©2019 Center for Communities That Care, University of Washington **Communities That Care** Tools for Community Leaders: **Guidebook for Getting Started**



Table of Contents

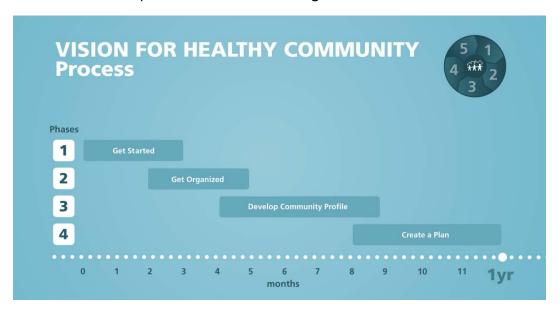
Getting Started

Page 3	Introduction
Page 5	Communities That Care Milestones & Benchmarks — Phase 1: Getting Started
Page 8	Milestone 1.1 Complete Preliminary Organization Tasks
Page 21	Milestone 1.2 Define the Scope of the Prevention Effort
Page 31	Milestone 1.3 Identify Community Readiness Issues
Page 56	Milestone 1.4 Engage Key Leaders
Page 64	Milestone 1.5 Analyze and Address Community Readiness Issues
Page 66	Milestone 1.6 Moving to Phase 2



The Tools for Community Leaders guide provides community members the tools and information needed to initiate the Communities That Care community-wide youth-development and prevention-planning effort.

This guide will help your community successfully complete the planning phase of the Communities That Care process— Phase 1: Getting Started.



It will help you:

- define the community to be involved
- recruit leaders and other participants
- identify and address community readiness issues (potential building and stumbling blocks)
- plan the next steps

This guide describes the six steps, or milestones, for getting started with the Communities That Care process:

Milestone 1.1 Complete Preliminary Organization Tasks

Milestone 1.2 Define the Scope of the Prevention Effort

Milestone 1.3 Identify Community Readiness Issues

Milestone 1.4 Engage Key Leaders

Milestone 1.5 Analyze and Address Community Readiness Issues

Milestone 1.6 Moving to Phase 2





Each milestone includes a list of benchmarks which, once met, will help you reach the milestone's goal.

Benchmarks may include:

Discussion—relevant research and information

Description of Tasks—roles and functions specific to CTC personnel whom you may have to recruit

Activities—specific actions to help achieve the benchmark. Some activities include worksheets that can be used for achieving the benchmark, which are available as separate downloadable documents on the CTC website.

Communities may use this guide in different ways.

They may use it as:

- a step-by-step guide for getting started with the Communities That Care prevention-planning system
- an aid to existing planning efforts (using selected pieces of the guide)
- a prevention-planning reference tool

Communities That
Care coaches can guide
community leaders
through the steps for
getting started to
increase the chances
for success in this
critical phase.



Milestones & Benchmarks

Phase 1: Getting Started

Milestone 1.1 Complete Preliminary Organization Tasks

Benchmarks:

Designate a single point of contact to act as a catalyst for the process.

Identify a champion (a community leader) to guide the process.

Inventory existing initiatives addressing youth and family issues.

Identify "lead" agency committed to supporting the project.

Secure coordinator/facilitator (at least half time).

Form core workgroup to activate the process.

Develop roster of key leaders to be involved in the process.

Prepare initial work plan and timeline for getting started.

Identify and acquire resources needed to get started.

Milestone 1.2 Define the Scope of the Prevention Effort

Benchmarks:

Define the community to be organized.

Identify health and behavior issues to be addressed to confirm that CTC is appropriate for your efforts.

Agree on what is involved in the "prevention" response.

Identify legislative/funding supports or constraints.

Agree on community board's role.

Begin to define how community board will operate in community.

Summarize issues related to key aspects.

Develop action plan to address outstanding issues related to key aspects.

Milestones & Benchmarks

Milestone 1.3 Identify Community Readiness Issues

Benchmarks:

Ensure that community members have a common definition of *prevention*.

Ensure that the community values collaboration.

Ensure that community-wide support exists for a risk and protection-focused, data-driven, research-based, outcome-focused prevention approach.

Obtain school district support for *Communities That Care Youth Survey*. Administer the survey as early as possible.

Plan for coordination among existing initiatives and planning efforts.

Identify community stakeholders.

Identify other community readiness issues.

Milestone 1.4 Engage Key Leaders

Benchmarks:

Hold Key Leader Orientation.

Obtain formal key leader commitment.

Identify role of key leaders.

Identify core group of key leaders.

Develop draft plan for communication between key leaders and future community board members.

Solicit key leader input on potential community board members.

Obtain necessary memoranda of agreement or joint operating agreements from relevant stakeholder groups, as needed.



Milestones & Benchmarks

Milestone 1.5 Analyze and Address Community Readiness Issues

Benchmarks: Analyze outstanding community readiness issues.

Address "show-stopper" issues (critical to moving forward).

Develop action plan for outstanding community readiness issues.

Milestone 1.6 Moving to Phase 2

Benchmarks: Develop work plan for moving to Phase 2: Get Organized.

Identify and secure the resources needed for Phase 2.



Milestone 1.1 Complete Preliminary Organization Tasks

Benchmark: Designate a single point of contact to act as a catalyst for the process

Discussion

The catalyst is the individual or group that introduces the Communities That Care system into the community.

The catalyst may be:

- an employee or director of a human services organization (e.g., police department, school district, health agency, recreation department)
- a concerned community leader (e.g., faith leader, parent, community activist, business leader)
- a staff person for the lead agency with the grant, if the Communities That Care system is being introduced into the community through a state, federal, or foundation grant

Catalyst tasks

The catalyst is the "spark plug" that ignites the community's interest in the Communities That Care system.

The catalyst's role is to:

- organize the core work group that will initiate the Communities That Care effort, if not already in place
- work with that core work group to identify interested community leaders and help prepare for the first training event— the Key Leader Orientation
- identify and recruit a champion (a community leader) for the Communities That Care process, if not already identified
- work with the champion and core work group to plan the Key Leader Orientation

During Milestone 1.1, one of your primary goals will be to identify and recruit the people, organizations, and agencies in your community you wish to involve in the **Communities That Care** process. The Communities That Care Milestones & Benchmarks chart for Phase 1: Getting Started on page 5 lists the types of people to involve. From pages 8 to 20, you'll find detailed information about each role and how to fill it.

Don't' forget! A
Communities That Care
coach can help to assess
needs and issues around
getting started.



Skills/expertise needed

The catalyst may be an individual or a team of people, with:

- knowledge of the community—including community leaders (influential community members who can provide leadership and support to the process), existing youth prevention/youth-development initiatives, and community politics
- access to one or more leaders in your community to recruit as the champion
- dedication to youth issues
- communication and organizational skills

Activities

- 1. If needed, build a list of potential catalysts, using the following worksheet.
- 2. Identify the best person to invite the selected potential catalyst(s) to join the process.



Potential Catalysts

Name/organization	Strengths	Challenges	Who will contact?
Document prepared by:			Last update:



Benchmark: Identify a champion (a community leader) to guide the process

Discussion

The champion is a community leader having credibility and influence with peers.

The champion serves as the "host" of the Key Leader Orientation, lending his or her position and standing to influence other community leaders to attend. Examples of people who have been Communities That Care champions are police chief/sheriff, publisher of a local newspaper, superintendent of schools, hospital CEO, executive director of a children's initiative, county commissioner, chief juvenile judge, and mayor.

Champion tasks

If a catalyst has not already been identified, the champion helps with identifying and recruiting the catalyst. The champion works with the catalyst to build support for the Key Leader Orientation by:

- helping to identify appropriate members for the core work group
- helping to identify community leaders to invite to be part of the Communities That Care key leader group
- personalizing the sample invitation and putting it on the champion's letterhead
- inviting (by phone or in person) community leaders without whose support the initiative might fail
- arranging for mailing of invitations, tracking of RSVPs, and orientation logistics

Skills/expertise needed

The champion should be someone who has:

- a positive relationship—and influence—with leaders in formal and informal systems within your community
- a desire to play a visible role in improving the lives of children and youth

Activities

- 1. Build a list of potential champions using the following worksheet. Identify each person's organization, strengths and any possible challenges (e.g., the person is very busy, may not be seen as a non-partisan leader, etc.).
- 2. Identify the best person to invite the selected potential champion to lead the process.



Potential Champions

Name/organization	Strengths	Challenges	Who will contact?
Document prepared by:		Last	t update:



Benchmark: Inventory existing initiatives addressing youth and family issues

Activities

Use the following worksheet to start to identify existing coalitions and initiatives that address related issues and to understand their mission and process.

Community Initiatives

List below the coalitions, collaboratives, and initiatives addressing the prevention of health and behavior problems in your community.

Document prepared by: Last update:

Collaborative/ Initiative	Mission/goals	Key contact person	Who will contact?



Benchmark: Identify "lead" agency committed to supporting the project

Discussion

The lead agency "houses" the Communities That Care initiative. It often serves as the funding channel.

Lead agency tasks

These can vary over the life of the project. For example, they may include:

- hiring the Communities That Care facilitator/coordinator
- hosting the planning and implementation process (through Phase 5: Implementing and Evaluating the Community Action Plan)
- providing fiscal oversight (with the community board responsible for staffing and logistics)
- providing financial support, staffing, office support, office space, and meeting rooms

Skills/expertise needed

The lead agency should have:

- the experience to support the functions previously listed
- · experience working with volunteers and volunteer organizations

Activities

- 1. Identify organizations that could serve as lead agency.
- 2. Discuss with potential lead agencies how they could manage and support this process.
- 3. Obtain agreement from the selected organization.
- 4. Record key contact information on the following worksheet.





Key Contact Information

Name and organization	Contact information: address, phone, fax and e-mail
Catalyst:	
Champion:	
Lead agency (include contact person):	
Other key contacts:	
Document prepared by:	Last update:



Benchmark: Secure coordinator/facilitator (at least half time)

Discussion

A coordinator or facilitator is critical to the community board's success.

The success of the Communities That Care process depends on the efforts of a wide range of participants. For most, involvement is added to existing job duties; for Community Board members, duties are often outside of regular professional responsibilities altogether. Therefore, securing a paid staff member (full time preferred; at least 75% time) is essential to the success of the process.

Funding

Funding for this position may come from one source (such as a state, county, or city agency) or several.

Coordinator/Facilitator tasks

These may vary. Following are some useful functions a paid staff person can perform:

- provide staff support to the community board and its work groups
- work with the Communities That Care coach to understand how to guide the community board through the Milestones & Benchmarks, and to prepare for CTC Plus workshops
- handle community board meeting preparation and follow-up
- document the Communities That Care effort by keeping files of all related activities
- prepare reports as needed

Center for CTC coaches can provide sample position descriptions





Benchmark: Form core workgroup to activate the process

Discussion

Typically, the initial Communities That Care effort is spearheaded by one or more individuals

... who have learned about the Communities That Care system through a workshop, orientation or training; an article or other publication; someone who knows about it—a parent, school superintendent, the mayor, a counselor, teacher, students, service providers; or anybody who sees the Communities That Care process as a potentially exciting opportunity for the community.

The challenge at the outset is to involve the "right" group of people

... to determine if and how the Communities That Care process will be started in the community. Generally, the most effective way is to involve a small group of people who have a "feel" for the community and can draw on others to participate. Communities That Care coaches can help engage and orient this core group.

This core group typically has four to seven people, and may include any of the following:

- chair or staff of a prevention or health-related coalition
- law enforcement representative
- education representative
- local government representative
- social services provider
- health services provider
- community "activist"
- parents and/or youth

Activities

- 1. Identify group members.
- Invite the core group to participate. Provide each person with the background material provided on the Communities That Care website at www.communitiesthatcare.net.
- 3. Convene a core group meeting to begin Phase 1: Getting Started.



Benchmark: Develop roster of key leaders to be involved in the process

Discussion

One of the first tasks of the core workgroup is to consider who needs to know about, and be involved in, the CTC effort in order for CTC to be successful in the community. To get started on this process, the core work group brainstorms a list of the key leaders in the community who will be important to include in the CTC process.

The CTC champion can also help with ideas for the list of key leaders to involve, and which people to approach earlier in the process.

This is an iterative process that is revisited in Milestone 1.3. See page 38 for discussion of the stakeholder identification process for both key leaders and community board members. The Stakeholder Identification and Analysis worksheet can help you identify community stakeholders and their representatives, and determine how they can best be involved to start building a strong key leader group and community board.

Activity

You can find the Stakeholder Identification and Analysis worksheet on page 41.

Benchmark: Prepare initial work plan and time line for getting started, and acquire any resources needed at this stage to begin

Discussion

Once the core work group is activated, they may want to work with the coordinator/facilitator to develop a work plan and time line for completing the rest of the Phase 1 benchmarks. The typical question at this juncture is: when do we want to hold the Key Leader Orientation, and what has to happen in order to make that a reality?

Some groups make an informal list of tasks and action items; others may develop a more formal plan. They review the actions suggested in this workbook and decide together on a timeline and task list, with responsible parties named, that will help them complete Phase 1.

Activity

See the "Next Steps Worksheet" for a sample format that may be helpful for this task.



Next Steps Worksheet

Action needed	By whom?	By when?



Benchmark: Identify and acquire resources needed to get started.

Discussion

The CTC prevention effort requires resources—both in acquiring CTC, and through local costs throughout the process. Below is a breakdown of what resources a community should be prepared to provide, with an estimation of cost based on a typical CTC community.

	CTC Costs	Sample Community of 50,000 people	Your Community
Contract with the Center for CTC	\$45,000 for two years	\$45,000 for two years	
Community Coordinator Salary	50% to full-time position, with a salary range of \$40- \$80,000	Full-time coordinator at \$60,000 a year	
CTC Youth Survey	1-999 surveys: \$2.25/survey 1,000+ surveys: \$2.00/survey	Approximately \$4,000 every two years * Based on 2,000 total students in grades 6, 8, 10, and 12	
Tested & Effective Program	Vary in cost	LifeSkills Training: \$20,100 * \$10,050 per middle school	



Milestone 1.2 Define the Scope of the Prevention Effort

One of the biggest challenges of starting any community-wide effort is clearly communicating its scope. Each person has his or her own experiences, knowledge and agenda—affecting his or her views of the effort and where it is headed. It is important for the core work group to come to an agreement about the scope.

This section discusses the following key aspects for defining the scope of your community-wide prevention effort:

- define the community to be organized
- identify health and behavior issues to be addressed
- agree on what is involved in the "prevention" response
- identify legislative or funding supports or constraints
- agree on the community board's role
- begin to define how the community board will operate in the community

Benchmark: Define the community to be organized

Discussion

Defining the boundaries of the community is critical to determining the participants in the planning process. The community can be defined by geography, jurisdictional boundaries, language, culture, norms and values, etc.

The following table describes the factors can affect the definition of the community involved in the prevention effort.

During Milestone 1.2, one of your primary goals will be to define the key aspects of your prevention effort, in order to fully define the effort's scope. The Communities That Care Milestones & Benchmarks chart for Phase 1: Getting Started on page 5 lists the aspects you'll need to consider. From pages 20 to 30, you'll find detailed information about each key aspect, as well as help for planning ways to address any outstanding issues.



Factor	Description	Examples
Lead Agency Focus	The lead agency that is sponsoring the effort may serve a defined community.	 The city council constituency includes only those within city limits. A local funding agency serves the entire county. The public health department serves a three-county health district.
Funding	Funding may require that a specific community be included.	 Department of Education funding may require the recipient to be a school district. Law enforcement grants may be specific to jurisdictions (e.g., city police or county sheriff).
Geographic Area	The area may be too large or spread out for a single planning effort.	 A county that takes one to two hours to cross may need to be split. A county with distinct and distant rural population centers may be organized by individual centers of population. A city may be organized by distinct neighborhoods that residents identify with (but caution must be taken not to define too small an area, as it is not likely to get necessary political or economic support).
Resources	The amount of available resources (staff, budget) may limit the extent of community organizing.	In a county with several distinct population centers and not enough staff for each, the effort may need to be county-wide or piloted in a single population center.
Preference	How people see themselves organized as a community can be based on various factors —geography, language, culture, socioeconomics, history, etc.	 The population identifies itself as "the entire Tri-Cities area." Residents define themselves as a distinct neighborhood north of the downtown area.



Benchmark: Identify health and behavior issues to be addressed to confirm that CTC is appropriate for your efforts

CTC Communities

Upper Peninsula, MI

A large rural area with scattered communities, the regional prevention agency supported the establishment of a separate community board in each county.

Tooele, UT

A mid-sized town where a dedicated school district chose to have a single CTC effort.

Chicago, IL

In one of the county's major cities, residents of the Bronzeville neighborhood organized a CTC effort with links to city-wide leadership.

Discussion

Communities are faced with numerous issues related to the health and safety of children and families—for example: positive youth development, alcohol and other drug use, juvenile delinquency, youth violence, dropping out of school, teen pregnancy, suicide prevention, childhood disease prevention, injury prevention, and mental health promotion.

The Communities That Care prevention-planning system focuses on building positive youth development by addressing risk and protective factors that are predictive of six adolescent health & behavior problems:

- substance abuse
- juvenile delinquency
- teen pregnancy
- school dropout
- youth violence
- depression & anxiety

Differences may be found within the community in:

- awareness of issues
- perceptions of a problem's seriousness
- feelings about whether the community can or should address the problem
- the missions of different funding sources and organizations (e.g., addressing specific behaviors)

In light of these potential differences, communities must:

- specify the issues the prevention effort will address
- be clear that the other issues will not be ignored, but addressed either secondarily by the current effort or by other existing efforts



Benchmark: Agree on what is involved in the *prevention* response

Discussion

Individuals and organizations may differ not only on which health issues and problem behaviors to address, but also on the appropriate range of response to them.

Because people in various fields (mental health, juvenile justice, public health, substance abuse, and other fields) interpret and define this continuum differently, those involved in the prevention planning effort need to:

- agree on what responses to health and behavior issues are and are not included in the Communities That Care effort (for example, be clear that CTC works at the prevention end of the response system and not in treatment or after care)
- identify ways for the Communities That Care prevention effort to most effectively complement intervention, treatment, and aftercare initiatives

Benchmark: Identify legislative or funding supports or constraints

Discussion

A federal, state, or county agency may sponsor a prevention planning effort. This sponsorship may come with mandated restrictions or requirements. Any mandates should be clearly defined and discussed with the community. For example:

- A federal agency may require that a certain portion of the grant funds be allocated to approaches that have been proven effective.
- A state-sponsored initiative may require that the community board include a specific number of members appointed by the county council.
- A state agency may provide funding specifically for community prevention plans based on a communitywide assessment of risk and protective factors.

Continuum of
Responses to
Health Issues and
Problem Behaviors

Prevention

Intervention

Treatment

Aftercare



Benchmark: Agree on the community board's role

Discussion

The board is expected to continue its Communities That Care role through the planning and implementation phases. Board members commit for a three- to five-year period.

A typical board would feature:

- membership rules
- three-year, renewable terms
- staggered exit (so not all terms end at the same time)
- regular recruitment of new members

The community board may be:

Advisory

The board's findings serve as the foundation to inform prevention planning in the community, but with no specific agency bound to follow the board's suggested initiatives.

Decision-making

The board is authorized to make decisions regarding allocation of funding and other resources.



Benchmark: Begin to define how the community board will operate in the community

Discussion

The best position for the community board in relation to existing coalitions and initiatives is not always easy to determine.

Existing coalitions and boards each may have:

- a unique focus (e.g., pregnancy prevention, family preservation, substance abuse)
- a unique assessment and planning framework (e.g., a county-wide social services agency and the department of health each use distinct assessment tools)
- representation from different community sectors

In a community with existing coalitions:

- the community board must not duplicate existing boards' efforts or be seen as simply "another coalition meeting" to attend
- the core work group should investigate ways to establish the community board in a manner acceptable to other coalitions

There is no one right way to establish a community board.

The following examples can help guide the process:

- A new coalition
 - If the Communities That Care approach is seen as unique and beneficial, it may be established as a new coalition. Board members may come from existing coalitions, and other community organizations and sectors.
- A subcommittee of an existing coalition
 If the Communities That Care process is seen as complementing an existing coalition's mission, it may be created under the umbrella of that coalition. The board may include members from the umbrella coalition and other community members.
- An ad hoc work group sponsored by the lead agency
 If there is concern about establishing a new coalition, or if there is no good "fit" with an existing coalition, the community board may be established under the sponsorship of the lead agency as an ad hoc, or work, group. It may include members from existing coalitions and organizations, and other community members.



Benchmark: Summarize issues related to key aspects

Discussion

In order to ensure agreement on the key aspects of the community-wide effort, it is important to gather input from:

- core work group members
- key members of related community initiatives
- community stakeholders

Activities

- 1. Have members of the work group discuss issues related to each key aspect and complete the following summary worksheet, noting issues agreed upon and those that will require further discussion or action before agreement can be reached. Include the worksheet as a reference document in the orientation material.
- 2. Share the completed worksheet with other selected community members, to see if they agree with the conclusions.



Key Aspects Summary

Key Aspect	Issue(s) needing further discussion/action:
1. Community definition:	
2. Health and behavior issues to be addressed:	
3. Scope of the <i>prevention</i> response:	
4. Funding source/sponsor:	
5. Requirements of the funding source/sponsor:	
6. The community board's role:	
7. The community board's manner of	
operation in the community:	
Document prepared by:	Last update:



Benchmark: Develop an action plan to address outstanding issues related to key aspects

Discussion

It is important to clearly define and articulate the scope of the prevention effort early in the planning process. Not doing so can result in miscommunications and misunderstandings, which may not surface until later. Issues not resolved during Phase 1: Getting Started can be addressed during Phase 2: Organizing, Introducing, Involving at the Community Board Orientation.

Activity

Discuss each outstanding issue from the previous summary worksheet, and document any proposed action for addressing it on the following planning worksheet.



Outstanding Planning Issues

Issue (include date of origin)	Description	Proposed action (include who will address it, and when)	Resolution
Document prepared by	/:	Last (update:

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Milestone 1.3: Identify Community Readiness Issues

Addressing readiness issues can help prevention planners:

- identify issues that may become obstacles
- identify additional individuals or organizations that need to be included
- clarify aspects of the prevention-planning effort that the community needs to know about
- prepare to continue to Phase 2: Organizing, Introducing, Involving.

The following specific issues should be addressed early in the planning process by investigating each issue with the diverse economic, cultural, and racial groups that make up your community:

- Is there agreement on issues to be addressed?
- Do community members have a common definition of "prevention"?
- Does the community value collaboration?
- Is there community-wide support for a risk- and protection-focused approach to prevention?
- Is there school district support for the Communities That Care Youth Survey?
- Is there coordination among existing initiatives and planning efforts?
- Have community stakeholders been identified for the key leader group and community board?
- Can other community readiness issues be identified?

During Milestone 1.3, your goal will be to determine your community's readiness for a successful communitywide prevention effort. The **Communities That Care** Milestones & Benchmarks chart for Phase 1: Getting Started on page 5 lists the issues you'll need to consider. From pages 31 to 55, you'll find detailed information about each issue, as well as help for planning ways to address any issues that may present obstacles.



Community members will differ in their awareness and interpretations of the issues and problems facing the community. For example:

- a wealthy part of a community may be in denial about the extent of alcohol and other drug use among its children, in spite of student survey results and other evidence of the issue. They may not feel the need to actively engage in a prevention effort
- a community with a recent departure of a major industry may not be ready to address prevention issues. It may need to focus on providing for the immediate needs of unemployed and homeless people
- a community may have started responding to a series of assaults and rapes, calling for immediate action and demanding more streetlights. This community may need to address immediate security issues before engaging in a long-term effort to prevent youth problem behaviors

When communities have divergent views on a problem, it may be necessary to delay the prevention effort until there is more agreement. In some cases, it may be necessary to address more immediate issues prior to, or along with, the Communities That Care effort.



Benchmark: Ensure that community members have a common definition of prevention

Discussion

Certain attitudes may be stumbling blocks in defining what prevention should be in a community:

- Skepticism about prevention
 If a community acknowledges a problem but does not believe it can be prevented, it will be difficult to generate interest in prevention activities.
- A feeling that youth development and problem prevention are "not my job"
 - Some people see it as the school's responsibility to educate and take care of youth
 - o The schools may see it as the family's responsibility to control children
 - Others may place responsibility on government, law enforcement, or the juvenile justice system

Unless community members see the safe and healthy development of the community's young people as their shared responsibility, little progress is likely. In such cases, the planning effort must first build support for prevention across multiple sectors.

• Seeing a "get-tough" approach as the only solution to problems in the community
This can lead to imposing more severe sanctions on youth involved in problem
behaviors, without addressing the underlying conditions that led to those
problems.



Benchmark: Ensure that the community values collaboration

Discussion

It is important to determine the attitudes of individuals and organizations toward collaborating on a planning effort. If:

- the community has a history of successfully working together—identifying common goals and priorities, and implementing shared solutions—these positive attitudes toward collaboration will act as building blocks
- past collaboration efforts have not resulted in successful partnerships and outcomes, efforts must be made to overcome this potential stumbling block in order to build a sense of trust and cooperation

It is important that community members agree to collaborate on the planning effort, or it may be hampered by mistrust and lack of cooperation. When community members agree to collaborate, they can build a coalition that takes full advantage of community resources and avoids "turf wars."

Benchmark: Ensure that community-wide support exists for a risk and protection-focused, data-driven, research-based, outcome-focused prevention approach

Discussion

The community needs to agree that the risk- and protection-focused approach provides a sound theoretical framework, a useful and manageable methodology, and research-based solutions. If community members do not agree, apathy, lack of support, or conflict among individuals and organizations could cause the effort to stumble.

During the readiness phase, communities need to take the time to understand the research foundations, language, and tools of the risk- and protection-focused approach. The CTC PLUS website provides information about the Communities That Care risk-and protection-focused, data-driven, research-based and outcome-focused framework for prevention planning.



Benchmark: Obtain school district support for *Communities That Care Youth Survey*. Administer the survey as early as possible

Discussion

Having the most current and complete set of data possible gives communities the clearest possible picture of where their needs and strengths are. It's strongly suggested that communities use the CTC Youth Survey for their risk and protection assessment in Phase 3: Developing a Community Profile.

Note: your state survey may provide substantial measures—contact the Center for CTC to discuss.

The Communities That Care Youth Survey:

- measures a comprehensive set of risk and protective factors among a community's adolescent population (students in grades six through twelve), to identify problem behaviors and their prevalence rates
- provides a means to explain why these problem behaviors exist and what communities can do to prevent them

Activities

Obtaining school district support takes time and should begin as early in the Communities That Care planning process as possible. Use the worksheet on the following page to start the process of obtaining support for the Communities That Care Youth Survey.



Obtaining School District Support for the Communities That Care Youth Survey

List below the people you will need to contact to obtain survey support.

Name/title	Role in survey support	Who will contact?
Document prepared by:		Last update:



Benchmark: Plan for coordination among existing initiatives and planning efforts

Discussion

As discussed earlier, the community board should communicate and collaborate with each existing community initiative as early as possible.

Activities

Review the "inventory of existing initiatives" the core workgroup created as part of the work in Milestone 1.1, and consider appropriate approaches to inviting coordination or collaboration – especially with those initiatives already engaged in something to do with child or youth well-being, or with cross-community coordination.

For example, a community in Illinois already had a broad coalition focused on economic and cultural development. The CTC catalyst, champion, and core work group held a facilitated discussion with the leadership of that coalition to share the intent of bringing CTC to the community and discussed strategies for working well together. The result? The group decided to invite CTC to become the 'Youth and Family' subcommittee of this larger development effort!



Benchmark: Identify community stakeholders

Discussion

The Communities That Care effort involves change. Changing the way a community addresses norms, values, and behaviors—and allocates resources—takes significant time and effort.

It is important that the Communities That Care effort organizes and involves all community members who have a stake in healthy futures for young people. Your effort will benefit bringing together representation from all of those stakeholders—groups such as elected officials, the business community, schools, public health officials, law enforcement, agencies and organizations serving local youth and families, the faith community, youth, parents, and residents.

The Communities That Care process involves stakeholders as:

- key leader group members—the influential community leaders who control
 resources and who support and oversee the Communities That Care effort,
 including securing needed resources for implementing the programs, policies, and
 practices recommended by the community board as a result of the planning and
 assessment process
- community board and work group members—the community members who carry out the Communities That Care process, reporting to the key leader group
- community members who take part in other ways—by attending neighborhood meetings about prevention needs, for example

Community board members commit for a three- to five-year period. Key leader group members serve for the duration of their community leadership positions.

Activities

The Stakeholder Identification and Analysis worksheet can help you identify community stakeholders and their representatives, and determine how they can best be involved to start building a strong key leader group and community board.

Find the Stakeholder Analysis and Recruitment worksheet on the next page.

Stakeholder Analysis and Recruitment Worksheet

- 1. Complete the Stakeholder Analysis & Recruitment Worksheet (below). Brainstorm to identify leaders in each sector of your community who are not currently involved with the CTC process. As you do this, think about what skills, connections, and abilities each might bring to the effort and the role each person or organization might serve in the process (.e.g., key leader, active community board member, workgroup member, advice on particular issues, etc.).
- 2. List anyone whose commitment is so critical that moving forward without it would endanger a successful collaborative initiative.

3. For each person in #2, identify how commitment would be demonstrated (e.g., memorandum of understanding, membership on key leader group, dedication of resources).

Stakeholder Analysis and Recruitment Worksheet

Use the worksheet on the next page to organize your stakeholder mapping.

Stakeholder Category: Use this column to track whether you are reaching individuals in each sector, or a leader of an existing initiative. An individual may fit into more than one or more category. For example, a civic leader may also be a leader of an existing initiative or a business leader.

Possible Role: Use the potential role column to track whether or not the stake holder would be appropriate as a key leader, community board member, a workgroup member, or advice on particular issues (e.g., outreach, data, program, or fiscal). Note that individuals may be appropriate for both the Community/Systems Partnership and one of the Allies roles.

Is this person essential to success?: Mark with an asterisk if this is a person whose commitment is so critical that moving forward without it would endanger a successful collaborative initiative.



Stakeholder Identification & Analysis Worksheet

Name	Possible role	Name	Possible role
Parents		Faith Community	
Resident leaders		Social Services	
Business		Community Action Organization	ns



Name	Possible role	Name	Possible role
Education		Public Health	
Media		Economic Development	
Youth Serving Organizations		Justice System	



Name	Possible role	Name	Possible role
Youth		Elected Officials	
Community Law Enforcement		Other	



Recruiting Stakeholders

Use the Recruiting Stakeholders Worksheet (below) to track progress in gaining the commitment of community stakeholders.

Key interests: Use the key interests column to track how this stakeholder's key interests align with CTC and how CTC will benefit them and their organization or agency.

Who Will Contact?: Use the Who Will Contact column to track who will be outreaching to this stakeholder. This will be a contact who will have some 'in' or influence with the stakeholder, who may be most successful in finding time to introduce him/her to CTC and explain its benefits.

How?: By phone, in-person meeting, email, etc.

By when?: Use this column to track the outreach timeline.

Strength of interest: Use this column to estimate the strength of the stakeholder's interest in CTC (with 1 being strong and 5 being weak)



Recruiting Stakeholders Worksheet

Name of Stakeholder	Key Interests	Who will contact?	How?	By when?	Strength of Interest (1-5)



Benchmark: Identify other community readiness issues

Discussion

Readiness and diversity

Today, most communities include people from different ethnic groups, cultures, and economic groups. Different groups have unique challenges and perspectives that influence their attitudes about prevention. A thorough examination of these unique challenges and perspectives can identify potential obstacles to collaborative prevention efforts.

As a part of this examination and dialogue, it is critical to:

engage representation from each diverse stakeholder group in the assessment of community readiness continue to involve those groups in actions to address readiness issues.

The questions discussed in this section illustrate possible factors to consider with each group in the community during readiness assessment.

Which adolescent behaviors are considered to be problems in the community?

Many communities are home to a variety of competing issues and problems. It can be tempting for a community to single out one problem behavior and focus all efforts on its elimination.

However, while such an approach may reduce one problem, many others are likely to persist. In such communities, it can be helpful to determine which problems are considered most important, and how others tie in.

For example, one community might perceive youth substance abuse as a greater problem than youth violence. In this case, it may be important to emphasize that youth substance abuse and youth violence are related through common risk and protective factors. By addressing these risk and protective factors, the community can deal with both youth substance abuse and youth violence simultaneously.

When a community understands that targeting priority risk and protective factors can reduce multiple problems, it is on its way to readiness for the Communities That Care process.



To what extent does each group see prevention as a solution to these problems?

Some communities might be more willing to focus on treatment or law enforcement approaches than on prevention.

In this case, it can be helpful to explain the benefits of prevention to someone in the community who favors treatment or law enforcement. Once that person is convinced of the benefits of a prevention-based approach—and sees that this approach doesn't necessarily exclude other approaches—he or she can serve as a spokesperson to help gain acceptance of a prevention-based approach in the community.

How experienced is the community with effective prevention programs?

If the community is relatively inexperienced with effective prevention programs, it may need to invest in training existing staff or hiring new staff. This can be a significant obstacle to communities that are already facing limited financial resources.

This part of readiness is best done in conjunction with the development of the strategic youth development plan, once you have chosen the effective programs that address your prioritized risk factors.

Milestone 1.3 Identify Community Readiness Issues

Will the community's desire to protect its image interfere with prevention efforts?

A community may be less receptive to prevention efforts if it believes that identifying and acknowledging risk factors and problem behaviors will harm its reputation.

One way to counteract such concerns is to emphasize that the Communities That Care assessment process relies on objective data. Using objective data:

- helps communities accurately portray their challenges, often debunking negative stereotypes and misconceptions in the process
- highlights areas in which communities are doing well
- increases community awareness of programs, policies and practices that are effectively increasing protection and decreasing risk





Has the community had negative experiences with past programs?

Attempts by agencies outside a community to impose programs designed to "fix" the community's problems can leave leaders and residents feeling left out or helpless.

It can be important to help communities wary of external, "cookie-cutter" approaches understand that the choice to initiate the Communities That Care process lies with the community itself. The Communities That Care prevention-planning system:

- is a self-directed process, which each community tailors to meet its unique challenges and needs
- emphasizes broad community involvement and "ownership" of the community's problems

When all the community's interested stakeholder groups are involved in some way in creation and adoption of a prevention plan, it's possible to change the entire local environment—creating the foundation for long-term, positive change.

Milestone 1.3 Identify Community Readiness Issues

Additional readiness questions to consider may include:

- Is the community marked by rapid cultural and other changes due to migration and integration?
- Does the community believe that drugs or crime play an important economic role?
- Is tolerance of inappropriate behavior prevalent in the community?
- Does the community believe that positive change is possible?

Remember, the best way to ensure representation from diverse groups is to identify an individual or organization in the community that has successfully engaged each group in the past and find out from them what strategies were successful.





In addition to the prevention readiness issues identified above, there may be other issues that are obstacles to organizing the community and conducting prevention planning and action. Their nature and severity will vary across communities. It is important to identify these issues, even if they cannot all be addressed at this time.

The following are examples of potential obstacles:

- A controversial city election will occur in six months—there will be no decisions about prevention planning until the election results are known.
- Recent incidents in the news unrelated to health and safety, youth and families, or prevention currently dominate the headlines and people's attention. Any organizing efforts will have to compete with these issues.
- There is a sense of mistrust and separateness in the community over issues of race and ethnicity. Consequently, community members are not always willing to commit to community-wide efforts.

It is important to determine how each issue might affect the organizing and planning effort. If an issue is significant (a "showstopper")—threatening your ability to move forward—it may need to be addressed before continuing with the Communities That Care process.

Milestone 1.3 Identify Community Readiness Issues

The role of readiness

Communities that don't assess and address key readiness issues directly are likely to encounter more difficulty in initiating the Communities That Care process.

In some communities, dealing with readiness is a straightforward process. In others, it takes a considerable amount of time. But in either case, assessing and addressing readiness issues is a crucial step in the Communities That Care process.





Activities

The following community readiness questionnaire provides an opportunity to analyze readiness issues. It is important to gather a variety of responses (for example, from core members of the planning effort, key members of related initiatives in the community, and stakeholders).

You can find the sample Readiness Questionnaire on page 51-54.

Instructions

- 1. Have core group members review the questionnaire, and revise as needed for your specific community.
- 2. Have core group members complete the questionnaire.
- 3. If desired, ask stakeholder groups and leaders from related initiatives to complete the questionnaire. Some core groups have chosen to use an on-line survey tool (like Survey Monkey) to send the questionnaire to various stakeholder groups. Some core groups have chosen to create slightly modified versions of the questionnaire for different stakeholder groups, for example professionals working in youth development compared to business owners or parents.
- 4. Share the completed questionnaire with other selected members of the community, to see if they agree with the group's conclusions.
- 5. Review the questionnaire results, to identify any common issues that need to be addressed.
- 6. Summarize those issues and plan next steps (see page 64, Milestone 1.5).

Assessing Community Readiness for Prevention

	Α.	Agreement on	child	well-being	issues t	o be	addresse
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1.	List "problems" currently faced by children and youth in your community/city.
	Address all aspects (e.g., economics, health, social conditions, housing,
	infrastructure).

2. Of the above problems, where does there seem to be the most traction for immediate action?

3. Review the health & behavior problems that CTC addresses: substance abuse, violence, delinquency, teen pregnancy, school drop-out, depression/anxiety. Do the problems listed in #2 above fit? If not, how receptive will the community be to addressing these issues?

4. What are some ways to increase awareness of these issues if they do not seem to be current priorities?

B. Community Support for Prevention

	• • • •
1.	Do people in the community believe that child and youth well-being issues can be prevented? Do they believe that a prevention strategy (vs. incarceration, for example) can effectively address child and youth problems?
2.	Does the community believe that there are effective prevention programs, and that they can help in addressing the issues facing the community's children and youth?
3.	Has the community made any efforts in the past to prevent child and youth wellbeing issues? Were they successful? Why or why not?
Ma	andate for a risk- and protection-focused approach to prevention
4.	Is there a legislative or policy mandate in your City or state for a risk- and protection-focused, data-driven, outcome-based approach to prevention?
5.	Do your City and/or community currently use a prevention model or framework? If yes, is it seen as successful? How can it be used with the CTC system?



C. Community values collaboration

	•
1.	Do the leaders and stakeholders in the community value collaboration?
2.	Do community leaders and local public agencies and service organizations value collaboration?
3.	Has your community had any collaborative initiatives? Were they successful? Why or why not?
D. Scł	nool support for the CTC Youth Survey (or something similar)
1.	Do school leaders in your community understand the value of the survey?
2.	Are school leaders willing to advocate about the survey with their staff, to ensure the survey is administered effectively and supported by staff and students?
3.	Do school staff understand the value of the survey?



- E. Coordinating with other Community Initiatives
 - 1. Complete the Community Initiatives worksheet.

Community Initiatives				
List below the coalitions, collaboratives and initiatives addressing the prevention of health and behavior problems in your community.				
Collaborative/initiative	Mission/goals	Key contact person	Who will contact?	
Document prepared by:		Last update:		
		L		

2. From this worksheet, which existing community collaboratives may have missions or goals similar to the CTC effort?

3. How can these be included in CTC? How can duplication or competition be avoided?



Outstanding Readiness Issues

As you complete your readiness assessment, list the issues that are unresolved, the critical obstacles, proposed actions, and when completed document the resolution for each issue.

Outstanding Readiness Issues				
Issue (include date of origin and description)	Critical obstacle	Proposed action (include what, by whom and when it will be addressed)	Resolution	
Document prepared b	by:	Last update:		

Milestone 1.4 Engage Key Leaders

Benchmarks: Hold Key Leader Orientation

Obtain formal key leader commitment

Identify role of key leaders

Identify core group of key leaders

Develop plan for communication between community board and key leaders

Solicit key leader input on potential community board members

Obtain necessary memoranda of agreement or joint operating agreements from relevant stakeholder groups

Discussion

The Key Leader Orientation introduces the Communities That Care system to those community leaders who control resources, impact policy, and influence public opinion. It involves them as members of the key leader group, which supports and oversees the Communities That Care process. A successful Key Leader Orientation (KLO) will help you to complete the rest of the benchmarks for this important milestone in the CTC process.

Activities

- 1. Work with your Center for Communities That Care coach and core work group to prepare for the Key Leader Orientation (KLO).
- 2. Core work group refers to the Stakeholder Analysis and Recruitment process to ensure that all appropriate key leaders are invited to join the CTC effort and attend the Key Leader Orientation.
- 3. Set a date for the Key Leader Orientation where most or all of the invited key leaders can attend, and which your C4CTC coach can attend.
- 4. Your C4CTC coach will share materials for the orientation with you, and discuss how you will work together to deliver this orientation. Your coach will join you in delivering the orientation in person.

Before Scheduling the Key Leader Orientation:

Task	Who does it?	Tools Needed
Identify catalyst	Core work group	Potential Catalysts worksheet (page 10)
Identify Champion	Core work group	Potential Champions worksheet (page 12)
Identify lead agency	Core work group	Key Contact Information sheet (page 15)
Summarize issues related to key aspects: develop action plan to address outstanding issues	Core work group	Key Aspects Summary worksheet (page 27) Outstanding Planning Issues worksheet (page 29)
Address community readiness issues	Core work group Other stakeholders already involved determine which readiness issues must have key leader input/involvement	Community Initiatives worksheet (page 13) Stakeholder Identification and Analysis worksheet (page 41) Assessing Community Readiness for Prevention Questionnaire (pages 51-54)
Develop action plan for outstanding community readiness issues	Core work group (with key leader involvement as needed)	Outstanding Readiness Issues worksheet (page 55)

For the Key Leader Orientation (KLO):

Task	Who does it?	Tools Needed
Contact Center for CTC for necessary materials and coaching to plan for KLO	Catalyst	Communities That Care: ctr4ctc@uw.edu
 Schedule KLO Set date Send your coach copies of completed: Key Contact Information worksheet (page 15) Key Aspects Summary worksheet (page 28) Assessing Community Readiness for Prevention questionnaire (pages 51-54) Outstanding Readiness Issues worksheet (page 55) Review the materials listed at right 	Catalyst	 Sponsoring Site Information (pages 59-60) Suggested Room Setup (page 61) Sample Invitation Letter (page 62) Communities That Care Key Leader Orientation Information (page 63)
Find a site	Catalyst	Sponsoring Site Information (pages 59-60) Suggested Room Setup (page 61)
Invite key leaders	Champion, catalyst, other stakeholders already involved	Sample Invitation Letter (page 62)
Publicize the event	Catalyst, Champion, other stakeholders already involved	Communities That Care Key Leader Orientation Information (page 63)
Conduct KLO	All	Sponsoring Site Information (pages 59-60) Suggested Room Setup (page 61)



Preparing for the KLO: Sponsoring Site Information

One Month Prior to Event

- Review the agenda and materials with your CTC coach.
- Ensure that invitations (personalized from Sample Invitation Letter on page 62, on the champion's letterhead) are sent to potential participants with information about the training, what funding (if any) is sponsoring this event, and reservation information.
- Confirm location. Make maps or directions as needed.
- Confirm food decisions—e.g., breakfast or lunch provided, need to brown bag, whatever works for your community. For a half-day training as the Key Leader Orientation generally is, we strongly suggest a snack break halfway through. If the training includes the lunch hour, we strongly suggest that participants stay on site for lunch; but if they do not, be sure to research restaurants that can serve a large group in the customary one-hour lunch time frame. If a one-hour lunch is not enough, please discuss an agenda adjustment with the Communities That Care contact before the agenda is finalized.
- Seek donations for food, equipment, room, or whatever may be needed.
- Send a message to participants to suggest they review the communities that care.net website and watch at a minimum the videos about Prevention Science and the Social Development Strategy

Two Weeks Prior to Event

• Send a confirmation notice to each potential participant. Include information about start and finish times and food arrangements, a reminder to review the website and watch recommended videos, and the agenda, if ready.

Equipment needs (see room setup diagram on page 61)

- Computer projector and laptop computer
- Screen
- Table for trainers
- Easel and flip chart pads (one for each table group if possible)
- Wireless microphone (depending on room size, number of participants)
- Round tables (preferred). (Plan on 6-8 people at each table to allow enough space and to allow for productive group discussions by table, which are an integral part of the event. If round tables are not available, use large enough oblong tables to set 3 people per side, to provide plenty of space.)
- Trainer table (large enough for 2 trainers)
- Markers for each table
- Post-it® notes
- Pads of paper



- Registration table
- Snack table
- Name tags
- Sign-in sheet

Week of Event

- Call participants who have not responded
- Confirm food, room, and equipment issues
- Prepare participant handout packets as decided during your planning discussions with your CTC coach
- Arrange for setup team to help with room setup

Day of Event

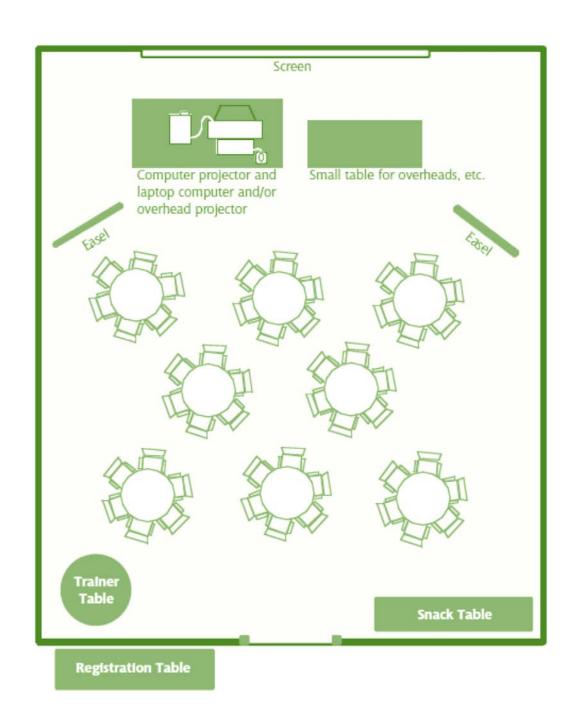
- Arrive at site with materials and equipment one hour prior to registration time
- Assist with logistics (e.g., room setup, food, site questions)
- Manage registration (materials distribution, seating issues, sign-in sheets, name tags, and getting people started on the opening exercise as decided with your CTC coach)

Post-Event

- Provide your CTC coach with copies of sign-in sheets, evaluations, and other documentation as needed
- Follow up on all 'parking lot' issues
- Provide feedback to key leaders or other involved stakeholders about the event and implementation issues



Preparing for the KLO: Suggested Room Setup





Sample Invitation Letter

Sample invitation Letter				
Dear,				
would like to take a moment of your time to share some information about an exciting apportunity to join with other community leaders to improve the lives of our community's youth through a customized, community-wide project called the Communities That Care (CTC) prevention-planning system.				
Problems of adolescent delinquency, violence, alcohol and oth depression/anxiety, and teen pregnancy still disrupt the lives a young people. A growing body of research in the field of preinformation on how to support healthy youth development a behaviors in adolescence. Programs to reduce risk factors and have been shown to be effective. The best results happen what tested, effective programs with their unique profile of risk and the core foundation of Communities That Care.	and threaten the futures ovention science now gives not protect against proble enhance protective factors on the communities match	of s us em ors		
The CTC system takes a practical, evidence-based, outcome-for the whole community in promoting positive youth development research, we are able to prevent youth behavior problems and development. It can also help us use our money, efforts, and effectively. By using objective data to determine priorities, we that have been shown to work and have the tools to measure	ent. Using prevention scied promote healthy energy efficiently and energy efficiently and energians	ence		
The Communities That Care system is sponsored and supported organization(s): SAMHSA NPN Blueprints	ed by the following			
A successful Communities That Care effort will need the community leaders like you, representing all the significant second community leaders have been identified from education, local enforcement, juvenile justice, social services, health services, preligious and business leaders, the media, and other important attend a Key Leader Orientation on (date)	egments of our communit al government, law parent groups, students, at stakeholder groups to			
at (place) Please contact	to)		
confirm your interest or for more information.				
We hope that you will join us in building a shared vision of or nurturing environment for all children.	ur community as a safe,			
Sincerely,				

Key Leader Orientation Information

Who should attend?

This orientation is for those community leaders who control resources, affect policy, or influence public opinion representing: business, education, public health, social services, law enforcement, the faith community, government, media, parents, youth, other community groups who have a stake in healthy futures for young people.

What to Expect

The orientation, lasting generally half a day, provides key leaders with an overview of the Communities That Care process to prepare them for their role as members of the key leaders' group that oversees and supports the Communities That Care process.

The goal is to provide key leaders with the background needed to recommend or designate a 15- to 30-member community board representing all the community's diverse stakeholder groups, that reports to/works in collaboration with the key leader group, and that works on planning, implementing, and sustaining an outcome-focused, data-driven, research-based strategic approach to positive youth development.

Key leaders will learn about:

- the protective factors that buffer young people from exposure to risk and promote healthy development
- the risk factors that increase the likelihood that young people will become involved in certain problem behaviors in adolescence—alcohol and other drug use, delinquency, teen pregnancy, dropping out of school, and violence
- the five phases of the Communities That Care process and the key tasks for successfully carrying out each phase
- the roles and responsibilities of the key leader group and community board

Key outcomes of the Key Leader Orientation:

- a shared vision of a positive future for youth in a community that provides a safe and nurturing environment
- definition of the community to be involved
- development or designation of a 15- to 30-member community board
- clarification of the role and structure of the key leader group



Milestone 1.5 Analyze and Address Community Readiness Issues

Milestone 1.5 Analyze and Address Community Readiness Issues

Benchmarks: Analyze outstanding community readiness issues

Address "show-stopper" issues (critical to moving forward)

Develop an action plan for outstanding community readiness issues

Discussion

It is important to address outstanding readiness issues early in the planning process. Failure to do so can result in miscommunication and misunderstanding, which may not surface until later.

Activities

- 1. Revisit the summary the core group created from the readiness questionnaire (p. 51-54).
- 2. Document each outstanding readiness issue on the following worksheet.
- 3. Determine which, if any, of these issues could be considered 'show-stoppers' that is, if it is not addressed, the CTC effort is unlikely to succeed in this community.

The core group can begin to brainstorm possible approaches to addressing the list of readiness issues now. Some of these issues may require input, advice, and action from key leaders – so after the Key Leader Orientation, the core group may wish to circle back to this list to develop final plans of action for addressing any remaining readiness issues.



Milestone 1.5 Analyze and Address Community Readiness Issues

Outstanding Readiness Issues

Issues (include date of origin and description)	Show-stopper	Proposed action (include what, by whom and when it will be addressed)	Resolution
Document prepared	by:	l act i	update:

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Milestone 1.6 Moving to Phase 2

Benchmark: Develop work plan for moving to Phase 2: Get Organized

Discussion

This first planning phase is critical to the success of the Communities That Care process. It's important to make a plan for completing any steps still needed for moving forward.

Before moving on to Phase 2, talk to your CTC Coach and make sure you are all in agreement that your coalition is ready for the next step!

During Milestone 1.6, your goal is to ensure that everything needed to prepare for moving into Phase 2 is in place. The Communities That Care Milestones & Benchmarks chart for Phase 1: Getting Started on page 5 identifies what is needed. From pages 66 to 67, you will find detailed information for identifying the steps and resources still needed for moving to Phase 2.



Benchmark: Identify and secure the resources needed for Phase 2

Discussion

As you develop a work plan for Phase 2, it is important to identify needed resources and develop a budget.

The key leader group and community board are responsible for providing needed resources. The planning process will be more successful if resources are identified and available during the initial planning meetings.

Types of resources and expenses needed:

Clerical

preparing mailings; typing minutes and agendas; making reminder calls; photocopying

Meetings logistics

planning agendas; taking minutes; locating and preparing the meeting site; facilitating; coordinating with the coalition's chairperson or steering committee; providing refreshments

Membership

recruiting; orienting; contacting, supporting and encouraging others

Research and fact gathering

collecting data; evaluating the process and outcome

Public relations and public information

developing materials and press releases; contacting local reporters

Coordination of planning activities

planning coalition events, media campaigns and joint projects

Fund-raising

raising money and other resources

Activities

- Create a list of resources anticipated for Phase 2: Organizing, Introducing, Involving.
- 2. Provide the list to the key leader group and community board