Sustaining Community Processes and Positive Outcomes for Prevention

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New England Summer School of Addiction and Prevention Studies

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Proposed Agenda

- Definition and Importance of Sustainability
- Sustainability Check-in
- Review Online Course/Tools
- Building your team
- What to sustain, what to sustain?
- Developing sustainability goals
- What does an Oz. of Prevention Cost?
- Making the Case
- Working the Plan
- Closing and Evaluation
SUSTAINABILITY IS...

...a community’s ongoing capacity and resolve to work together to establish, advance, and maintain effective strategies that continuously improve health and quality of life for all.

“In the case of substance abuse prevention, that involves developing prevention systems that promote and support the delivery of effective prevention strategies in order to prevent and reduce substance use, misuse and abuse among whole populations. Ultimately, sustainability is about maintaining positive outcomes in these populations.”

SAMHSA’s Center for the Application of Prevention Technologies (2017). Planning for Sustainability
Sustainability is Central

Image courtesy of SAMHSA
Sustainability Planning: Parallel Tracks

Sustaining the SPF Process

Sustaining Positive Outcomes
Sustainability Successes and Challenges

Prevention SustainAbilities: Planning for Success

Quick Review
Online Course


Online Course Resources

Resources: https://captonline.edc.org/mod/page/view.php?id=19649
Getting Started

- Develop a shared understanding of sustainability with your full prevention task force
Building Your Team

• Form a small sustainability planning team
What to sustain, what to sustain?

- Practices and Processes

**TOOL 1: PROCESS REVIEW WORKSHEET**

Use this chart to summarize your review of strategic planning processes. Key findings from this review, and from your review of prevention interventions (see Tool 2), will help you set sound sustainability goals for your community (see Tool 3).

<table>
<thead>
<tr>
<th>SPF Steps</th>
<th>Process Guidelines</th>
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<tbody>
<tr>
<td></td>
<td>What Worked*</td>
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<tr>
<td>Assessment</td>
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<td>- Established data sharing agreements with health centers</td>
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What to sustain, what to sustain?

- Practices and Processes

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| - Developed Online Training opportunities increase capacity for training  
  - multi grant funded community: developing a strategic plan for the municipality that incorporates all the different grant programs  
  - Two different grants work very closely together, planning, holding monthly joint meetings, and working on a lot of the same strategies, and supporting communities together as a regional coalition rather than just one grant piecemeal | What Worked* | What Did Not Work* | New Processes Needed* | Task Force Role* |
What to sustain, what to sustain?

- Practices and Processes

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<td>Revised our entire Logic Model and re-prioritized our strategies and IVs</td>
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<td>- Thinking about what kinds of primary prevention is being covered by our communities’ other grants so our grant can focus on different strategies</td>
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<td>What Did Not Work*</td>
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<tr>
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- Practices and Processes

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| **Implementation** | - Expanding prevention efforts to collaborate with school nurses working with elementary school students on medicine cabinet safety  
- Coordinators getting Trained as Trainers so they can train school staff in delivering evidence-based curriculum, then they don’t have to pay to send people to trainings. Get buy-in from school early, support now with understanding they’ll take over costs later  
- great working relationships with their police departments and make follow up/door knock visits to individuals after an overdose |  |  |
| **Evaluation** | Using data from post overdose follow up programs for sustainability planning |  |  |
What to sustain, what to sustain?
## What to sustain, what to sustain?

<table>
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<tr>
<th>Interventions</th>
<th>Evidence of Effectiveness*</th>
<th>Evidence of Internal Capacity*</th>
<th>Evidence of Community Support*</th>
<th>Task Force Role*</th>
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<tr>
<td>Intervention 1: school-based program.</td>
<td>yes, reaching most students, high levels of satisfaction w/ participants/teachers, increasing perception of harm</td>
<td>Yes, schools have well trained facilitators, own materials, current trainers want to keep using program and coach new trainers, schools have workable time slot for program</td>
<td>Yes, Parent+school staff like it, support from admin, program results in local paper</td>
<td>Yes primary responsibility, Got program up and running, but school looks to coalition to coordinate and monitor activities</td>
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<tr>
<td>Intervention 2: parent program</td>
<td>Attendance is low, not reaching focus population, not achieving intended outcomes</td>
<td>Staff unable to engage parents, facilitator turnover is high, location inaccessible to many parents</td>
<td>Parents view program as poor fit as far as facilitators, content, location; neighborhood leaders and associations lack interest</td>
<td>Yes, primary responsibility. Task force struggles to attract program participants and partners</td>
</tr>
<tr>
<td>Intervention 3: mass media campaign</td>
<td>Not yet achieving outcomes, is reaching audience and audience is receptive to messages</td>
<td>Initial development phase complete, task force members have greater communications/media expertise and stronger ties to media partners</td>
<td>Campaign stimulated positive discussions, media outlets are partners, campaign has champions across sectors</td>
<td>Yes, primary responsibility. Media partners engaged/supportive, but look to task force to coordinate and monitor campaign</td>
</tr>
<tr>
<td>Intervention 4: prescriber education</td>
<td>Not yet producing outcomes, program reaching many prescribers, high rate of satisfaction</td>
<td>Program ownership has shifted from taskforce who developed it to healthcare sector, which has invested ample resources and recently adopted it</td>
<td>Town requires local prescribers to participate, healthcare sector committed to implementing it going forward</td>
<td>No, taskforce is supporter, but has recently turned program over to healthcare sector</td>
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* Evidence of Effectiveness: Determine if the intervention is achieving positive prevention outcomes now or moving in the right direction.  
* Evidence of Internal Capacity: Determine if the intervention is well equipped with staff, supplies, and space.  
* Evidence of Community Support: Determine if the intervention is valued by community leaders, key stakeholders, and the public.  
* Task Force Role: Describe your prevention task force’s level of responsibility for sustaining successful interventions over time.
What does it cost?
Making the Case
Building Community Partnerships, Saving Young Lives

A CALL TO ACTION FROM THE RIVERSIDE PREVENTION TASK FORCE

Who We Are

Four years ago, a few concerned prevention and health practitioners won a state grant to address Riverside's prescription drug problem. This small team has since grown into the Riverside Prevention Task Force. We are service providers, civic leaders, parents, and students dedicated to reducing rates and preventing the negative consequences of prescription drug misuse among local youth.

The Problem

Riverside has the highest rate of youth (ages 12-17) prescription drug misuse in the state.

1 in 5 local youth report having taken prescription drugs that were not prescribed to them.

27% of local youth showed causes that prescription drugs are used instead of other drugs.

42% of local youth report easy access to prescription drugs at home.

Secrets to Our Success

Diverse Membership: To ensure broad community representation and access to essential insights and expertise, we engage people across ages and locations.

Best Practices: Guided by the science of prevention and social change, we use proven strategies for improving health and well-being.

Action Orientation: Committed to producing tangible results, we consistently move from thoughtful conversation to strategic action.

Continual Improvement: Through ongoing evaluation of our prevention work, we learn from each decision we make and each action we take.

Accomplishments to Date

- Coordinated Response: Forged cross-sector partnerships to become Riverside's central source of prevention expertise and strategic action. Members represent health, education, government, law enforcement, faith, and media sectors.
- Prescriber Education: Partnered with regional medical center and Department of Public Health to deliver the safe prescribing practices training SafeRx, now mandatory for local prescribers. Trained more than 500 physicians, nurses, and pharmacists.
- Prevention Curriculum: Partnered with school district to implement the evidence-based curriculum 100% in all four middle schools. Perceived harm associated with prescription drug misuse nearly doubled, from 36% to 70%, among participants.
- Mass-Media Campaign: Launched community-wide KIDS-SAFE campaign to raise awareness and promote safe storage and disposal practices among parents. Received more than 10,000 hits on Facebook.

We Need Your Help!

As our initial funding comes to an end, our progress and positive results in the community also run the risk of disappearing. The Department of Public Health has assumed responsibility for delivering our safe prescribing practices training—but we need to engage new supporters to ensure the continuation of our effective prevention curriculum, far-reaching media campaign, and dynamic task force. Please consider becoming a:

- Prevention Partner: Join the Riverside Prevention Task Force and help us move our prevention work forward.
- Prevention Patron: Donate money, supplies, or specialized services (e.g., fundraising, media, evaluation).
- Prevention Proponent: Spread the word about our prevention work and how people can connect with us.

For more information about our work, our impact, and opportunities to get involved, please visit us at: www.spiff.org

Have any questions? Ready to help? Please contact Jack Bishop, task force coordinator, at jackbishop@rptff.org or Ellen Park, development coordinator, at ellen@rptff.org. You can also call task force headquarters at 555-555-7733.
Working the Plan

Image courtesy of https://hautecature.wordpress.com/2012/12/03/working-cat/