Integrated Provider Network (IPN) Grant

Strategic Plan Template

**Title Page (1 page)**

* Include the IPN county and the title “Integrated Provider Network (IPN) Strategic Plan” and the month and year when submitted to IDPH.
* Include a graphic such as the Strategic Prevention Framework (SPF) logo or a picture that represents the county.

**Introduction (1/2 page)**

* Provide a brief overview of the county IPN grant.
* Include the vision and/or your coalition/subcommittee
  + A statement describing the overall vision for prevention efforts in the county will help guide the county services and will serve as an anchor for prevention efforts. The statement should be clear and comprehensive in scope. The vision statement reflects the overall guiding principle that will direct the coalition/Collaboration Council.
* Provide an overview of your coalition/subcommittee and who has been involved in the IPN grant.

**Priority Areas:**

* **Alcohol (ages 25-65)**
* **Marijuana (ages 12-20)**
* **Methamphetamine (all ages)**
* **Prescription Medication Misuse/Opioids (ages 65 and over)**
* **Problem Gambling (ages 21 and over)**
* **Suicide (all ages)**
* **Tobacco (ages 12-20)**

1. **Assessment (2-4 pages)**

* Provide a brief summary of what the assessment data shows about each of the three three priority issues of focus in the county.
* Which populations in the county have been identified as disproportionately affected by each of the three priority issues?
* Describe the prioritization process used to identify the three prevention priorities to be addressed.
* Provide the identified intervening variables for each of the three prevention priority areas and the data to support each (reference the County Assessment Workbook).
* List identified underlying conditions for each intervening variable and the data to support each (reference the County Assessment Workbook).
* Describe any identified data gaps in the county related to the three prevention priority areas and the plans to address them.

1. **Capacity (2-4 pages)**

* Provide an overview of the county’s readiness and capacity to implement the identified strategies to address each prevention priority.
* Discuss plans to enhance capacity and readiness related to each strategy.
  + Identify specific partners, sectors and stakeholders whose readiness will need to be raised.
  + Consider the need for information sharing, training, and experience, commitment from local agencies and coalitions.
  + Identify who will be responsible for carrying out those activities, including work that will be done by outside partners.
* Discuss how you will build capacity for implementing the required National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) in the county for this priority area.

1. **Planning (4-5 pages)**

* Describe the process utilized by the county to select the proposed strategies. Include a description of how the best fit for each strategy was determined, including discussion of conceptual fit, practical fit and evidence of effectiveness for each strategy (for IDPH required and county selected strategies).
* Discuss the population of focus for each strategy and include:
  + How the population of focus has been involved in strategy selection.
  + How the population of focus will continue to be involved throughout the SPF steps.
  + Include plans to increase the involvement of the population of focus for each strategy.
* Describe the proposed dosage and frequency for each strategy. Provide an explanation for how these were determined (include baseline amounts, data sources, etc.).
* Describe what steps will be taken to ensure that each strategy will be implemented with fidelity.
* Describe any cultural adaptations that may be anticipated.
* Identify the stakeholders or organizations that will assist in the implementation of strategies in a way that will ensure cultural competency.

**Conclusion (1/2 page)**

Provide a concluding summary or statement. This could be a call to action for those reading the document, a summary of the project’s long term vision or goals, an impact statement from a coalition member or stakeholder or other similar item to conclude the document.

**Attachments**

**Logic Model (1 Logic Model for each prevention priority**)

Use the provided template and directions to create the county logic model.

**Action Plan (1 Action Plan for each prevention priority)**

Use the provided template and directions to create the county action plan.