

IOWA DEPARTMENT OF PUBLIC HEALTH  
BUREAU OF SUBSTANCE ABUSE

# **IPN Capacity Guide**

February 2021



# Table of Contents

PREFACE.....	2
DELIVERABLE SUBMISSION PROCESS .....	2
THE STRATEGIC PREVENTION FRAMEWORK.....	3
FIVE STEPS OF THE STRATEGIC PREVENTION FRAMEWORK .....	4
DEFINITIONS.....	5
SUBSTANCE ABUSE PREVENTION .....	5
CENTER FOR SUBSTANCE ABUSE PREVENTION.....	5
COUNTY RESOURCE MAPPING.....	6
WHAT IS RESOURCE MAPPING .....	6
HOW CAN RESOURCE MAPPING CHANGE COUNTIES.....	6
SCANNING THE RESOURCES .....	7
COUNTY SUBSTANCE MISUSE & PROBLEM GAMBLING PREVENTION RESOURCES CHART .....	8
SUBSTANCE MISUSE & PROBLEM GAMBLING PREVENTION SYSTEM ORGANIZATIONAL CHART .....	9
SCANNING THE RESOURCES.....	9
TAKING ACTION.....	10
COMMUNITY SECTOR WORKSHEET .....	11
CAPACITY CHECKLIST.....	13
CONSIDERING THE GROUP'S RESPONSES.....	16
CAPACITY WOORKBOOK CONTRIBUTORS.....	17
SOURCES.....	18

# Preface

Welcome to the Capacity step of the Strategic Prevention Framework. The Iowa Department of Public Health (Department) has developed this document which contains materials for Integrated Provider Network (IPN) funded prevention contractors. The resources identified within this guide will be utilized during the Capacity step which will be conducted during the timeframe of February 26, 2021 through May 28, 2021. This guide outlines how the Capacity step will be addressed through the IPN grant. Included in this document are the following Capacity step deliverables:

- 1. County Substance Misuse and Problem Gambling Prevention Resources Chart**
- 2. Substance Misuse and Problem Gambling Prevention System Organization Chart (Optional)**
- 3. Community Sector Worksheet**
- 4. Capacity Checklist**
- 5. Capacity Workbook Contributors Chart**
- 6. Coalition Recruitment Plan (as listed in the Prevention Services Orientation Guide)**

Detailed instructions describing the steps to successfully complete each capacity deliverable are outlined throughout this guide. IPN prevention contractors must assure that each capacity deliverable is fully implemented within each county of an awarded Service Area.

By completing each capacity deliverable, IPN prevention contractors will collaborate with local stakeholders to begin the process for selecting data-driven prevention strategies that address the prevention priority areas identified in the IPN Request for Proposal.

Throughout this process, IPN prevention contractors are encouraged to contact Julie Hibben and Katie Bee using the IPN Helpdesk at [ipn@idph.iowa.gov](mailto:ipn@idph.iowa.gov) with any questions.

The Resource Mapping materials were created by the National Center of Secondary Education and Transition through the University of Minnesota. Some of these materials were adapted for Iowa's Strategic Prevention Framework State Incentive (SPF SIG) grant, Iowa Partnerships for Success (IPFS) grant, and Strategic Prevention Framework for Prescription Drug (SPF Rx) grant. Further adaptations have taken place for IPN.

Sections of this guide were adapted from material developed by the following sources:  
*Applying the Strategic Prevention Framework - Step 2: Build Capacity, Substance Abuse and Mental Health Services Administration, 2018*  
*Substance Abuse Mental Health Services Administration, June 2019, A Guide to SAMHSA's Strategic Prevention Framework*

## Deliverable Submission Process

<b>Deliverable</b>	<b>Due Date</b>	<b>Submission Process</b>
<b>Capacity Workbook (including all identified deliverables)</b>	<b>May 28, 2021</b>	<b>Submitted to Julie Hibben and Katie Bee through <a href="http://IowaGrants.gov">IowaGrants.gov</a> correspondence</b>

The following are materials that the Integrated Provider Network (IPN) funded prevention contractors will utilize within the Capacity step of the Strategic Prevention Framework process.

## The Strategic Prevention Framework

The Strategic Prevention Framework (SPF) is a planning process for preventing substance misuse and problem gambling. The five steps and two guiding principles of the SPF offer prevention professionals a comprehensive process for addressing substance misuse and problem gambling, as well as the related behavioral health problems facing their communities. The effectiveness of the SPF begins with a clear understanding of community needs and involves community members in all stages of the planning process.

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

**Data driven:** Good decisions require data. The SPF is designed to help practitioners gather and use data to guide all prevention decisions—from identifying which substance misuse and problem gambling issues to address in their communities, to choosing the most appropriate ways to address those issues. Data also helps practitioners determine whether communities are making progress in meeting their prevention needs.

**Dynamic:** Assessment is more than just a starting point. Practitioners will return to this step again and again as the prevention needs of their communities change, and as community capacity to address these needs evolve. Communities may also engage in activities related to multiple steps simultaneously. For example, practitioners may need to find and mobilize additional capacity to support implementation once an intervention is underway. For these reasons, the SPF is a circular, rather than a linear, model.

**Focused on population-level change:** Effective prevention means implementing multiple strategies that address the constellation of risk and protective factors associated with substance misuse and problem gambling in a given community. In this way, we are more likely to create an environment that helps people support healthy decision-making.

**Intended to guide prevention efforts for people of all ages:** Substance misuse and problem gambling prevention has traditionally focused on adolescent use. The SPF challenges prevention professionals to look at substance misuse and problem gambling among populations that are often overlooked but are at significant risk, such as young adults ages 18 to 25 and adults age 65 and older.

**Reliant on a team approach:** Each step of the SPF requires, and greatly benefits from, the participation of diverse community partners. The individuals and institutions you involve will change as your initiative evolves over time, but the need for prevention partners will remain constant.

## Five Steps of the Strategic Prevention Framework

The second step of the SPF model is Capacity, which helps prevention professionals identify resources and build readiness to address substance misuse and/or problem gambling. “This involves building and mobilizing local resources and readiness to address identified prevention needs. A community needs both human and structural resources to establish and maintain a prevention system that can respond effectively to local problems. It also needs people who have the motivation and willingness – that is, the readiness – to commit local resources to address identified prevention needs.” Prevention programs and interventions that are well-supported with adequate resources and readiness are more likely to succeed.

Continuing with the house analogy used in the Assessment Guide, the Capacity step of the SPF continues to build on the strong foundation (i.e. assessment) that took place earlier. Just like any new construction project, many “builders” need to be a part of the process to see the final product emerge. Each person brings their own experience, knowledge, and passion to the work. During the Capacity step, IPN prevention contractors will continue to identify and collaborate with a broad range of diverse community stakeholders (i.e. the builders) that will help inform local primary prevention efforts. Stakeholder involvement is key to identifying, promoting, maintaining, and sustaining local prevention efforts. By design, the Capacity Guide is intended to assist counties through the Capacity step by comprehensively building community engagement.



# Definitions

## **Substance Abuse Prevention**

The Center for Substance Abuse Prevention defines prevention as "a process that empowers individuals to meet the challenges of life by creating and reinforcing healthy behavior and lifestyles and by reducing the risks that contribute to alcohol, tobacco and other drug misuse and abuse."

## **Center for Substance Abuse Prevention Strategies**

Prevention services are based on the Center for Substance Abuse Prevention's six strategy categories:

**Information Dissemination** – Provides awareness and knowledge of the nature and extent of substance misuse and/or problem gambling and its impact on individuals, families, and communities.

**Education** - Involves two-way communication with interaction between the facilitator and the participants to improve critical life and social skills. Multiple sessions are usually included.

**Alternatives** - Provides for the participation of target populations in activities that exclude substance misuse and/or problem gambling. Providers offer technical assistance to help identify the need for community events that increase protective factors.

**Environmental** - Establishes or changes written and unwritten community standards, codes, and attitudes, thereby influencing the incidence and prevalence of the abuse of alcohol, tobacco, and other drugs and/or problem gambling behaviors by the general population.

**Problem Identification and Referral** – Aims to serve those who have participated in illegal or age-inappropriate use of tobacco or alcohol and those who have participated in the first use of illicit drugs, as well as, problem gambling behaviors.

**Community-Based Process** – Aims to enhance the ability of the community to more effectively provide substance misuse and/or problem gambling prevention services through the establishment of collaborative groups.

# County Resources Mapping

## What is Resource Mapping?

Resource mapping is a strategy for promoting county collaboration by better aligning programs and services. The major goal of resource mapping is to ensure that counties have access to a broad, comprehensive, and integrated system of prevention services. Resource mapping can be used to improve education, workforce development, and economic development in a county by aligning available services and resources, streamlining those services and resources, and identifying areas of need. The idea of resource mapping builds on the county's strengths by increasing the frequency, duration, intensity, and quality of services and supports. It is a way to organize information and give direction to meet a common goal.

Community resource mapping is not a new strategy or process. It has been in use for many years in varying forms. Community resource mapping is sometimes referred to as asset mapping or environmental scanning. Community resource mapping is best noted as a system-building process used by groups at different stages in order to align resources and policies in relation to specific system goals, strategies, and expected outcomes.

## How Can Resource Mapping Change Counties?

The resource mapping process acknowledges that individuals, organizations, and local institutions all have the capacity to create real change in their counties, but that no agency, or person, can do it alone. With increased accountability, tight budgets, resource shortages, and fragmented services, it is a sound decision for counties to encourage cross-agency and cross-systems coordination. Insight into a county's existing partnerships and programs, resource allocations and policies, priorities and assets can contribute to its ability to evaluate its overall effectiveness in substance misuse and problem gambling prevention services.

Resource maps can provide a comprehensive picture of a county's vision, goals, projects, and infrastructure. In short, resource mapping can help counties to accomplish a number of goals, including:

- Identify new resources
- Avoid duplication of services and resources
- Cultivate new partnerships and relationships
- Share information across agencies that provide substance misuse and problem gambling prevention services
- Encourage collaboration
- Successfully achieve prevention outcomes

The alignment of resources, streamlining of resources and identification of service gaps within the county enables prevention professionals to:

- Understand the full range of prevention services available within a county,
- More efficiently provide services, and
- Develop new services and supports targeted to fill existing gaps



In order to identify countywide substance misuse and problem gambling prevention resources and build county capacity, follow the steps below to complete the resource mapping process in each IPN funded county within the awarded Service Area.

## **1. Scanning the Resources**

Counties need to create a comprehensive list of the various services provided that prevent substance misuse and problem gambling. This includes service providers that may have shared outcomes with substance misuse and problem gambling prevention, including groups and agencies that address youth and family issues, other health issues including behavioral health, and community wellness initiatives. Identify all organizations that provide these services in the chart below.

Different methods can be used to gather this information. The information collection methods selected depend on the type of information you want and the stakeholders who are sharing the information. Possible methods include questionnaires, surveys, interviews (i.e. telephone, virtual, and personal interviews), focus groups, and roundtable discussions. Look beyond traditional sources when collecting information about resources. No single collection method can provide all the necessary information to support good decisions. Remember, much data already exists within your county and is available for you to use.

Stakeholders should be engaged to help identify other partners in the process, provide a unique perspective about the mapping process and product(s), generate questions for collection purposes, serve as sources of information, and participate in the actual data collection process. Procedures to guide “collectors” should be developed to address some common problems such as re-contacting individuals/organizations for missing information or approaching organizations that choose not to provide information and ensuring tasks are completed as agreed upon.

Your countywide coalition/Community Partnership Grant identified coalition and/or subcommittee should consider the following questions when developing the plan to collect information:

- What kinds of information should be collected?
- How much relevant information already exists and how can it be accessed?
- How will information be collected and recorded?
- How will you select or develop collection instruments?
- What is your timeline for collection?
- How will collection responsibilities be determined?
- How will the information be organized and analyzed?
- How will you handle missing information?
- How will the information be shared with stakeholders?
- What kinds of problems can be expected?



# County Substance Misuse and Problem Gambling Prevention Resources Chart

**Table 1. Resource Mapping**

<b>Organization /Group Name &amp; Sector</b>	<b>Types of Services Provided *</b>  <b>List for Each Focused Population Service</b>	<b>Strategies &amp; Expected Outcomes</b>	<b>Strategies and Expected Outcomes that Overlap with IPN?</b>	<b>Key members and Other County Partners</b>	<b>Current Coalition Member (Y/N)</b>	<b>If Yes List, Key Contact</b>  <b>If No, Identify Possible Point of Contact</b>

*\*Types of services provided may include substance misuse and problem gambling prevention or treatment, community wellness, youth services, suicide prevention services, family services, and other health services (including behavioral health)*

# Substance Misuse and Problem Gambling Prevention System Organization Chart (Optional)

After completion of the resource mapping process, each IPN prevention contractor may create a visual representation of the county prevention services through an organizational chart. This reflects all known substance misuse and/or problem gambling prevention services within each county of the awarded Service Area. The identified prevention services should align with the age ranges identified for each prevention priority as identified on page 36 of the IPN Assessment Guide.

Ideally, all organizations listed in the County Substance Abuse Prevention Resources Worksheet should be included in the chart. IPN prevention contractors may use the SmartArt function in Microsoft Word 2007 or higher, Google Docs, or PowerPoint to create the chart in the space below.

## 2. Scanning the Resources

Identify services that overlap or are missing from your county substance misuse and problem gambling prevention resources chart. Then list the opportunities to improve services in the county through alignment and collaboration.

**Table 2.** Organizational Chart (Optional)

Service Overlaps	Service Gaps	Opportunities for Alignment/Collaboration

### 3. Taking Action

For the next two worksheets you will work with the county coalition identified to collaborate on the Strategic Prevention Framework (SPF) process throughout the IPN project. The intention of these worksheets are not to take over or manage a prevention-focused coalition but to look at measures of successful community engagement in the SPF process and work to incorporate those measures to the fullest extent possible with the group that is committed to the success of the project outcomes. It should be a group that includes at least the required sectors (see table below) and meets regularly to be engaged in all steps of the SPF including data gathering, project planning, decision making, implementation, evaluation, sustainability planning and ensuring cultural competence throughout the process.

In the event that all required sectors are not included in the coalition by April 16, 2021, the IPN prevention contractor must provide rationale identifying barriers to coalition recruitment. In addition, IPN prevention contractors will revisit their created *Coalition Recruitment Plan* developed in Year 1 of the grant to continue identifying ways to engage missing sector(s) in prevention efforts. **The Coalition Recruitment Plan shall be provided to Julie Hibben and Katie Bee on or before May 28, 2021 via the Correspondence section of IowaGrants.gov.**

Required Sectors
Drug Free Communities Grantee (if applicable)
Public Health (including local Boards of Health)
Business Community
Law Enforcement
School Districts
Civic and Volunteer Groups
Youth
Elected County and City Officials (Board of Supervisors, City Council Representatives, Mayors, etc.)
Military (Activity Duty, Veteran, County Veterans Affairs Representatives, etc.)
Substance Abuse Treatment Providers
Other Substance Abuse Prevention Grantees
Media
Department of Human Services - Child Welfare
Representatives from the strategy population of focus

All of the documents in this guide should be consulted regularly, as capacity building happens not just one time, but throughout all of the SPF steps. The Community Sector Worksheet and Capacity Checklist will be filled out twice per year so that you can monitor your progress and do more of what your group is doing well. IPN prevention contractors should keep records of who was involved in completing these documents and how the process happened; including discussion around how scores were decided or specific resources were included. This will aid in tracking progress and in completing documents in the future if some of the stakeholders or staff members have changed.

One Community Sector Worksheet and one Capacity Checklist must be completed for each county in an awarded Service Area. **Completed deliverables must be submitted to Julie Hibben and Katie Bee through the IowaGrants.gov correspondence component. The initial Community Sector Worksheet and Capacity Checklist are due on or before May 28, 2021. Guidance on submission of additional forms will be provided in FY22.** IPN prevention contractors shall also maintain a copy of their completed deliverable on-site at their agency.

# Community Sector Worksheet

Add additional rows as necessary. For example, under Law Enforcement, you may want to include both local and county contacts or for schools you will want to include contacts for each district within the county.

**Table 3:** Community Sector Worksheet

Sector	Current, active member and affiliate organization, if applicable	Potential member and affiliate organization if applicable	Benefits from including this sector?	How will we build on or increase capacity with this sector? Include specific actions, persons responsible and timeframe
Drug Free Communities Grantee (if applicable)				
Public Health (including local Boards of Health)				
Business Community				
Law Enforcement				
School Districts				
Civic and Volunteer Groups				
Youth				
Elected County and City Officials				

Healthcare Professionals				
Military				
Substance Abuse Treatment Provider				
Other Substance Abuse Prevention Grantees				
Media				
Department of Human Services				
Representatives From the Strategy Population of Focus (Decided During the Planning Step of the SPF)				
Other				

# (Name of IPN Prevention Focused Coalition) Capacity Checklist

IPN prevention contractors are responsible for completing the following Capacity Checklist.

**Completed checklists must be submitted to Julie Hibben and Katie Bee twice per year via the correspondence component of IowaGrants.gov. The initial Capacity Checklist will be due on or before May 28, 2021. Guidance on submission of additional forms will be provided in FY22.** IPN prevention contractors will work with the county coalition identified to collaborate on the Strategic Prevention Framework (SPF) process through the IPN grant. Reviewing each indicator with coalition members will confirm an understanding of the Strategic Prevention Framework and will identify continued opportunities for growth.

Please use the following rating scale in completing this checklist:

**NS - Not Sure**

**1 - Never: Our group does not do this**

**2 - Sometimes: Our group sometimes does this**

**3 - Most of the time: Our group does this most of the time**

**4 - Always: Our group does this consistently/always**

**Table 4.** Capacity Checklist

Indicators	Date	Date
	Score	Score
Group has a chair, who is not an IPN Prevention Specialist.		
Members can identify at least three key organizations that are actively involved.		
Members can describe the purpose/mission of the group.		
Members are familiar with the Strategic Prevention Framework (SPF).		

Members are familiar with the concept of environmental strategies.		
Members know what is meant by evidence based programs/practices		
Members are part of making project related decisions.		
New members are oriented and receive information/ training on the SPF.		
Meetings are held regularly at a time and location that is convenient for members.		
An agenda/minutes are distributed before and after the meeting.		
During the meeting the agenda is followed.		
Meetings begin and end on time.		
Members are actively involved in gathering and interpreting assessment data.		
Assessment results are shared with other prevention partners.		
Assessment results are shared with the community.		
Ongoing efforts are made to increase membership.		
Ongoing efforts are made to retain and engage existing members.		
All required sectors are regularly involved.		



There are members from the target audiences the project will reach and partner with.		
Members are recognized for their contributions.		
Members actively participate in processes to clearly move prevention services forward. Examples include but are not limited to reviewing surveys, creating guides, approving promotional materials, writing press releases, creating fact sheets, etc.		
Members use data for ongoing planning.		
Current services are provided through IPN within each county of the awarded Service Area.		
The county is knowledgeable about coalition efforts.		
Members use data to monitor prevention services to make sure they are effective.		
Outcomes are routinely shared with the county and help guide future prevention services.		
Members use data for evaluation.		
Members are reflective of the county population.		
Cultural competence is considered through all steps of the SPF.		
Members regularly work on sustainability planning.		

Group has a written plan to sustain positive outcomes over time.		
Members have identified and secured resources to sustain positive outcomes over time.		
Members commit time and resources to the project.		

**Consider your group’s responses to the Capacity Checklist and answer the following questions:**

1. Where did your group give a score of NS, 1 or 2?
  
2. How can you move each of those items to a score of 3 or 4? What specific steps will you take? What will your timeline be?
  
3. Where did your group give a score of 3 or 4?
  
4. What is your group doing well that you will continue doing?
  
5. How will you use this information to increase your group’s effectiveness in using the SPF?

# Capacity Workbook Contributors

List the names of Capacity Workbook contributors, the sector and/or organizations they represent, the coalition they may be affiliated with, and the specific contributions they made to complete this workbook (such as providing data, assistance with identifying new stakeholders, reviewing and analyzing prevention services, etc.) in Table 5 below. This table should reflect that a diverse group of county stakeholders were engaged in the completion of the workbook, including representatives from the Community Partnership grant identified coalition or a subcommittee of the coalition. In the event a workbook contributor does not want their name shared publicly, simply indicate N/A in the Name column. Please do not include the names here of anyone whose contributions or responses should be kept confidential or anonymous, such as the names of focus group attendees.

**Table 5:** Workbook Contributors

Name	Sector/Organization	Coalition Name	Contribution (process, meetings, events, etc.)

## Sources

Mooney, Marianne; Crane, Kelli. (2005). Community Resource Mapping (NCSET Essential Tools). University of Minnesota, Institute of Community Integration, National Center on Secondary Education and Transition (NCSET). Retrieved from the University of Minnesota Digital Conservancy, <https://hdl.handle.net/11299/172995>.

Substance Abuse and Mental Health Services Administration. A Guide to SAMHSA's Strategic Prevention Framework. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, 2019.  
<https://www.samhsa.gov/sites/default/files/20190620-samhsa-strategic-prevention-framework-guide.pdf>

Substance Abuse Prevention and Treatment Block Grant. (2020, April, 16). Substance Abuse and Mental Health Services Administration. <https://www.samhsa.gov/grants/block-grants/sabg>