

# State Targeted Response to Opioids (STR) Capacity Workbook



Strategic  
Prevention  
Framework  
*of Iowa*

## Introduction

The following are materials will assist you in the capacity step of the Strategic Prevention Framework process. Some of the following Resource Mapping materials were created by the National Center of Secondary Education and Transition through the University of Minnesota. These materials were adapted for Iowa's SPF SIG and Partnerships for Success grants and have been further adapted for this project.

## Overview

Capacity is the second step of the Strategic Prevention Framework. This is where you begin to build and mobilize resources and readiness.

According to SAMHSA:

Substance use and misuse are complex problems that require the energy, expertise, and experience of multiple players, working together across disciplines, to address. Collaboration can help you tap the resources available in your community, extend the reach of your own resources by making them available to new audiences, and ensure that your efforts are culturally competent. By working in partnership with community members and involving them in all aspects of planning, implementation, and evaluation, you demonstrate respect for the people you serve and increase your own capacity to provide services that meet genuine needs, build on strengths, and produce positive outcomes.



<https://www.samhsa.gov/capt/applying-strategic-prevention-framework/step2-build-capacity>

## Catchment Area Resource Mapping

### What is Resource Mapping?

Resource mapping is a strategy for promoting 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 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 Communities?**

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 abuse related 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 related services
- Encourage collaboration
- Successfully achieve outcomes

### **Scanning the Available Resources**

Grantees will need to create a comprehensive list of the various services provided that will have an impact on the opioid crisis, especially in expanding the accessibility of Medication Assisted Treatment. This includes prevention and treatment agencies and coalitions, healthcare providers, pharmacists, law enforcement and first responders. It will also include other service providers that have shared outcomes with substance abuse prevention and treatment, such as groups and agencies that address other health issues including behavioral health, and community wellness initiatives. Sectors that you are required to engage are included in the chart in bold. You may add in as many additional rows as you need to represent the array of work and services happening in your county.

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 (both telephone 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 catchment area and is available for you to use.

### **Additional Capacity Resources**

For additional information, tools and resources:

*CAPT Collaboration Toolkit*

<https://captcollaboration.edc.org/>

*SAMHSA Step 2: Build Capacity*

<https://www.samhsa.gov/capt/applying-strategic-prevention-framework/step2-build-capacity>

University of Kansas Community Tool Box

<http://ctb.ku.edu/en/toolkits>

CADCA (Community Anti-Drug Coalitions of America) Capacity Primer

<http://www.cadca.org/sites/default/files/resource/files/capacityprimer.pdf>

### Catchment Area Capacity

Stakeholder/ Sector (required sectors are in bold)	Organization/ Group Name	Types of Services Provided and How They Relate to STR	Are they currently connected with our efforts? (Yes or No)	If Yes, Key Contact	If No, Possible Point of Contact	If no, how do you specifically plan to engage this group/agency/ sector?
<b>Treatment</b>						
<b>SUD Prevention</b>						
<b>Opioid Treatment Program</b>						
<b>Healthcare Provider: Pharmacist</b>						
<b>Healthcare Provider: Prescriber</b>						
Other Healthcare Provider						
<b>First Responders: EMS/Fire Department</b>						
<b>First Responders: Law Enforcement</b>						
Other First Responder						
<b>Recovery Community</b>						
College/ University						
Corrections/ Re-Entry						

Court System						
Faith Community						
Government/ Elected Official						
Harm Reduction Program						
Veterinarian						
Employer/ business leader						

### Analyzing Resources

Identify services that overlap or seem to be missing from your resources review. Then list the implications of these overlaps and/or gaps for your service system as they relate to addressing the opioid crisis.

**Comment [H1]:** I debated about also including something for them to identify resources they think they will need (for example someone experienced in providing MAT or knowledgeable about insurance billing) but I don't think we want them putting the cart before the horse and being too strategy specific yet, so I think we may want to include that in their strategic planning instead. I think this part is more about who is informing and engaging in the SPF process and how to get the needed stakeholders on board.

Overlaps	Gaps	Implications

