

Part 2:
Strategic Planning
Implementation
Evaluation

Strategic Prevention Framework

Tips for maximizing the SPF
& avoiding common pitfalls

Developed for the Iowa Department of Public Health, Bureau of Substance Abuse
Facilitators: Laurie Barger Sutter & Mary Ellen Shannon, Growth Partners

Nine Critical Elements of MAPP

Sound familiar?

- Creating strategic plans
- Encouraging systems thinking
- Enlisting community ownership and stakeholder investment
- Sharing responsibility and working toward a collective vision
- Using comprehensive data to inform the process
- Building on previous experience
- Encouraging partnerships
- Involving the local public health system
- Celebrating successes



Crosswalk

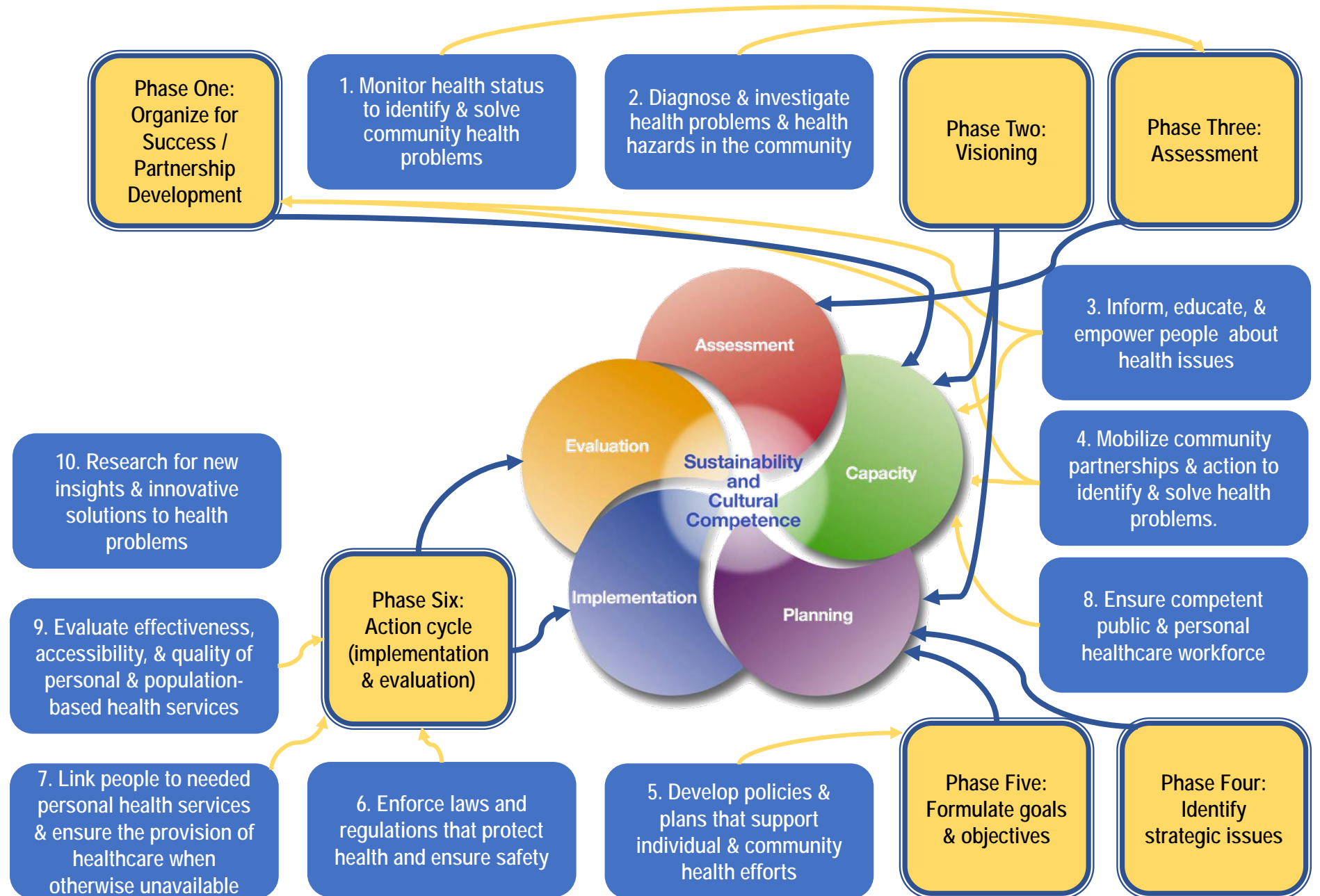
SAMHSA

Strategic
Prevention
Framework

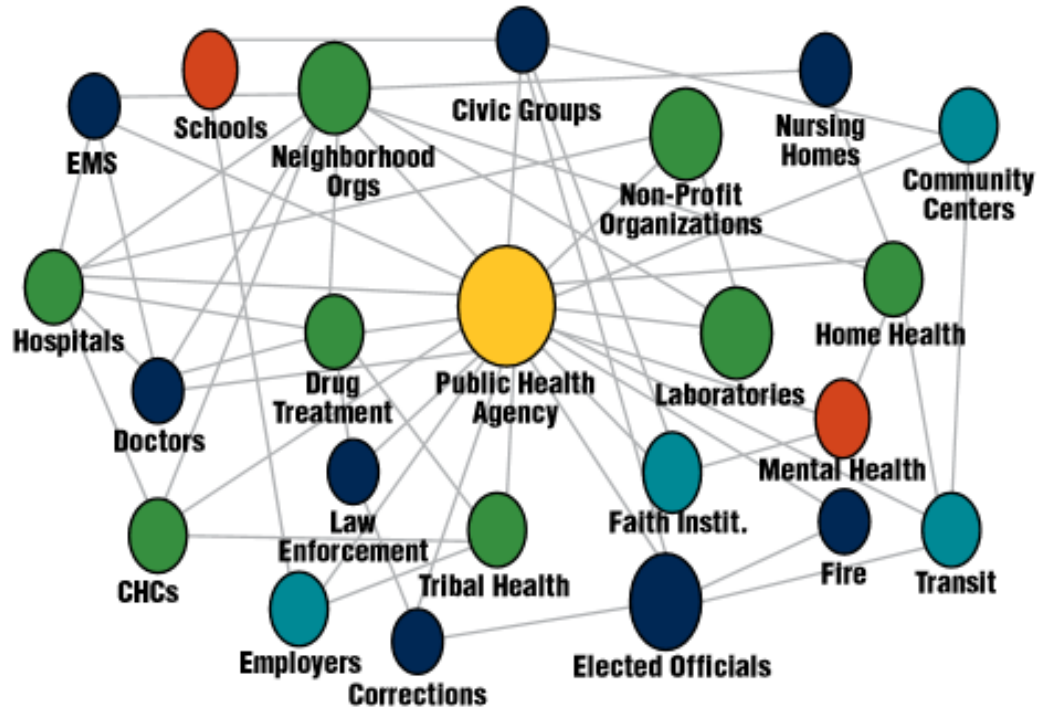
CDC

10 Essential
Public Health
Services

Mobilizing for
Action through
Planning &
Partnerships
(MAPP)

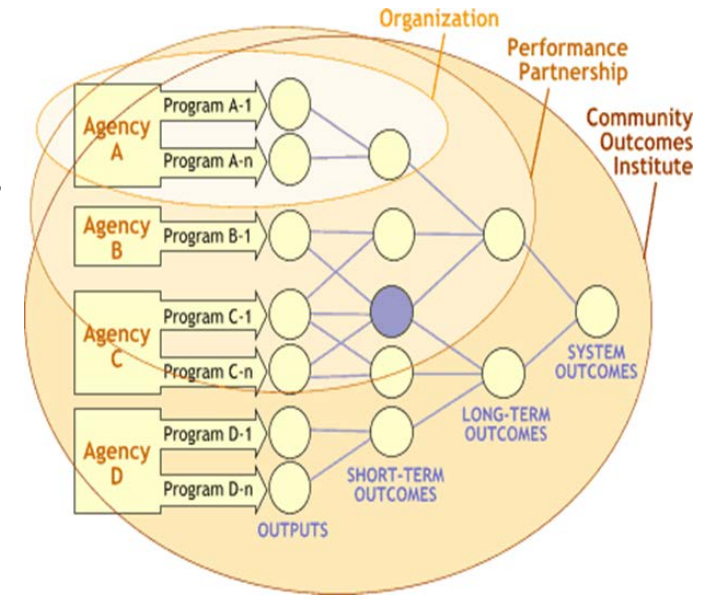


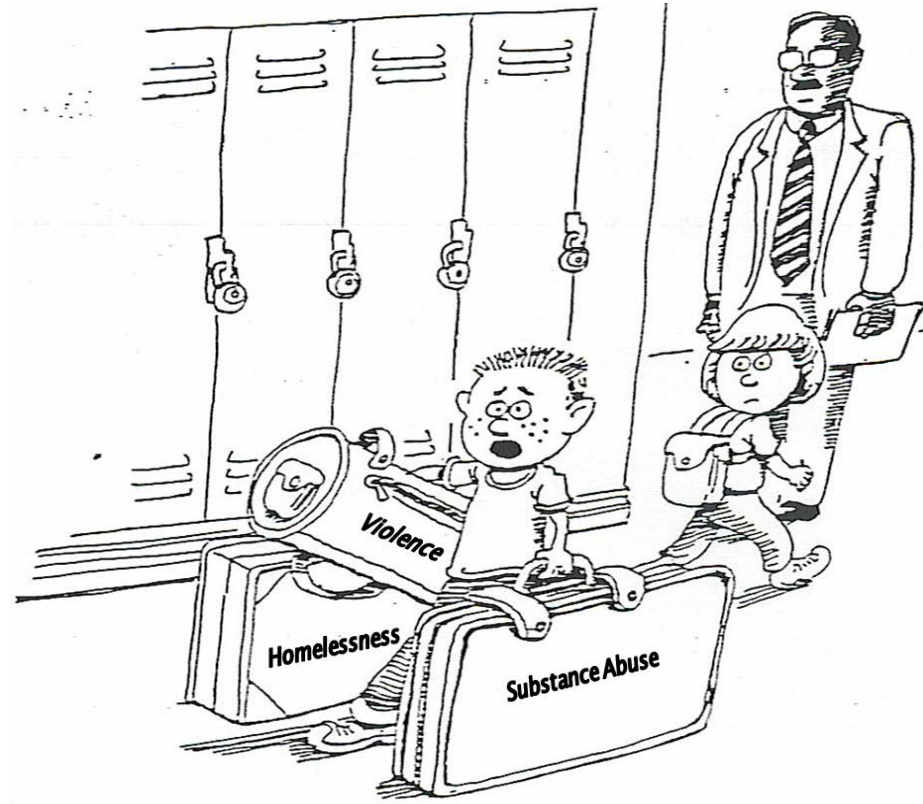
How Essential Public Health Services Engage One Another (MAPP Users Handbook)



Prevention Systems - coordinated, strategic partnerships which jointly:

- Assess & share data
- Plan & identify priorities
- Select & implement interventions
- Allocate, or reallocate, resources
- Monitor & evaluate effectiveness





*"Could someone help me with these?
I'm late for math class."*

To prevent a **Syndemic** you must identify the most important factors that drive it, as well as the forces that tie the factors together.

Crosswalk Types of Partners



STAKEHOLDERS
MAPP: CIRCLE OF
INFORMATION &
AWARENESS



COLLABORATORS
MAPP: CORE
GROUP/CIRCLE OF
ENGAGEMENT



ALLIES
MAPP: CIRCLE OF
CHAMPIONS



OPINION LEADERS
MAPP: CIRCLE OF
CHAMPIONS

Problem Statement & Target Populations

Goals & Target Populations

Objectives & Target Populations

Outcomes

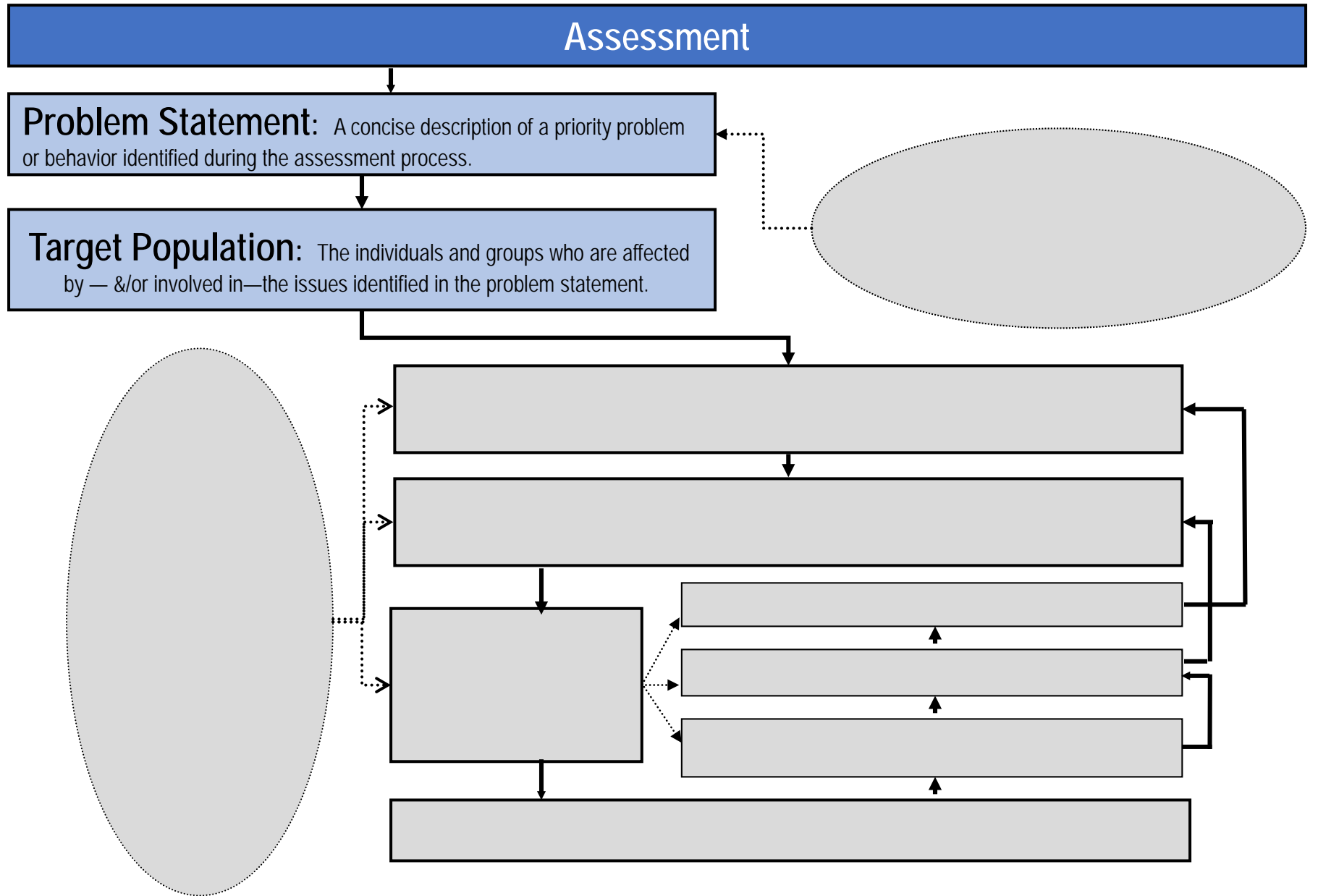
Strategy Selection

Strategic Planning

Planning Map

~

Problems & Target Populations



Problem Statement

A concise description of a priority issue identified during the assessment process.

Three qualities
of a good
**Problem
Statement**



It's supported by data



There is widespread
consensus about the
problem



There is political will to solve
the problem



Lack Trap

A statement that frames a problem as a “lack” of something assumes that addressing the “lack” will solve the problem.

It almost never does.

Example Problem Statement

In 2018, *(when)* 122 people *(how many)* died due to alcohol-related motor vehicle crashes *(what)* in Gordon County, *(where)* which has had the second highest rate in the state after Metropolis for the past five years.



Strategic Plan Template - Example

Assessment Summary:

- **Consequence:** Gordon County has had the second highest rate of fatalities from alcohol-related car crashes in the state from 2013 – 2018, and the rate has increased each year over that time period.
- **Behavior/Target Populations:** TBD
- **Intervening Variables:** TBD

Problem Statement: In 2018, 122 people died due to alcohol-related motor vehicle crashes in Gordon County, which has had the second highest rate in the state after Metropolis for the past 5 years.

Goal 1:

Long-Term Outcome:

Long-term Outcome Indicators:

Objective 1.1

Intermediate Outcome:

Intermediate Outcome Indicator(s):

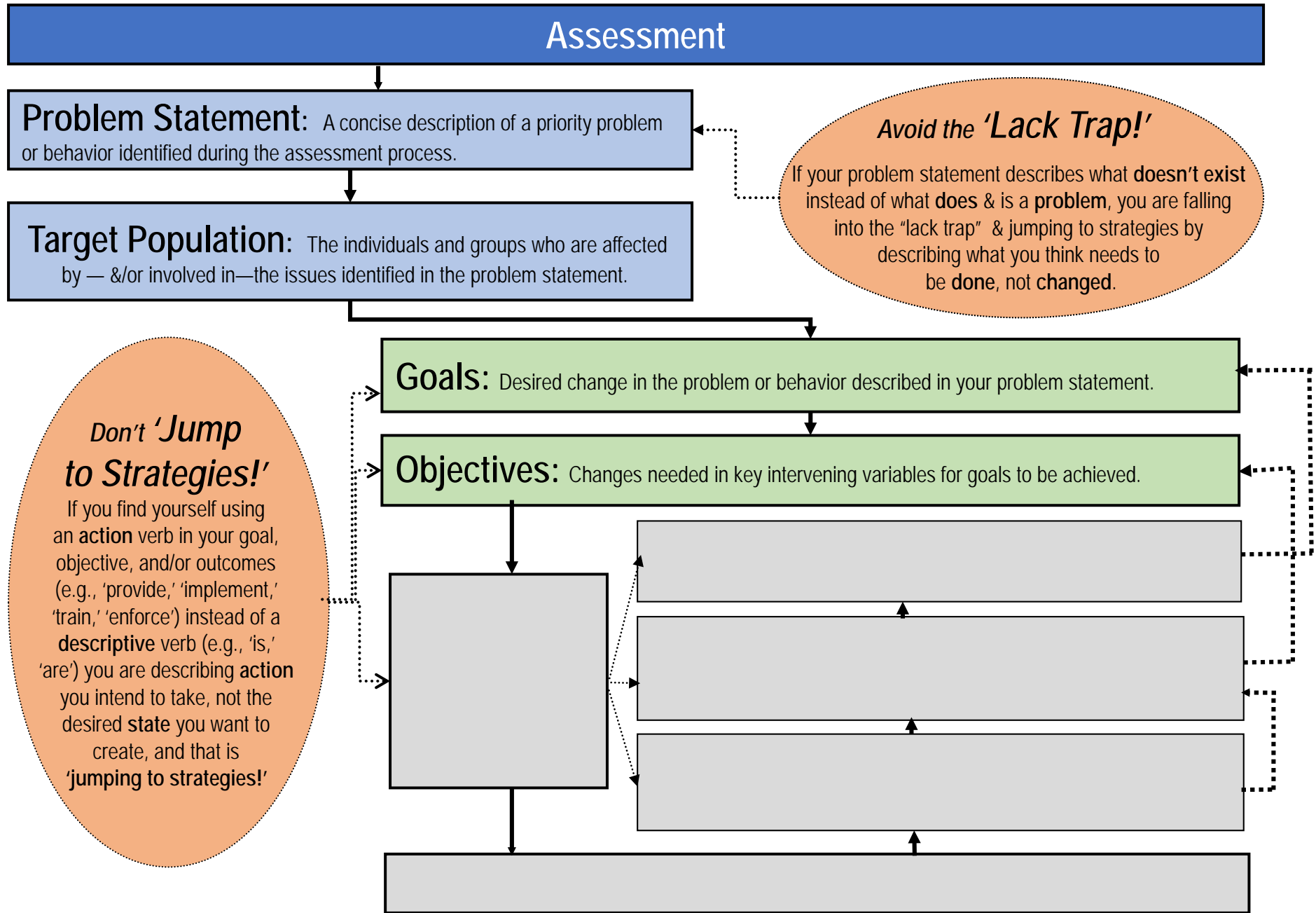
Immediate Outcomes	Strategy	Activities	Timeline		Who Is Responsible	Process Indicators	Outputs
			Start Date	End Date			

Planning
Template
~
Problem &
Goal

Planning Map

~

Goals & Objectives



Goal

Desired change in the issue described in
your problem statement

Don't Jump to Strategies!

If you find yourself using an **action verb** in your goal (*provide, train, enforce*) instead of a **descriptive verb** (*is, are*) you're describing what you think needs to be *done*, not the desired state you hope to *achieve*, & that is "*jumping to strategies!*"



Example Goal Statement

Reduce fatalities due to alcohol-related motor vehicle crashes in Gordon County.



Strategic Plan Template - Example

Assessment Summary:

- **Consequence:** Gordon County has had the second highest rate of fatalities from alcohol-related car crashes in the state from 2013 – 2018, and the rate has increased each year over that time period.
- **Behavior/Target Populations:** TBD
- **Intervening Variables:** TBD

Problem Statement: In 2018, 122 people died due to alcohol-related motor vehicle crashes in Gordon County, which has had the second highest rate in the state after Metropolis for the past 5 years.

Goal 1: Reduce fatalities due to alcohol-related motor vehicle crashes in Gordon County

Long-Term Outcome:

Long-term Outcome Indicators:

Objective 1.1

Intermediate Outcome:

Intermediate Outcome Indicator(s):

Immediate Outcomes	Strategy	Activities	Timeline		Who Is Responsible	Process Indicators	Outputs
			Start Date	End Date			

Planning
Template

~

Problem &
Goal

Strategic Plan Template - Example

Assessment Summary:

- **Consequence:** Gordon County has had the second highest rate of fatalities from alcohol-related car crashes in the state from 2013 – 2018, and the rate has increased each year over that time period.
- **Behavior/Target Populations:** Crashes due to drinking drivers—primarily males ages 21-25—comprised a significant percentage of the fatalities, but fatalities also involved intoxicated pedestrians and bicyclists and non-drinking drivers. Crashes and fatalities were clustered along a 3-mile section of the Dale Highway.
- **Intervening Variables:** TBD

Problem Statement: In 2018, 122 people died due to alcohol-related motor vehicle crashes in Gordon County, which has had the second highest rate in the state after Metropolis for the past 5 years.

Goal 1: Reduce fatalities due to alcohol-related motor vehicle crashes in Gordon County.

Long-Term Outcome:

Long-term Outcome Indicators:

Objective 1.1

Intermediate Outcome:

Intermediate Outcome Indicator(s):

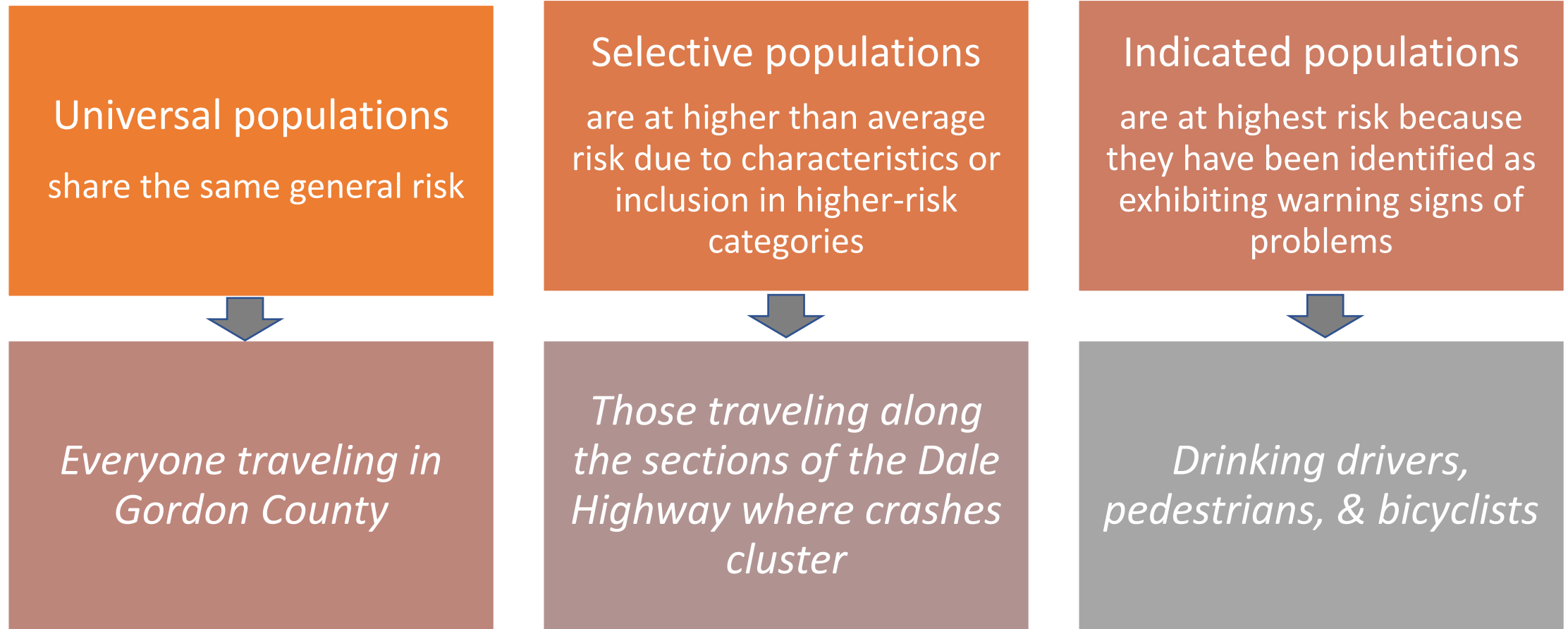
Immediate Outcomes	Strategy	Activities	Timeline		Who Is Responsible	Process Indicators	Outputs
			Start Date	End Date			

Planning
Template

~

Problem &
Goal

Target Populations: Institutes of Medicine Classification System



Objectives

Changes needed in **key** intervening variables for goals to be achieved.

Pareto
Principle

THE 80
20 RULE



Pareto
Applications

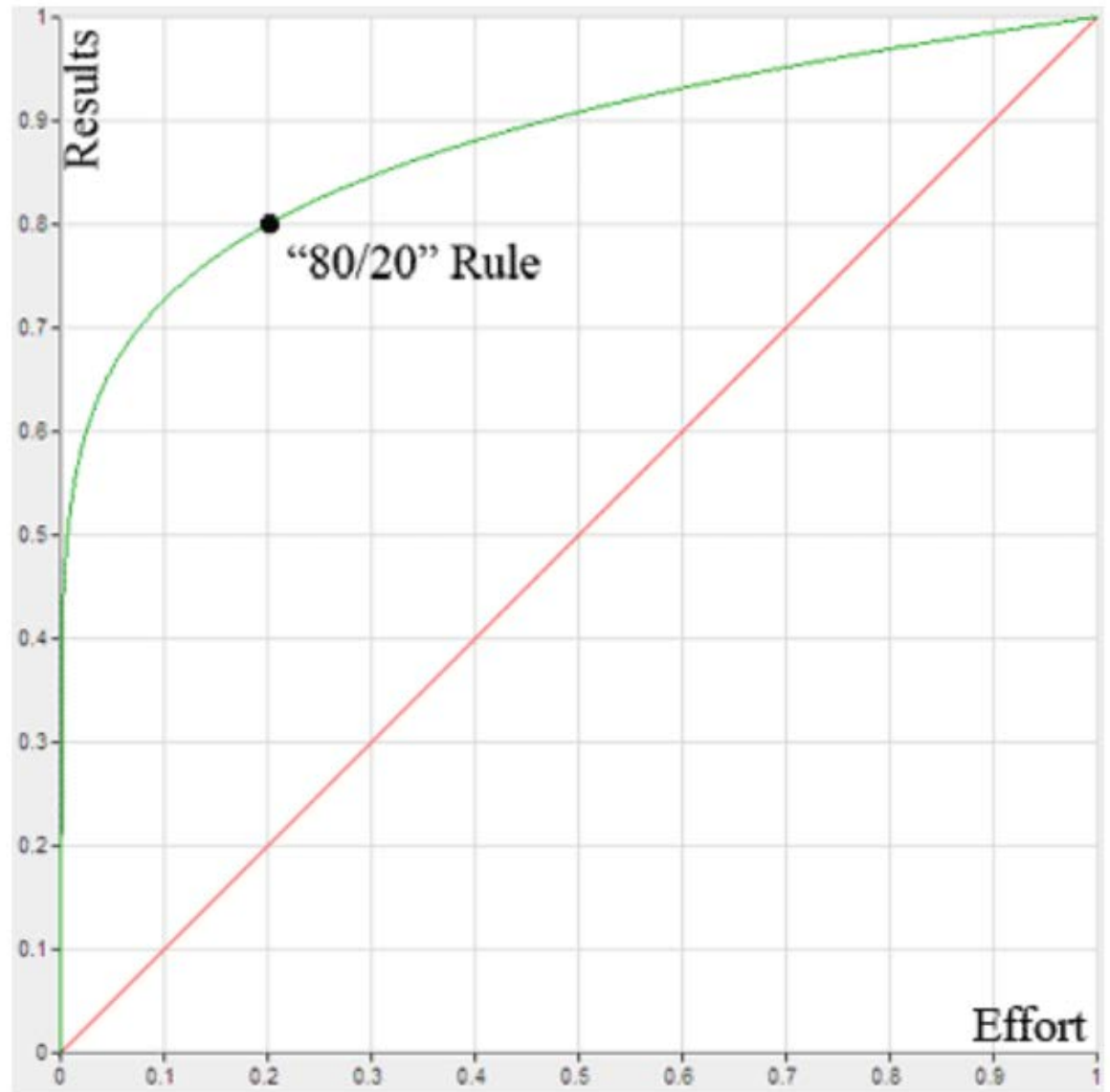
Health Care: 20% of patients account for 80% of healthcare spending

Sales: 20% of customers account for 80% of all profits

Technology: 80% of system crashes are caused by 20% of all “bugs”

Workforce: 80% of outcomes are achieved by 20% of workers

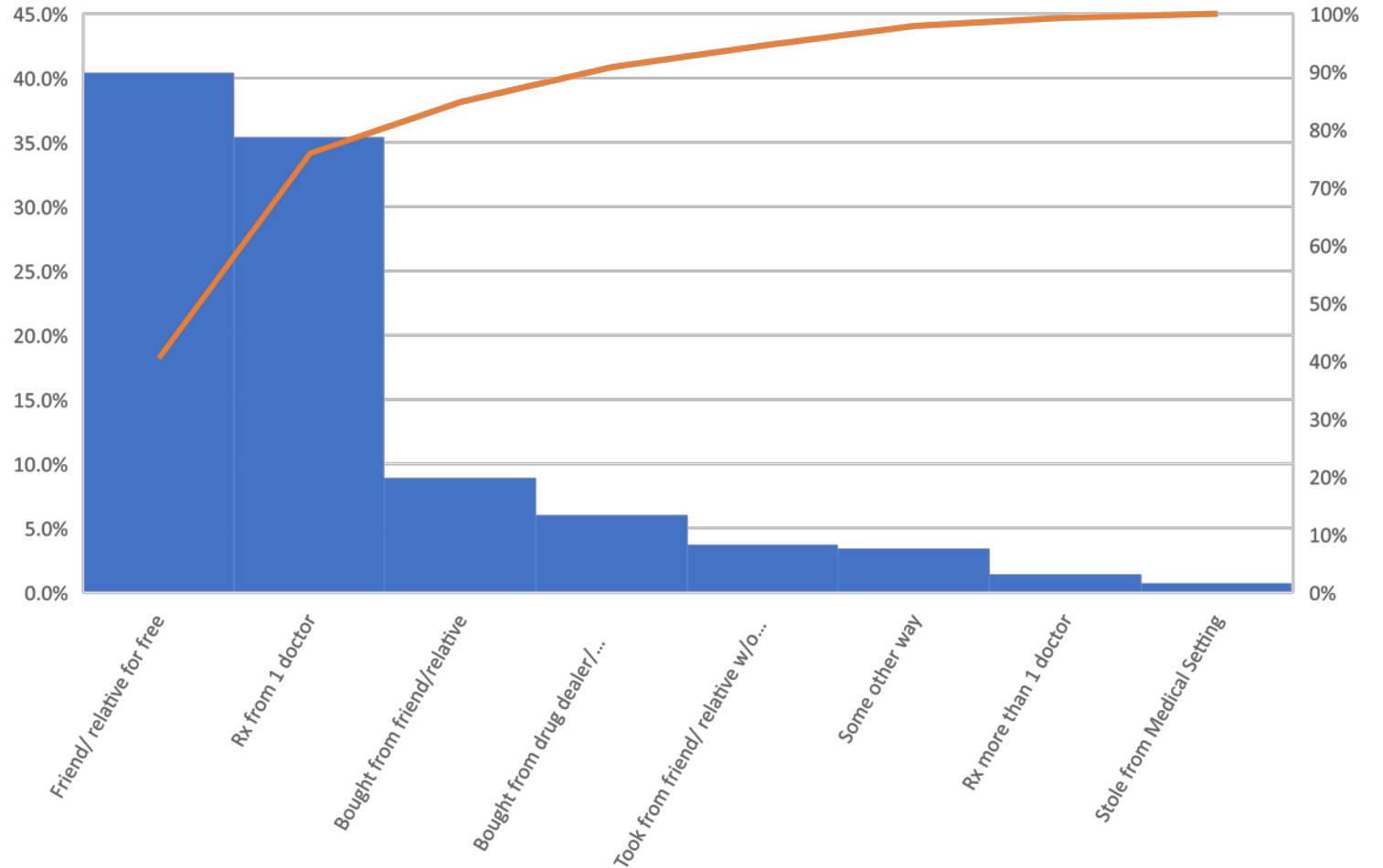
Pareto Principle Chart



Behavioral Health Pareto Chart

Pareto Principle at work in substance misuse

Source Where Pain Relievers Were Obtained for Most Recent Misuse among People Aged 12 or Older Who Misused Prescription Pain Relievers in the Past Year: Percentages 2016 (NSDUH, 2016)



Planning Template

Problem & Goal

Strategic Plan Template - Example

Assessment Summary:

- **Consequence:** Gordon County has had the second highest rate of fatalities from alcohol-related car crashes in the state from 2013 – 2018, and the rate has increased each year over that time period.
- **Behavior/Target Populations:** Crashes due to drinking drivers—primarily males ages 21-25—comprised a significant percentage of the fatalities, but fatalities also involved intoxicated pedestrians and bicyclists and non-drinking drivers. Crashes and fatalities were clustered along a 3-mile section of the Dale Highway.
- **Intervening Variables:** Of the many possible intervening variables, assessment revealed that the most important one tying the three groups together (i.e., intoxicated drivers, bicyclists, and pedestrians) was retail and restaurant/bar access to alcohol past the point of intoxication.

Problem Statement: In 2018, 122 people died due to alcohol-related motor vehicle crashes in Gordon County, which has had the second highest rate in the state after Metropolis for the past 5 years.

Goal 1: Reduce fatalities due to alcohol-related motor vehicle crashes in Gordon County.

Long-Term Outcome:

Long-Term Outcome Indicator(s):

Direct Target Populations

~

Gordon County
Example

Universal populations: all motor vehicle drivers & passengers, bicyclists, and pedestrians in Gordon County.

Selective populations: motor vehicle drivers & passengers, bicyclists, and pedestrians traveling through the 3-mile stretch of the Dale Highway in Gordon County where alcohol-related crash fatalities are clustered.

Indicated populations: motor vehicle drivers, bicyclists, and pedestrians in Gordon County who have consumed alcohol prior to traveling.

Indirect Target Populations

~

Gordon County
Example

Retail clerks

Beverage servers

Companions of those consuming alcohol
prior to traveling

Don't Jump to Strategies!

If you find yourself using an **action verb** in your objective (*provide, train, enforce*)

instead of a **descriptive verb** (*is, are*)

you're describing what you think needs to be *done*, not the desired state you hope to *achieve*, & that is "*jumping to strategies!*"

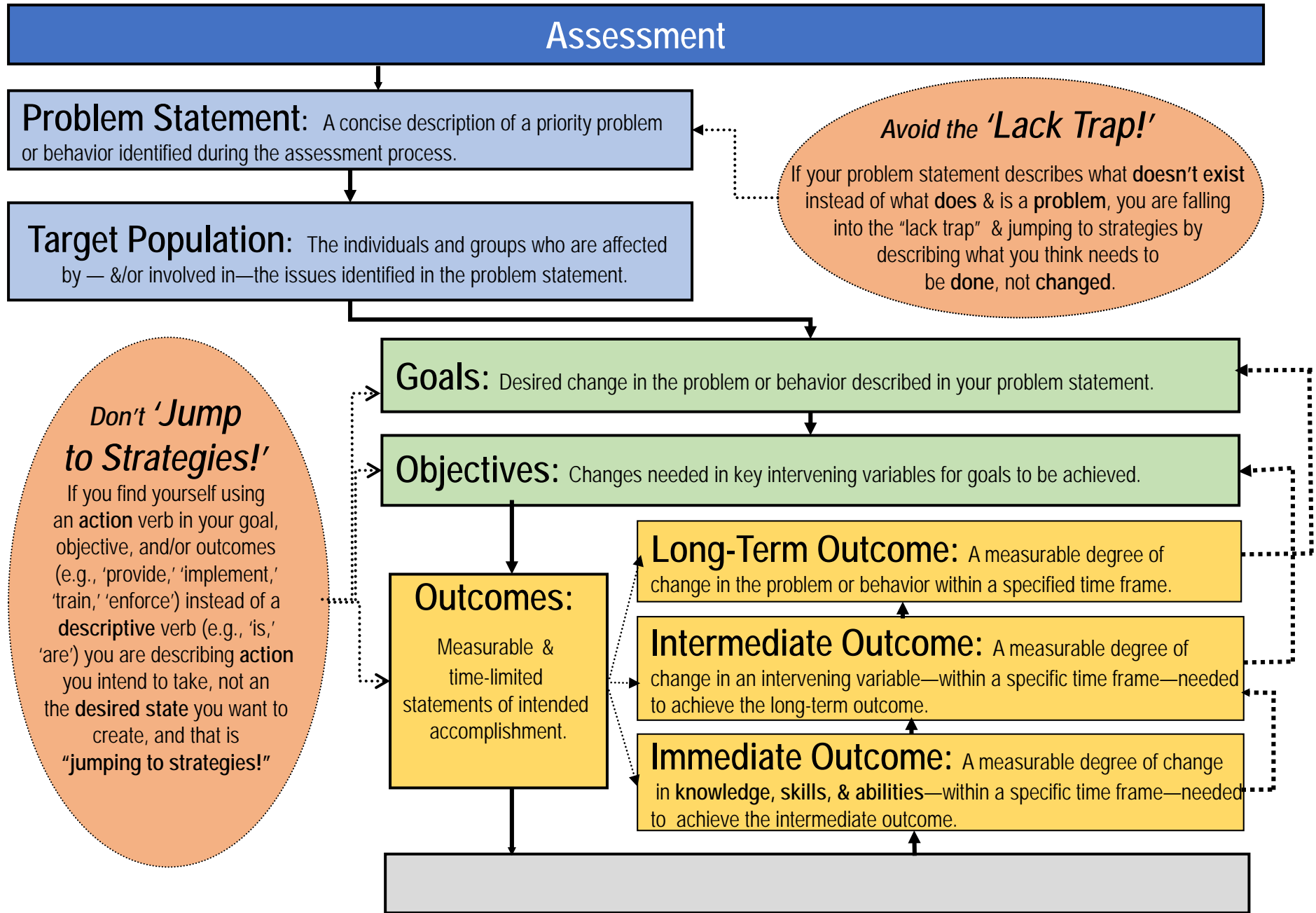


Example Objective Statements

1. Reduce retail access to alcohol for persons who are nearing or in a state of intoxication
2. Reduce over service of alcohol in restaurants & bars



Planning Map ~ Outcomes



Don't Jump to Strategies!

If you find yourself using an **action verb** in your outcome (*provide, train, enforce*)

instead of a **descriptive verb** (*is, are*)

you're describing what you think needs to be *done*, not the desired state you hope to *achieve*, & that is "*jumping to strategies!*"



Example Outcome Statements

Long-term: Reduce the rate of alcohol-related motor vehicle crash deaths in Gordon County by 10% in 5 years

(Measurement: Department of Motor Vehicles crash data)



Example Outcome Statements

Long-term: Reduce the rate of alcohol-related motor vehicle crash deaths in Gordon County by 10% in 5 years

Intermediate:

- Reduce retail sales of alcohol to persons who are already alcohol-impaired by 25% in 4 years

(Measurement: nonenforcement compliance checks, 'point of source' data)

- Reduce alcohol service in bars and restaurants to persons who are nearing or in a state of intoxication by 40% in 4 years

(Measurement: observational studies, 'point of source' data)



Example Outcome Statements

Intermediate: Reduce retail sales of alcohol to persons who are already alcohol-impaired by 25% in 4 years

Immediate:

- Increase retail clerk knowledge of laws prohibiting retail sales of alcohol to intoxicated persons by 75% in 1 year
- Increase retail clerk knowledge of the signs of alcohol impairment by 60% in 1 year
(Measurement for both above: pre-/post-test data)
- Increase retail clerk ability to refuse sales of alcohol to persons who appear to be intoxicated by 30% in 2 years
(Measurement: nonenforcement compliance checks, 'point of source' data)



Example Outcome Statements

Intermediate: Reduce over service of alcohol in bars and restaurants to persons who are nearing or in a state of intoxication by 40% in 4 years

Immediate:

- Increase server knowledge of guidelines for alcohol consumption by 80% in 1 year
- Increase server knowledge of the signs of alcohol impairment by 60% in 1 year
(Measurement for both above: pre-/post-test data)
- Increase server ability to refuse sales of alcohol to persons who appear to be intoxicated by 50% in 2 years
(Measurement: observational studies, 'point of source' data)



Planning
Template

~

Long-term
Outcomes

Strategic Plan Template - Example

Assessment Summary:

- **Consequence:** Gordon County has had the second highest rate of fatalities from alcohol-related car crashes in the state from 2013 – 2018, and the rate has increased each year over that time period.
- **Behavior/Target Populations:** Crashes due to drinking drivers—primarily males ages 21-25—comprised a significant percentage of the fatalities, but fatalities also involved intoxicated pedestrians and bicyclists and non-drinking drivers. Crashes and fatalities were clustered along a 3-mile section of the Dale Highway.
- **Intervening Variables:** Of the many possible intervening variables, assessment revealed that the most important one tying the three groups together (i.e., intoxicated drivers, bicyclists, and pedestrians) was retail and restaurant/bar access to alcohol past the point of intoxication.

Problem Statement: In 2018, 122 people died due to alcohol-related motor vehicle crashes in Gordon County, which has had the second highest rate in the state after Metropolis for the past 5 years.

Goal 1: Reduce fatalities due to alcohol-related motor vehicle crashes in Gordon County.

Long-Term Outcome 1:

- Reduce the rate of alcohol-related motor vehicle crash deaths in Gordon County by 10% in four years (Data source: Department of Motor Vehicles crash data)

Long-Term Outcome Indicators:

**Planning
Template**
 ~
**Intermediate &
Immediate
Outcomes**

Objective 1.1: Reduce retail access to alcohol for persons who are already alcohol-impaired							
Intermediate Outcome 1.1.: Reduce retail sales of alcohol to persons who are already alcohol-impaired by 25 percent in 4 years (Data sources: non-enforcement compliance check results, 'point of source' data)							
Intermediate Outcome Indicators:							
Immediate Outcomes	Strategy	Activities	Timeline		Who's Responsible	Process Indicators	Outputs
			Start	End			
1.1.1. Increase retail clerk knowledge of laws prohibiting retail sales of alcohol to intoxicated persons by 75% in 1 year							
1.1.2. Increase retail clerk knowledge of the signs of alcohol impairment by 60% in 1 year							
1.1.3. Increase retail clerk ability to refuse sales of alcohol to persons who appear to be intoxicated by 30% in 2 years							

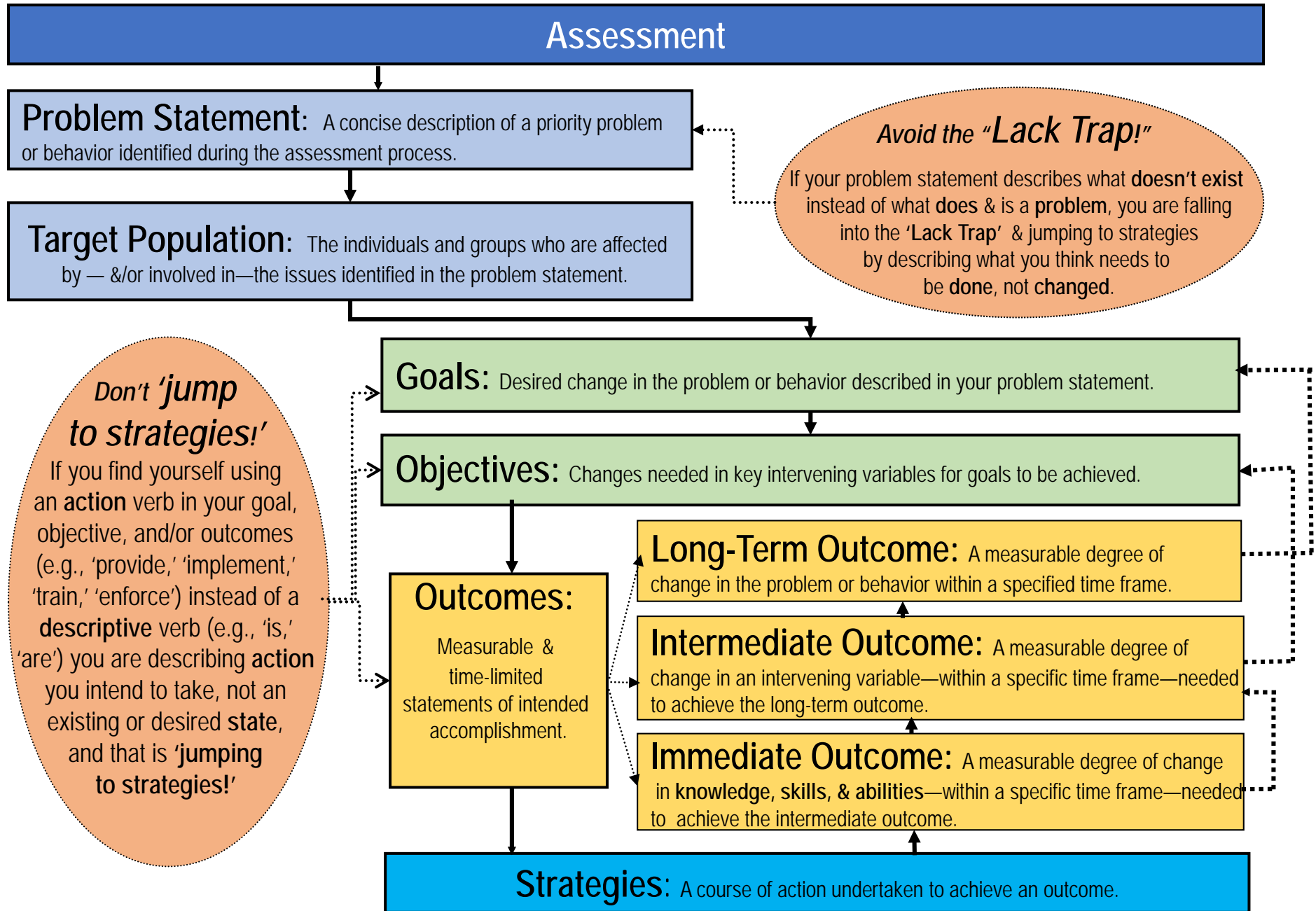
**Planning
Template**
 ~
**Intermediate &
Immediate
Outcomes**

Objective 1.2: Reduce over service of alcohol in bars and restaurants							
Intermediate Outcome 1.2.: Reduce alcohol service in restaurants and bars to persons who are nearing or in a state of intoxication by 40 percent in 4 years (Data sources: observational studies, 'point of source' data)							
Intermediate Outcome Indicators:							
Immediate Outcomes	Strategy	Activities	Timeline		Who's Responsible	Process Indicators	Outputs
			Start	End			
1.2.1. Increase server knowledge of guidelines for alcohol consumption by 80% in 1 year							
1.2.2. Increase server knowledge of the signs of alcohol impairment by 60% in 1 year							
1.2.3. Increase server ability to refuse sales of alcohol to persons who appear to be intoxicated by 50% in 2 years							

Planning Map

~

Strategies



Strategies

Individual

individual behaviors
and attributes

Environmental

conditions in the
shared environment

Strategies

Programs: Structured interventions designed to change attributes or conditions within a defined area or population. *Usually individual; may also be environmental*

Policies: Formally codified rules, regulations, laws, or standards designed to prevent problems; informal and unwritten standards and norms. *Environmental*

Practices: Activities used to implement policies designed to prevent problems and consequences. *Environmental*

Evidence- based Strategies

Interventions “based on a strong theory or conceptual framework that comprise activities grounded in that theory or framework & that produce empirically verifiable positive outcomes when well implemented.”

(Substance Abuse & Mental Health Services Administration)

Conceptual Fit

Strategies are based on a theory of change which is carefully aligned with the intervening variables that most contribute to the problem to be prevented.

Practical Fit

Strategies are carefully aligned to capacity, resources, and readiness of the community and organizations responsible for implementing them.

Strategy Considerations

Characteristics of the population for which the strategy has been documented to be effective

Nature and intended reach and scope of the strategy

Geographic setting for which the strategy has been documented to be effective

Domains or social environments in which the strategy has proved to be effective

Intervening variables the strategy has proven successful in addressing

Outcomes the strategy has proven successful in achieving

Implementation and evaluation requirements associated with the strategy

Costs associated with the strategy

Sustainability of the outcomes that will be produced

Example Guidance Document

Strategy	Target Population		Target Setting	Cultural Adaptations (Validated or Replicated) ¹	Primary Domain	IOM Category	Risk Factors to Decrease	Protective Factors to Increase	Other Targeted Factors	Key Activities & Strategies	Key Outcomes	Documented Outcomes Area(s)	Cost Estimates
	Age	Sex											
Communities Mobilizing for Change on Alcohol	13-20	M F	Rural Suburban Urban Communities	Validated populations: CMCA has been used successfully with all ages, both genders, and a diverse ethnic population mix Cultural adaptations: Program not specifically adapted for ethnic or cultural populations	Individual/Peer Community	Universal	Individual/Peer • Friends who engage in the problem behavior Community • Availability of alcohol • Community laws and norms favorable toward drug use	Community • Bonding to a community that promotes healthy beliefs and clear standards	Individual/Peer • Peers providing alcohol Community • Increased enforcement of alcohol laws and regulations • Lack of laws or institutional policies that limit alcohol availability • Institutional policies that discourage youth alcohol use • Public and institutional policies that reduce alcohol sales to youth • Civic action against illegal sale and provision of alcohol to youth • Increased interaction among diverse community sectors	• Environmental strategy • Limit minors' access to alcohol through community mobilization • Compliance checks	• Reduction in sales to minors • Increased identification checks by vendors • Community mobilization • 18- to 20-year-olds less likely to provide alcohol to younger minors, to try to buy or consume alcohol, and to be arrested for driving while under the influence of alcohol	Substance abuse	Implementation costs vary by community and circumstances. A full-time community organizer is required; salary and benefits typically are around \$40,000 annually. Other costs include an initial investment in materials and supplies for the community organizer (about \$3,000) and about \$300-\$500 per month for supplies, travel, and project-related expenses. Training/Technical Support: • Two levels of training on CMCA can be purchased from the Youth Leadership Institute (http://www.yli.org/prevention/programs/cmca.php). The first level is a 2-day overview for groups familiar with environmental prevention and the intervention; the other is an advanced 6-day training spread over 3-6 months. The overview package (\$5,000) includes 2 days of training, 8-16 hours of phone or electronic consultation or technical assistance, and the CMCA Foundation Overview Curriculum. The advanced package (\$12,000) includes 6 days of advanced training (three 2-day sessions), 16-24 additional hours of phone or electronic consultation or technical assistance, and the CMCA Advanced Training Curriculum. Materials: • All CMCA materials and resources are freely available for adaptation by other communities seeking to reduce youth access to alcohol, reduce teen drinking, and reduce the health and social problems associated with underage drinking. Materials on the University of Minnesota Alcohol Epidemiology Program's Web site (http://www.epi.umn.edu/alcohol) include a manual, fact sheets, and topic briefs describing policies, community strategies, and model ordinances that can help reduce teens' access to alcohol.

**Planning
Template
~
Strategies**

Objective 1.1: Reduce retail access to alcohol for persons who are already alcohol-impaired							
Intermediate Outcome 1.1.: Reduce retail sales of alcohol to persons who are already alcohol-impaired by 25 percent in 4 years (Data sources: non-enforcement compliance check results, 'point of source' data)							
Intermediate Outcome Indicators:							
Immediate Outcomes	Strategy	Activities	Timeline		Who's Responsible	Process Indicators	Outputs
			Start	End			
1.1.1. Increase retail clerk knowledge of laws prohibiting retail sales of alcohol to intoxicated persons by 75% in 1 year	Train all alcohol retail outlet clerks on alcohol sales laws, signs of alcohol impairment, and how to refuse sales to impaired persons within 3 months of their hire						
1.1.2. Increase retail clerk knowledge of the signs of alcohol impairment by 60% in 1 year							
1.1.3. Increase retail clerk ability to refuse sales of alcohol to persons who appear to be intoxicated by 30% in 2 years							

**Planning
Template**
 ~
Strategies

Objective 1.2: Reduce over service of alcohol in bars and restaurants								
Intermediate Outcome 1.2.: Reduce alcohol service in restaurants and bars to persons who are nearing or in a state of intoxication by 40 percent in 4 years (Data sources: observational studies, 'point of source' data)								
Intermediate Outcome Indicators:								
Immediate Outcomes	Strategy	Activities	Timeline		Who's Responsible	Process Indicators	Outputs	
			Start	End				
1.2.1. Increase server knowledge of guidelines for alcohol consumption by 80% in 1 year	Train all alcohol servers on alcohol consumption and sales guidelines, signs of alcohol impairment, and how to refuse sales to impaired persons within 1 month of their hire							
1.2.2. Increase server knowledge of the signs of alcohol impairment by 60% in 1 year								
1.2.3. Increase server ability to refuse sales of alcohol to persons who appear to be intoxicated by 50% in 2 years								

Implementation & Outputs

Quantitative & Qualitative Evaluation

Process Evaluation & Process Indicators

Outcome Evaluation & Outcome Indicators

Evaluation Considerations

Implementation & Evaluation

Implementation Plan

Activities
Timelines
Processes
Roles and Responsibilities
Outputs

**Planning
Template**
 ~
Implementation

Objective 1.1: Reduce retail access to alcohol for persons who are already alcohol-impaired							
Intermediate Outcome 1.1.: Reduce retail sales of alcohol to persons who are already alcohol-impaired by 25 percent in 4 years (Data sources: non-enforcement compliance check results, 'point of source' data)							
Intermediate Outcome Indicators:							
Immediate Outcomes	Strategy	Activities	Timeline		Who's Responsible	Outputs	Process Indicators
			Start	End			
1.1.1. Increase retail clerk knowledge of laws prohibiting retail sales of alcohol to intoxicated persons by 75% in 1 year	Train all alcohol retail outlet clerks on alcohol sales laws, signs of alcohol	Review existing training to identify needed additions & revisions	TBD	TBD	TBD	List of edits & revisions needed	
		Revise/update training curriculum	TBD	TBD	TBD	Final training curriculum	
1.1.2. Increase retail clerk knowledge of the signs of alcohol impairment by 60% in 1 year	impairment, & how to refuse sales to impaired persons within 3 months of their hire	Update training evaluation	TBD	TBD	TBD	Updated evaluation	
		Conduct a Training of Trainers	TBD	TBD	TBD	List of TOT sites, dates, & trainees	
		Schedule clerk trainings	TBD	TBD	TBD	List of clerk training sites, dates & trainees	
1.1.3. Increase retail clerk ability to refuse sales of alcohol to persons who appear to be intoxicated by 30% in 2 years		Implement clerk trainings	TBD	TBD	TBD	# of clerks trained	
		Review evaluation findings from clerk trainings	TBD	TBD	TBD	Participant feedback on training quality	

**Planning
Template
~
Implementation**

Objective 1.2: Reduce over service of alcohol in bars and restaurants

Intermediate Outcome 1.2.: Reduce alcohol service in restaurants and bars to persons who are nearing or in a state of intoxication by 40 percent in 4 years (Data sources: observational studies, 'point of source' data)

Intermediate Outcome Indicators:

Immediate Outcomes	Strategy	Activities	Timeline		Who's Responsible	Outputs	Process Indicators
			Start	End			
1.2.1. Increase server knowledge of guidelines for alcohol consumption by 80% in 1 year	Train all alcohol servers on alcohol consumption and sales guidelines, signs of alcohol impairment, and how to refuse sales to impaired persons within 1 month of their hire	Review existing training to identify needed additions & revisions	TBD	TBD	TBD	List of edits & revisions needed	
		Revise training curriculum	TBD	TBD	TBD	Finished training	
1.2.2. Increase server knowledge of the signs of alcohol impairment by 60% in 1 year		Update evaluation	TBD	TBD	TBD	Updated evaluation	
		Conduct a Training of Trainers	TBD	TBD	TBD	List of TOT sites, dates, & trainees	
1.2.3. Increase server ability to refuse sales of alcohol to persons who appear to be intoxicated by 50% in 2 years		Schedule server trainings	TBD	TBD	TBD	List of training sites, dates & trainees	
		Implement server trainings	TBD	TBD	TBD	# of servers trained	

Evaluation

The process of measuring an initiative's progress toward desired outcomes

Evaluation

Quantitative

Focus: quantity

“How many people were reached?” “What degree of change occurred?”

Qualitative

Focus: quality

*“How well was it done?”
“What benefits were achieved?”*

Process Evaluation

Monitors process indicators & outputs to ensure all activities are being implemented as planned & on time

Process Evaluation Considerations

Are activities being implemented as planned and on schedule?
If not, why not?

Have modifications taken place?
If so, what kind and why?
What impacts could this have on future implementation steps?

What challenges, if any, exist, and what steps are being taken to address them?

What modifications, if any, need to be made to the implementation of the project?

What learnings have occurred?

Outcome Evaluation

Measures progress toward desired
outcomes

Outcome Evaluation Considerations

What differences, if any, are occurring between baseline, planned, and actual outcomes?

Are there patterns in data that need additional analysis?

What other explanations exist for progress—or lack thereof—other than the strategies and activities being implemented?

What other considerations does outcome data have for current and future implementation?

Important Evaluation Considerations

What data will be collected, from what sources, and in what manner?

How will information be presented, to whom, and by what timelines?

How will **outcome** evaluation be firmly linked to—and inform—**process** evaluation?

How will **process** evaluation be firmly linked to—and inform—**outcome** evaluation?

Strategic Plan Template - Example

Assessment Summary:

- **Consequence:** Gordon County has had the second highest rate of fatalities from alcohol-related car crashes in the state from 2013 – 2018, and the rate has increased each year over that time period.
- **Behavior/Target Populations:** Crashes due to drinking drivers—primarily males ages 21-25—comprised a significant percentage of the fatalities, but fatalities also involved intoxicated pedestrians and bicyclists and non-drinking drivers. Crashes and fatalities were clustered along a 3-mile section of the Dale Highway.
- **Intervening Variables:** Of the many possible intervening variables, assessment revealed that the most important one tying the three groups together (i.e., intoxicated drivers, bicyclists, and pedestrians) was retail and restaurant/bar access to alcohol past the point of intoxication.

Problem Statement: In 2018, 122 people died due to alcohol-related motor vehicle crashes in Gordon County, which has had the second highest rate in the state after Metropolis for the past 5 years.

Goal 1: Reduce fatalities due to alcohol-related motor vehicle crashes in Gordon County.

Long-Term Outcome:

- Reduce the rate of alcohol-related motor vehicle crash deaths in Gordon County by 10% in four years

Long-Term Outcome Indicators:

- Reduce the rate of alcohol-related motor vehicle crash deaths in Gordon County by 2% in one year
- Reduce the rate of alcohol-related motor vehicle crash deaths in Gordon County by 5% in two years
- Reduce the rate of alcohol-related motor vehicle crash deaths in Gordon County by 8% in three years

Planning
Template
~
Evaluation 1

**Planning
Template
~
Implementation**

Objective 1.1: Reduce retail access to alcohol for persons who are already alcohol-impaired

Intermediate Outcome 1.1.: Reduce retail sales of alcohol to persons who are already alcohol-impaired by 25 percent in 4 years (Data sources: non-enforcement compliance check results, 'point of source' data)

- Intermediate Outcome Indicators:**
- Reduce retail sales of alcohol to impaired persons by 10% in 18 months
 - Reduce retail sales of alcohol to impaired persons by 20% in 3 years

Immediate Outcomes	Strategy	Activities	Timeline		Who's Responsible	Outputs	Process Indicators
			Start	End			
1.1.1. Increase retail clerk knowledge of laws prohibiting retail sales of alcohol to intoxicated persons by 75% in 1 year	Train all alcohol retail outlet clerks on alcohol sales laws, signs of alcohol impairment, & how to refuse sales to impaired persons within 3 months of their hire	Review existing training to identify needed additions & revisions	TBD	TBD	TBD	List of edits & revisions needed	% completed per timeline
		Revise/update training curriculum	TBD	TBD	TBD	Final training curriculum	% completed per timeline Revision quality
1.1.2. Increase retail clerk knowledge of the signs of alcohol impairment by 60% in 1 year		Update training evaluation	TBD	TBD	TBD	Updated evaluation	% completed per timeline
		Conduct a Training of Trainers	TBD	TBD	TBD	List of TOT sites, dates, & trainees	Feedback on training quality
1.1.3. Increase retail clerk ability to refuse sales of alcohol to persons who appear to be intoxicated by 30% in 2 years		Schedule clerk trainings	TBD	TBD	TBD	List of clerk training sites, dates & trainees	% completed per timeline
		Implement clerk trainings	TBD	TBD	TBD	# of clerks trained	% completed per timeline
		Review evaluation training findings	TBD	TBD	TBD	Participant feedback	Feedback on training quality

**Planning
Template
~
Implementation**

Objective 1.2: Reduce over service of alcohol in bars and restaurants

Intermediate Outcome 1.2.: Reduce alcohol service in restaurants and bars to persons who are nearing or in a state of intoxication by 40 percent in 4 years (Data sources: observational studies, 'point of source' data)

Intermediate Outcome Indicators:

- Reduce over service of alcohol in restaurants/bars by 15% in 18 months
- Reduce over service of alcohol in restaurants/bars by 30% in 3 years

Immediate Outcomes	Strategy	Activities	Timeline		Who's Responsible	Outputs	Process Indicators
			Start	End			
1.2.1. Increase server knowledge of guidelines for alcohol consumption by 80% in 1 year	Train all alcohol servers on alcohol consumption and sales guidelines, signs of alcohol impairment, and how to refuse sales to impaired persons within 1 month of their hire	Review existing training to identify needed additions & revisions	TBD	TBD	TBD	List of edits & revisions needed	% completed per timeline
		Revise training curriculum	TBD	TBD	TBD	Finished training	% completed per timeline Revision quality
1.2.2. Increase server knowledge of the signs of alcohol impairment by 60% in 1 year		Update evaluation	TBD	TBD	TBD	Updated evaluation	% completed per timeline
		Conduct a Training of Trainers	TBD	TBD	TBD	List of TOT sites, dates, & trainees	Feedback on training quality
1.2.3. Increase server ability to refuse sales of alcohol to persons who appear to be intoxicated by 50% in 2 years		Schedule server trainings	TBD	TBD	TBD	List of training sites, dates & trainees	% completed per timeline
		Implement server trainings	TBD	TBD	TBD	# of servers trained	% completed per timeline

Thank You!

Next Up:

Final Technical Assistance Call

1:30-3:00 pm, Monday, September 30

To help us make the most of our time together, please send questions and issues you'd like to have discussed to us at: partnerwithus2019@gmail.com!