Average
Cosmopolis	215	.	0			Average	Average
Mc Cleary	319	.	2			Average	Average
Oakville	218	.	4			High	High
Quinault	136	.	4			Average	Low
Satsop	67	.	0				
Taholah	142	.	4			Average	Very Low
Wishkah Valley	78	.				Average	

Sample

Appendix 2: SAMPLE Timeline for Writing a New Strategic Plan

The chart below is for reference and is not required to be submitted with the Plan. Each coalition should work directly with their DBHR Prevention System Manager to establish your timeline. A Microsoft Excel template - has been prepared for your use and can be found at www.TheAthenaForum.org/strategic_planning_templates.

Suggested Timeline to Prepare and Write Coalition Strategic Plan Cohort 5

Steps		Aug	Sep	Oct	Nov	Dec	Jan
Step 1	Develop a timeline for drafting, reviewing, and revising the coalition's Plan.						
Step 2	Review this Guide, chapter 4.						
Step 3	Get the coalition organized (Getting Started and Capacity Building).						
Step 4	Document key decisions about how the coalition is organized.						
Step 5	Building the coalition's Cultural Competency and Sustainability.						
Step 6	The coalition completes the Needs and Resource Assessments (Assessment).						
Step 7	Begin writing summary reports from each of the Assessments.						
Step 8	Write a first draft of the Plan.						
Step 9	The coalition reviews the first draft of Plan.						
Step 10	Send a draft of the Plan to your Prevention System Manager.						
Step 11	Revise Plan based on the feedback.						
Step 12	The coalition develops strategies, activities and timelines for implementation (Planning).						
Step 13	Write the coalition's Plan for Action and Implementation sections of the Plan.						
Step 14	The coalition reviews the revised draft of the Strategic Plan.						
Step 15	Send a draft of the Plan to your Prevention System Manager.						
Step 16	Revise Plan based on the feedback.						
Step 17	The coalition develops an evaluation plan.						
Step 18	Write the Evaluation section, and Executive Summary of the coalition's Strategic Plan.						
Step 19	The coalition reviews revised draft of Strategic Plan.						
Step 20	Send a draft of the Plan to your Prevention System Manager.						
Step 21	Make final revisions to the Plan based on feedback.						
Step 22	Get coalition approval of final Plan.						
Step 23	Submit Plan to DBHR for review. (By determined date)						
Step 24	Once approved, publicize Plan to coalition, partners, and community.						

SAMPLE Timeline Comprehensive Strategic Plan Update

Suggested Timeline to Complete Comprehensive Strategic Plan Update for June 15, 2019

Steps		July 2018	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
Step 1	Develop a timeline for drafting, reviewing, and revising the coalition's Strategic Plan.	■											
Step 2	Review this Guide, chapter 4.		■										
Step 3	Review Organizational Development of coalition (Getting Started and Capacity Building).		■	■	■								
Step 4	Review and document how the coalition is organized and functions and any updates or key changes decided upon.			■	■								
Step 5	Review the coalition's Cultural Competency and Sustainability in each section. Document updates.					■	■	■					
Step 6	The coalition completes the Needs and Resource Assessments (Assessment).								■	■	■		
Step 7	Begin writing summary reports from each of the Assessments.										■		
Step 8	Add updates and changes from Assessment to draft of the Updated Strategic Plan.										■	■	
Step 9	The coalition reviews the first complete draft of Updated Strategic Plan.											■	
Step 12	The coalition reviews strategies, activities and timelines for implementation. Review and discuss program effectiveness - process and outcome measures. (Planning).										■	■	
Step 13	Update the Plan and Implementation sections of the coalition's Strategic Plan. (Including Logic Model, Action Plan and Budget.)											■	
Step 17	Review coalition's evaluation plan and make necessary revisions.											■	■
Step 18	Update the Executive Summary.										■	■	■
Step 19	The coalition reviews draft of Updated Strategic Plan.											■	■
Step 20	Send a draft of the Updated Strategic Plan and all attachments to DBHR Prevention System Manager.											■	■
Step 21	Make final revisions to the Updated Strategic Plan based on feedback.											■	■
Step 22	Get coalition approval of final Updated Strategic Plan.											■	■
Step 23	Submit Updated Strategic Plan to DBHR by June 15 for review.												■
Step 24	Once approved, publicize Plan to coalition, partners, and community. Celebrate!												

Appendix 3: Strategic Plan Outline TEMPLATE

The information on the following page is for reference. A Microsoft Word template has been prepared for your use and can be found at www.TheAthenaForum.org/strategic_planning_templates. *(See page 5 for download instructions.)*

Executive Summary/Introduction

Organizational Development (Getting Started)

- *Mission Statement and Key Values*
- *Coalition Structure and Organization*
- *Membership Recruitment and Retention*
- *Cultural Competency in Organizational Development*
- *Sustainability in Organizational Development*

Capacity Building

- *Outreach*
- *Training/Technical Assistance (TA)*
- *Cultural Competency in Capacity Building*
- *Sustainability in Capacity Building*

Assessment

- *Needs Assessment*
  - *Process*
  - *Summary of Key Data*
  - *Needs Assessment Conclusions*
- *Resources Assessment*
  - *Process*
  - *Summary of Key Information*
  - *Resources Assessment Conclusions*
- *Cultural Competency in Assessment*
- *Sustainability in Assessment*

Plan

- *Process for Planning*
- *Goals, Objectives and Strategies*
- *Action Plan*
- *Cultural Competency in Plan*
- *Sustainability in Plan*

Implementation

- *Structural Support for Implementation*
- *Budget*
- *Cultural Competency in Implementation*
- *Sustainability in Implementation*

Reporting and Evaluation

- *Expected Outcomes (Baseline and Target Data)*
- *Plan for Tracking and Reviewing Evaluation Information*
  - *Use of Evaluation Information*
  - *Minerva*
  - *Local Evaluation*
- *Cultural Competency in Reporting and Evaluation*
- *Sustainability in Reporting and Evaluation*

Appendix to Coalition Strategic Plan

Appendix 1. Logic Model
Appendix 2. List of Coalition Members
Appendix 3. Needs Assessment
Appendix 4. Community Survey Results
Appendix 5. Resources Assessment
Appendix 6. Action Plan

***Attachment 1**: Budget*

Appendix 4: Cover Letter SAMPLE

[Coalition letterhead]

[Date]

[Name], Prevention System Manager
Address block

Dear [name]:

On behalf of all of the partner agencies and organizations of the [coalition name], I am pleased to submit the [name of plan] to the Division of Behavioral Health and Recovery. Our coalition is excited to move forward on our [strategies of….] to address substance abuse prevention in our community.

If you have any questions, please contact me at [phone], or by e-mail at [email] or our Community Coalition Coordinator, [name] at [phone], or by email at [email].

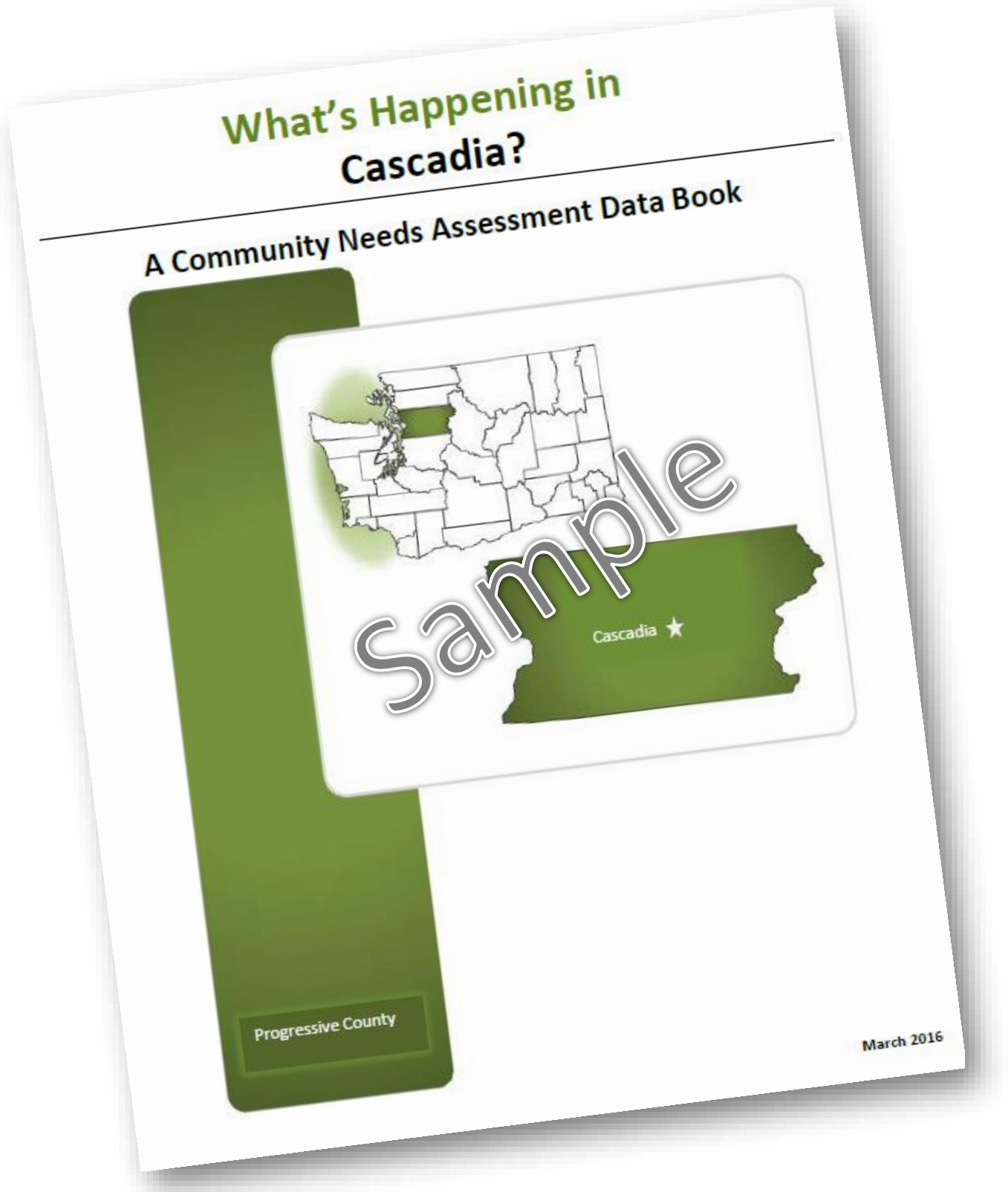
We appreciate your consideration.

Sincerely,

[Name]
Coalition Chair

Appendix 5: SAMPLE Data Book

The picture of the cover of a Data Book below is for reference only. The Community Data Books are developed by DBHR and sent directly to communities.



Appendix 6: Logic Model

Note: CPWI is a community and state partnership and therefore, the **coalition's Assessment** includes information from the state assessment and the local assessment. The CPWI Logic Model is based on the state priority of reducing underage drinking. The long-term consequences, behavioral health problems, and intervening variables were established through the state assessment and selection of each community is based on the highest need areas. The coalition should determine priorities based on local assessment in congruence with the state priorities.

Completing the Coalition's Logic Model:

Part 1. Assessment: *(Columns 1-4 are completed as part of the coalition's Assessment.)*

Column 1. **Long-Term Consequences:** The coalition must include the long-term consequences identified in the Logic Model. Based on the Assessment, the coalition will need to determine if any additional long-term consequences need to be added to the logic model. If needed, enter Long-Term Consequences into the boxes in the red column.

Column 2. **Behavioral Health Problems:** The coalition must include the Behavioral Health Problems identified in the Logic Model. Based on the Assessment, the coalition will need to determine if any additional behavioral health problems need to be added to the logic model. If needed, enter Behavioral Health Problems into the boxes in the purple column.

Column 3. **Intervening Variables:** The coalition must select at least one variable from the options provided. Based on the Assessment, the coalition will need to select the intervening variables that are most relevant locally from the options provided within each box. Enter intervening variables into the boxes in the blue column. The coalition may add intervening variables.

Column 4. **Local Conditions and Contributing Factors:** Based on the intervening variables and community survey results, the coalition will determine the local conditions and contributing factors. Enter local conditions and contributing factors into the boxes in the orange column connected to the appropriate intervening variables. You may add additional boxes if needed.

Part 2. Plan: *(Column 5 is completed as part of the coalition's Plan.)*

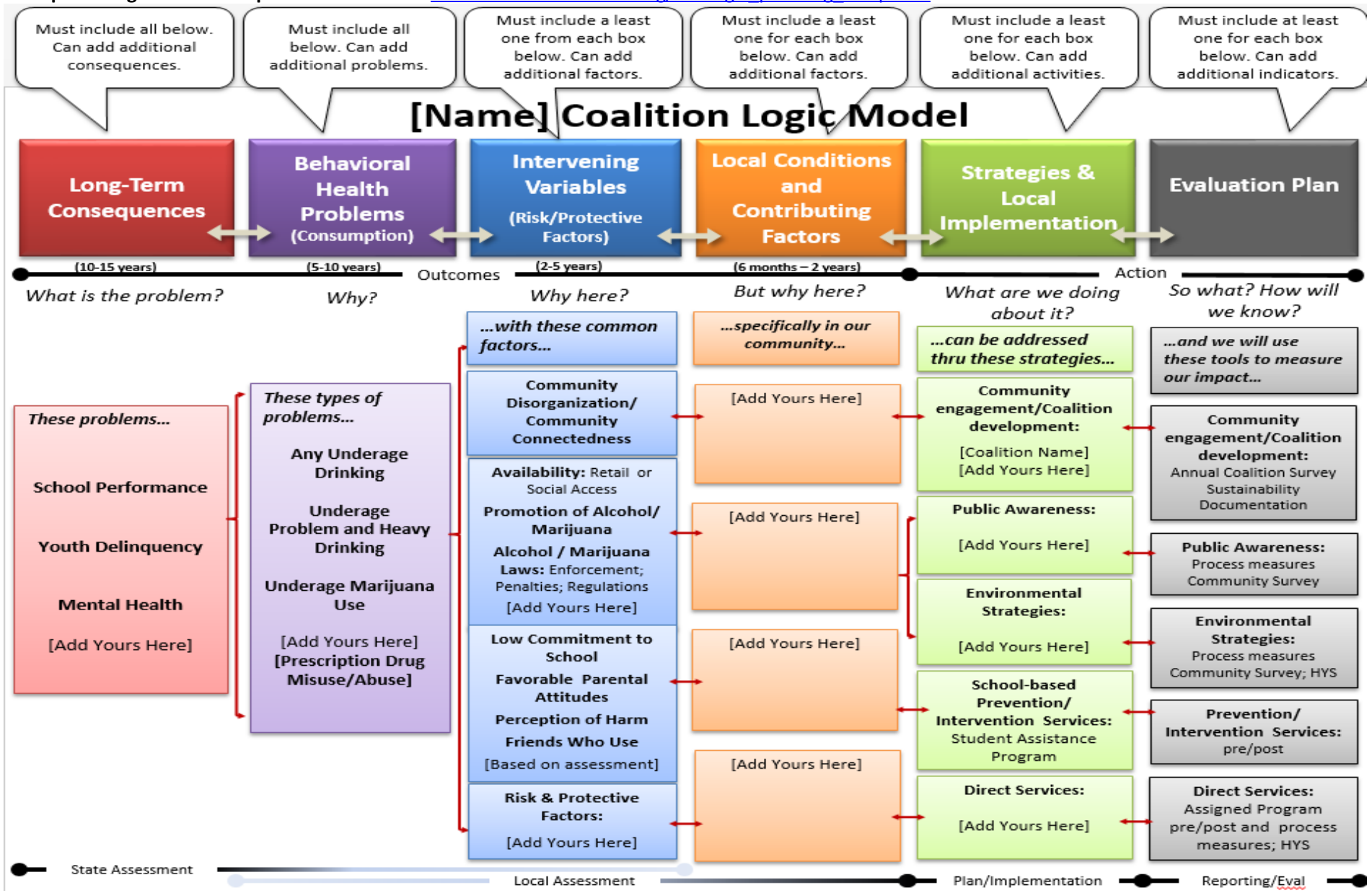
Column 5. **Strategies and Local Implementation Activities:** The coalition will develop strategies and local implementation activities/programs to address the local conditions. Enter strategies and local implementation activities into the boxes provided in the green column. The coalition should include a minimum of one activity for each strategy area (box) listed. You may add additional boxes if needed.

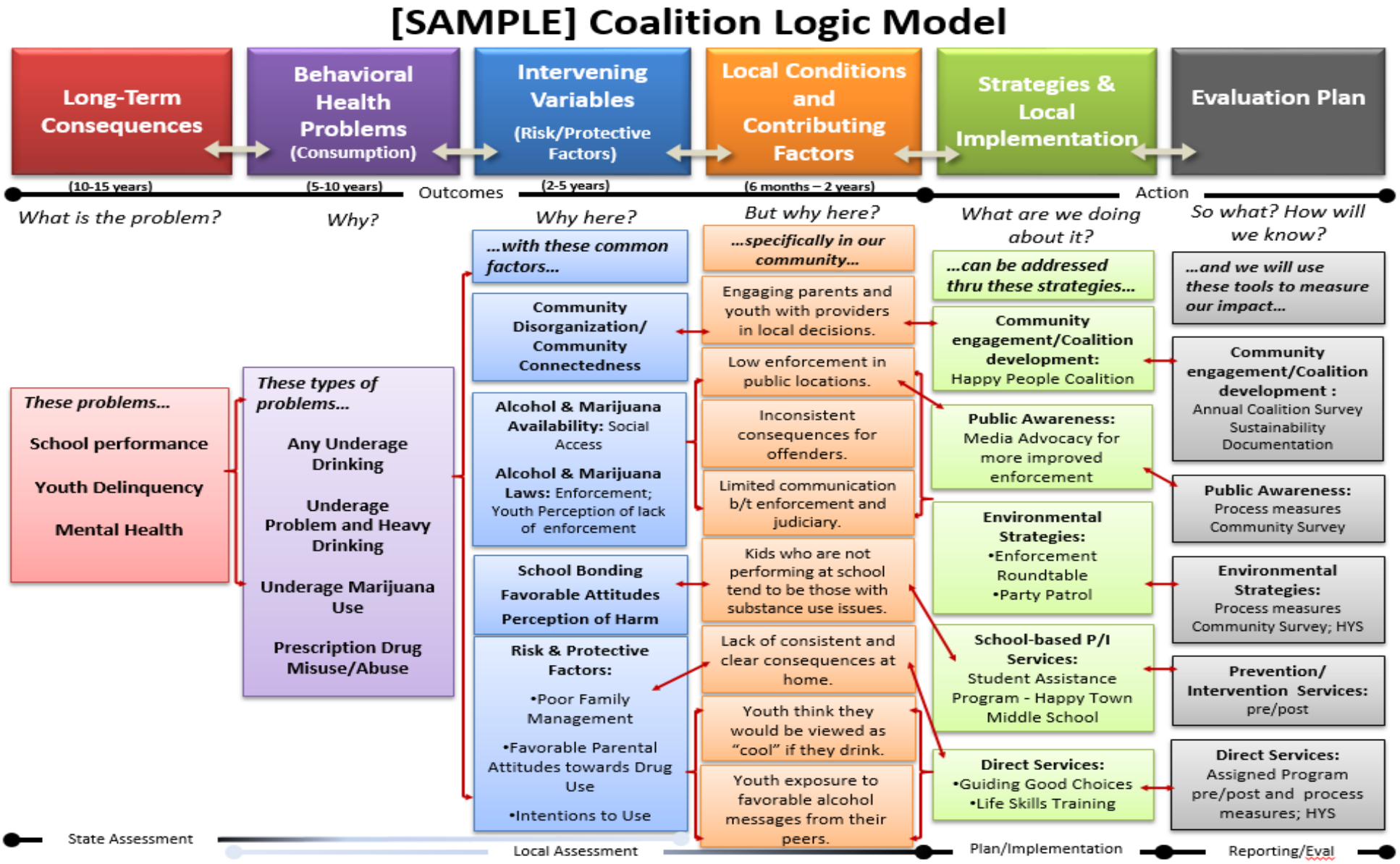
Part 3. Reporting and Evaluation: *(Column 6 is completed as part of the coalition's Reporting and Evaluation.)*

Column 6. **Reporting and Evaluation:** The coalition decides the Reporting and Evaluation methods and tools that will be used for tracking outcomes for each strategy. Enter the method and tools to be used into the boxes in the gray column connected to each strategy/activity.

The pictures on the following pages are for reference. A Microsoft PowerPoint template has been prepared for your use and can be found at www.TheAthenaForum.org/strategic_planning_templates. *(See page 5 for download instructions.)*

The required Logic Model Template is available at www.TheAthenaForum.org/strategic_planning_templates.




[SAMPLE] Coalition Logic Model
Long-Term Consequences
Behavioral Health Problems (Consumption)
Intervening Variables (Risk/Protective Factors)
Local Conditions and Contributing Factors
Strategies & Local Implementation
Evaluation Plan
(10-15 years)
(5-10 years)
Outcomes
(2-5 years)
(6 months – 2 years)
Action
What is the problem?
Why?
Why here?
But why here?
What are we doing about it?
So what? How will we know?
These problems...
School performance
Youth Delinquency
Mental Health
These types of problems...
Any Underage Drinking
Underage Problem and Heavy Drinking
Underage Marijuana Use
Prescription Drug Misuse/Abuse
...with these common factors...
Community Disorganization/ Community Connectedness
Alcohol & Marijuana Availability: Social Access
Alcohol & Marijuana Laws: Enforcement; Youth Perception of lack of enforcement
School Bonding
Favorable Attitudes
Perception of Harm
Risk & Protective Factors:
•Poor Family Management
•Favorable Parental Attitudes towards Drug Use
•Intentions to Use
...specifically in our community...
Engaging parents and youth with providers in local decisions.
Low enforcement in public locations.
Inconsistent consequences for offenders.
Limited communication b/t enforcement and judiciary.
Kids who are not performing at school tend to be those with substance use issues.
Lack of consistent and clear consequences at home.
Youth think they would be viewed as "cool" if they drink.
Youth exposure to favorable alcohol messages from their peers.
...can be addressed thru these strategies...
Community engagement/Coalition development: Happy People Coalition
Public Awareness: Media Advocacy for more improved enforcement
Environmental Strategies:
•Enforcement Roundtable
•Party Patrol
School-based P/I Services: Student Assistance Program - Happy Town Middle School
Direct Services:
•Guiding Good Choices
•Life Skills Training
...and we will use these tools to measure our impact...
Community engagement/Coalition development : Annual Coalition Survey Sustainability Documentation
Public Awareness: Process measures Community Survey
Environmental Strategies: Process measures Community Survey; HYS
Prevention/ Intervention Services: pre/post
Direct Services: Assigned Program pre/post and process measures; HYS
State Assessment
Local Assessment
Plan/Implementation
Reporting/Eval

Appendix 7: List of Coalition Members TEMPLATE

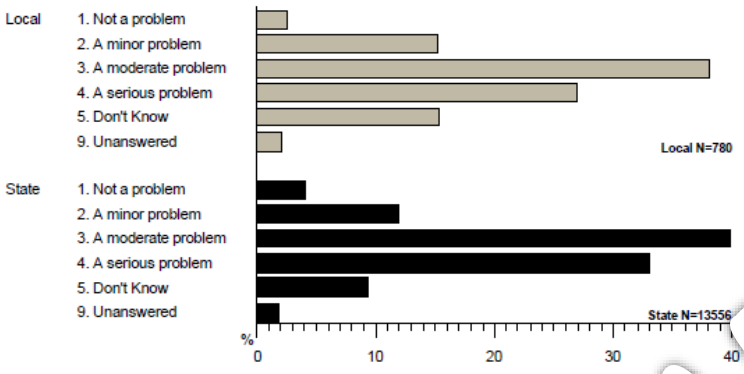
The information on this page is for reference. A Microsoft Word template has been prepared for your use and can be found at www.TheAthenaForum.org/strategic_planning_templates.

Sector	Agency/Organization	Coalition Representative Name

Appendix 8: Community Survey Results

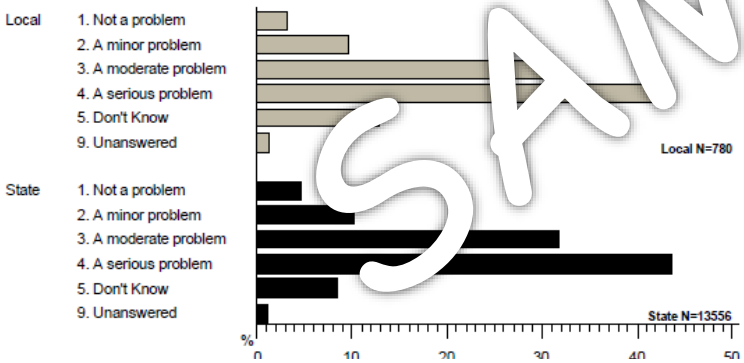
Include a copy of the Community Survey Results in the Attachments of the Plan using report provided by DBHR. The coalition will receive this report following the administration of the community survey.

01a. How much of a problem do you think each of the following is among youth (6 – 12th grade) in your community? Alcohol use



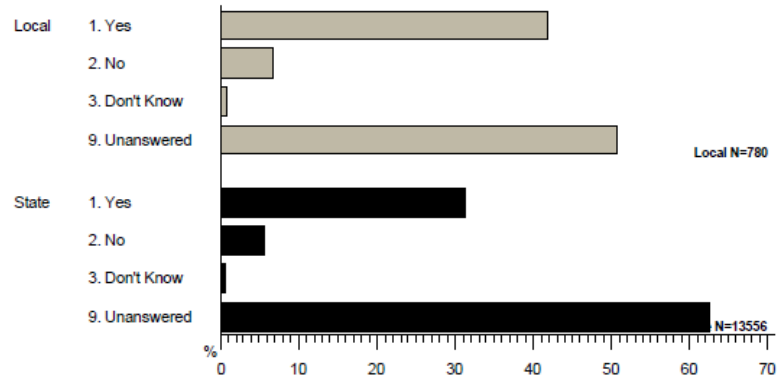
Answer	Local Count	Local %	State Count	State %
1. Not a problem	20	2.6	554	4.1
2. A minor problem	118	15.1	1621	12.0
3. A moderate proble	297	38.1	5387	39.7
4. A serious prob	210	26.9	4473	33.0
5. Don't Know	1	5.3	1273	9.4
9. Unanswered	16	2.1	248	1.8

01b. How much of a problem do you think each of the f wing a. ng y th (6 – 12th grade) in your community? Marijuana or hashish use (weed, hash, pot)



Answer	Local Count	Local %	State Count	State %
1. Not a problem	25	3.2	622	4.6
2. A minor problem	75	9.6	1397	10.3
3. A moderate problem	241	30.9	4309	31.8
4. A serious problem	328	42.1	5925	43.7
5. Don't Know	101	12.9	1158	8.5
9. Unanswered	10	1.3	145	1.1

22a. Have you talked to your child (6 - 12th grade) in the last 3 months about the risk or harms from underage alcohol use?



Answer	Local Count	Local %	State Count	State %
1. Yes	327	41.9	4228	31.2
2. No	52	6.7	771	5.7
3. Don't Know	6	0.8	74	0.5
9. Unanswered	395	50.6	8483	62.6

SAMPLE

Appendix 9: Action Plan

Completing the Coalition's Action Plan:

Include an Action Plan in the appendix of the Plan using the template provided on the Athenaforum.org in CPWI Guides. www.TheAthenaForum.org/strategic_planning_templates.

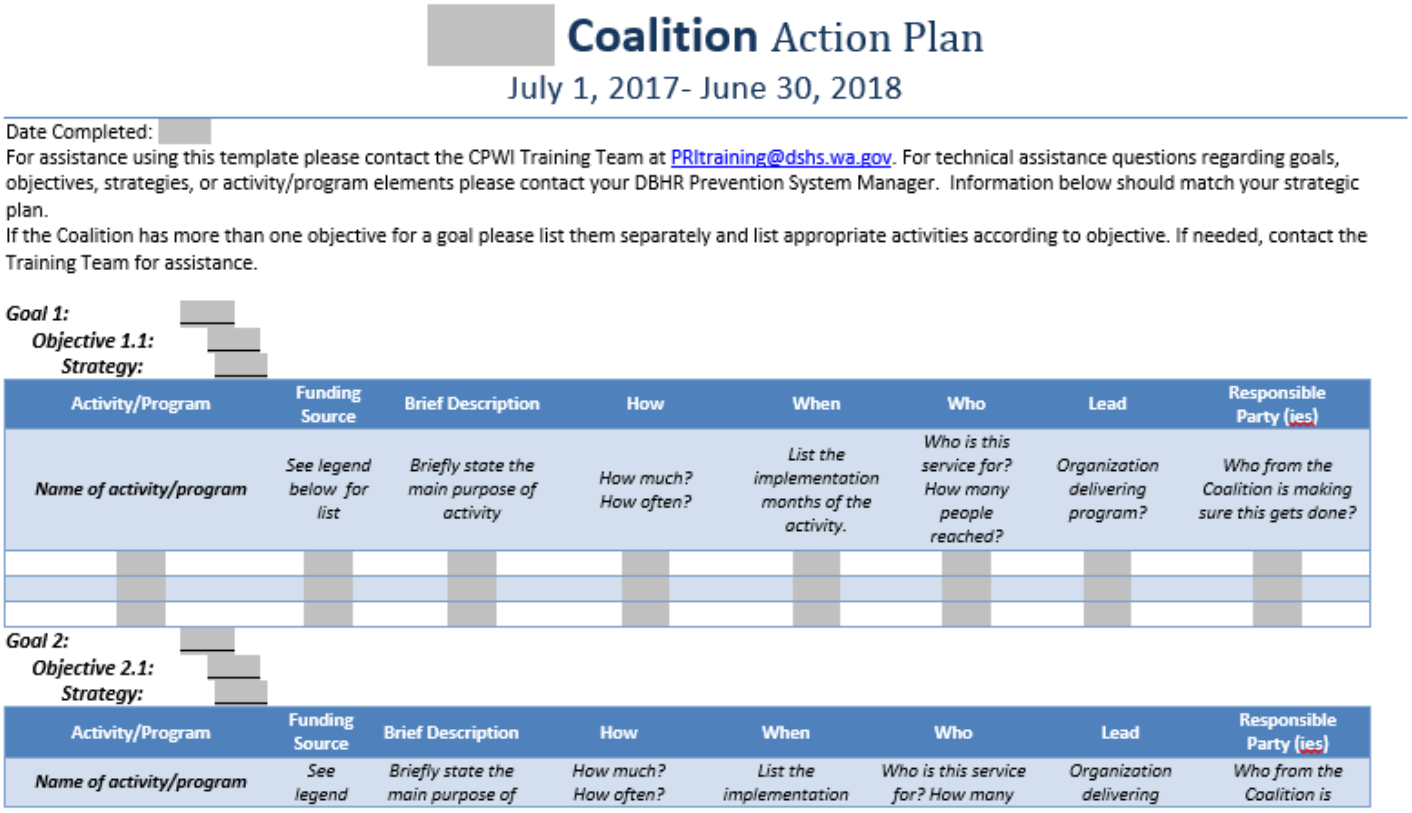
The Action Plan should provide details for each goal, objective and strategy on the following:

- Activity/Program – Name of activity/program.
- Funding Source – See legend for list
- Brief Description – Briefly state the main purpose of the activity.
- How – How many times will the program be provided this year?
- When – List the implementation months of the activity.
- Who – Who is this service for? How many people will be reached?
- Lead – List the Organization delivering program.
- Responsible Party(ies) – Who from the coalition is making sure this gets done?

Be sure to include, the coalition meetings, sustainability, cultural competence, renewal of assessments, and review of evaluation information as part of the coalition's strategies and activities.

Follow Evidence-based Practice requirement(s) in contract.

**Work with your Prevention System Manager if needed.* Below is a picture for reference.



Coalition Action Plan

July 1, 2017- June 30, 2018

Date Completed:

For assistance using this template please contact the CPWI Training Team at PRItraining@dshs.wa.gov. For technical assistance questions regarding goals, objectives, strategies, or activity/program elements please contact your DBHR Prevention System Manager. Information below should match your strategic plan.

If the Coalition has more than one objective for a goal please list them separately and list appropriate activities according to objective. If needed, contact the Training Team for assistance.

Goal 1:
Objective 1.1:
Strategy:

Activity/Program	Funding Source	Brief Description	How	When	Who	Lead	Responsible Party (ies)
Name of activity/program	*See legend below for list*	*Briefly state the main purpose of activity*	*How much? How often?*	*List the implementation months of the activity.*	*Who is this service for? How many people reached?*	*Organization delivering program?*	*Who from the Coalition is making sure this gets done?*

Goal 2:
Objective 2.1:
Strategy:

Activity/Program	Funding Source	Brief Description	How	When	Who	Lead	Responsible Party (ies)
Name of activity/program	*See legend*	*Briefly state the main purpose of*	*How much? How often?*	*List the implementation*	*Who is this service for? How many*	*Organization delivering*	*Who from the Coalition is*

Action Plan SAMPLE

Happy People Coalition Action Plan

July 1, 2017- June 30, 2018

Date Completed: 7/01/2017

For assistance using this template please contact the CPWI Training Team at PRItraining@dshs.wa.gov. For technical assistance questions regarding goals, objectives, strategies, or activity/program elements please contact your DBHR Prevention System Manager. Information below should match your strategic plan.

If the Coalition has more than one objective for a goal please list them separately and list appropriate activities according to objective. If needed, contact the Training Team for assistance.

Goal 1: *Reduce Family Management Problems*

Objective 1.1: *Improve family management skills in at least half of the middle school parents by June 30, 2018*

Strategy: *Education Strategy Type*

Activity/Program	Funding Source	Brief Description	How	When	Who	Lead	Responsible Party (ies)
Name of activity/program	*See legend below for list*	*Briefly state the main purpose of activity*	*How much? How often?*	*List the implementation months of the activity.*	*Who is this service for? How many people reached?*	*Organization delivering program?*	*Who from the Coalition is making sure this gets done?*
Strengthening Families Program	***PFS***	***SFP is intended to teach family management skill to reduce risk factors***	***3 groups total - 2 hour sessions, 1x per week for 7 weeks***	***September 10 – October 15 January 20 – March 15 April – June***	***30 total families (Minimum of 10 immagrant families)***	***Family Support Center***	***Jane Smith, Program Manager***
Parent Tools Program	***SABG***	***Distribution of interactive parenting tool kits at Doctors Office***	***Minimum of 3 kits per day for 6 months***	***September – March***	***540 Families in Happy Town***	***Better Health Clinic***	***Dr. Jones***

Appendix 10: Budget TEMPLATE

The budget detail should be submitted as a separate excel document with your Plan and does not need to be included in the required Appendix of the Plan. A Microsoft Excel template has been prepared for your use and can be found at www.TheAthenaForum.org/strategic_planning_templates.

[Type in name of Coalition here]
ONE YEAR BUDGET for July 1, 2017-June 30, 2018*
Date Budget Last Revised: [Date]

Line Item		CSAP Strategy	DBHR Funding Sources: General Fund State (Admin only) (Jul 1-Jun 30)	Substance Abuse Block Grant Prevention (SABG) (Jul 1 Jun 30)	Partnerships for Success (PFS) * If applicable (Jul 1 -Sept 29)	Partnerships for Success (PFS) * If applicable (Sept 30-Jun 30)	Dedicated Marijuana Account (DMA) EBP/RBP (85%) *If applicable (Jul 1-Jun 30)	Dedicated Marijuana Account (DMA) PP (up to 15%) *If applicable (Jul 1-Jun 30)	SUBTOTAL Possible DBHR Funding Sources	Optional Additional Funding Sources Our Coalition Accesses**: Drug Free Communities (DFC)	Local Funds	Match Funds	Additional Funding Sources Subtotals	OPTIONAL: What other activities identified in your strategic plan would your coalition choose to fund if the coalition had access to additional funding? This is identified by the TBD funding source in the Action Plan legend.
Community Coalition Coordinator: [name]									$ -				$ -	
Community Coalition Coordinator: [name]									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -
Benefits		5. Community-Based												
Community Coalition Coordinator: [name]									$ -				$ -	
Community Coalition Coordinator: [name]									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -
ordinator Travel/ Professional Development		7. "Other" Training												
Mileage									$ -				$ -	
Air									$ -				$ -	
Hotel									$ -				$ -	
Lodging									$ -				$ -	
Transportation									$ -				$ -	
Registration fees									$ -				$ -	
Per diem									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -
Programs/Strategies														
Community Coalition: Universal Indirect		5. Community Based												
Travel									$ -				$ -	
Professional Services [name]									$ -				$ -	
Program Supplies									$ -				$ -	
Program Printing									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -
Direct Service: [strategy name] [IOM Typ	Select from dropdown	1. Information Dissemination												
Salary [name]									$ -				$ -	
Benefits									$ -				$ -	
Travel									$ -				$ -	
Professional Services [name]									$ -				$ -	
Program Supplies									$ -				$ -	
Program Printing									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -
Media Awareness/ Campaign: [name of strategy/program] [IOM Type]		1. Information Dissemination												
Salary [name]									$ -				$ -	
Benefits									$ -				$ -	
Travel									$ -				$ -	
Professional Services [name]									$ -				$ -	
Strategy Supplies									$ -				$ -	
Strategy Printing									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -
Environmental Strategy: [name of strategy/program] [IOM Type]		6. Environmental												
Salary [name]									$ -				$ -	
Benefits									$ -				$ -	
Travel									$ -				$ -	
Professional Services [name]									$ -				$ -	
Strategy Supplies									$ -				$ -	
Strategy Printing									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -
Environmental Strategy: [name of strategy/program] [IOM Type]		6. Environmental												
Salary [name]									$ -				$ -	
Benefits									$ -				$ -	
Travel									$ -				$ -	
Professional Services [name]									$ -				$ -	
Strategy Supplies									$ -				$ -	
Strategy Printing									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -
oalition/Community Training														
Coalition / Community Training:		7. "Other" Training												
Professional Services									$ -				$ -	
Registration Fees									$ -				$ -	
Supplies (if applicable)									$ -				$ -	
Printing (if applicable)									$ -				$ -	
Travel Costs									$ -				$ -	
Subtotal			$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -

CATEGORY	General Fund State (Admin only)	Block Grant Prevention (SABG)	Partnerships for Success (PFS) (July 1-Sept 29)	Partnerships for Success (PFS) (Sept 30-Jun 30)	Dedicated Marijuana Account (DMA) EBP/RBP	Dedicated Marijuana Account (DMA) Promising	SUBTOTALS	Drug Free Communities (DFC)	Local Funds	MATCH Funds	SUBTOTALS	Future Planning
Administration	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Salary and Benefits		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Coordinator Training/Travel		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Strategies and Programs		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Coalition/Community Training		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TOTALS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

Appendix 11: Plan-on-a-Page TEMPLATE

This is an optional template for your use in working with the coalition. It is intended to be a one-page summary of the various decisions the coalition has made for the Plan. It can be a helpful to use as a communication piece for the coalition and the broader community. The coalition may choose to use this as the Executive Summary. The information on the following page is for reference. A Microsoft Word template has been prepared for your use and can be found at www.TheAthenaForum.org/strategic_planning_templates.

[Coalition Name & LOGO]

Summary Plan

Approved at Coalition Meeting on [DATE].

What	**Mission:**	*What is the coalition mission or vision statement?*
	Theory of Change:	*What research framework is the coalition using and how does that framework support the coalition's expected change in the community?*
	Strategies:	*What strategies will the coalition use? (E.g., environmental, direct services, community organizing, etc.)*
	Operating Principles:	*What are key principles on which the coalition bases their decisions?*
How	**Programs/ Projects/ Activities:**	*What programs, projects and/or activities is the coalition doing?*
	Structure:	*What is the organizational structure of the coalition? (E.g., Full Coalition, Leadership committee, ad-hoc committees, youth councils, etc.)*
	Operational Functioning:	*What are key operating functions? (i.e., How are decisions made? What are rules for membership, etc.?)*
Resources	**Funding:**	*What major sources of funds does the coalition use?*
	Support:	*What non-monetary resources does the coalition have? (i.e., volunteers, staff, training, partnerships, etc.)*

Plan-on-a-Page SAMPLE

This is a sample for your reference.

Happy People Coalition

Summary Plan

Approved at Coalition Meeting on March 15, 2017.

What	**Mission:**	The Coalition is working to prevent youth violence and substance abuse by working in and with communities to strengthen families and increase positive development.
	Theory of Change:	Use Risk and Protective Factor research framework to change community and family outcomes, which will contribute to the reduction and prevention of youth violence and youth substance abuse. Prioritized following risk factors: • Community Disorganization and Community connectedness. • Social Access to Alcohol. • Alcohol law enforcement and youth perception. • School bonding, Social skills, and Friends who use. • Poor Family Management. • Favorable attitudes towards drug use and intentions to use. And the protective factors of Bonding and Healthy Beliefs and Clear Standards.
	Strategies:	Community engagement/coalition development, Media Advocacy, and Service Collaboration; and Parent and Youth Education.
	Operating Principles:	We believe in community involvement and inclusion in strategic planning and implementation. Our coalition includes a wide variety of community members and youth, local non-profit organizations, school representatives, law enforcement, service agencies, parents and faith-based and business leaders.
How	**Programs/ Projects/ Activities:**	• Coalition Meetings *(Monthly meetings of full Coalition and Leadership Committee; ad-hoc meetings as needed)* • Media advocacy for improved enforcement, Law Enforcement Roundtable and Party Patrol. • Student Assistance Program *(Prevention-Intervention Specialist in middle school).* • *Guiding Good Choices Parenting Program.* • *LifeSkills Training student program.*
	Structure:	Local Community Coalition with Executive Leadership Committee and ad-hoc Planning Workgroups and Youth Council.
	Operational Functioning:	Membership: voting members are to attend ¾ of the meetings annually. All partners and supporters are encouraged to participate as available. Meetings are open to the public. Meeting Protocol: Coalition uses Roberts Rules as general guidelines for facilitation of meetings and works to build consensus whenever possible. Coalition votes on key decisions regarding policy, fiscal and strategy decisions. Must have quorum to validate vote.
Resources	**Funding:**	Public and private sources.
	Support:	Coalition volunteers. Staffing support *(.5 FTE Coalition Coordinator and 1.0 FTE P-I Specialist)* County/ESD/DBHR technical assistance.

Appendix 12: New/Media Release TEMPLATE

The purpose of this news release template is to announce the funding your community is receiving to prevent youth substance use, and to encourage community members and leaders to get involved in your coalition's plans and strategies.

- Localize this template by adding a few sentences about your local data, planned strategies, prevention successes, and a quote. The DBHR director's quote must be used as is.
- Keep your final news release to one page, or as concise as possible.
- Email your news release to newspapers and TV and radio news reporters. You are more likely to get coverage if you follow up with a phone call to offer additional information.
- Please email a copy of your localized news release, and links to any news coverage, to your DBHR Prevention System Manager and to SchneDA@dshs.wa.gov.

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Section A ***Your organization's logo***

Date:

Contact: ***name, phone number, email***

(Community name) joins statewide initiative to prevent underage use of alcohol and other drugs

(Your City) - The community of ***(name)*** has received a state grant of ***(amount)*** to reduce youth alcohol, marijuana and other drug use, and work with community members to support youth in making healthy choices. The grant, awarded by the Washington Department of Social and Health Services (DSHS) includes funding for training, technical assistance, and community and school-based prevention services.

(Community name) is one of ***(Insert UPDATED Number)*** communities statewide participating in the DSHS Community Prevention and Wellness Initiative (CPWI). The Initiative supports new or existing coalitions in partnering with parents, youth, educators, health professionals, law enforcement, faith leaders and local government. Coalitions identify their highest prevention needs, plan and implement evidence-based strategies, leverage local resources and evaluate the impact of selected programs.

"By leveraging enough resources in high-need communities, we should see greater reductions in substance abuse and the harm it causes," said Chris Imhoff, director of the DSHS Division of Behavioral Health and Recovery. "Community leaders are prepared to use these resources to help young people make healthy choices and succeed," added Imhoff.

CPWI's primary goals are to reduce underage use of alcohol and marijuana, improve academic performance, and reduce juvenile crime. An evaluation by Washington State University shows that 95% of CPWI programs implemented between July 2015 and June 2016 resulted in delaying the first use of alcohol or other drugs, reducing use and reducing risk factors. In addition, the Washington State Healthy Youth Survey shows that underage drinking in among 10th graders in (your county) has decreased from ___% in 2006 to ___% in 2016.

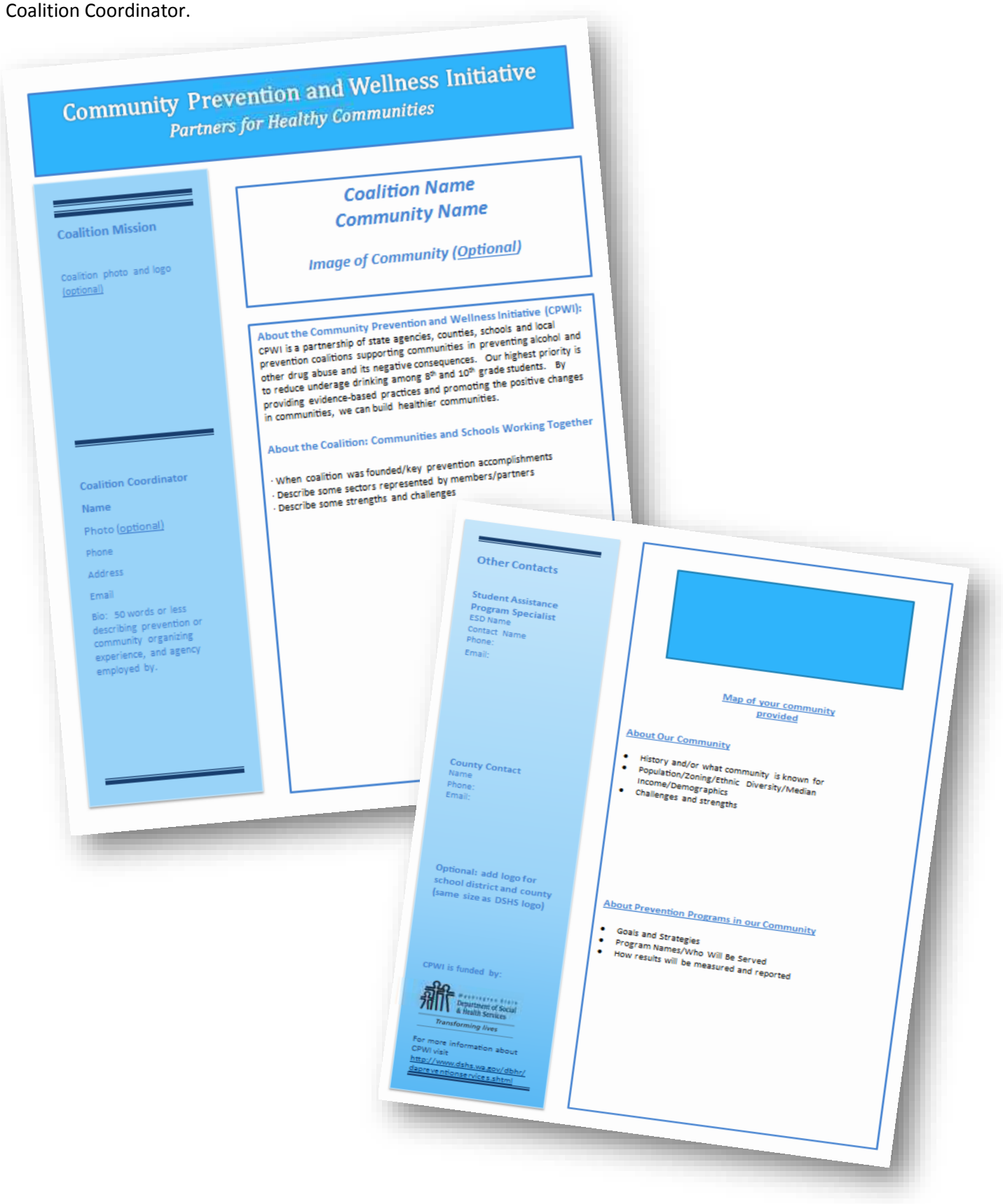
"A number of factors were considered in selecting ***(name of community)*** for services", said ***(county or school spokesperson)***. "These included ***(list key risk factors)*** as well as successes in ***(provide examples)***.

State and county Healthy Youth Survey data is available at www.AskHYS.net. Prevention tips for parents can be found at www.StartTalkingNow.org.

For information about joining the ***(coalition name)*** coalition, contact ***(name)***.

Appendix 13: Community Profile Brochure TEMPLATE

The pictures below are for reference. A unique Microsoft Word template has been prepared for you and sent to Coalition Coordinator.



Appendix 14: Community Coalition Coordinator Hours Categories

Below is a list of coalition coordination categories that must be entered monthly into the Minerva System to track the Coordinator's hours spent in the CPWI community. For more information on reporting Community Coalition Coordinator Hours please review the Minerva User Manual 2.0 at www.TheAthenaForum.org/Minerva.

Enter estimated Coalition Coordinator hours monthly in the following categories:	
Membership recruitment and retention hours/minutes	Maintaining sector representation and recruitment of new members. Ensuring coalition membership is engaged and active. Includes time spent recruiting new members, providing orientation for new individual members, making new contacts, efforts retaining membership, and developing coalition materials- such as coalition brochures, new releases, and new articles.
Coalition communication/ meeting preparation hours/minutes	Effective communication with coalition/tribe to ensure they are supported to accomplish their work. Includes time spent organizing monthly calendar, preparing for coalition/workgroup meetings and workgroup needs, sharing information about opportunities and initiatives, and planning communication to and from coalition/tribe leadership.
Coalition development and training hours/minutes	Capacity building to ensure the coalition has a clear understanding of CPWI goals, Strategic Prevention Framework planning model and coalition structure. Includes time spent planning and organizing Community Coalition Orientation (CCO), relaying pertinent information to build coalitions? Knowledge about prevention issues and frameworks, preparing all other training for the coalition, preparing and coordinating membership participation in state-wide or national training opportunities. (NOTE: Actual time conducting training coalition members as a group recorded in recurring services under the coalition program.)
Community Outreach hours/minutes	Increasing community awareness of coalition's/tribal prevention program efforts, initiatives, and building community support. Includes time spent making contracts and communicating with partner to coordinate media/public awareness campaigns or projects, preparing and participating in coalition presentations, participating in community meetings to support planning and implementation of common efforts, and working with media (newspaper articles, social media, newsletters, billboards, preparing media interviews with coalition members, etc.).
Key leader engagement/ relationship building hours/minutes	Increasing key leader (i.e. tribal leaders, elders, elected officials) and policy makers' awareness of tribe/coalition's strategic prevention plan. Nurture community partnerships. Includes time spent organizing and implementing Key Leader Orientation (KLO) events, tribal leader events, meetings with key decision or policy makers in the community to build and strengthen relationships that will result in future partnerships or common visions for services. Includes any effort to build community awareness of coalition or coalition's direction with Key Leaders (i.e., emails, phone calls, meetings, interactions).

Community Coalition Coordinator Hours Categories *Continued*

Enter estimated Coalition Coordinator hours monthly in the following categories:	
Coordinator / Tribe Staff professional development hours/minutes	Increasing knowledge and skills of coordinator/tribe prevention staff to support coalition and/or prevention efforts. Includes time spent viewing webinars, reading resources related to prevention research and new information, strategic prevention framework, attending prevention and wellness training, learning about hot topics and topics of interest that the coalition has requested more information about, training related to coalition development and community organization and participating in and attending required DBHR meetings for Community Coalition Coordination.
Strategic planning hours/minutes	The process, findings decisions and plan for the future for each step of the planning framework. Includes time spent supporting coalition/tribal prevention program structure development, ensuring cultural competency, advancing sustainability, assessing needs, and overseeing coalition's/tribal community priority needs selection, resources assessment, gap analysis, strategy selection, action plan development, evaluation planning, and involvement in developing and writing plan.
Technical assistance to coalition strategy implementation hours/minutes	Providing technical assistance to support coalition members to carry out action plans. Includes time spent supporting coalition efforts and related initiatives as needed to assist the coalition in successful implementation. Includes technical assistance to youth coalitions, coalitions and workgroups and subcommittees.
Reporting and evaluation hours/minutes	Ensuring all data related to the coalitions/tribal prevention strategies activities are reported analyzed and evaluated. Includes time spent collecting pre/post-tests, community surveys, coalition assessments (annually), providing Technical Assistance for evaluation, gathering community input, preparing evaluation tools for coalitions/tribal workgroups, meeting with community partners to facilitate outreach for community participation in evaluation, collecting local data from partners, reviewing outcomes, support coalition's evaluation workgroup, preparing reports for coalitions feedback, entering service date and evaluation on behalf the coalition/tribe into the online reporting system.
Organization support hours/minutes	Ensuring proper functioning and accountability to internal structures/fiscal agent. May include time spent participating in budget/fiscal meetings and communication, attending internal staff meetings, sub-contracting related to coalition's/tribal prevention plan and processing billing paperwork.
Other please specify:	Coordinator/tribal prevention staff time that does not include coordination services. Example include: Sick leave, annual/vacation leave, maternity/paternity leave, bereavement, jury duty, and holiday.

Appendix 15: Understanding Community Survey Selection

The table below has been created using the WA DSHS system logic for measuring change in objectives to address risk and protective factors. It has been developed to assist users in the MINERVA system to select the appropriate survey question banks based on the risk and protective factors identified for program selection and implementation. www.TheAthenaForum.org/Minerva

UNDERSTANDING SURVEY SELECTION IN MINERVA- Revised February 2017

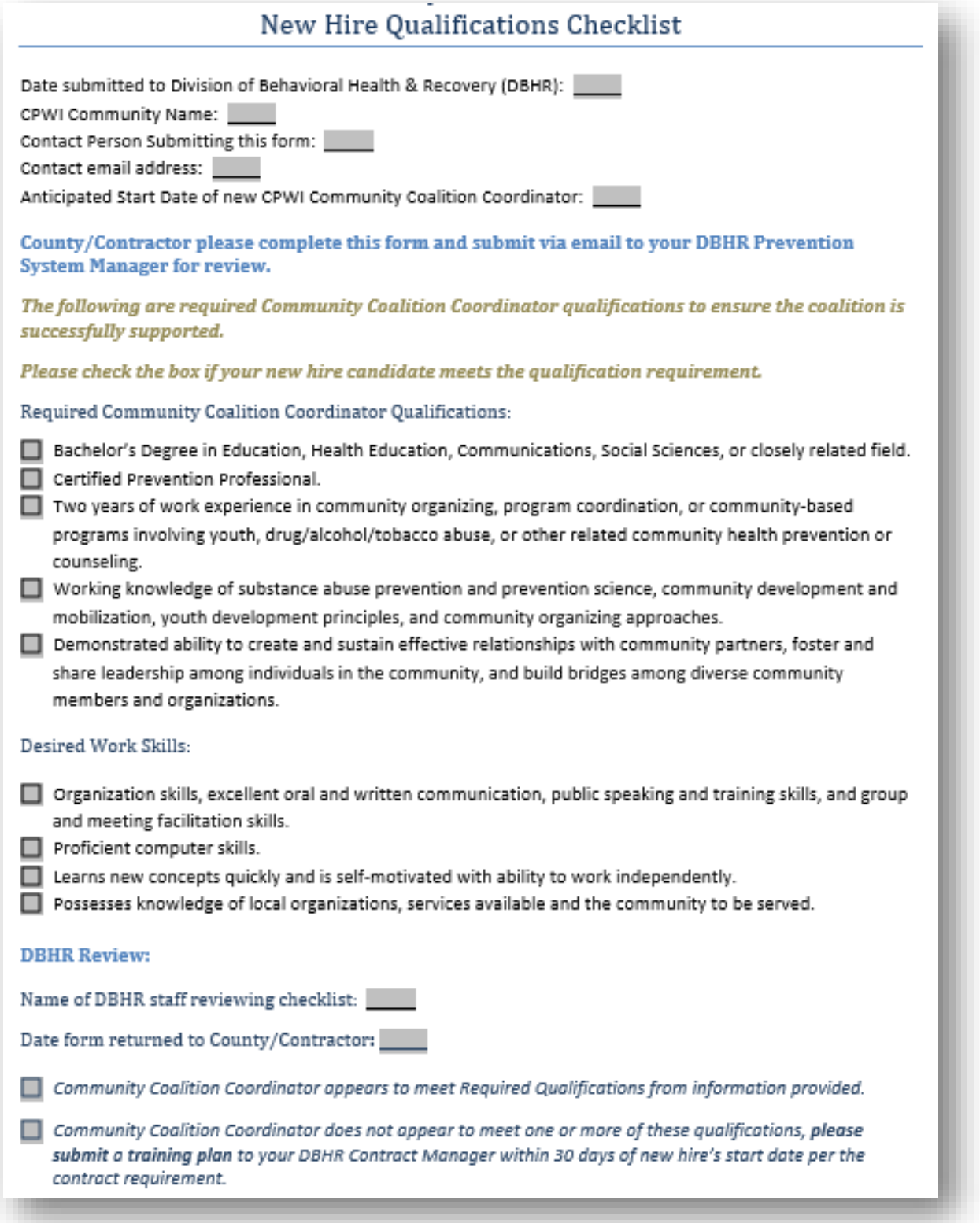
(Revisions made in highlights/shading to Family Bonding table on page 1)

The table below has been created using the WA DSHS system logic for measuring change in risk and protective factors. It has been developed to assist users in the MINERVA system to select the appropriate survey question banks based on the risk and protective factors identified for program selection and implementation. With many objectives, there are multiple survey instrument options. Some options involve pre v post tests, Spanish versions, or other options. Multiple surveys may be selected if a program or strategy is attempting to change more than one objective. If you are unsure of which survey option is most appropriate, you may contact your project officer.

RISK/PROTECTIVE FACTOR	MEASURABLE OBJECTIVE	SURVEY OPTIONS
If you selected a program or strategy to address this R/P factor....	*And you selected this objective to be your measure of change...*	*Then these are your survey options in MINERVA:*
(P)Community: Bonding (opportunity, skills, and recognition)	Acquisition of culturally defined values using a cultural and social context	No survey available in Minerva
	Opportunities, skills and recognition for prosocial involvement in the community	Survey Community Connections
		VOICE [Org129_1]
		Youth Participation - Opportunities for Prosocial Involvement [C006]
(P)Community: Healthy Beliefs and Clear Standards	Opportunities, skills and recognition to promote bonding to community role models who exhibit healthy beliefs and clear standards	AM Bonding/Attachment [Y1]
	Understanding of influence of community norms on children's lives	No survey available in MINERVA
	Understanding of the importance of the Tribe's culture, traditions, and heritage	Participant Survey Snoqualmie Canoe Family
(P)Engagement and connections in one or more of the following contexts: school, peers, family, employment or culture	Opportunities for increasing sense of connectedness to community, self-esteem and sense of wellbeing	Self-Esteem [IP008]
		VOICE [Org129_1]
(P)Family: Bonding (opportunity, skills, and recognition)	Knowledge of nurturing parenting techniques	Learning Coalition Parent Skills Index (revised) [Org131007_2]
	Opportunities, skills and recognition to contribute to family bonding	AM Bonding/Attachment [Y1]
		Mentee Quality of Match
		Mentee Teacher Survey
		Mentor Support Tracking
		Positive Family Management [APMF03]
		Sembrando Salud 10-12 [Org127_2]
	Opportunities, skills and recognition to contribute to positive family involvement	Strengthening Families For Parents of Youth 10-14 (Parent) [SFWSU_AX]
		Strengthening Families WSU (Parent Post) (Spanish) [SFWSU_A2s]
		Strengthening Families WSU (Parent Pre) (Spanish) [SFWSU_A1s]

Appendix 16: CPWI Coalition Coordinator New Hire Qualifications Checklist

Form available at www.TheAthenaForum.org/cpwi_coalition_coordinator_new_hire_qualifications_checklist.



New Hire Qualifications Checklist

Date submitted to Division of Behavioral Health & Recovery (DBHR): _____
CPWI Community Name: _____
Contact Person Submitting this form: _____
Contact email address: _____
Anticipated Start Date of new CPWI Community Coalition Coordinator: _____

County/Contractor please complete this form and submit via email to your DBHR Prevention System Manager for review.

The following are required Community Coalition Coordinator qualifications to ensure the coalition is successfully supported.

Please check the box if your new hire candidate meets the qualification requirement.

Required Community Coalition Coordinator Qualifications:

- ☐ Bachelor's Degree in Education, Health Education, Communications, Social Sciences, or closely related field.
- ☐ Certified Prevention Professional.
- ☐ Two years of work experience in community organizing, program coordination, or community-based programs involving youth, drug/alcohol/tobacco abuse, or other related community health prevention or counseling.
- ☐ Working knowledge of substance abuse prevention and prevention science, community development and mobilization, youth development principles, and community organizing approaches.
- ☐ Demonstrated ability to create and sustain effective relationships with community partners, foster and share leadership among individuals in the community, and build bridges among diverse community members and organizations.

Desired Work Skills:

- ☐ Organization skills, excellent oral and written communication, public speaking and training skills, and group and meeting facilitation skills.
- ☐ Proficient computer skills.
- ☐ Learns new concepts quickly and is self-motivated with ability to work independently.
- ☐ Possesses knowledge of local organizations, services available and the community to be served.

DBHR Review:

Name of DBHR staff reviewing checklist: _____

Date form returned to County/Contractor: _____

- ☐ *Community Coalition Coordinator appears to meet Required Qualifications from information provided.*
- ☐ *Community Coalition Coordinator does not appear to meet one or more of these qualifications, **please submit a training plan** to your DBHR Contract Manager within 30 days of new hire's start date per the contract requirement.*

Appendix 17: Community Survey Requirements for CPWI Communities

The following table provides the required minimum community surveys to be collected annually by CPWI Community Coalition. (Revised September 2017)

Number of Minimum Required Surveys	Population Group	County	CPWI Community	Population
100	Up to 3,999	Whitman	Tekoa	951
		Stevens	Wellpinit	1,114
		Douglas	Waterville	1,710
		Pend Oreille	Cusick	2,025
		Garfield	Pomeroy	2,126
		Pacific	South Bend	2,529
		Clallam	Crescent / Joyce	2,694
		Lewis	Morton	2,802
		Wahkiakum	Wahkiakum / Cathlamet	3,182
		Clallam	Cape Flattery	3,201
		Stevens	Mary Walker / Springdale	3,273
		Snohomish	Darrington	3,286
		Ferry	Republic	3,370
		Klickitat	Klickitat / Lyle	3,530
		Columbia	Dayton	3,783
140	4,000-10,999	Lincoln	Reardan	4,355
		Yakima	White Swan	4,433
		Skagit	Concrete	5,022
		Thurston	Rainer	5,355
		Skamania	Stevenson	6,448
		Clallam	Forks	6,837
		San Juan	San Juan	7,915
		Kittitas	Cle Elum / Roslyn	8,300
		Grant	Wahluke	8,834
		Thurston	Tenino	10,052
		Cowlitz	Castle Rock	10,191
		Pacific	Long Beach	10,307
		Okanogan	Omak	10,552
		Grays Harbor	Hoquiam	10,627

Community Survey Requirements for CPWI Communities *Continued*

Number of Minimum Required Surveys	Population Group	County	CPWI Community	Population
180	11,000-29,999	King	Vashon Island	11,024
		Jefferson	Chimacum	11,720
		Benton	Prosser	13,441
		Yakima	Wapato	13,954
		Whatcom	Mount Baker	15,062
		Adams	Othello	15,689
		Asotin	Clarkston	18,841
		King	Central Seattle	18,888
		Clark	Washougal	20,770
		Mason	Shelton	24,140
		Yakima	Sunnyside	25,079
		Spokane	East Valley	26,630
215	30,000-49,999	King	White Center / Highline	32,027
		Whatcom	Ferndale	33,123
		King	Chief Sealth	36,607
		Skagit	Mount Vernon	38,443
		Walla Walla	Walla Walla	38,867
		Snohomish	Monroe	39,544
		Island	Oak Harbor	40,138
		Pierce	Central Tacoma / Foss	41,558
		Grant	Moses Lake	42,491
		Chelan	Wenatchee	44,430
		Clark	West Vancouver	46,821
		King	Auburn-Cascade	47,006
		Kitsap	Bremerton	47,483
		Kitsap	North Kitsap	48,324
250	More than 50,000	Pierce	Tacoma / Franklin Pierce	51,886
		Snohomish	Marysville	73,415
		Franklin	Pasco	77,346
		Yakima	Yakima	78,976
		Pierce	Clover Park	80,931
		King	South East Seattle	85,754
		Spokane	West Central	101,055
		Whatcom	Bellingham	105,959
		Pierce	Bethel	112,227

Appendix 18: Self-Guided Training List

The table below has been created to help coordinators identify resources available on the Athena Forum categorized by the Strategic Prevention Framework. Take time to review all relevant documents to help yourself learn more and gather resources on how to move your coalition through the Strategic Prevention Framework.
www.TheAthenaForum.org/training/cpwi_trainings

DBHR Prevention Self – Guided Trainings, Presentations, and Resources

The table below has been created to help coordinators identify resources available on the Athena Forum categorized by the Strategic Prevention Framework. Take time to review all relevant documents to help yourself learn more and gather resources on how to move your coalition through the Strategic Prevention Framework.

Training Offered – SELF GUIDED THE ATHENA FORUM	Audience
Prevention Basics	
☐ Coalition Coordinator Orientation 2014 *(OWL)*	CPWI Coordinators
☐ CPWI Coordinator Orientation Slides 2017 ***(PPT)***	
☐ CPWI Coordinator Orientation Slides 2016 ***(PPT)***	
☐ CPWI Coordinator Orientation Slides 2015 ***(PPT)*** *(Handouts)*	
☐ Strategic Plan Update Webinar 2015 *(OWL)*	
☐ Coaching for Success Part 1 2013 *(OWL)*	
☐ Coaching for Success Part 2 2013 *(OWL)*	
Strategic Prevention Framework - Capacity Building	
☐ Coalition Development by Ginlin Woo 2017 ***(PPT)***	CPWI Coordinators
☐ Organizational Development, Governance, Mission Statements 2017 ***(PPT)***	
☐ Substance Abuse Prevention Capacity Building Workshop 2016 ***(PPT)*** *(Handouts)*	
☐ Strategic Plan Overview Slides 2016 ***(PPT)***	
☐ Why are we Here? C4 Webinar Series #1 2016 ***(PPT)***	
☐ Coalition Development C4 Webinar Series #2 2016 ***(PPT)***	
☐ Facilitation Techniques 2016 *(Handouts)*	
☐ Key Leader Orientation SAMPLE PPT 2015 ***(PPT)***	
☐ Strategic Plan Update Overview Webinar 2015 ***(PPT)***	
☐ Building Your Coalition Toolkit 2013 ***(PPT)*** *(Handouts)*	
Strategic Prevention Framework - Assessment	
☐ Needs Assessment, Data Resources, and Resources Assessment 2017 ***(PPT)*** *(Handouts)*	CPWI Coordinators
☐ Needs Assessment 101 Webinar Series 2015 ***(PPT)***	
☐ Data Books Training 2017 ***(PPT)***	
☐ Using your 2015 Data Book 2015 ***(PPT)***	
☐ Gaps Analysis/Strategy Selection 2015 ***(PPT)***	
☐ Community Survey and Local Evaluation 2015 ***(PPT)***	
☐ Logic Model-Fine Tuning Your Logic Model 2013 ***(PPT)***	
☐ Community Surveys webinar series with Dr. Marc Bolan 2012 ***(PPT)*** *(Handouts)*	
☐ Healthy Youth Survey 2012 Webinar Series (4 total) ***(PPT)***	
☐ Needs Assessment Clinic Modules (1-4) 2011 ***(PPT)***	
☐ Healthy Youth Survey: HYS 101 2013 *(OWL)*	
☐ Healthy Youth Survey: HYS 201 2013 *(OWL)*	
☐ Resource Assessment Training Workshop 1 2013 *(OWL)*	
☐ Resource Assessment Training Workshop 2 2013 *(OWL)*	
Strategic Prevention Framework - Planning	
☐ Developing a Comprehensive Prevention Approach ***(PPT)***	CPWI Coordinators
☐ Linking Strategies to Objectives Rhonda Ramsey Molina of CADCA ***(PPT)*** *(Handouts)*	

Last Revised 8/23/2017

Appendix 19: Commonly Used Prevention Resources

- **Division of Behavioral Health and Recovery** (DBHR) website: www.dshs.wa.gov/bha.
  - www.TheAthenaForum.org/ online resource for prevention professionals- managed by DBHR
  - www.StartTalkingNow.org/ Washington Healthy Youth Coalition website targeted for parents.
  - **New CPWI Community Coalition Coordinator Welcome Page**
    www.TheAthenaForum.org/New_CPWI_Coordinator
  - CPWI training www.TheAthenaForum.org/training/cpwi_trainings
    Modifiable slides on the following topics are available for your use:
    - Community Coalition Orientation
    - Key Leader Event
    - Needs Assessment Clinic
    - Resources Assessment

    See Self-Guided Training List for additional topics (Appendix 18)
  - For more information about programs that have shown outcomes in substance abuse prevention and mental health promotion www.TheAthenaForum.org/learning_library/ebp.
  - List of **Programs and Practices for Youth Marijuana Use Prevention** is at www.TheAthenaForum.org/I502PreventionPlanImplementation.
- **Minerva** one stop shop including important documents listed below www.TheAthenaForum.org/Minerva
  - Data Entry for Coalition Groups Reference Document (Important data entry
  - User Guide Version 2.0
  - Quick Reference Guide
  - Reporting Environmental Strategies and Information Dissemination
  - Understanding Survey Selection
  - Available evaluation tool surveys
- **Minerva** –DBHR Substance Use Disorder Prevention and Mental Health Online Data reporting site. https://wadshs.health-e-link.net/login
- **Healthy Youth Survey (HYS)** student survey reports are available at www.askHYS.net/.
- **Archival data – Community Risk Profiles** is at www.dshs.wa.gov/sesa/research-and-data-analysis/community-risk-profiles, and clicking on School District will provide a list to narrow down to community level.
- The **Substance Abuse Professional Systems Training (SAPST) is at** www.pscbw.com/Pages/default.aspx
- Information on how to obtain the **Certified Prevention Professional (CPP)** accreditation is at www.pscbw.com/Pages/CPPApplicationProcess.aspx.
  - Important CPP **Due Dates** www.pscbw.com/Pages/ImportantDueDates.aspx.
- The **SAMHSA-** Federal Substance Abuse and Mental Health Services Administration is at www.samhsa.gov/prevention.
- The **CSAP Principles** of Effective Substance Abuse Prevention are important for program implementation and planning and are located at www.TheAthenaForum.org/sites/default/files/CSAP_Principles_of_SA_Prevention.pdf.
- The **CADCA** Community Anti-Drug Coalitions of America Series of Primers at www.cadca.org/resources/series/Primers.
- The **CAPT** Center for the Application of Prevention Technologies is at www.samhsa.gov/capt/.
  - Online trainings on Sustainability, Introduction to Substance Abuse Prevention, What is the SPF?, Find existing Data, Focus Groups, Key Informant Interviews, Involving Youth in Your prevention programs. https://captonline.edc.org/mod/page/view.php?id=19630



Community Prevention & Wellness Initiative (CPWI) is a partnership with Washington State DSHS Division of Behavioral Health and Recovery, Office of Superintendent of Public Instruction, Local County Governments, Educational Service Districts, School Districts, and Local Community Coalitions.

For more information about CPWI go to

www.TheAthenaForum.org