

CHESTER COUNTY

County Drug & Alcohol Prevention Profile Part III Comprehensive Strategic Plan Update for Fiscal Year 2013/2014

The plan, at a minimum, must include a combination of programs and strategies which are being implemented through targeted and non-targeted activities. The SCA must allocate and expend Department of Drug and Alcohol Program funds for the implementation of prevention services under each Federal Strategy and IOM Classification. 25% of program services must be delivered through a combination of evidence based and state approved programs. 20% of services must occur through recurring events. The SCA must provide Student Assistance and Fetal Alcohol Spectrum Disorder Programming.

The plan is due to your assigned prevention program analyst by March 29, 2013 and should be submitted via email.

Please respond to the following questions:

1. What programs/strategies are you adding to your plan for 13/14? Provide an explanation as to why you chose to add each program/strategy to your plan for the coming fiscal year and what funding sources will be assigned to the program/strategy.

SCA Response:

AOD Environmental Prevention Strategies: It is the goal of the SCA to support community- based action-oriented initiatives under the Environmental federal strategy. In order to do so we will solicit proposals from our core prevention providers as well as non-traditional organizations (e.g. youth groups, coalitions, etc.). Activities to be provided under this federal strategy will focus on identified county-wide and/or community specific risk factors. Programming will be determined based on a competitive selection process. It is anticipated that the following funding source will be utilized: DDAP-SAPT Block Grant Prevention.

2. What programs/strategies will you no longer use in 13/14? Provide an explanation as to why you chose to discontinue use of each program/strategy for the coming fiscal year.

SCA Response

Strengthening Families Program: this program will be sustained and expanded in FY 13/14 through other organizations and funding sources.

3. Overall, how do you evaluate your programs and strategies to determine their effectiveness? What programs/strategies were successful and which were not? Please note what you used as a measure of success or failure for each of these.

SCA Response

The SCA requires contracted prevention providers to evaluate all purchased services. The evaluation design is outlined in each provider's contract work statement and is monitored for compliance throughout the year. Evaluations generally contain one or more of the following components:

- Consumer Satisfaction Surveys
- Quantitative (e.g. numbers served; projected versus actual)
- Demographic Data
- National Outcome Measures Survey (NOMS)
- Pre/Post Tests
- Knowledge-Based Surveys
- Monitoring (the SCA conducts on-site monitoring a minimum of one time per year)
- Anecdotal Feedback
- Comparison of national, state and county-level data (e.g.; consumption patterns, arrest rates, school drop-out rates, etc.)

It is the SCA's expectation that providers collect, review and analyze all data/information from the approved evaluation design and submit a compilation of the results to the SCA in the form of a year-end report. In conjunction with the formal year-end report, the providers are routinely reviewing evaluation data so that programmatic changes can be made, in a timely manner, throughout the year, to ensure the delivery of quality programs.

Although the year-end evaluations have not been completed for FY 12/13, the SCA has reviewed FY 11/12 evaluations as well as year-to-date data/information (gleaned from on-site monitoring and provider feedback) to help inform programming for the upcoming fiscal year. Please see below for detail on what programs/strategies, broken out by federal strategies, were successful and which were not:

Federal Strategy: Information Dissemination

- Speaking Engagements
- Health Fairs/Health Promotion
- Telephone/Email Information Requests
- Public Service Announcements
- Fetal Alcohol Spectrum Disorder Prevention Strategy
- Printed Material Dissemination

The majority of services delivered under this federal strategy are evaluated using consumer satisfaction surveys and numbers/demographics served compared to contract expectations. Overall, the contracted provider has consistently met or exceeded work statement objectives and projections. Please see below for excerpts from the consumer satisfaction surveys:

- The provider was able to make an appropriate referral/s in 98% of the total number of Information and Referral telephone calls received (N=782).

The overall quality of resources available through the provider agency is:

- Excellent: 60%
- Very Good: 40%

Federal Strategy: **Education**

- Padres Activos de Hoy
- Active Parenting of Teens
- Parenting Wisely
- BABES
- ATOD Abuse Services
- Children In Between
- Project Alert
- Media Straight Up!
- Safe Dates
- Say it Straight

The above listed evidence-based and state approved programs are evaluated utilizing the developer's pre and posttests or an instrument that has been pre-approved by both the SCA and the Department of Drug and Alcohol Programs (DDAP). For evaluations completed in FY 11/12, where a pre and posttest were delivered, the contracted provider reviewed responses and calculated the percentage of positive change for each question or topic area covered. Since the majority of these programs were delivered with fidelity to the developer's model there were few, if any programmatic, adjustments needed. Participant's responses reflected knowledge gained in the topics addressed within the programs. This data was also used as an aide for staff supervision. Supervisors were able to identify facilitator's strengths and weaknesses in regard to program delivery and make any needed adjustments to individual's training plans.

Facilitator observation, consumer satisfaction surveys, demographic and service location data were also utilized by the provider to determine effectiveness. Reviewing these data sets enabled the provider to make the following types of corrections: address attendance issue among the Latino population for parent education programs, contact Say It Straight program developer to discuss adaptations needed to better serve Latino youth, increase outreach efforts to underserved geographic areas of the county, etc.

Federal Strategy: **Alternative Activities**

- Nurse-Family Partnership

The majority of funding for this program comes from a federal grant that requires each grantee to utilize the same evaluation design. Specific measurable objectives are defined by the program developer and each NFP site collects and reports the same data sets across the nation. Chester County programmatic outcomes have consistently reflected national achievements and in some measures significantly exceeded national standards. For example, nationally 40% of mothers who have a child before they turn 18 ever graduate from high school, in comparison, the Chester County NFP drop-out rate over the past five years is 9%.

Federal Strategy: Problem Identification and Referral

- Student Assistance Program

The Student Assistance Program (SAP) is rigorously evaluated using a variety of survey instruments and data sets. Statistical and quantitative data is collected and submitted quarterly via the Pennsylvania Department of Education (PDE) web site. The contracted provider also submits quarterly reports, developed by the SCA, which includes more detailed information on referral reason, screenings and outcome of screening. This data is collected for all SAP services, including those purchased by the individual school districts as well as the county Department of Mental Health and Intellectual and Developmental Disabilities and is used to track trends and help inform programming for the following year.

Additionally, the SCA in conjunction with the contracted provider has developed a three-prong evaluation design intended to measure the following areas:

- Student Satisfaction
- SAP Liaison Effectiveness
- Core Team Effectiveness

Review and analysis of all evaluation components show a very strong program however, numbers served have been steadily decreasing over the past three to four years as school districts continue to decrease funding. The decline in purchased services by the school districts has forced the county to re-evaluate how best to serve youth in the schools.

Federal Strategy: Community-Based Process

- Community Mobilization

Under this federal strategy, the SCA supports four (4) Communities That Care (CTC) sites as they move through the five phases of the CTC mobilization process. The evaluation design for activities delivered under Community Mobilization is based on the EPIS Center instrument entitled: *Milestones and Benchmarks*. FY 12/13 will provide the SCA with benchmark data for the five (5) phase process.

In addition to the above, the evaluation design includes: provider submission of mid and year-end reports as well as the NOMS. To date, the CTC sites are at varying stages in the process and measurements for success will be individualized by community.

Federal Strategy: Environmental

- Social Norms Marketing Campaign

In FY 11/12, the contracted provider produced a Social Norms Marketing Campaign Plan with implementation scheduled for FY 12/13. This aspect of the Campaign was evaluated based on work statement objectives associated with the development of a plan.

To date, the Campaign has not been implemented due to the following reasons: staff vacancies at the provider level and late receipt of the PAYS Report (note: tagline for the Campaign is based on 2011 county-level PAYS data). Once implemented the Campaign will be evaluated based on consumer feedback and numbers served.

4. Describe the programs/services/activities you are planning to do/fund in 13/14 for the following:

- a. Student Assistance Program (List/describe the SAP services you will be providing/funding.)

SCA Response:

Core Team Meetings – utilize professionally trained liaisons that will work with the SAP Teams within the school setting and provide consultation following best practice guidelines as defined by the DDAP.

District Council – at no cost to the SCA, provider will continue to facilitate monthly meetings for SAP team members and other stakeholders/organizations. Meetings provide in-service trainings, information dissemination and networking opportunities.

It should be noted that the SCA, in conjunction with the county's Department of Mental Health and Intellectual and Developmental Disabilities (MH/IDD), has embarked on an analysis of currently funded SAP activities in an effort to more effectively serve youth in the publically funded secondary school system. It is anticipated that once the analysis is complete recommendations for either new services and/or enhancement of currently funded SAP activities may be implemented in FY 13/14.

- b. Fetal Alcohol Spectrum Disorder (List/describe the services you will be providing/funding to address FASD. Also note, which of those activities you expect to take place during September.)

SCA Response:

It is the goal of the SCA to provide/support activities that are designed to raise awareness and educate selected populations on the harmful effects of any alcohol use during pregnancy. Services may include, but not be limited to, the following:

- Targeted Information Dissemination – printed materials (posters, pamphlets, rack cards, etc.) and/or public service announcements will be delivered to target populations. Target populations may include:

physicians, pregnant women and/or women of child bearing age. It is anticipated that this activity will occur in September 2013.

- Training – it is the intention of the SCA to request a DDAP approved trainer for one of the three FASD specialized trainings offered by the state.
- c. Marijuana (List/describe the services you will be providing/funding that specifically address* marijuana and would therefore be marked in PBPS as addressing the marijuana block grant priority. If no services will be provided / funded to specifically address marijuana, write “none” in the space below.)

SCA Response:

- None

- d. Driving Under the Influence (List/describe the services you will be providing/funding that specifically address* driving under the influence and would therefore be marked in PBPS as addressing the driving under the influence block grant priority. If no services will be provided / funded to specifically address driving under the influence, write “none” in the space below.)

SCA Response:

- None

- e. Prescription Drug Misuse (List/describe the services you will be providing/funding that specifically address* prescription drug misuse and would therefore be marked in PBPS as addressing the prescription drug misuse block grant priority. If no services will be provided / funded to specifically address prescription drug misuse, write “none” in the space below.)

SCA Response:

ATOD Education Services/Speaking Engagements – one hour presentation targeting high school youth. Presentation covers the following areas specific to prescription drug misuse: current trends, signs and symptoms of abuse and community resources.

* Please reference the Block Grant Priorities message posted in PBPS from 7/2/2012-7/30/2012 for a definition of “specifically addresses.” To access this message in PBPS go to Reports, click on the Administrative tab, click on the report System Message History, select fiscal year 2012/2013, enter begin date 7/2/2012, enter end date 7/30/2012, select status “All,” and then open the report.