

Six CSAP Strategies with Examples

Primary Prevention

Primary prevention activities are those directed at individuals who do not require treatment for substance abuse. In implementing the comprehensive primary prevention program, the State shall use a variety of strategies including the six strategies listed below.

- (1) **Information Dissemination:** This strategy provides awareness and knowledge of the nature and extent of alcohol, tobacco and drug use, abuse and addiction and their effects on individuals, families and communities. It also provides knowledge and awareness of available prevention programs and services. Information dissemination is characterized by one-way communication from the source to the audience, with limited contact between the two.

Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- Clearinghouse/information resource center(s);
- Resource directories;
- Media campaigns;
- Brochures;
- Radio/TV public service announcements;
- Speaking engagements;
- Health fairs/health promotion; and
- Information line.

- (2) **Education:** This strategy involves two-way communication and is distinguished from the Information Dissemination strategy by the fact that interaction between the educator/facilitator and the participants is the basis of its activities. Activities under this strategy aim to affect critical life and social skills, including decision-making, refusal skills, critical analysis (e.g., of media messages) and systematic judgment abilities.

Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- Classroom and/or small group sessions (all ages);
- Parenting and family management classes;
- Peer leader/helper programs;
- Education programs for youth groups; and
- Children of substance abusers groups.

- (3) **Alternatives:** This strategy provides for the participation of target populations in activities that exclude alcohol, tobacco and other drug use. The assumption is that constructive and healthy activities offset the attraction to, or otherwise meet the needs usually filled by alcohol, tobacco and other drugs and would, therefore, minimize or obviate resort to the latter.

Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- Drug free dances and parties;
- Youth/adult leadership activities;
- Community drop-in centers; and
- Community service activities.

Six CSAP Strategies with Examples

- (4) Environmental: This strategy establishes or changes written and unwritten community standards, codes and attitudes, thereby influencing incidence and prevalence of the abuse of alcohol, tobacco and other drugs used in the general population. This strategy is divided into two subcategories to permit distinction between activities which center on legal and regulatory initiatives and those that relate to the service and action oriented initiatives.

Examples of activities conducted and methods used for this strategy shall include (but not be limited to) the following:

- Promoting the establishment or review of alcohol, tobacco and drug use policies in schools;
- Technical assistance to communities to maximize local enforcement procedures governing availability and distribution of alcohol, tobacco, and other drug use;
- Modifying alcohol and tobacco advertising practices; and
- Product pricing strategies.

- (5) Community-Based Process: This strategy aims to enhance the ability of the community to more effectively provide prevention and treatment services for alcohol, tobacco and drug abuse disorders. Activities in this strategy include organizing, planning, enhancing efficiency and effectiveness of services implementation, interagency collaboration, coalition building and networking.

Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- Community and volunteer training, e.g., neighborhood action training, training of key people in the system, staff/officials training;
- Systematic planning;
- Multi-agency coordination and collaboration;
- Accessing services and funding; and
- Community team-building.

- (6) Problem Identification and Referral: This strategy aims at identification of those who have indulged in illegal/age-inappropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs in order to assess if their behavior can be reversed through education. It should be noted, however, that this strategy does not include any activity designed to determine if a person is in need of treatment.

Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- Employee assistance programs;
- Student assistance programs; and
- Driving while under the influence/driving while intoxicated education programs.

Explanation of Target Audience

Institute of Medicine Classification: Universal, Selective and Indicated:

- *Universal:* Activities targeted to the general public or a whole population group that has not been identified on the basis of individual risk. .

Universal Direct - Interventions directly serve an identifiable group of participants but who have not been identified on the basis of individual risk (e.g., school curriculum, after-school program, parenting class). This also could include interventions involving interpersonal and ongoing/repeated contact (e.g., coalitions)

Universal Indirect - Interventions support population-based programs and environmental strategies (e.g., establishing ATOD policies, modifying ATOD advertising practices). This also could include interventions involving programs and policies implemented by coalitions.

- *Selective:* Activities targeted to individuals or a subgroup of the population whose risk of developing a disorder is significantly higher than average.
- *Indicated:* Activities targeted to individuals in high-risk environments, identified as having minimal but detectable signs or symptoms foreshadowing disorder or having biological markers indicating predisposition for disorder but not yet meeting diagnostic levels. (*Adapted from The Institute of Medicine*)

Activity/Service Type Codes

Strategy: Information Dissemination Strategies

CSAP Strategy Definition: his strategy provides awareness and knowledge of the nature and extent of alcohol, tobacco and drug use, abuse and addiction and their effects on individuals, families and communities. It also provides knowledge and awareness of available prevention programs and services. Information dissemination is characterized by one-way communication from the source to the audience, with limited contact between the two.

Coding Tips: Information dissemination services are not recurring services.

STN102

Materials Development Steps 0.2.0.4.5

Target Audience:
Not Applicable

This includes development of all types of materials, including video/film, printed material, curricula, newsletters, media messages, resource directories, Web pages, etc. This is reported when the product is complete. This includes all phases of development from research to the finished product. For sequential materials such as newsletters, each issue is a separate entry.

Select all strategy options that apply to the material content:

- Educational Strategies Alternative Strategies Environmental Strategies
 Community-Based Process Strategies Early Intervention/Problem Identification and Referral Strategies

Program Name: Any zero (0) code or PM999, if not directly related to a specific program.

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of content and type of material.

Start Date: Date the material development began

End Date: Date the material development was completed

Service Count: Number of different materials developed.

Duration Hours: NA

Number of Sessions: Number of different days during that staff actively worked on developing the material.

This does not include the days when researching, reading, gathering information, etc. are being done in preparation for developing materials.

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), or other agency/organization that developed the material.

Service Population: The most specific for the target audience of the material developed.

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of this material development.

Recipient: Name and Job Title of individual or a brief description of the group receiving the material.

Contractor Role(s): CR01

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: Select all that apply to changing the behavior of the target audience of the material.

Activity/Service Type Codes

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the duration of the materials development activities.

Volunteer Time: (optional)

Number of Participants: NA (0)

Demographics: NA (0)

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus (2/2013) - Copy of material developed with publication date on it (month, year) along with acknowledgement of at least partial funding from the Center for Substance Abuse Prevention (CSAP). If material developed is too bulky to store with other supporting documentation, a reference to the specific location within the RPC office where the copy is stored would suffice.

Materials Dissemination

Notes: Records should NOT be created every time information is given out in a training event or as part of a technical assistance service. Such distribution may be added to the monthly entries, if desired.

Coding Tip: Monthly total records for Materials Dissemination are recommended for Printed Materials and Information Requests Responded to, rather than making an entry each time one of these events occurs.

Activity/Service Type Codes

STN109

Materials Dissemination

Steps 0.0.0.4.5

Target Audience:
Universal Direct
Selective
Indicated
Universal Indirect

This code includes dissemination of all types of materials, including audiovisuals, curricula, newsletters and resource directories. This also includes “hits” on a Web site. This usually applies to a large quantity of materials given to an individual who will then disperse them to others. Participation in health fairs or similar events where material is given out would also be coded as materials dissemination.

Select all strategy options that apply to the material content:

- Educational Strategies Alternative Strategies Environmental Strategies
 Community-Based Process Strategies Early Intervention/Problem Identification and Referral Strategies

Program Name: Any zero (0) code or PM999, if not directly related to a specific program.

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of content and type of material.

Start Date: Date the material was disseminated

End Date: Date the material was disseminated

Service Count: One (1)

Duration Hours: NA (0)

Number of Sessions: NA (0)

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), or other agency/organization that distributed the material.

Service Population: The most specific for the direct recipient of the material, not necessarily the target audience.

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of this material dissemination.

Recipient: Name and Job Title of individual or a brief description of the group receiving the material.

Contractor Role(s): CR01

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: Select all that apply to changing the behavior of the target audience of the material.

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual presentation of material to Recipient.

Volunteer Time: (optional)

Number of Participants: The number of individuals who are given information. For example, if RPC staff give materials to a librarian or doctor’s office staff, the Number of Participants is one (1).

Demographics: Estimated or actual demographic information regarding the recipients of the material.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Documentation Requirements

KIDS NOW Plus (2/2013) -

Log containing relevant info:
Name of materials
Recipient
Date disseminated

Activity/Service Type Codes

STN112

Media Messages/ Media Campaign Activities Steps 0.0.0.4.5

Target Audience:
Universal Direct
Universal Indirect

Use this code when a message is ACTUALLY PUBLISHED or BROADCAST by a media outlet. This includes radio, print & TV public service announcements (PSAs), articles & announcements and radio/TV appearances. This code should also be used for local participation in state or national media campaigns or if the local group has developed a media campaign involving a number of coordinated activities.

Coding Tips: Use STC515 - Marketing when you distribute the material to the media outlet or otherwise encourage their participation.

Also, the implementation of structured activities that use print media to deliver substance specific prevention information or health promotion messages relative to substance abuse. This would typically be coalition/youth group members distributing materials to large populations such as shopping center/mall patrons or neighborhood residents. Examples are:

- Distribution of signs to stores and businesses
- Distribution of bumper stickers, posters, flyers, window clings, bookmarks, etc.

Select all strategy options that apply to the material content:

- Educational Strategies Alternative Strategies Environmental Strategies
 Early Intervention/Problem Identification and Referral Strategies

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of content and type of media message/campaign, e.g. radio PSA on second-hand smoke, neighborhood blitz with “I won’t be the One” or “MEDS” materials.

Start Date: First day during the reporting period that media message ran or start date of the media campaign activity.

End Date: Last day during the reporting period that media message ran or end date of the media campaign activity.

Service Count: # of different messages X # of outlets (e.g. 2 different PSAs are broadcast by 3 radio stations = a Service Count of 6).

Pieces: The number of pieces of substance specific prevention materials distributed

Duration Hours: NA (0)

Number of Sessions: IF available, # of times the messages ran or how many different days it took to cover one area (e.g. subdivision, shopping center, etc.).

Presenter/Executor PE31 - Media Outlet/Organization or as appropriate for the members distributing material

Service Population: The most specific for the target audience of the media message/campaign activity.

Provider: Media Outlet Name (newspaper) or call letters (TV/Radio). If the city of origin is not part of the name, include city/town with a hyphen after the Client (e.g. State Journal – Frankfort, WLRS FM - Louisville or WKYT TV - Lexington). The name of the coalition or youth group, etc. that distributed materials.

Client: Name of shopping center/mall or neighborhood or “**** Not Applicable ****” in the case of media messages

Recipient: Brief description of target population of the media outlet (during message run times) or .

Contractor Role(s): CR02; CR04; CR05; CR06 as applicable

High Risk Group(s): HR99, unless a special group was the targeted audience.

Activity/Service Type Codes

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this message?

Staff Time: NA (0)

Volunteer Time: (optional)

Number of Participants: IF available, 10% of the media outlet's official estimate of reach.

Demographics: Estimated demographic information regarding the target audience of the media message.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus (2/2013) - Any combination of the following that provides adequate information about the Media message ran, when, how often, etc. or what and when the material was distributed:

E-mail

Letter

Fax

Note

Copy of the printed article/material, PSA, letter to the editor, log from the media outlet

Activity/Service Type Codes

STN116

Speaking Engagements and Brief Educational Programs

Steps 1.2.3.4.5

Target Audience:
Universal Direct
Selective
Indicated

This code includes speeches, talks, press conferences, briefings, one-time classroom presentations, plays, assembly presentations, hearings, volunteer speakers bureau engagements, etc. to raise awareness or increase knowledge of substance abuse and related problems, prevention organizations, services and activities.

Select all strategy options that apply to the material content:

- Educational Strategies Alternative Strategies Environmental Strategies
 Community-Based Process Strategies Early Intervention/Problem Identification and Referral Strategies

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this Speaking Engagement or Brief Educational Program.

Activity Description: Brief description of the message content of the Speaking Engagement.

Start Date: The date of the Speaking Engagement/Program.

End Date: The date of the Speaking Engagement/Program.

Service Count: One (1)

Duration Hours: Total (unduplicated) "clock hours" to complete the Speaking Engagement/Program (not including breaks).

Number of Sessions: One (1)

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), PE16 Prevention Professional NOS or other as appropriate for the provider of the Speaking Engagement/Brief Educational Program.

Service Population: The most specific for the target audience of the Speaking Engagement/Program.

Client: The Agency, Organization, School, or Company requesting or sponsoring the Speaking Engagement/Program. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: A brief description of the group receiving the presentation

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual presentation to Recipients.

Volunteer Time: (optional)

Number of Participants: Number of persons attending presentation.

Demographics: Estimated or actual demographic information regarding the recipients of the presentation.

Activity/Service Type Codes

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus (2/2013) - Any combination of the following that provides reasonable evidence that the speaking engagement/program occurred:

- Agenda
- Outline of Presentation
- Printed copy of PowerPoint presentation
- Sign-in sheet

Activity/Service Type Codes

STN118

Information Requests Responded To Steps 0.2.0.4.0

Target Audience:
Universal Direct
Selective
Indicated
Universal Indirect

Use this code to track information requested by persons who walk-in, call, fax, e-mail, etc. Unlike STN109, these are usually requests for a small quantity of brochures, pamphlets etc. intended for individual use. An example would be a mother desiring information on marijuana because she is worried about her son's use.

Coding Tip: Create one record at the end of each month.

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Blank (NA)

Start Date: The first date of the month that information requests were responded to.

End Date: The last date of the month that information requests were responded to.

Service Count: Total requests for ATOD information responded to during that month. Includes requests received via telephone, electronic messages, and other means.

Duration Hours: NA (0)

Number of Sessions: NA (0)

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11)

Service Population: The most specific for the persons requesting information.

Client: *** Not Applicable ***

Recipient: A brief description of the individual(s) requesting information.

Contractor Role(s): CR01

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: NA, unless information requests focused on a particular project.

Targeted Behaviors: Select all that apply to changing the behaviors of the target audience of the information provided.

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual response to Recipients.

Volunteer Time: (optional)

Number of Participants: Number of persons receiving information directly from the RPC.

Demographics: Estimated or actual demographic information regarding the recipients of the presentation.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus (2/2013) - Copy of the monthly log containing relevant info:

Name of materials

Recipient

Dates of service

Activity/Service Type Codes

STN119

Materials Review Steps 0.2.0.4.0

Target Audience:
Not Applicable

Use this code after completing a **written** review of prevention materials, much like a “book report” to be used as reference materials by RPC staff and/or library patrons.

Select all strategy options that apply to the material content:

- Educational Strategies Alternative Strategies Environmental Strategies
 Community-Based Process Strategies Early Intervention/Problem Identification and Referral Strategies

Program Name: PM999 or any zero (0) code, unless related to a specific program

Staff Name: Staff person completing the materials review.

Activity Description: Brief description of the materials reviewed.

Start Date: The date the written review was completed.

End Date: The date the written review was completed.

Service Count: One (1) for each written review created.

Duration Hours: NA (0)

Number of Sessions: NA (0)

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11)

Service Population: The target population of the materials.

Client: *** Not Applicable ***

Recipient: Blank

Contractor Role(s): CR01

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: NA, unless materials are for a particular project.

Targeted Behaviors: Select all that apply to changing the behaviors of the target audience of the materials reviewed.

Staff Time: Man-hours of staff time to review the materials and prepare the written report.

Volunteer Time: (optional)

Number of Participants: NA

Demographics: NA

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus (2/2013) - Dated copy of the written review

Activity/Service Type Codes

Strategy: Educational Strategies

CSAP Strategy Definition: This strategy involves two-way communication and is distinguished from the Information Dissemination strategy by the fact that interaction between the educator/facilitator and the participants is the basis of its activities. Activities under this strategy aim to affect critical life and social skills, including decision-making, refusal skills, critical analysis (e.g., of media messages) and systematic judgment abilities.

STE201

Curriculum Delivery

Steps 0.0.0.4.0

Target Audience:
Universal Direct
Selective
Indicated

This code includes **all** types of recognized substance abuse prevention courses, seminars or workshops. The course name should be on the program list. If it is not, please e-mail the Prevention Data System Manager to request an addition. TIP: This code does **not** include training of trainers courses. This is coded under STC509.

Examples: Project Alert, Prime for Life, and Smoking cessation programs.

Coding Tips: Vendor education and training of trainers courses are coded under Community-based process as STC509 (Training).

Please Note: The Program Name Codes ending with zero (0) should NOT be used for FULL deliveries of curricula. The codes ending in zero (0) should be used when:

- 1) You have documentation that a curriculum delivery occurred, but there is no documentation of the number of Sessions or total Duration of the delivery.
- 2) The Sessions or Duration indicate that only a portion of the curriculum was delivered.
- 3) You wish to indicate Marketing, Consultation/TA, Training of Trainers, or other activities related to the curriculum, using those codes listed under the Community-based Process Strategy.

Select all strategy options that apply to the curriculum content:

- Information Dissemination Strategies Alternative Strategies Environmental Strategies
 Early Intervention/Problem Identification and Referral Strategies

Program Name: Select a code from the Program Name list. If the course you delivered is not listed, code as STC509 (Training) and contact the Prevention Data System Manager to request that the course be entered into the Program Name list. If there is assurance with an instructor/administrator signature that the curriculum was taught with fidelity and demographic info is included, use the appropriate "Full Curriculum Delivery" code. If either the signature or the demographic info is not available, choose the appropriate "zero (0) code."

Staff Name: Staff person assigned primary responsibility for reporting this curriculum delivery.

Activity Description: Brief description of any variation from program design or content. If the curriculum was implemented as designed, this field should be left blank.

Start Date: First day the group met for this curriculum delivery.

End Date: Last day the group met for this curriculum delivery.

Service Count: One (1) **NOTE:** If characteristics of the groups are similar (same age/grade, same site, same curriculum) and curriculum is taught similarly (same number of Sessions, same Duration) and delivery

Activity/Service Type Codes

- starts about the same date (within 2 weeks from first group to last group) and ends about the same date (within 2 weeks from the first group to last group), multiple curriculum deliveries may be reported in the same record. Participants/Demographics and Staff Time would cover all deliveries reported on this record.
- Duration Hours:** Total (unduplicated) “clock hours” to complete one entire course of instruction (not including breaks).
- Number of Sessions:** Number of different days the group met (start date to end date inclusively) to complete one entire course of instruction.
- Presenter/Executor:** PE11 – Project Staff (e.g. if RPC is the contractor, PE11), PE15 – Teachers & School Personnel NOS or other as appropriate for the provider of the curriculum delivery.
- Service Population:** The most specific for the Recipients of the curriculum delivery.
- Client:** The agency, organization, school, or company the Recipient is affiliated with for the context of the curriculum delivery. If more than one agency, etc is represented, choose *** Not Applicable ***.
- Recipient:** A brief description of the group receiving the curriculum delivery.
- Contractor Role(s):** If PE11, CR01. If other than PE11, choose all that apply (Training of Trainers, Technical Assistance, or Marketing during the last 12 months). If no support was provided over the past 12 months, choose CR99 – Not Applicable.
- High Risk Group(s):** Choose all that apply
- National/State Initiative:** As appropriate
- Related Project:** Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.
- Targeted Behaviors:** What behavior of the Service Population is targeted by this activity?
- Staff Time:** Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual presentation of curriculum delivery to recipients.
- Volunteer Time:** (optional)
- Number of Participants:** Number of persons counted as “Completers” of the course of instruction. *Note:* The definition of “Completer” depends on the criteria specified by the program designer. If not specified, participant must attend 75% of the sessions to complete the curriculum.
- Demographics:** Estimated or actual demographic information regarding the recipients of the curriculum delivery.
- Cost Data:** Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus (2/2013) –

Staff delivery:

Sign-in sheet for each session

Cover letter for Pre/Post tests sent for verification

Delivery by Other:

Tracking form, e-mail or other correspondence from responsible person that includes the following:

All information needed to complete a database entry

Signature of responsible person

OR, if information is gathered by phone:

Tracking form with all information needed to complete a database entry and an indication of the source of the data, date the information was collected and the signature of staff member gathering info by phone or interview.

Activity/Service Type Codes

Strategy: Alternative Strategies

CSAP Strategy Definition: This strategy provides for the participation of target populations in activities that exclude alcohol, tobacco and other drug use. The assumption is that constructive and healthy activities offset the attraction to, or otherwise meet the needs usually filled by alcohol, tobacco and other drugs and would, therefore, minimize or obviate resort to the latter.

STA301

Alternative Activity or Program Delivery and Support Group Activities Steps 0.0.0.4.0

**Target Audience:
Universal Direct
Selective
Indicated**

Activities may be single, such as drug-free parties or dances, or recurring, such as after school programs, mentoring sessions or support group meetings provided to a specific group of participants.

Examples: SMART MOVES after school clubs, Reconnecting Youth school bonding and social activities, community sponsored drug-free activities.

This code also includes community service events. These are events or activities intended to prevent substance abuse through involving people in community service.

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this alternative activity.

Activity Description: Brief description of the alternative activity.

Start Date: First day of the activity

End Date: Last day of the activity

Service Count: One (1)

Duration Hours: The total length, in hours, within the dates recorded for the activity (not to be confused with length of each session). For example, if you are recording one semester's worth of weekly one-hour sessions, the Duration might be 15 hours.

Number of Sessions: Number of different days the group met (start date to end date inclusively) to complete the activity.

Presenter/Executor: The organization sponsoring or presenting the activity/program.

Service Population: The most specific for the Recipients participating in the activity..

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of the activity delivery. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: A brief description of the group participating in the activity or receiving the program.

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply (Training of Trainers, Technical Assistance, or Marketing during the last 12 months).

High Risk Group(s): Choose all that apply

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual activity delivery to recipients.

Volunteer Time: (optional)

Number of Participants: Number of persons that participated in the alternative activity/program.

Activity/Service Type Codes

Demographics: Estimated or actual demographic information regarding the recipients of the activity (if feasible).

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus (2/2013) –

Description of activity

Staff delivery:

Sign-in sheet for each session

Delivery by Other:

Tracking form, email or other correspondence from responsible person that includes the following:

All information needed to complete a database entry

Signature of responsible person

OR, if information is gathered by phone:

Tracking form with all information needed to complete a database entry and an indication of the source of the data, date the information was collected and the signature of staff member gathering info by phone or interview.

Activity/Service Type Codes

Strategy: Environmental Strategies

CSAP Strategy Definition: This strategy establishes or changes written and unwritten community standards, codes and attitudes, thereby influencing incidence and prevalence of the abuse of alcohol, tobacco and other drugs used in the general population. This strategy is divided into two subcategories to permit distinction between activities which center on legal and regulatory initiatives and those that relate to the service and action oriented initiatives.

Coding Tips: Note that some codes capture staff/community efforts to change policy, and others capture the policy change itself.

STV402

Efforts, Campaigns or Activities to Reduce Illegal Sales to Minors

Steps 0.0.0.4.0

Target Audience:
Universal Direct
Universal Indirect

Use this code for any effort aimed at vendors who sell alcohol, tobacco or other drugs, or drug paraphernalia to minors. Examples include, carding programs, recognizing vendors who comply with the law, conducting underage buying surveys, compliance checks or sting operations, recruiting or training volunteers to assist in law enforcement efforts, and Parent Alert activities.

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of content and method of effort.

Start Date: First day of the effort/campaign

End Date: Last day of the effort/campaign

Service Count: One (1)

Duration Hours: Total (unduplicated) "clock hours" of effort/campaign.

Number of Sessions: Number of different days during the month staff actively pursued this effort/campaign.

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), or other as appropriate for the provider of the effort/campaign

Service Population: The most specific for the target audience of the effort (alcohol/tobacco vendors, business/industry/workplace, etc.).

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of the effort. If more than one agency, etc. is represented, choose *** Not Applicable ***.

Recipient: Name and Job Title of 4 or less individuals, or a brief description of the group receiving the effort.

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual presentation of marketing effort to recipients.

Volunteer Time: (optional)

Number of Participants: Persons receiving the effort (store or restaurant owner/manager, etc.), members of the group, etc.

Activity/Service Type Codes

Demographics: Estimated demographic information regarding information regarding persons anticipated to be directly affected by the effort.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Any combination of the following that provides reasonable evidence that the effort/campaign occurred:

Sign-in sheets

Client contact log with:

Dated list of contacts with a particular Client including notes on content & method (face to face, e-mail, phone, etc)

Correspondence, flyers, or announcements re: the campaign

Phone log

Calendar with notes

Copy of letter or certificate with list of recipients (name, address, etc)

Activity/Service Type Codes

STV403

Other Public Policy Effort, Campaign or Activity

Steps 0.0.0.4.0

Target Audience:
Universal Direct
Universal Indirect

Use this code for efforts, campaigns or activities aimed at establishing or changing alcohol, tobacco and other drug policies other than sales to minors (STV402). For example, efforts to develop more effective DUI enforcement, increase the price of alcoholic beverages, dedicate taxes to prevention efforts, and decrease outlet density. Other examples include warning sign campaigns and restrictions on smoking in public places, or community efforts aimed at youth to increase protective factors while reducing risk factors (e.g. Safe Homes Pledge Drive).

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity

Activity Description: Brief description of content and method of effort

Start Date: First day of the effort/campaign

End Date: Last day of the effort/campaign

Service Count: One (1)

Duration Hours: Total (unduplicated) "clock hours" of effort/campaign.

Number of Sessions: Number of different days during the month staff actively pursued this effort/campaign.

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), or other as appropriate for the provider of the effort/campaign.

Service Population: The most specific for the target audience of the effort.

Client: The Agency, Organization, School, or Company the Recipient is affiliated with for the context of the effort. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: Name and Job Title of 4 or less individuals, or a brief description of the group receiving the effort.

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual presentation of marketing effort to Recipients.

Volunteer Time: (optional)

Number of Participants: Persons receiving the effort (store or restaurant owner/manager, etc.), members of the group, etc.

Demographics: Estimated demographic information regarding information regarding persons anticipated to be directly affected by the effort.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Documentation Requirements

- KIDS NOW Plus (2/2013)** - Any combination of the following that provides reasonable evidence that the effort/campaign occurred:
- Sign-in sheets
 - Client contact log with:
 - Dated list of contacts with a particular Client including notes on content & method (face to face, email, phone, etc)
 - Correspondence, flyers, or announcements re: the campaign
 - Phone log
 - Calendar with notes
 - Copy of letter or certificate with list of recipients (name, address, etc)

Activity/Service Type Codes

New Policies

The following codes capture an actual environmental change that may result from staff/community efforts.

Note: An event that is coded as a New Policy (STV405-408) must be an actual change, not just an expression of intent. New policies entered into the database must be documented in-house by formal written policy statements or follow-up studies that demonstrated that the policy was implemented. *As a general rule, only one policy change per client per year will be accepted.*

STV405

Law, Regulation or Ordinance

Passed

Steps 0.0.0.4.0

Target Audience:
Universal Indirect

This code includes new laws, formal decisions upholding supportive laws already in existence, and positive revisions or amendments to laws, regulations or ordinances.

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of the provisions of the new initiative.

Start Date: Date that the law, regulation or ordinance was passed.

End Date: Same as start date

Service Count: One (1) when a new law, regulation or ordinance is passed or strengthened.

Duration Hours: Not applicable

Number of Sessions: 0 (NA)

Presenter/Executor: The agency that will implement the policy change.

Service Population: Population the policy is aimed at (e.g. vendors would be the population for an effort to increase compliance checks; employees for a workplace policy).

Client: Name of the particular agency, organization, school, or company impacted (if applicable).

Recipient: Further specify the group to be impacted.

Contractor Role(s): Choose all that apply – CR01 and CR07 are not applicable.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Not applicable. Time spent in TA/Consultation or Marketing should have already been coded.

Volunteer Time: (optional)

Number of Participants: The number of recipients likely to be impacted during the next year. NA if a reasonable estimate is not feasible.

Demographics: Provide if feasible

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Copy of the law regulation, or ordinance (before and after)

Correspondence, news release, newspaper articles indicating the RPC's significant involvement

KIDS NOW Plus – 2-2013

Activity/Service Type Codes

STV406

Product Placement, Pricing or Packaging Change

Steps 0.0.0.4.0

Target Audience:
Universal Indirect

Program Name: PM999 or any zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of the provisions of the new initiative.

Start Date: Date that the change went into effect.

End Date: Same as start date

Service Count: One (1) when a new initiative is established or an ongoing one is strengthened.

Duration Hours: Not applicable

Number of Sessions: NA (0)

Presenter/Executor: The agency that will implement the policy change.

Service Population: Population the policy is aimed at (e.g. vendors would be the population for an effort to increase compliance checks; employees for a workplace policy, customer group, etc.).

Client: Name of the particular agency, organization, school, or company impacted (if applicable).

Recipient: Further specify the group to be impacted.

Contractor Role(s): Choose all that apply – CR01 and CR07 are not applicable.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Not applicable. Time spent in TA/Consultation or Marketing should have already been coded.

Volunteer Time: (optional)

Number of Participants: The number of recipients likely to be impacted during the next year. NA if a reasonable estimate is not feasible.

Demographics: Provide if feasible

Documentation Requirements

One of the following:

Letter from organization indicating policy change and RPC's involvement

Completed RPC policy form signed by the store owner or manager

Completed on-site observation form (before and after)

Not KIDS NOW Plus - 2-2013

Activity/Service Type Codes

STV407

Product
Advertising/Marketing/Promotion
Policy Change

Target Audience:
Universal Indirect

Steps 0.0.0.4.0

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of the provisions of the new initiative.

Start Date: Date that the change went into effect.

End Date: Same as start date

Service Count: One (1) when a new initiative is established or an ongoing one is strengthened.

Duration Hours: Not applicable

Number of Sessions: NA (0)

Presenter/Executor: The agency that will implement the policy change.

Service Population: Population the policy is aimed at (e.g. vendors would be the population for an effort to increase compliance checks; employees for a workplace policy, customer group, etc.).

Client: Name of the particular agency, organization, school, or company impacted (if applicable).

Recipient: Further specify the group to be impacted.

Contractor Role(s): Choose all that apply – CR01 and CR07 are not applicable.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Not applicable. Time spent in TA/Consultation or Marketing should have already been coded.

Volunteer Time: (optional)

Number of Participants: The number of recipients likely to be impacted during the next year. NA if a reasonable estimate is not feasible.

Demographics: Provide if feasible

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

One of the following:

Letter from organization indicating policy change and RPC's involvement

Completed RPC policy form signed by the store owner or manager

Completed on-site observation form (before and after)

Not KIDS NOW Plus – 2-2013

Activity/Service Type Codes

STV408

Other Community Policy Change Steps 0.0.0.4.0

Target Audience:
Universal Indirect

Program Name: PM999 or any applicable zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of the provisions of the new initiative.

Start Date: Date that the policy change went into effect.

End Date: Same as start date

Service Count: One (1) when a new initiative is established or an ongoing one is strengthened.

Duration Hours: Not applicable

Number of Sessions: NA (0)

Presenter/Executor: The agency that will implement the policy change.

Service Population: Population the policy is aimed at (e.g. vendors would be the population for an effort to increase compliance checks; employees for a workplace policy, customer group, etc.).

Client: Name of the particular agency, organization, school, or company impacted (if applicable).

Recipient: Further specify the group to be impacted.

Contractor Role(s): Choose all that apply – CR01 and CR07 are not applicable.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Not applicable. Time spent in TA/Consultation or Marketing should have already been coded.

Volunteer Time: (optional)

Number of Participants: The number of recipients likely to be impacted during the next year. NA if a reasonable estimate is not feasible.

Demographics: Provide if feasible

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

One of the following:

Letter from organization indicating policy change and RPC's involvement

Completed RPC policy form signed by a responsible person from the agency/organization making the change (e.g. store owner, school principal)

Completed on-site observation form (before and after)

Activity/Service Type Codes

Strategy: Community-Based Process Strategies

CSAP Strategy Definition: This strategy aims to enhance the ability of the community to more effectively provide prevention and treatment services for alcohol, tobacco and drug abuse disorders. Activities in this strategy include organizing, planning, enhancing efficiency and effectiveness of services implementation, interagency collaboration, coalition building and networking.

STC501

Formal Community Team Formation Steps 0.2.0.0.0

Target Audience:
Universal Direct

Use to report the establishment of formalized community organizations concerned with fostering common interests and advocacy for substance abuse prevention. Examples include new interagency councils, task forces, coalitions, and youth prevention clubs. Record one time in the database as a new team is established.

Examples: KY-ASAP Local Board, Champions County Action Group, Youth Empowerment System Group

Program Name: PM999

Staff Name: Staff person assigned primary responsibility for reporting this event.

Activity Description: Brief description of the organization being formed.

Start Date: Date the organization is established.

End Date: Date the organization is established.

Service Count: One (1) for the formal establishment of the organization.

Duration Hours: NA (0)

Number of Sessions: NA (0)

Presenter/Executor: As appropriate for group with elected/appointed/assumed leadership, for organizational meeting where RPC staff leads until leadership is elected from within the group of volunteers, PE11 – Project Staff (e.g. if RPC is the contractor, PE11).

Service Population: The type of group (e.g. Champions RAG, Local KY-ASAP Board, etc.)

Client: Name of the Group. If the group is not named, mark ***Not Applicable*** until the group decides on a name, and then revise.

Recipient: May be left Blank if Client is named. Otherwise, describe the group membership.

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: NA

Staff Time: NA. Any significant staff efforts to develop the team should have already been coded.

Volunteer Time: (optional)

Number of Participants: NA

Demographics: NA

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Documentation Requirements

KIDS NOW Plus (2/2013) –

Sign-in sheets

Agenda

Minutes

Activity/Service Type Codes

STC502

Formal Community Team **Meetings** Steps 0.0.3.0.0

Target Audience:
Universal Direct

Use to report the meetings of Champions Community or Regional Action Groups, KY-ASAP Local Boards or other community groups or multi-agency coalitions. Subcommittee meetings should also be reported under this code, using the appropriate sub-code.

Note: Staff are **not required** to report their attendance at other formal community team meetings. However, this is an opportunity to indicate where staff time is spent.

Select all strategy categories that apply to the content of the meeting:

- Information Dissemination Strategies* *Educational Strategies* *Alternative Strategies*
 Environmental Strategies *Early Intervention/Problem Identification and Referral Strategies*

Program Name: PM999

Staff Name: Staff person assigned primary responsibility for reporting these meetings.

Meeting Subcode: Indicate whether this was a full group meeting or a subcommittee meeting.

Activity Description: Brief description of the nature and content of the meeting.

Start Date: Day of the meeting

End Date: Day of the meeting

Service Count: One (1) Do not record more than one meeting per record.

Duration Hours: Total (unduplicated) "clock hours" to complete the meeting (not including breaks).

Number of Sessions: NA (0)

Presenter/Executor: As appropriate for group with elected/appointed/assumed leadership, for organizational meeting where RPC staff leads until leadership is elected from within the group of volunteers, PE11 – Project Staff (e.g. if RPC is the contractor, PE11).

Service Population: As appropriate for the group

Client: The name of the group

Recipient: Blank

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: NS99 or NS32 – KY-ASAP

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

If NS32 – KY-ASAP, then NA

Targeted Behaviors: NA

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual meeting.

Volunteer Time: (optional)

Number of Participants: Number of persons attending meeting

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Demographics: Estimated or actual demographic information regarding information regarding the persons attending the meeting.

Documentation Requirements

KIDS NOW Plus (2/2013) - Any combination of the following:

Sign-in sheets

Agenda

Minutes

Activity/Service Type Codes

STC503

Other Formal Community Team

Activities

Steps 0.2.3.4.0

Target Audience:
Universal Direct

This code should be used for activities or services conducted with or sponsored by formalized community teams for the purpose of fostering, supporting, or enhancing community prevention services. Examples include multi-agency coordination and collaboration, mobilization events, development or implementation of action plans, joint planning or programming between two or more agencies or organizations, development of cooperative agreements. In general, this code is useful for community team activities for which there is no other clearly appropriate code.

Select all strategy categories that apply to activity:

- Information Dissemination Strategies* *Educational Strategies* *Alternative Strategies*
 Environmental Strategies *Early Intervention/Problem Identification and Referral Strategies*

Program Name: PM999

Staff Name: Staff person assigned primary responsibility for reporting these activities.

Activity Description: Brief description of the nature and content of the activity.

Start Date: Date which activity began formally

End Date: Date which activity ended formally

Service Count: One (1) Do not record more than one meeting per record.

Duration Hours: Total (unduplicated) "clock hours" to complete the activity (not including breaks).

Number of Sessions: NA (0)

Presenter/Executor: As appropriate for group with elected/appointed/assumed leadership, for organizational meeting where RPC staff leads until leadership is elected from within the group of volunteers, PE11 – Project Staff (e.g. if RPC is the contractor, PE11).

Service Population: As appropriate for the group

Client: The name of the group

Recipient: Blank

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: NA

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual activity.

Volunteer Time: (optional)

Number of Participants: Number of persons attending activity

Demographics: Estimated or actual demographic information regarding information regarding the persons attending the activity.

Activity/Service Type Codes

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus (2/2013) – Any combination of the following:

Sign-in sheets, if small group activity

Agenda, Minutes, announcement, brochure, newspaper article, press release or correspondence describing the activity

Activity/Service Type Codes

STC504

Community Needs Assessment Steps 1.0.0.0.0

**Target Audience:
Not Applicable**

This Service Type refers to a completed needs assessment report. Needs assessment involves both the collection of data relevant to substance abuse and an analysis of the data. The analysis presents the conclusions that can be drawn from the data about substance abuse, related problems, or risk/protective factors in a target population. A needs assessment report also identifies the priorities to be addressed by prevention program objectives.

Program Name: PM999

Staff Name: Staff person assigned primary responsibility for reporting the needs assessment activities or completing the report.

Activity Description: Brief description of the nature and scope of the needs assessment.

Start Date: Date needs assessment activities began

End Date: Date needs assessment activities ended

Service Count: One (1) when the formal needs assessment report is completed.

Duration Hours: NA (0)

Number of Sessions: NA (0)

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11) or other as appropriate for the individuals/organization conducting the needs assessment.

Service Population & Recipients: The population whose needs were assessed.

Client: NA

Recipient: Blank, or describe population whose needs were assessed.

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: NA

Staff Time: Man-hours of staff time spent conducting needs assessment activities.

Volunteer Time: (optional)

Number of Participants: NA

Demographics: NA

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Dated copy of the report, including both the data and data analysis/conclusions

Activity/Service Type Codes

STC505

Strategic Plan Steps 0.0.3.0.0

Target Audience:
Not Applicable

The product resulting from a structured process including definition of target populations, prioritization of prevention needs, assessment of existing prevention services, formulation of goals, objectives and action plans, selection of interventions, and allocation of resources. Make the database entry when a written plan is completed.

Program Name: PM999

Staff Name: Staff person assigned primary responsibility for reporting strategic plan activities.

Activity Description: Briefly explain what the plan proposes to accomplish.

Start Date: Date strategic plan is completed

End Date: Date strategic plan is completed

Service Count: One (1) when written plan is completed

Duration Hours: Not applicable, but staff time should be entered if not coded elsewhere (e.g. in TA/Consultation)

Number of Sessions: NA (0)

Presenter/Executor: Person or group who completed the plan.

Service Population: Population to benefit from the planned services.

Client: The name of the group

Recipient: Specify the group to be impacted.

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: NS99 or NS32 – KY-ASAP

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: NA

Staff Time: Man-hours of staff time in the strategic planning process (if not coded as TA/Consultation)

Volunteer Time: (optional)

Participants: The number of recipients to be served by the plan during the next year, if known. Zero (0) if a reasonable estimate is not feasible.

Demographics: Provide if feasible.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Dated copy of the Plan

Activity/Service Type Codes

STC507

Consultation and Technical Assistance Steps 1.2.3.4.5

Target Audience:
Universal Direct

Services provided by professional prevention staff intended to provide technical guidance to state or local prevention programs, community organizations, and individuals to conduct, strengthen, or enhance activities to promote prevention. Services recorded should go beyond brief informational contacts, and should lead to a final product, e.g. adding programs and services, developing funding and resources, providing professional expertise, addressing cultural competence, developing an action plan, capacity building, quality assurance and improvement, organizational development.

Enter one record per month for each client that received consultation and technical assistance services. Select all strategy categories that apply to the consultation or assistance effort by checking the appropriate boxes:

- Information Dissemination Strategies Educational Strategies Alternative Strategies
 Environmental Strategies Early Intervention/Problem Identification and Referral Strategies

Program Name: PM999 or any appropriate zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of **content and method of technical assistance**.

Start Date: First day during the month that staff provided TA to each Client.

End Date: Last day during the month that staff provided TA to each Client.

Service Count: One (1) (one per client per month)

Duration Hours: Total (unduplicated) "clock hours" of TA provided during one month. If you report a meeting where the Contractor Role is TA, do not report that same time in this record.

Number of Sessions: Number of different days during the month staff provided TA to this Client.

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), (Do NOT report TA provided by another agency).

Service Population: The most specific for the recipient of the TA (Not the target audience of the program you provided TA about).

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of the TA. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: Name and Job Title of 4 or less individuals or a brief description of the group receiving the TA.

Contractor Role(s): CR01

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: NA

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual presentation of TA to recipients.

Volunteer Time: (optional)

Number of Participants: Number of different persons served by staff with TA during the reporting period.

Demographics: Estimated or actual demographic information regarding the recipients of the TA.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Documentation Requirements

KIDS NOW Plus – 2-2013

Description of subject of consultation/TA

Calendar showing appointment & notes from consultation/TA

Client TA contact log including:

Dated list of contacts with a particular Client including notes on content & method (face to face, e-mail, phone, etc.)

Face to Face:

Follow-up correspondence

Handouts or flyers

Meeting:

Agenda or minutes

Handouts

Phone calls (not reported unless followed up by email/written correspondence):

Follow-up correspondence

Activity/Service Type Codes

STC508

Accessing Services and Funding Steps 0.2.0.0.0

Target Audience:
Not Applicable

Accessing services and funding activities are counted as one each time a new community resource is developed or renewed or a grant application is submitted with assistance from the project staff. This is used to report a one-time event, not an ongoing budget process.

Program Name: PM999 or any appropriate zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting these activities.

Activity Description: Brief description of the nature and content of the activity.

Start Date: Date the new resource is established or proposal is submitted.

End Date: Date the new resource is established or proposal is submitted.

Service Count: One (1)

Duration Hours: NA (0)

Number of Sessions: NA (0)

Presenter/Executer: PE11 – Project Staff (e.g. if RPC is the contractor, PE11).

Service Population: Population that will benefit from the new resource.

Client: The name of the organization receiving assistance from staff.

Recipient: Blank

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: NA

Staff Time: Man-hours of staff time in the preparation of the grant application or other resource development activities.

Volunteer Time: (optional)

Number of Participants: NA (0)

Demographics: NA

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Copy of grant/contract application face page, abstract and budget. It is not necessary to retain the entire application for documentation purposes.

Activity/Service Type Codes

STC509

Community Training Steps 0.2.0.0.0

Target Audience:
Universal Direct

A variety of structured substance abuse prevention training events intended to develop proficiency in the Strategic Prevention Framework, as well as other program design, development, and delivery. E.g. training of impactors (e.g. training of trainers, and training of volunteers (including attendance at state and national conferences). This code does not include speaking engagements and programs to raise general awareness of ATOD problems - these should be counted under Speaking Engagements and Brief Educational Programs (STN116). This code also does not include the delivery of structured ATOD curricula that are defined under Educational Strategies nor in-house staff training unless it is a special structured training event.

Select all strategy categories that apply to the training effort:

- Information Dissemination Strategies Educational Strategies Alternative Strategies
 Environmental Strategies Early Intervention/Problem Identification and Referral Strategies

Community Training

Program Name: PM999 or any appropriate zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this Training.

Activity Description: Brief description of content of Training unless covered by Program Name Code.

Start Date: First day the group met for this training

End Date: Last day the group met for this training

Service Count: One (1)

Duration Hours: Total (unduplicated) "clock hours" to complete one entire course of instruction (not including breaks).

Number of Sessions: Number of different days the group met (start date to end date inclusively) to complete one entire course of instruction.

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), PE16 Prevention Professional NOS or other as appropriate for the provider of the Training

Service Population: The most specific for the target audience of the Training. If provided by RPC staff to other RPC staff, SP15 – Prevention Professional.

Client: The Agency, Organization, School, or Company the Recipient is affiliated with for the context of the Training. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: Name and job title of 4 or less individuals or a brief description of the group receiving the training.

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: What behavior of the Service Population is targeted by this activity?

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual presentation of training to recipients.

Volunteer Time: (optional)

Number of Participants: Number of persons counted as "Completers" of the course of instruction.

Demographics: Estimated or actual demographic information regarding the recipients of the Training.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Documentation Requirements

KIDS NOW Plus – 2-2013

Training provided to others:

Description of subject of training/training materials/handouts, etc.

Sign-in sheet for each session of training

Activity/Service Type Codes

STC511

Research or Evaluation Plan Steps 0.0.0.0.5

Target Audience:
Universal Direct
Selective
Indicated

Use this code for **reporting the development of an evaluation plan**, such as for conducting research studies, data collection and analysis, population surveys, and process evaluation activities, such as monitoring a session of a curriculum to determine implementation fidelity. Use this code when completing a written evaluation plan that describes the evaluation of a prevention intervention or strategy.

Select all strategy categories that apply to the evaluation plan:

- Educational Strategies* *Alternative Strategies* *Environmental Strategies*
 Early Intervention/Problem Identification and Referral Strategies

Program Name: Zero (0) code of the strategy being evaluated

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of content and method of research/evaluation effort and summary of the plan.

Start Date: First day of developing the evaluation plan.

End Date: The day the evaluation plan was finalized.

Service Count: One (1) (Report ONE service per evaluation plan)

Duration Hours: NA (0)

Number of Sessions: NA (0)

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), or other as appropriate for the provider of the research/evaluation plan. If Coalition members or evaluator developed the report use appropriate Presenter/Executor code that represents the group.

Service Population: The most specific for the target population of the research/evaluation effort.

Provider: The agency, organization, school, or company that developed the evaluation plan (unless it is the RPC).

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of the evaluation effort. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: A brief description of the group receiving the evaluation effort.

Contractor Role(s): CR01, CR02, CR04, CR06, CR08 as appropriate.

High Risk Group(s): HR99, unless a special high risk group was the targeted population.

National/State Initiative: NS99 or as appropriate.

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: As appropriate for the outcome behavior evaluated.

Staff Time: Person-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual development of the evaluation plan.

Volunteer Time: (optional)

Number of Participants: NA (0)

Demographics: NA.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Copy of evaluation plan

Activity/Service Type Codes

STC512

New Ongoing Prevention Activity **Established** Steps 0.2.0.4.0

Target Audience:
Not Applicable

Use this code when a community organization formally adopts a new prevention activity for delivery to their target audience on an ongoing basis. Also use this code when establishing a new information outlet. This code may also be used for formal written organizational policy changes that result in significant program expansion. If an alternative activity is being established, see the code under Alternative Strategies (STA301).

Note: The establishment of a new ongoing prevention activity or new information outlet is a one time occurrence.

Select the strategy category that applies to the new prevention activity:

- Information Dissemination Strategies* *Educational Strategies* *Alternative Strategies*
 Environmental Strategies *Early Intervention/Problem Identification and Referral Strategies*

Program Name: If listed on Program Name Code list, then enter program code. Otherwise enter PM999

Staff Name: Staff person assigned primary responsibility for reporting the new activity established.

Activity Description: Brief description of the new prevention activity.

Start Date: Date the activity was established as ongoing.

End Date: Date the activity was established as ongoing.

Service Count: One (1)

Duration Hours: NA (0)

Number of Sessions: NA (0)

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: NA

Staff Time: Not applicable.

Volunteer Time: (optional)

Presenter/Executor: The agency that will implement the activity.

Service Population: Population that will receive the activity.

Client: The name of the school, agency, organization or company that the recipients are affiliated with (NOT a description of a group).

Recipient: Specify who will receive the activity and where.

Participants: The number of recipients, e.g. in a school or business, expected to receive the activity during the next year, if known.

Demographics: Report if feasible.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Documentation Requirements

KIDS NOW Plus – 2-2013

Correspondence from the organization that is adopting the activity, or an official notice of adoption/linkage agreement, indicating the RPC's involvement.

Activity/Service Type Codes

STC513

Research or Evaluation Activity Steps 1.0.0.0.5

Target Audience:
Universal Direct
Selective
Indicated
Not Applicable

Use this code for activities such as conducting research studies, data collection and analysis, population surveys, and process evaluation activities, such as monitoring a session of a curriculum to determine implementation fidelity. Conducting pre-post tests for another community agency would be appropriate to record using this code. Also use this code when completing of a written evaluation report that describes the outcomes of a prevention intervention or strategy.

Coding Tips: When used to report the development of a survey instrument or completion of a written report, Participants and Demographics are not required. **Note:** It is not advisable to enter a database record for the administration of pre-post tests each time a curriculum is delivered by staff. Such activity is considered an integral part of delivering a research-based program.

Select all strategy categories that apply to evaluation effort:

- Educational Strategies Alternative Strategies Environmental Strategies
 Early Intervention/Problem Identification and Referral Strategies

Program Name: PM999 or any zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of content and method of research/evaluation effort.

Start Date: First day of the evaluation process.

End Date: Last day during the month that staff marketed services/programs/concepts to each Client.

Service Count: One (1) (Report ONE service per Client per month)

Duration Hours: Total (unduplicated) "clock hours" of evaluation provided.

Number of Sessions: Number of different days during the month staff conducted evaluation activities for this Client.

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), or other as appropriate for the provider of the research/evaluation effort.

Service Population: The most specific for the target audience of the research/evaluation effort.

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of the evaluation effort. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: Name and Job Title of 4 or less individuals or a brief description of the group receiving the evaluation effort.

Contractor Role(s): CR01

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: As appropriate for the outcome behavior evaluated.

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual evaluation activity conducted with recipients.

Volunteer Time: (optional)

Number of Participants: Number of different persons participating in evaluation activities conducted by staff during the reporting period.

Demographics: Report if feasible.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Documentation Requirements

KIDS NOW Plus – 2-2013

Any combination of the following that provides reasonable evidence that the evaluation activity occurred:

- Pre/Post tests, with data summaries or analysis
- Cover letter from submission of Pre/Post tests
- Notes from monitoring session
- Copy of evaluation report

Activity/Service Type Codes

STC514

Research or Evaluation Report Steps 0.0.0.0.5

Target Audience:
Universal Direct
Selective
Indicated

Use this code for **reporting the results** of activities such as conducting research studies, data collection and analysis, population surveys, and process evaluation activities, such as monitoring a session of a curriculum to determine implementation fidelity. Use this code when completing a written evaluation report that describes the outcomes of a prevention intervention or strategy.

Select all strategy categories that apply to the evaluation report:

- Educational Strategies Alternative Strategies Environmental Strategies
 Early Intervention/Problem Identification and Referral Strategies

Program Name: Zero (0) code of the strategy being evaluated

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of content and method of research/evaluation effort and summary of the report.

Start Date: First day of developing the evaluation report.

End Date: The day the evaluation report was finalized.

Service Count: One (1) (Report ONE service per evaluation report)

Duration Hours: NA (0)

Number of Sessions: NA (0)

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), or other as appropriate for the provider of the research/evaluation report. If Coalition members or evaluator developed the report use appropriate Presenter/Executor code that represents the group.

Service Population: The most specific for the target population of the research/evaluation effort.

Provider: The agency, organization, school, or company that developed the evaluation report (unless it is the RPC).

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of the evaluation effort. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: A brief description of the group receiving the evaluation effort.

Contractor Role(s): CR01, CR02, CR04, CR06, CR08 as appropriate.

High Risk Group(s): HR99, unless a special high risk group was the targeted population.

National/State Initiative: NS99 or as appropriate.

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: As appropriate for the outcome behavior evaluated.

Staff Time: Person-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual development of the evaluation report.

Volunteer Time: (optional)

Number of Participants: Number of different persons participating in evaluation activities summarized by the evaluation report.

Demographics: Report if feasible.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Copy of evaluation report

Activity/Service Type Codes

STC515

Marketing Steps 0.2.3.4.0

Target Audience:
Universal Direct

This code is used for **all** marketing activities related to the six strategies of substance abuse prevention.

Select all strategy categories that apply to the marketing effort:

- Information Dissemination Strategies* *Educational Strategies* *Alternative Strategies*
 Environmental Strategies *Early Intervention/Problem Identification and Referral Strategies*

Program Name: PM999 or any appropriate zero (0) code

Staff Name: Staff person assigned primary responsibility for reporting this activity.

Activity Description: Brief description of **content and method of marketing effort**.

Start Date: First day during the month that staff marketed services/programs/concepts to each Client.

End Date: Last day during the month that staff marketed services/programs/concepts to each Client.

Service Count: One (1) (Report ONE service per Client per month)

Duration Hours: Total (unduplicated) "clock hours" of marketing provided. If you report a meeting where the Contractor Role is Marketing, do not report that same time in this record.

Number of Sessions: Number of different days during the month staff marketed services/programs/concepts to this Client.

Presenter/Executor: PE11 – Project Staff (e.g. if RPC is the contractor, PE11), or other as appropriate for the provider of the marketing effort.

Service Population: The most specific for the target audience of the marketing effort (Not for the concept/strategy being marketed).

Client: The agency, organization, school, or company the Recipient is affiliated with for the context of the marketing effort. If more than one agency, etc is represented, choose *** Not Applicable ***.

Recipient: Name and Job Title of 4 or less individuals or a brief description of the group receiving the marketing effort.

Contractor Role(s): CR01

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: As appropriate

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: Usually NA because you are not marketing to the Target Audience of the program/curriculum/concept.

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual presentation of marketing effort to recipients.

Volunteer Time: (optional)

Number of Participants: Number of different persons served by staff with a marketing effort during the reporting period.

Demographics: Estimated or actual demographic information regarding recipients of the marketing effort.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Activity/Service Type Codes

Documentation Requirements

KIDS NOW Plus – 2-2013

Description of Concept/Strategy being marketed

Calendar showing appointment & notes from meeting

Client Marketing contact log with:

Dated list of contacts with a particular Client including notes on content & method (face to face, e-mail, phone, etc)

Face to Face: Follow-up correspondence, handouts or flyers

Meeting: Agenda, minutes, or handouts from the meeting

Phone calls: Follow-up correspondence

Mail: 1 copy of mailed materials & list of contacts and addresses

Fax: Copy of faxed info

Activity/Service Type Codes

STC516

Staff Development Steps 0.2.0.0.0

Target Audience:
Universal Direct

Note: Staff Development Training and Technical Assistance should be coded using the following instructions:

- A) Code your own training separate from other staff entering your name in the Staff Name field and leave the Client field blank.
- B) Code yourself as the only participant (Participants = 1), rather than the number of persons attending the course.
- C) Fill out demographics for yourself.
- D) Duration hours and Staff Delivery Time should be the actual number of instruction hours you attended, not including breaks.
- E) Each major course taken (e.g. at the Kentucky School) should be entered into a separate record.
- F) In the Activity Description name the course taken.
- G) If you attended a conference with many short workshops, give the name of the conference and brief descriptions of the most important courses you attended. For example: "National Prevention Network Conference courses on college programming, evaluation, needs assessment, and media campaign."

Select all strategy categories that apply to the staff development effort:

- Information Dissemination Strategies* *Educational Strategies* *Alternative Strategies*
- Environmental Strategies* *Early Intervention/Problem Identification and Referral Strategies*

Program Name: Any appropriate Program Code ("Zero Code" for Training of Trainers, etc.).

Staff Name: The name of the staff person receiving the Staff Development service.

Activity Description: Brief description of content and type of development activity.

Start Date: First day of the course of instruction

End Date: Last day of the course of instruction

Service Count: One (1)

Duration Hours: Total (unduplicated) "clock hours" of Staff Development received (not including breaks).

Number of Sessions: Number of different days during the course of instruction staff received guidance.

Presenter/Executor: PE16 – Prevention Professional or other as appropriate for the provider of the service to staff.

Service Population: SP03 RPC/Project Staff

Client: *** Not Applicable ***

Recipient: Blank

Contractor Role(s): CR07

High Risk Group(s): HR99

National/State Initiative: NS99

Related Project: NA

Targeted Behaviors: NA

Staff Time: Man-hours of staff time in the preparation (includes follow-up), travel (both directions) and the actual receipt of guidance/instruction.

Volunteer Time: Blank

Number of Participants: One (1)

Demographics: Actual demographic info for self

Activity/Service Type Codes

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus – 2-2013

Training provided to others:

Description of subject of training/training materials/handouts, etc.

Sign-in sheet for each session of training

Received by staff:

Certificate

Conference Brochure

Activity/Service Type Codes

STC517

Sustainability Plan Steps 0.0.3.0.0

**Target Audience:
Not Applicable**

Recognizing that sustainability is a fluid concept, communities have a plan to maintain the human, social and material resources needed to achieve or sustain their long-term goals. Report one whenever a plan is completed or major revision are made.

Program Name: PM999

Staff Name: Staff person assigned primary responsibility for reporting sustainability plan activities.

Activity Description: Briefly explain what the plan proposes to accomplish.

Start Date: Date sustainability plan is completed

End Date: Date sustainability plan is completed

Service Count: One (1) when written plan is completed or major revision are made

Duration Hours: Not applicable, but staff time should be entered if not coded elsewhere (e.g. in TA/Consultation)

Number of Sessions: NA (0)

Presenter/Executor: Person or group who completed the plan.

Service Population: Population to benefit from the planned services.

Client: The name of the group

Recipient: Specify the group to be impacted.

Contractor Role(s): If PE11, CR01. If other than PE11, choose all that apply.

High Risk Group(s): HR99, unless a special high risk group was the targeted audience.

National/State Initiative: NS99 or NS32 – KY-ASAP

Related Project: Is this activity related directly to one of the projects listed in this field? For example, to be considered Champions related, the activity should be aimed at the formation, activities or development of the Champions group itself, or the implementation of the Champions plan.

Targeted Behaviors: NA

Staff Time: Man-hours of staff time in the sustainability planning process (if not coded as TA/Consultation)

Volunteer Time: (optional)

Participants: The number of recipients to be served by the plan during the next year, if known. Zero (0) if a reasonable estimate is not feasible.

Demographics: Provide if feasible.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Dated copy of the Plan

Activity/Service Type Codes

STC518

Signed Memorandum of Agreement/Understanding Steps 0.2.0.0.0

Target Audience:
Universal Direct

Use this code when a Memorandum of Agreement or Memorandum of Understanding is signed by a desired partner organization.

Program Name: PM999 unless the MOA/MOU is specifically to provide a service regarding the listed program (e.g. providing a delivery of LifeSkills curriculum with fidelity)

Staff Name: Staff person assigned primary responsibility for this activity.

Activity Description: Briefly explain what the memorandum proposes to accomplish.

Start Date: Date memorandum was signed

End Date: Date memorandum was signed

Service Count: One (1) when memorandum was signed

Duration Hours: Not applicable, but staff time should be entered if not coded elsewhere (e.g. in Marketing)

Number of Sessions: NA (0)

Presenter/Executor: Person or group who signed the agreement.

Service Population: Population or group to benefit from the agreement (coalition).

Provider: The name of the group (company or organization) agreeing to assist the group or coalition.

Client: The name of the group (coalition) to benefit from the agreement

Recipient: Blank

Contractor Role(s): CR99 or CR02, CR04, CR05 CR06 (choose all that apply).

High Risk Group(s): HR99.

National/State Initiative: NS99 unless this is a time limited agreement for the express purpose of a specific initiative.

Related Project: NA unless agreement is related directly to one of the projects listed in this field. For example, to be considered CSNaP related, the agreement should be aimed at the development and/or implementation of the CSNaP plan.

Targeted Behaviors: Select those behaviors that this agreement will serve to target.

Staff Time: Person-hours of staff time in the process of securing the Memorandum of Agreement/Understanding (if not reported separately as Marketing)

Volunteer Time: (optional)

Participants: Zero (0).

Demographics: NA

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

Signed and dated copy of the Memorandum of Agreement/Understanding

Activity/Service Type Codes

STC519

Grant Review Panel Steps 0.0.0.0.0

**Target Audience:
Not Applicable**

Use this code when one or more RPC Staff serve on a Grant Review Panel for the purpose of determining funding from competitive grant applications.

Note: This is not for use when reviewing grants from within the RPC's own region before submitting for consideration for funding. That review would be reported as technical assistance to the coalition submitting the grant.

Program Name: PM999.

Staff Name: Staff person assigned primary responsibility for this activity.

Activity Description: Briefly explain what grant serving on the review panel for.

Start Date: Date review panel started the actual review process

End Date: Date review panel completed the actual review process

Service Count: One (1)

Duration Hours: Actual hours of the grant review panel, not including preparatory reading of grants

Number of Sessions: The number of different days the review panel met to review the grants under consideration.

Presenter/Executor: PE11 – Project/RPC Staff.

Service Population: The type of coalition/group that will receive the funding (SP22, SP27, SP29, SP31, SP43, SP44, SP46, SP47, SP48, SP51, SP59, SP64, SP71, SP72).

Provider: The name of the group (company or organization) that issued the RFP.

Client: *** Not Applicable ***

Recipient: Blank

Contractor Role(s): CR01 – Presenter/Executor

High Risk Group(s): HR99 unless the RFP is specifically targeting a High Risk Group.

National/State Initiative: NS99

Related Project: NA

Targeted Behaviors: NA unless the RFP is specifically targeting a behavior.

Staff Time: Person-hours of staff time (Prep for preparatory reading, Travel & Delivery for actual time of the review).

Volunteer Time: NA

Participants: Total Participants from the reporting RPC (each RPC will report their own staff).

Demographics: Demographics of the RPC Staff reported in this record.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus – 2-2013

Letter(s), email(s), agreement(s) offered and accepted to for RPC Staff to serve on the Grant Review Panel.

Activity/Service Type Codes

Strategy: Problem Identification and Referral Strategies

CSAP Strategy Definition: This strategy aims at identification of those who have indulged in illegal/age-inappropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs in order to assess if their behavior can be reversed through education. It should be noted, however, that this strategy does not include any activity designed to determine if a person is in need of treatment.

NOTE: We interpret the last line of CSAP's definition to mean that actual assessments done by a treatment provider should not be counted. However, programs that result in referrals for such assessments are included in this strategy.

Coding Tips: *All coding for this strategy can be coded under the following: STE201 – Multi-Session Curriculum Delivery; STC 507 – Consultation or Technical Assistance; STC509 – Community Training and STC516 – Staff Development; STC512 – New Ongoing Prevention Program; or STC515 – Marketing. Check the Problem Identification/Referral Strategies option box under the appropriate code.*

STP601

Screening for Education or Referral

Steps 0.0.0.0.0

Target Audience:
Selective

Use this code to report when administering a screening instrument to determine criteria for placing youth in the appropriate follow-up program.

Note: This screening is NOT an assessment to determine the need for treatment.

Program Name: PM999.

Staff Name: Staff person assigned primary responsibility for this activity.

Activity Description: Include the name of the screening instrument.

Start Date: Date of the screening

End Date: Date of the screening

Service Count: The number of persons being reported in this record as completing the screening instrument.

Duration Hours: Actual hours to complete one (1) screening instrument.

Number of Sessions: One (1)

Presenter/Executor: PE12 – Early Intervention Program personnel.

Service Population: The Service Population that best describes the persons completing the screening instrument.

Provider: *** Not Applicable ***

Client: The agency, organization, school, or company that made the referral that resulted in the administering of the screening instrument.

Recipient: Blank

Contractor Role(s): CR01 – Presenter/Executor

High Risk Group(s): The High Risk Group that best describes the persons completing the screening instrument.

National/State Initiative: NS99

Related Project: EIP

Targeted Behaviors: NA.

Staff Time: Person-hours of staff time (Prep, Travel & Delivery).

Activity/Service Type Codes

Volunteer Time: NA

Participants: The number of persons being reported in this record as completing the screening instrument.

Demographics: Demographics of the persons being reported in this record as completing the screening instrument.

Cost Data: Cost Data is required, if there is Staff Prep, Travel or Delivery Time expended and/or materials purchased or other fees paid using Block Grant funds. KIDS NOW Plus activities are exempt, as they are paid for using Tobacco Settlement Funds.

Documentation Requirements

KIDS NOW Plus – 2-2013

Completed screening instrument (typically kept in a locked file for privacy reasons).

Activity/Service Type Codes

NOS_99

Service Type Not Otherwise Specified (NOS)

This code is to be used for any activity not clearly defined under the six strategy categories listed: Information, Educational, Alternative, Environmental, Community-Based Process, or Problem Identification and Referral. Almost all reportable activities should fall into one of the Service Type Codes described previously. However, since the prevention field is constantly evolving and new activities become accepted as effective, this code is provided as an option for such situations. **Do not use this code without prior consultation with DSA Staff.**

Documentation Requirements

KIDS NOW Plus – 2-2013