ORGANIZATIONAL LEVEL

Substance abuse prevention activities implemented at the organization level are intended to facilitate individual behavior change through communication and support aimed at influencing organizational systems and policies. Health care systems, employers or worksites, health care plans, local health departments, health clinics, and professional organizations represent potential sources of organizational messages and support.

For the SPF SIG needs assessment, *all sub-recipients* must perform a scan of their community at the organizational level. This portion of the needs assessment will arm you with the knowledge of what is already being done in your community to impact your specific priority issue. This is especially helpful when you begin the process of selecting a strategy. You do not want to duplicate services; you want to fill the gaps. After completing this assessment, you may know where you can build capacity in your community.

Please photocopy and complete the following Organizational-Level Assessment Tool for *each* prevention program, policy, and/or practice that targets *your priority issue*.

Organizational-Level Assessment Tool

Agency Name: _____

Contact Person: _____

Address:_____

Phone: _____

Email: _____

1. Is this resource a program, policy or practice? (Select One)
○ Program ○ Policy ○ Practice ○ Other [Please explain:]

2. What is the name of the program, policy, and/or practice and brief description?
_____
_____

3. What is the target population of the program, policy, and/or practice?
_____
_____

4. What are the causal factor(s) targeted by the program, policy, and/or practice? (Select All)
○ Social Availability ○ Retail Availability ○ Promotion ○ Criminal Justice/Enforcement
○ Community Norms ○ Individual Factors ○ Provider Lack of Knowledge
○ Other [Please explain:] _____

5. What are the risk and/or protective factors targeted by the program, policy, and/or practice? Please list out each risk and/or protective factor within the appropriate domain.

○ Family _____
_____

○ Community _____
_____

○ School_____
_____

○ Individual/Peer
_____
_____

6. What agency or group delivers the program, policy, and/or practice?
_____
_____

7. Approximately how many people (those targeted for change) will the program, policy, and/or practice reach during the current calendar year?
_____
_____

8. What is the duration of the program, policy, and/or practice?
_____
_____

9. How often is the program, policy, and/or practice offered to the target population?
_____
_____

10. What prevention strategy does the program, policy, and/or practice use? (Select All)
○ Education
○ Environmental strategies
○ Alternative activities
○ Community-based process
○ Problem Identification and referral
○ Information dissemination
○ Other [Please explain:]
_____
_____

11. What type of implementation data is collected? (Select All)
○ Attendance ○ Satisfaction ○ Other [Please explain:]

_____

12. Is the program, policy, and/or practice evidence based?   ○ YES ○ NO
If yes, which agency(s) list contains the program, policy, and/or practice? ○ NIDA ○ CDC
○ CSAP ○ DOE ○ Drug Strategies ○ OJJDP ○ None of the above

13. Has the implementing agency (as listed in Question 6) evaluated the outcomes of the program, policy, and/or practice?   ○ NO ○ YES If yes, please explain.

_____

14. What geographical area is served?

_____

15. Is this strategy culturally appropriate? ○ NO ○ YES If yes, please explain how:

_____

ORGANIZATIONAL LEVEL: BRINGING IT ALL TOGETHER

After you have completed the Organizational-Level Assessment Tool for *each* prevention program, policy, and/or practice that targets your priority issue, please complete this section. If you do not have data available at this time, please wait until you have collected the data. If you have more than one priority substance, please photocopy this worksheet and complete one for each substance.

Capacities:

1. What organizations are currently implementing prevention strategies for your priority substance?

_____

_____

2. What opportunities are there for your SPF-SIG coalition to work with those organizations?

_____

_____

3. What types of prevention strategies are currently being implemented for your priority substance in your community?

_____

_____

4. What opportunities are there for your SPF SIG coalition to capitalize on current prevention programming to help support or buttress your SPF SIG efforts?

_____

_____

Gaps

1. What gaps in prevention programming currently exist for your priority substance?

_____

_____

2. How can your SPF SIG coalition fill those gaps as you move forward?

_____

_____