**Needs Assessment Template for Deliverable 4**

**Final Report**

**Please provide the following information:**

**Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Drug(s) identified to focus on for the county’s needs assessment process: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Data Analysis

Provide a brief summary/analysis of the data you collected related to your priority substance(s). Include any outstanding data gaps, barriers/challenges, etc. (***update the summary provided from deliverable 3***)

Prioritization of Contributing Local Factors

* 1. After identifying risk factors and contributing local factors, your county agency must prioritize the contributing local factors in order to focus your efforts during future implementation. You should prioritize contributing local factors and produce a final list of up to five priority contributing local factors. See Page 17 of the needs assessment guide for more information on how to prioritize. For each contributing local factor, your county must complete the “Prioritization of Contributing Local Factors” score sheet *(see below)*. Your completed score sheets can be included as an attachment or appendix to your needs assessment final report.
  2. In this section, you will need to describe the processes that were used to prioritize contributing local factors *(But Why Here?)*, including:
     1. When and how the prioritization process took place
     2. Length of time the county used to complete the prioritization process
     3. Individual(s) or group who made the final decisions regarding these priorities and diverse representation in the process.
  3. Complete the following “Priority Contributing Local Factors Table.”

**Priority Contributing Local Factors Table**

**County:** **[NAME OF COUNTY]**

**Instructions:** In the first and second columns, list the top risk factors / underlying condition(s) and associated contributing local factors as identified during the prioritization process. Up to five contributing local factors can be listed. In the third column, include all relevant supporting data. In the fourth column, provide a detailed explanation of why each contributing local factor has been selected as a priority.

|  |  |  |  |
| --- | --- | --- | --- |
| **Risk Factor / Underlying Condition** | **Contributing Local Factor** | **Supporting Data** | **Rationale** |
|  |  |  |  |
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**Protective Factors and Existing Resources**

1. Describe existing protective factors in the county (e.g., citizen patrols, community rewards for pro-social behavior, local ordinances supportive of earlier bar closings, retailers refuse alcohol sales to clearly intoxicated patrons, retailers have a high rate of compliance for non-sale of alcohol to minors).
2. Describe the relevant resources identified through the needs assessment process (e.g., programs and services already in existence to address the priority issue[s], funding sources, training opportunities, presence of active and strong advocacy groups such as Mothers Against Drunk Driving; DUI prosecutors; organizational resources).

**Problem Statement**

List your overall problem statement(s) here (i.e., summarize the problem(s) you will be addressing). (EXAMPLE: “There is a high prevalence of underage drinking among 18- to 21-year-olds in \_\_\_\_ County. The contributing local factors influencing this problem in \_\_\_\_ County that we will address are: \_\_\_\_\_.) As applicable, list additional problem(s) or goals that you plan to address in your county’s FY16 prevention management plans.

**Plan Submitted By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Region Capacity Coach (signature): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Prioritization of Contributing Local Factors Score Sheet\***

**County:**

**Contributing Local Factor:** **[LOCAL FACTOR]**

**Score each contributing local factor along the following four dimensions. Average the scores for numbers 1-4 to get the Final Score.**

**Prevalence of the contributing local factor:** **[SCORE]**

1 2 3 4 5

*Doesn’t exist Exists to a high degree in this county*

**Relationship between the contributing local factor and priority issue: [SCORE]**

1 2 3 4 5

*Weak Strong*

**Capacity to change the contributing local factor: [SCORE]**

1 2 3 4 5

*No capacity High capacity*

**Political will to change the contributing local factor: [SCORE]**

1 2 3 4 5

*No will High will*

**Final Score = [FINAL SCORE]**

\* Adapted from a draft version of Appendix K of *Strategic Prevention Framework (SPF): A Guide for Michigan Communities*, written by the Michigan Bureau of Substance Abuse and Addiction Services and the Pacific Institute for Research and Evaluation.