



Opioid Response Planning Checklist

Authors:

Jennifer Loeffler-Cobia, M.S.
American Institutes for Research

Patricia Campie, Ph.D.
American Institutes for Research

Opioid Response Planning Checklist (ORPC)

Introduction

Congratulations, you have just completed your *Community Data Interpretation (CDI)* training at the Opioid Workshop! Now that you have new tools to help you and your coalition interpret data sources and reports and identify and prioritize key findings, what is next? What do you need to address successfully your prioritized problem areas and implement evidence-based practices (EBPs)? The implementation of EBPs to address the opioid issue in Tennessee requires a series of interrelated and often complex tasks. This type of implementation also requires a focus on outcomes; coalitions need to identify what they want to achieve and how to measure progress toward those outcomes. Without a plan to coordinate these efforts, it is easy for coalition efforts to flounder. Investing some time in building coalition capacity and implementation planning can help to keep efforts moving forward with the implementation of opioid EBPs.

“If you don’t know where you are going, you’ll end up someplace else.”

Yogi Berra

AIR has developed the *Opioid Response Planning Checklist (ORPC)* as a follow-up tool to complement the Opioid Workshop and to assist coalitions with this vital initiative.

EBP Implementation Planning Using the ORPC

Now that you and other key coalition members have reviewed and prioritized your key findings and possible EBPs from the workshop, it is time to move to action! The ORPC informs you of “essential ingredients” to help get your coalition from where it is (i.e., current priority problem areas based on your data) to where it wants to be (i.e., opioid prevention and reduction outcomes). Evidence-based practice implementation planning is a thoughtful, proactive process that enables your coalition to reflect on priority problem areas and consider the steps it needs to take to improve the implementation of your EBP solutions and overall achieve desired outcomes. The planning process lays out the direction of the coalition for several years, the goals the coalition hopes to achieve, action steps for successful implementation, and the people responsible for making it happen. The ORPC and instructions on how to use it to guide your coalition opioid EBP endeavors follow.

Opioid Response Planning Checklist (ORPC)

1. The ORPC is a tool designed to guide coalitions in their self-assessment and planning for implementation of evidence-based practices (EBPs) for opioid prevention and reduction endeavors.
2. Ideally, the coalition coordinator along with other members of the coalition should complete the tool so the broadest perspectives can be collected from different vantage points. If this is not possible, the coalition coordinator should complete the tool and share the results with the other members.
3. Completing this tool should take no longer than 1 hour. Ratings should be provided based on the coalition's current understanding and not by reviewing data or asking others to report on progress for any of these items.
4. Using a scale of 1–5 (**1 = "The coalition has not begun this," 2 = "The coalition is starting to work on this," 3 = "The coalition is working on this," 4 = "The coalition has almost completed this," and 5 = "The coalition has accomplished this"**), you will rate each item as to how it currently exists within current EBP planning and implementation.
5. The ORPC will help your coalition identify areas that may need to be strengthened to improve opioid EBP implementation.
6. Total the ratings for each section in the checklist summary at the end of the tool. Use the ratings to help prioritize your coalition's areas of focus for implementing EBPs. Rerating the coalition over time (annually for example) will highlight changes and accomplishments achieved in the ongoing implementation process.
7. In addition to the ORPC, templates have been provided to assist your coalition build the following: EBP implementation capacity; EBP implementation planning (e.g., developing goals and objectives); EBP implementation (e.g., developing the work plan); and communication planning.

Date Completed	Completed By	Coalition Name

Coalition Opioid EBP Implementation Self-Assessment

1. Capacity of the EBP Implementation Planning Coalition <i>Do the opioid coalition partners have the infrastructure, resources, and experience to implement their opioid prevention and reduction work effectively? What would each organization need to do to be ready to implement the expected work with a high degree of quality?</i>	Rate the items based on the level of completion by the coalition: 1 = The coalition has not begun this 2 = The coalition is starting to work on this 3 = The coalition is working on this 4 = The coalition has almost completed this 5 = The coalition has accomplished this					Additional questions to ask as you are identifying level of completion
	1	2	3	4	5	
1.1 Identified the role each partner organization will play to contribute to outcomes.						What organizational roles are needed for opioid EBP implementation to succeed?
1.2 Identified infrastructure and resources that each partner organization will bring to the coalition.						What organizational infrastructure is needed? What type of resources are required?
1.3 Identified any needed changes to current infrastructure or resources to participate in the coalition.						How will changing organizational resources or infrastructure affect the strength of the collaborative overall?
1.4 Identified gaps in infrastructure or resources that the organization will need to have filled by other organizations in the collaborative.						How will organizations support each other's resource and infrastructure gaps on behalf of the collaborative overall?
1.5 Demonstrated experience working with the population and community addressed by the prioritized problem areas.						Are the partnering organizations well-regarded in where the opioid EBP needs to be implemented? Do members come from this community or share cultural, linguistic, or ethnic experiences with them?
1.6 Demonstrated experience implementing opioid EBPs (new programs or practices)						How often has the partnering organizations tried new approaches when old solutions are no longer viable?
Section 1. Total Score:						

2. What Your Coalition’s EBP Implementation Plan is Trying to Achieve: Mission and Vision <i>Has the coalition developed a vision, mission, and/or purpose statement that clearly defines the prioritized opioid problem areas identified through current data, EBP solutions, and anticipated outcomes?</i>	Rate the items based on the level of completion by the coalition: 1 = The coalition has not begun this 2 = The coalition is starting to work on this 3 = The coalition is working on this 4 = The coalition has almost completed this 5 = The coalition has accomplished this					Additional questions to ask as you are identifying level of completion
	1	2	3	4	5	
2.1. Identified the primary opioid problem areas identified through current data.						What are the primary opioid problem areas that have been identified through current data?
2.2. Identified the targeted population to receive opioid-related EBPs.						Who is the targeted population?
2.3. Identified what changes the coalition expects to see in the target population as a result of opioid EBP implementation.						What changes do you expect to see in the targeted population as a result of participation in the identified opioid EBPs?
2.4. Defined the vision, mission, and/or purpose statement to reflect targeted population, risk and protective factors, and anticipated changes.						What is the current vision, mission and/or purpose statement of the coalition? Have partners reached consensus on the purpose for implementing opioid EPBs?
2.5. Disseminated the vision, mission, and/or purpose statement at the state and local levels to provide transparency and increase buy-in from community members.						How has the vision, mission, and/or purpose statement been disseminated? To whom has it been disseminated?
Section 2. Total Score:						

3. Choose Your Coalition’s Destination: Set Strategic Goals <i>Has the coalition translated the prioritized problem areas into goals that relate to the mission and help move opioid EBP implementation into action?</i>	Rate the items based on the level of completion by the coalition: 1 = The coalition has not begun this 2 = The coalition is starting to work on this 3 = The coalition is working on this 4 = The coalition has almost completed this 5 = The coalition has accomplished this					Additional questions to ask as you are identifying level of completion
	1	2	3	4	5	
3.1 Translated priority problem areas into Specific, Measurable, Attainable, Realistic, and Timely (SMART) goals.						What goals reflect the key findings identified through current data? Are they SMART goals?
3.2 Developed SMART goals related to the mission and determine what action is needed to move forward to address the priority problem areas .						How are the SMART goals related to the mission of the coalition? How do the SMART goals help the coalition move forward with opioid EBP implementation?
Section 3. Total Score:						

4. Develop the Roadmap: Setting Objectives, Teams, and Timelines Has the coalition developed an EBP implementation plan that outlines objectives, responsibilities of members, timelines, communication, and quality assurance? Have working committees been formed?		Rate the items based on the level of completion by the coalition: 1 = The coalition has not begun this 2 = The coalition is starting to work on this 3 = The coalition is working on this 4 = The coalition has almost completed this 5 = The coalition has accomplished this					Additional questions to ask as you are identifying level of completion
		1	2	3	4	5	
4.1	Developed clear objectives that emphasize steps to achieving each goal .						What are the steps needed to achieve each goal? Have the steps been translated into clear objectives?
4.2	Identified individual members or groups within the coalition as leads to achieve each goal and corresponding objectives.						Who is responsible for ensuring the necessary steps are taken to achieve each goal and corresponding objectives? Do the goals require just an individual or a group?
4.3	Identified deadlines for each goal and corresponding objectives to encourage progress .						What are the deadlines for completing each goal? Are intermediate timelines needed for each objective?
4.4	Completed a status plan that reflects progress toward achieving goals , identifies any barriers that may need to be addressed, and documents changes needed.						How is progress documented? What barriers exist to completing each goal?
4.5	Developed a communication plan to encourage action and accountability .						How does the coalition communicate about action and accountability?
4.6	Developed a measurement/quality assurance plan to measure progress toward achieving each goal and corresponding objectives.						How are goals measured to ensure progress is being made? What data collection procedures are in place? How does the coalition discuss when goals are met and not met (i.e., using data to drive implementation improvements)?
Section 4. Total Score:							

5. Strategy to Action! Get the Work Started Has the coalition developed specific work plans that detail tasks necessary to achieve objectives for each goal? Are specific coalition members responsible for certain goals? Has a charter been developed to help guide each working committee?	Rate the items based on the level of completion by the coalition: 1 = The coalition has not begun this 2 = The coalition is starting to work on this 3 = The coalition is working on this 4 = The coalition has almost completed this 5 = The coalition has accomplished this					Additional questions to ask as you are identifying level of completion
	1	2	3	4	5	
5.1 Identified working committees to complete tasks to implement goals simultaneously .						Have working committees been assigned to each goal?
5.2 Developed a committee charter for each committee to ensure the group stays focused and on schedule .						Does each working committee have a developed charter that clearly details their purpose? Where is the charter documented?
5.3 Developed a specific work plan by each working committee that “connects the dots” between different objectives, tasks, assigned roles, responsibilities, and timelines.						Has each working committee developed a work plan that details activities necessary to accomplish each objective and overarching goal? Where is the work plan documented?
Section 5. Total Score:						

6. Revisiting the EBP Implementation Plan: Quality Improvement <i>Does the coalition have a process to review the opioid EBP implementation plan on a regular basis? Does the coalition continually review data to determine when goals have been met, when priority areas have changed, and when new goals need to be added?</i>	Rate the items based on the level of completion by the coalition: 1 = The coalition has not begun this 2 = The coalition is starting to work on this 3 = The coalition is working on this 4 = The coalition has almost completed this 5 = The coalition has accomplished this					Additional questions to ask as you are identifying level of completion
	1	2	3	4	5	
6.1 Reviewed progress toward goals by the coalition quarterly to determine where progress is being made and where improvements need to be implemented.						How is progress documented? Where is progress documented? What happens to the documentation?
6.2 Used data during the review process to determine where progress is made and where improvements are necessary.						How are data documented? Where are data documented? What happens to the documentation?
6.3 Implemented annual data interpretation to assess any changes in the community's conditions (i.e., different priority problem areas).						How are changes documented? Where are changes documented? What happens to the documentation?
6.4 Updated the coalition's opioid EBP implementation plan annually to add new goals based on completed goals and changing conditions.						How are new goals documented? Where are new goals documented? What happens to the documentation?
6.5 Added new coalition members to ensure that new goals can be addressed as the opioid EBP implementation plan evolves .						How are new coalition members identified (e.g., experience related to problem areas)? How are they recruited?
Section 6. Total Score:						

Coalition Capacity Building Summary of the ORPC Worksheet

	Total of all Ratings (Add up each section)	Gaps to Prioritize	Strengths to Build On	Plans for Action
1. Capacity of the EBP Implementation Planning Coalition Range: 6 (low) to 30 (high)				
2. What Your Coalition’s EBP Implementation Plan is Trying to Achieve: Mission and Vision Range: 4 (low) to 20 (high)				
3. Choose Your Coalition’s Destination: Set Strategic Goals Range: 2 (low) to 10 (high)				
4. Develop the Roadmap: Setting Objectives, Teams, and Timelines Range: 6 (low) to 30 (high)				
5. Strategy to Action! Get the Work Started Range: 3 (low) to 15 (high)				
6. Revisiting the EBP Implementation Plan: Quality Improvement Range: 5 (low) to 25 (high)				

Opioid Evidence-Based Practice Implementation Plan Template

Template 1: Evidence-Based Practice Implementation				
Goals	Objectives	Team Responsible	Timeframe	Status
Goal 1:				
Goal 2:				
Goal 3:				
Goal 4:				

Opioid Coalition Work Plan Template

Template 2. Committee Work Plan					
Objectives to Accomplish Goals	Strategies/ Activities	Completion Date	Person/Team Responsible	Strategy/ Activity Benchmarks	Outcome
Goal 1:					
Goal 2:					
Goal 3:					

Coalition EBP Communication Plan

Template 3: Coalition Opioid EBP Communication Plan			
WHAT? Brainstorm what information needs to be relayed.	Overview of Opioid Initiative	Update of Opioid Prevention and Reduction Mission Statement	Implementation of Risk/Needs Assessment
<p>WHO? Brainstorm the stakeholder groups that need to receive information on priority problem areas and EBP solutions.</p>	<p>HOW? For each matrix square of stakeholder and information, list a tactic and frequency for communicating the information. For key information, multiple tactics will be needed. The type and frequency of communication will likely change over time, so the communication plan will be a dynamic document. Include dates and individuals responsible when possible. (Once the matrix has been completed, look for overlap where one tactic can serve multiple functions. For example, if several stakeholders will benefit from regular email updates, a monthly e-newsletter on the change initiative may be most effective and efficient.)</p>		
Substance Abuse Agency			
Mental Health Agency			
Public Health Agency			
Education Agency			
Community Treatment Providers			
Judges and Court Officers			
Elected County Officials			
Victims and Victim Service Providers			
Community Members			

Note:
After brainstorming, the communication plan may contain more elements than can be committed to by the coalition. If so, prioritize the list based on the importance and urgency of the information, and the resources needed to convey it.

Contact Information

Jennifer Loeffler-Cobia, M.S.
Senior Researcher
American Institute for Research
Phone: (202)-403-6668
Email: jloefflercobia@air.org

Patricia Campie, Ph.D.
Principal Researcher
American Institutes for Research
Phone: (202) 403-5441
Email: pcampie@air.org