

**(Mecklenburg County Substance Abuse Prevention Advisory Council (MCSPAC)
Strategic Plan 2010-2011 (2011-20112)
OBJECTIVE 1: INFRASTRUCTURE**

To establish an infrastructure for the delivery of substance abuse prevention services in Mecklenburg County.

Strategy: Support consistent and coordinated substance abuse prevention efforts in organizations, both public and private, to reduce substance abuse in Mecklenburg County, consistent with Mecklenburg County's 2015 Goal of the lowest per capita incidence of substance abuse in the nation.

ACTION STEPS	DESIRED OUTCOMES/OBJECTIVE	10-11 STATUS TO DATE
<ul style="list-style-type: none"> ● Continue to convene MCSPAC monthly with the purpose of oversight and advocacy for substance abuse prevention efforts and communicate regularly with the LME/PSO/ and State Director of Prevention and North Carolina Substance Abuse Prevention Providers Association (NCSAPPA) regarding our process. Add Kimm Campbell from Meck Co. (over prevention contracts) ● Support certification for substance abuse prevention professionals and encourage certification for all staff providing prevention services with the goal of having certified substance abuse prevention consultants providing prevention services. ● Identify, support, and encourage the use of Best Practice Models in the delivery of substance abuse prevention services. ● Participate in the planning of an annual event to recognize excellence in prevention services. 	<ul style="list-style-type: none"> ● Local providers will have a framework to guide the prevention best-practice manual development and implementation of prevention services and a resource to identify available technical assistance. ● Services fit into the overall collaborative community-wide best practices strategy. ● Elicit information from state on current prevention changes, goals and objectives and mandates. ● Increased knowledge of state prevention objectives and increased state knowledge of MCSPAC work and needs. ● MCSPAC will advocate on behalf of prevention services and policies. ● MCSPAC will have a representative at the NCSAPPA meetings. ● Each prevention program has one or more Certified Substance Abuse Prevention Consultants and staff who are engaged in the process of certification to facilitate effective prevention programming. ● Best Practice Models for prevention programs are provided utilizing the Institute of Medicine's (IOM) model of universal, selected and indicated populations and consistent with Center for Substance Abuse Prevention (CSAP) six strategies (information dissemination, prevention education, alternatives, problem identification and referral, community-based processes, and environmental approaches). 	<p>Conducted monthly meetings.</p> <p>MCSPAC has served as substance abuse prevention subcommittee to the Charlotte-Mecklenburg Drug Free Coalition (CMDFC) and the Alcohol and Drug Abuse Program Administrators Association (ADAPAA).</p> <p>There are certified prevention specialists on the staffs of primary providers.</p> <p>MCSPAC members serve on a Best Practices Committee to develop a comprehensive set of Best Practices guidelines for the Area's Planning and Collaboration Committee. This will be used in the development of network wide standards for the delivery of prevention services.</p> <p>SAPS, and Anuvia each hosted annual events to increase prevention efforts and awareness.</p>

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<ul style="list-style-type: none"> ● MCSPAC will strive to maintain a diverse, inclusive and active membership. Annual membership drive in September. 	<ul style="list-style-type: none"> ● MCSPAC will support annual prevention events. ● A community wide system of informed partners involved in the design and delivery of services is established. ● Agencies and organizations are working together cooperatively. ● Continue to increase MCSPAC membership. 	<p>MCSPAC has continued to make regular outreach to non-attending agencies and include them on email list to receive meeting minutes and updates on activities.</p>
<p><u>Strategy: Document the delivery of local substance abuse prevention services.</u></p>		
<ul style="list-style-type: none"> ● <u>Commit to the development and utilization of a standardized reporting format for prevention services.</u> 	<ul style="list-style-type: none"> ● <u>Quarterly reports submitted to designated MCSPAC staff.</u> 	
<p><u>Strategy: Increase focus on prevention in the delivery of substance abuse services.</u></p>		
<ul style="list-style-type: none"> ● Strengthen the link between MCSPAC and other substance abuse coalitions and groups. 	<ul style="list-style-type: none"> ● Substance abuse continues to be recognized as a public health issue. ● Prevention is recognized as a necessary component along the continuum of substance abuse services with intervention and treatment. 	<p>MCSPAC members continue to attend NC Federation, NCSAPPA, APNC, ADAPAA and CMDFC meetings to promote the inclusion of prevention as a part of the substance abuse continuum of services.</p>

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OBJECTIVE 2: COLLABORATION**

To increase collaboration among local organizations involved in substance abuse prevention in areas but not limited to training and technical assistance, funding, and marketing. (combined goals from #4, #5, #7)

Strategy: Encourage collaborative efforts among existing local organizations and consumers of all ages.

ACTION STEPS	DESIRED OUTCOMES/OBJECTIVES	STATUS TO DATE
<ul style="list-style-type: none"> ● Encourage opportunities for sharing substance abuse prevention information, including data, among providers, advocacy groups and consumers, encouraging youth representation. ● <u>Explore a link on the LME or Meck. Cares website to post minutes from each meeting.</u> ● <u>Advocate for inclusion in Grayce Crockett’s report to the BOCC.</u> ● <u>Post MCSPAC minutes on Preventionistheanswer.org.</u> ● To increase the dissemination of information regarding the value of prevention ● Explore CSAP options for marketing material. ● Support North Carolina Substance Abuse Prevention Providers Association in the development of a marketing plan and play a role in local implementation. ● Market the value of prevention to policy makers, providers, consumers, advocates and funding sources perhaps using: a) Media (audio, video, print, electronic); b) Interagency publications; c) Training; and d) Annual conferences. (all from #7 marketing) ● <u>Promote issues related to substance abuse prevention.</u> ● Promote and publicize effective substance abuse prevention programs. ● Identify and engage organizations relevant to MCSPAC efforts. 	<ul style="list-style-type: none"> ● Substance abuse prevention information is routinely shared with local providers, funding sources, community decision makers and others, thus maximizing resources and reducing duplication. ● Policy makers are more informed and are making more informed decisions that recognize the value of prevention. ● Providers are more informed and are utilizing evidence-based programs. ● Consumers are more informed about the types of services that are available in their communities. ● Advocates are more informed and are demanding effective services in their communities. (all from #7 marketing) ● Prevention is recognized as a necessary component along the substance abuse continuum of services. ● MCSPAC is linked with statewide NCSAPPA contacts to market the value of prevention. (#7 marketing) ● There is greater community awareness of substance abuse prevention issues and more informed decision making. ● There is increased credibility of substance abuse prevention efforts and raised awareness of need to support and expand service delivery system. 	<p>Agencies regularly report on current and planned initiatives.</p> <p>MCSPAC regularly collaborates in the planning and delivery of activities and events for Alcohol Awareness Month, Recovery Month, Fetal Alcohol Spectrum Disorder Awareness Day, the McLeod Institute and Substance Abuse Awareness Month.</p> <p>A list of local prevention providers has been created and is being maintained. Currently on Member List:</p> <ul style="list-style-type: none"> ○ LME Area Mental Health Substance Abuse Prevention Representative ○ The Center for Prevention Services ○ Anuvia ○ Bethlehem Center ○ MCHD Prevention/Wellness Administrator ○ Charlotte Mecklenburg Schools ○ Project ASSIST ○ Local Higher Education Prevention Coordinators ○ National Guard ○ Safe Communities ○ Hospital Representative ○ Consumers ○ CASCADE/Community Choices Inc. ○ UNC Charlotte ○ Davidson College ○ Johnson C. Smith University ○ Queens University

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OBJECTIVE 3: PLANNING

To create a forum for strategic planning for substance abuse prevention in Mecklenburg County, North Carolina.

Strategy: Establish a framework that gives general direction and guidance to local providers and supporters of substance abuse prevention.		
ACTION STEPS	DESIRED OUTCOMES/OBJECTIVES	STATUS TO DATE
<ul style="list-style-type: none"> MCSPAC will serve as a local forum for prevention planning. Facilitate opportunities for local providers to include programming consistent with Substance Abuse Prevention Best Practices, Center for Substance Abuse Prevention's (CSAP) identified 6 Strategies and other current technologies. 	<ul style="list-style-type: none"> Planning assists local providers in decision-making. Member agencies regularly attend and participate in planning and implementation of local and state prevention services. Providers and supporters have an established framework for providing effective programs. MCSPAC Meeting minutes are posted on CMDFC website. MCSPAC provides encouragement and consultation to local providers in support of programming that is consistent with Substance Abuse Prevention Best Practices including the CSAP 6. 	<p>MCSPAC serves on the committee to plan the Prevention Best Practices Guidelines for the Best Practices Committee.</p> <p>MCSPAC is recognized by the CMDFC and the LME as the local prevention advisory body.</p> <p>MCSPAC members participated in planning the McLeod Institute.</p>

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OBJECTIVE 4: TRAINING AND TECHNICAL ASSISTANCE

To increase opportunities for effective training for providers and provide technical assistance to support and enhance prevention programs community wide.

Strategy: Ensure availability of information about training and technical assistance to substance abuse prevention programs/agencies.		
ACTION STEPS	DESIRED OUTCOMES/OBJECTIVES	STATUS TO DATE
<ul style="list-style-type: none"> ● Encourage local providers to designate training funds and opportunities to assist staff for professional development. ● Advocate and encourage availability of training in evidence-based programs in Mecklenburg County, North Carolina. ● Advocate for a statewide generated prevention training calendar. ● Encourage all prevention agencies to enroll in state and national training mailing lists and forums. ● Support on-going training opportunities for prevention certification and re-certification including “train the trainer” models. 	<ul style="list-style-type: none"> ● There is an increase in certified substance abuse prevention consultants to provide programming and training. ● There is an increase in opportunities for training including evidence-based programs. ● There is an increase in trained substance abuse prevention professionals. ● There is an increase in prevention training for personnel within agencies where duties include, but are not primarily focused on, prevention services. ● There is improved awareness of current local, statewide and national substance abuse prevention training opportunities. ● A minimum of 140 hours of substance abuse prevention trainings will be provided in 10-11. 	<p>A MCSPAC member creates and disseminates a quarterly training calendar that is inclusive of prevention training.</p> <p>CMDFC funds have been earmarked for training.</p> <p>A MCSPAC member agency (Anuvia) provides technical assistance through the Western Prevention Resource Center.</p> <p>Mecklenburg County training Calendar is posted on the North Carolina Substance Abuse Prevention Providers Association website, www.preventionistheanswer.org.</p> <p>Work with NCSAPPA for statewide communication.</p> <p>40 hours of SA Prevention Training has either been delivered or is scheduled for 10-11 by MCSPAC agencies.</p> <p>The CMDFC training committee has arranged for free or low cost trainings for Coalition and MCSPAC members.</p>

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OBJECTIVE 5: FUNDING

To advocate for funding from federal, state, local, and private sources that ensures high-quality community wide substance abuse prevention programming.

Strategy: Maintain current funding and determine need for increased funding for prevention services.		
ACTION STEPS	DESIRED OUTCOMES/OBJECTIVES	STATUS TO DATE
<ul style="list-style-type: none"> Identify available funding sources (federal, state, local, private, foundation) to meet identified community needs and work collaboratively to apply for appropriate funds. 	<ul style="list-style-type: none"> There is increased knowledge of and access to available funding opportunities. There is increased collaboration in applying for prevention funding. 	<p>MCSPAC members actively participated in the successful development of the Charlotte Mecklenburg Drug Free Community grant application and the CMS-SAPS SDFSC Grant.</p> <p>A grant writing module is currently under development.</p> <p>At least one opportunity in addition to the CMDFC grant has been explored collaboratively in FY 10-11.</p> <p>The CMDFC Training Committee is exploring funding options for FACE-IT for the community in 10-11.</p>

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OBJECTIVE 6: EVALUATION/MONITORING OUTCOMES

To identify and/or develop affordable, effective, and appropriate evidence-based prevention services and policies for adoption at the community level.

Strategy: Increase the use of outcome based evaluation for all local prevention programming.		
ACTION STEPS	DESIRED OUTCOMES/OBJECTIVES	STATUS TO DATE
<ul style="list-style-type: none"> ● Review outcome measurements to be included in prevention programming. ● Identify appropriate evaluation methods and encourage their use. 	<ul style="list-style-type: none"> ● There is an increased commitment to evaluation and increased evaluation of prevention services. ● At least 50% of existing prevention programs will be evaluated using identified methods. ● There is increased use of research findings in materials, curricula, and program models. ● There is increased dissemination of program findings. ● Outcome monitoring results will be presented at MCSPAC at fiscal year-end. ● It is ensured that evidence-based programs are provided with fidelity to the model. 	<p>Submitted Best Practices Guidelines to the BPC to be used in the development of criteria for prevention programs.</p> <p>Members are using prevention consumer based outcome measures that were adopted by the Best Practices Committee.</p> <p>Members continue to participate on state-wide evaluation team to develop standardized instruments.</p>
Strategy: Advocate for enhanced program effectiveness by encouraging local providers to seek evaluation technical assistance.		
ACTION STEPS	OUTCOMES	STATUS TO DATE
<ul style="list-style-type: none"> ● Encourage prevention collaboratives between providers of technical assistance and local programs/agencies to facilitate implementation of research and evaluation practices. 	<ul style="list-style-type: none"> ● There is an increase in the exchange of information in evaluation. ● There is an increase in prevention research activities, field studies, and evaluations. 	<p>A faculty member of UNC Charlotte chairs CMDFC, provides technical assistance for program evaluation and spearheads SAPS Youth Drug Survey and the development of the local Indicators Project.</p> <p>Committee members are entering program data into the North Carolina Prevention Outcomes Performance System (NCPOPS) database for statewide data collection.</p>

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OBJECTIVE 7: MARKETING

To increase the dissemination of information regarding the value of prevention.

Strategy: Develop a marketing plan.		
ACTION STEPS	DESIRED OUTCOMES/OBJECTIVES	STATUS TO DATE
<ul style="list-style-type: none"> ● Explore CSAP options for marketing material. ● Support North Carolina Substance Abuse Prevention Providers Association in the development of a marketing plan and play a role in local implementation. ● Market the value of prevention to policy makers, providers, consumers, advocates and funding sources perhaps using: a) Media (audio, video, print, electronic); b) Interagency publications; c) Training; and d) Annual conferences. (move to #2 collaboration) ● <u>Determine feasibility of developing a MCSPAC web-page.</u> 	<ul style="list-style-type: none"> ● MCSPAC is linked with statewide NCSAPPA contacts to market the value of prevention. ● Policy makers are more informed and are making more informed decisions that recognize the value of prevention. ● Providers are more informed and are utilizing evidence-based programs. ● Consumers are more informed about the types of services that are available in their communities. ● Advocates are more informed and are demanding effective services in their communities. (move all to #2 collaboration) ● <u>Funding sources are more informed and are directing funds towards evidence-based substance abuse prevention programs.</u> ● MCSPAC minutes are posted on the CMDFC website. 	<p>CMDFC has actively sought involvement from across all sectors of the community including media, policy makers, business, and the faith community.</p> <p>MCSPAC members actively participated in the development and delivery of the CMDFC Parent Forums, Fetal Alcohol Spectrum Disorder Initiative, Underage Drinking Initiative, Parent Centered Prevention Committee and S.P.I.D.A. (Students Preventing and Informing on Drugs and Alcohol).</p> <p>MCSPAC members continue to be involved in the CMDFC dissemination of information.</p>