**Appendix A.1: Sample Capacity Self-Assessment**

For each area, rate the experience on a scale of one to four with one being low. To get a final average, sum up all the responses on each item and divide by the number of responses. Conversely, the capacity assessment could be conducted as a group at a coalition meeting and ask the group to reach consensus on a final score. Where is the coalition showing high capacity (meaning the coalition is confident in their abilities)? Where is the capacity low (meaning there might be a need to build capacity)?

Please rate each of the areas listed below. Please place a (√) or an (X) in the boxes to indicate the responses.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1= Not very knowledgeable 3= Somewhat knowledgeable  2= A little knowledgeable 4= Very knowledgeable | | | | |
| **Workforce (coalition and prevention staff)** | **1** | **2** | **3** | **4** |
| Ensuring cultural competence in implementation |  |  |  |  |
| Action planning for implementation |  |  |  |  |
| Ensuring sustainability in implementation |  |  |  |  |
| Identification of data sources for performance monitoring |  |  |  |  |
| Data collection and analysis |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1= Inadequate / Not enough 3= Adequate / Sufficient  2= Minimally adequate / Barely enough 4= Highly adequate / Highly sufficient | | | | |
| **Resources** | **1** | **2** | **3** | **4** |
| Funding |  |  |  |  |
| Staff |  |  |  |  |
| Physical space |  |  |  |  |
| Time |  |  |  |  |
| Connections with the served community |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1= Inadequate / Not enough 3= Adequate / Sufficient  2= Minimally adequate / Barely enough 4= Highly adequate / Highly sufficient | | | | |
| **Effective Communication** | **1** | **2** | **3** | **4** |
| **Internal Communication** | | | | |
| Seeks input from all for improving the health of a community |  |  |  |  |
| Conveys data and information internally |  |  |  |  |
| **External Communication** | | | | |
| Evaluates and selects appropriate approaches for disseminating public health data and information |  |  |  |  |
| Conveys data and information to professionals and the public using a variety of approaches |  |  |  |  |
| Facilitates communication among individuals, groups, and organizations |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1= Not very knowledgeable 3= Somewhat knowledgeable  2= A little knowledgeable 4= Very knowledgeable | | | | |
| **Community Engagement** | **1** | **2** | **3** | **4** |
| Establishes relationships to improve health in a community |  |  |  |  |
| Maintains relationships to improve health in a community |  |  |  |  |
| Ensure that community input is used for developing, implementing, and improving policies, programs, and services |  |  |  |  |
| Coalition has broad and diverse representation |  |  |  |  |
| Members are actively engaged with defined roles |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1= Inadequate / Not enough 3= Adequate / Sufficient  2= Minimally adequate / Barely enough 4= Highly adequate / Highly sufficient | | | | |
| **Active Leadership** | **1** | **2** | **3** | **4** |
| Coalition leadership is able to articulate mission and vision |  |  |  |  |
| Coalition leadership is able to communicate effectively with stakeholders |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1= Inadequate / Not enough 3= Adequate / Sufficient  2= Minimally adequate / Barely enough 4= Highly adequate / Highly sufficient | | | | |
| **Readiness for Change** | **1** | **2** | **3** | **4** |
| Past records of successful prevention implementation in the community |  |  |  |  |
| Community is open to new ideas |  |  |  |  |
| Community is committed to creating changes for health |  |  |  |  |
| Community has strong connections among stakeholders |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1= Inadequate / Not enough 3= Adequate / Sufficient  2= Minimally adequate / Barely enough 4= Highly adequate / Highly sufficient | | | | |
| **Sustainability** | **1** | **2** | **3** | **4** |
| Stakeholders want to see prevention services continue and improve |  |  |  |  |
| Community members are invested in the process |  |  |  |  |
| A process has been created to institutionalize the knowledge and community efforts |  |  |  |  |

#### Summarize the capacity assessment results.

Which areas of capacity (strengths) will assist as the work plan is implemented? Which areas of capacity (weaknesses) is the coalition needing to build?

Without building this capacity, how might it be a barrier to implementation of the strategies within the work plan? Which areas of capacity will be included in the capacity building plan and why?

**Appendix A.2: Capacity Building Plan**

Directions: Complete one of these for each area of concern identified either in the self-assessment or the Comprehensive Capacity Assessment Report conducted by the Wyoming Survey & Analysis Center (WYSAC).

Area of low capacity: Strategy to build capacity:

|  |  |  |  |
| --- | --- | --- | --- |
| **#** | **Action Steps:** | **Responsible** Who will be responsible in ensuring the action steps are completed? | **Benchmarks** How will it be identified that the objectives were achieved?  What time frame is expected in achieve them? |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |

*(Add more steps as needed.)*

Capacity Building Priorities (Describe any additional capacity‐ building priorities beyond those associated with specific actions in the table above.)

Sustainability (Describe the plan for continuing the collaborative strategic planning process.)

**Appendix B: Strategy Selection Worksheet**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Superior | Good | Average | Fair | Poor |
| Strength of Evidence | 5 | 4 | 3 | 2 | 1 |
| Readiness | 5 | 4 | 3 | 2 | 1 |
| Coordination | 5 | 4 | 3 | 2 | 1 |
| Appropriate | 5 | 4 | 3 | 2 | 1 |
| Environmental | 5 | 4 | 3 | 2 | 1 |
| Capacity and other Resources | 5 | 4 | 3 | 2 | 1 |
| Political Will and Other Timing | 5 | 4 | 3 | 2 | 1 |
| Feasibility | 5 | 4 | 3 | 2 | 1 |
| Reach | 5 | 4 | 3 | 2 | 1 |
| Sustainability | 5 | 4 | 3 | 2 | 1 |
| TOTAL (Out of 50) | | | | |  |

Descriptions: These are only some things to consider for each category. Ensure that the same criteria is used to evaluate each strategy being considered.

#### Strength of Evidence: Consider the strength of the evidence for each strategy.

Did the strategy receive a recommended rating by an authoritative source or is it considered an effective strategy within the Environmental Strategies Tool?

#### Readiness: Consider how ready the community is to implement the strategy.

Has some groundwork been laid for the strategy? Is the strategy already being implemented and this would “scale-up” the current efforts?

#### Coordination: Consider other efforts within the community.

Would this strategy duplicate other efforts within the community? Would the strategy add value to existing work?

#### Appropriate: Is the strategy appropriate for the identified needs and community conditions?

Is the strategy considered effective for the identified populations? Is the strategy considered effective for the needs identified within the community prioritization?

#### Environmental: Will the strategy appropriately modify policies, systems, or environments, or is it considered a primary prevention strategy?

Is this an upstream strategy designed to modify how people interact with their environment?

#### Capacity and Other Resources: Consider all needs for implementation of the strategy.

Are all resources obtainable needed to implement the strategy with fidelity including funding, workforce, time, etc.

#### Political Will and Other Timing:

Is the timing right within the current political context? Is the strategy legal in the community or state?

#### Feasibility:

Is the strategy realistic within the community? If the strategy requires support or effort from an outside entity, will they be able to provide this?

#### Reach:

What is the estimated number of people to be impacted by the strategy? Will the strategy make a meaningful impact within the identified population? Would another strategy make a larger impact?

#### Sustainability:

How long does the strategy need to be maintained? Is the community able to sustain the effort?

*Adapted from the Ohio “Evidence in Action” Community Guide Project (5/2/13)*

**Appendix C: Community Work Plan**

**Directions:**

Please copy and paste for multiple underage alcohol use strategies.

**UNDERAGE ALCOHOL USE**

**Strategic Objectives:**

### Reduce Access and Availability of Alcohol to Youth [Overarching]:

### Minimize Home Parties Where Alcohol is Served

### Reduce Legal-Aged Young Adults Purchasing and Providing to Underage Youth

### Minimize Retail and On-Premise Sale of Alcohol to Underage Youth

### Limit and Restrict the Location and Density of Alcohol Retail Outlets

### Improve Alcohol Restrictions at Community Events

### Enhance Policies and Enforcement of Underage Drinking [Overarching]:

### Enhance Enforcement of Impaired Driving Laws

### Enhance Enforcement and Compliance with Underage Drinking Laws

### Improve the Discovery of Illegal Activities through Tip-lines or other Techniques

### Improve Systems of Consequences and Incentives Related to Youth and Alcohol

### Strengthen Policies, Programs, and Enforcement to Reduce Excessive Drinking Among College and University Students

### Educate the Community about the Problem and Harms of Underage Drinking [Overarching]:

### Research-Based Education Campaigns to Shift Norms

### Educate Policy Makers

### Educate Stakeholders or General Population

### Train Coalition Members to Educate the Community

### Other

**☐**

**Strategy:**

**Target Population(s):**

**Target Location(s):**

**Anticipated Completion Date:**

**Anticipated Budget:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Action Steps:** | **Responsible Party** | **Start Date:** | **End Date:** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |

*(Add more steps as needed.)*

**Community Conditions: (What are the intervening variables and contributing factors? Why did the community choose this strategy?)**

**Budget Description: (Please provide a brief breakdown of the budget.)**

**Directions:**

Please copy and paste for multiple adult binge drinking strategies.

**ADULT OVERCONSUMPTION**

**Strategic Objectives:**

### Reduce Access and Availability of Alcohol to Adults [Overarching]:

### Restrict Retail and On-Premise Drink Specials

### Minimize On-Premise Over-service of Alcohol to Adults

### Limit and Restrict the Location and Density of Alcohol Retail Outlets

### Improve Alcohol Restrictions at Community Events

### Enhance Policies and Enforcement on Adult Overconsumption [Overarching]:

### Enhance Enforcement of Impaired Driving Laws

### Enhance Enforcement and Compliance with Drinking Laws

### Improve Systems of Consequences and Incentives Related to Adults and Adult Overconsumption

### Strengthen Policies, Programs, and Enforcement to Reduce Excessive Drinking Among College and University Students

### Strengthen Relationships with Healthcare Providers and Encourage Their Use of Screening and Brief

### Intervention (SBI)

### Educate the Community about the Problem and Harms of Adult Overconsumption [Overarching]:

### Research-based Education Campaigns to Reach Target Audiences

### Educate Legislators and Policy Makers

### Educate Stakeholders

### Train Coalition Members to Educate the Community

### Other

**☐**

**Strategy:**

**Target Population(s):**

**Target Location(s):**

**Anticipated Completion Date:**

**Anticipated Budget:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Action Steps:** | **Responsible Party** | **Start Date:** | **End Date:** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |

*(Add more steps as needed.)*

**Community Conditions: (What are the intervening variables and contributing factors? Why did the community choose this strategy?)**

**Budget Description: (Please provide a brief breakdown of the budget.)**

**Directions:**

Please copy and paste for multiple tobacco strategies.

**TOBACCO PREVENTION**

**Strategic Objectives:**

### Keep People from Starting to Use Tobacco [Overarching]:

### Expand Research-Based Education Campaigns to Shift Norms/Perceptions

### Expand Education of Tobacco Retailers on Sales to Minors

### Support or engage in efforts to reduce and monitor the sale of tobacco to minors (local law enforcement, FDA, Synar)

### Restrict Tobacco Retail Outlet Density

### Strengthen Policies and Consequences for Underage Tobacco Use/Vaping

### Modify or Implement Smoke, Tobacco, and Vape-Free Environment Policies in Targeted Settings

### Help Those Who Use Tobacco to Quit [Overarching]:

### Increase Referrals to WQTP

### Promote Other Local Cessation Services

### Strengthen Relationships with Healthcare Providers to Encourage Cessation (Ask, Advise, Refer [AAR]) and WQTP

### Modify or Implement Smoke, Tobacco, and Vape-Free Environment Policies in Targeted Settings

### Educate the Community about the Problem and Harms of Tobacco Use [Overarching]:

### Research-Based Education to Reach Target Audiences, include smoking and secondhand smoke

### Educate Legislators and Policy Makers

### Educate Stakeholders

### Train Coalition Members to Educate the Community

### Other

**☐**

**Strategy:**

**Target Population(s):**

**Target Location(s):**

**Anticipated Completion Date:**

**Anticipated Budget:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Action Steps:** | **Responsible Party** | **Start Date:** | **End Date:** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |

*(Add more steps as needed.)*

**Community Conditions: (What are the intervening variables and contributing factors? Why did the community choose this strategy?)**

**Budget Description: (Please provide a brief breakdown of the budget.)**

**Directions:**

Please copy and paste for multiple opioid/other drug strategies.

**OPIOID MISUSE/ABUSE or OTHER DRUG PREVENTION**

**Strategic Objectives:**

### Reduce Access to Opioids [Overarching]:

### Increase Safe Storage and Disposal of Prescription Drugs

### Expand and Promote Prescription Drug Take-Back Events and Options

### Engage Healthcare Providers to Promote New Prescribing Practices and Guidelines

### Increase the Use of the PDMP among Healthcare Providers

### Educate the Community about the Problem and Harms of Opioid/Drug Misuse/Abuse [Overarching]:

### Research-based Education to Reach Target Audiences

### Educate Legislators and Policy Makers

### Educate Stakeholders

### Train Coalition Members to Educate the Community

### Other

**☐**

**Strategy:**

**Target Population(s):**

**Target Location(s):**

**Anticipated Completion Date:**

**Anticipated Budget:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Action Steps:** | **Responsible Party** | **Start Date:** | **End Date:** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |

*(Add more steps as needed.)*

**Community Conditions: (What are the intervening variables and contributing factors? Why did the community choose this strategy?)**

**Budget Description: (Please provide a brief breakdown of the budget.)**

**Directions:**

Please copy and paste for suicide prevention strategies.

**SUICIDE PREVENTION**

**Strategic Objectives:**

### Upstream Prevention [Overarching]:

### Enhance Support to Communities to Address Suicide

### Expand Effective Programs that Promote Wellness and Address Factors that Lead to Suicide

### Decrease Unmet Behavioral Health Needs

### Improve Access to High-Quality Mental Health Care

### Decrease Stigma Related to Mental Health

### Decrease Availability and Access to Lethal Means

### Improve Knowledge, Attitudes, and Behaviors through Researched-informed Communication

### Improve School and Workplace Policies

### Postvention [Overarching]:

### Improve Care and Support to Suicide Survivors

### Improve Care and Support to Suicide Attempt Survivors

### Implement Effective Community and/or Entity’s Response to Suicide

### Enhance Media Reporting and Response

### Other

**☐**

**Strategy:**

**Target Population(s):**

**Target Location(s):**

**Anticipated Completion Date:**

**Anticipated Budget:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Action Steps:** | **Responsible Party** | **Start Date:** | **End Date:** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |

*(Add more steps as needed.)*

**Community Conditions: (What are the intervening variables and contributing factors? Why did the community choose this strategy?)**

**Budget Description: (Please provide a brief breakdown of the budget.)**