COMMUNITY CAPACITY ASSESSMENT

for the Triple P System of Interventions

(CCA-TP)

Facilitator's Guide

NCIC-TP
North Carolina Implementation
Capacity for Triple P

Acknowledgements & Disclosure

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The North Carolina Implementation Capacity for Triple P (NCIC-TP) team has developed a measure of the capacity of a community to implement and scale-up the Triple P – Positive Parenting Program system of interventions. A *community* might be locally defined as a collection of neighborhoods, a single county, or even a region or cluster of counties within a state. Their *capacity* to implement and scale-up Triple P includes the resources and abilities of people and organizations needed to develop, improve, and sustain the use of Triple P as intended.

The Community Capacity Assessment for the Triple P System of Interventions (CCA-TP) was initially adapted from school district and county implementation capacity assessments and a more generic implementation drivers assessment (see "related resources," page 24). The CCA-TP includes eleven individual indices and three summary indices that measure and describe core components of implementation and scale-up capacity, information from which can be used for action planning. The CCA-TP was refined throughout a two-year implementation evaluation of Triple P in Cabarrus and Mecklenburg counties in North Carolina. Community capacity index scores were observed to follow similar patterns of strength and needs as Triple P service agency implementation infrastructure scores.

The CCA-TP Facilitator's Guide is intended to assist facilitators in planning for and carrying-out a successful assessment. It includes several resources that may be useful for assessment facilitation, including an example script to describe the CCA-TP to participants, a copy of the assessment annotated with facilitation notes, as well as a checklist of actions to take before, during, and after the assessment. Facilitators should review the guide and become familiar with all content prior to moving forward with administration of an assessment.

Delivery

Though it is possible to have a single facilitator, *it is strongly recommended, when possible*, to have one person facilitate and score the assessment and a second person take more detailed process and content notes that may be useful for recalling specific implementation activities, action plans, and/or areas of concern or confusion among respondents. It is important that whoever facilitates the assessment possess the following qualities:

- Proficiency with the CCA-TP instrument and specific indices
- Proficiency with implementation science
- Experience with Triple P implementation and scale-up
- Strong facilitation and communication skills

NOTE:
Pay attention to these important notes located in the side bar throughout the assessment.

This guide contains a facilitator's version of the CCP-TP that has been annotated with important notes to keep in mind throughout the assessment process, including common issues encountered and scoring nuances. It is strongly encouraged that the facilitator uses this guide during all assessments so that these essential points are not overlooked.

Who should attend?

The CCA-TP is designed for community leadership and implementation teams involved in the implementation of Triple P, as well as other community-level stakeholders. Community leadership and implementation team members may already be formally identified or teams might be more informal in nature. For example, there may be many individuals at the community level who are purposefully supporting practice change among Triple P service agencies, but these individuals may not formally refer to themselves as an "implementation team". Regardless of formal team names or labels, CCA-TP respondents should include:

1. community leaders with decision-making power related to the scale-up of Triple P across the community coalition;
2. community-level staff who manage the day-to-day implementation and scale-up of Triple P interventions across the community coalition; and
3. if applicable, community-level staff who:
   - help make decisions related to identifying or selecting agency-level practitioners to be trained in Triple P interventions
   - coordinate or facilitate access to Triple P trainings coordinate or facilitate access to coaching supports for Triple P practitioners after Triple P accreditation
   - are involved in collecting or managing data relative to the implementation of Triple P throughout the community

Preparing for the Assessment:

Successful facilitation of the CCA-TP requires detailed planning. It is recommended that facilitators reach out to the community Triple P coordinator at least <u>six weeks prior</u> to the targeted assessment date in order to—

1. Provide a brief orientation to the purpose and objectives of the CCA TP.
2. Discuss community-level leadership and staff who would be most relevant to participate in the assessment.
3. Coordinate a date, time, and location for the assessment that works with all attendees' schedules, as well as a plan for future communication and coordination leading up to the assessment date.

At least <u>two weeks prior</u> to the assessment date –

1. Send a copy of the CCA-TP to the community point-of-contact, along with a letter introducing the items and assessment process. Ask that the CCA-TP be shared with and reviewed individually by all individuals who will be in attendance.
2. Introduce the <u>Interventions by Stage of Implementation Worksheet</u> (Appendix C), and request that the information be returned before the assessment date.
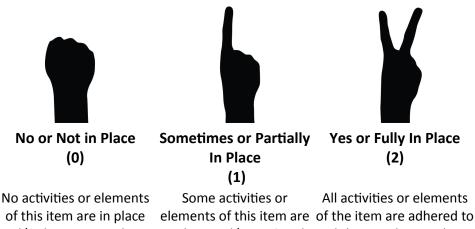3. Email the <u>Intervention by Stage of Implementation Worksheet</u> to the coordinator.

<u>One week prior</u> to the assessment date –

1. Send a reminder email to the community Triple P coordinator, confirming logistics of the upcoming assessment, and address to any remaining questions or concerns they may have.
2. Pull together materials (see Materials Checklist, Appendix D)

Facilitator Instructions:

Read each question aloud and ask all participants to vote whether the item should be scored as "No or Not in Place" (0), "Sometimes or Partially in Place" (1), or "Yes or Fully in Place" (2). Use the first CCA-TP item as a trial to see if participants understand the administration and scoring process. Answer any additional questions or confusion that may persist, and then proceed more formally with the remaining items.

For each item, give participants a moment to jot down their individual vote, then ask the participants to hold up their vote using their fingers (i.e., 0 fingers, 1 finger, 2 fingers); a process known as *simultaneous public polling*. This voting process is intended to equalize all voices in the room on the initial vote and prevent participants from influencing each other's' initial vote. It's often helpful to prompt simultaneous public polling by stating, "*ready, set, vote*."

No or Not in Place (0)	**Sometimes or Partially In Place (1)**	**Yes or Fully In Place (2)**
No activities or elements of this item are in place and/or have not yet been initiated.	Some activities or elements of this item are in place and/or initiated.	All activities or elements of the item are adhered to and there is clear evidence to support this.

Record each participant's vote. If voting is unanimous, circle the consensus decision and move on to the next question. If voting is not unanimous, facilitate a brief discussion to see if modified consensus can be reached.

If modified consensus is not reached in a reasonable fashion or if there are strong concerns raised by any participant, facilitators might skip that question for the time being and return to it at a later time during the same administration. If, at that later time, modified consensus still cannot be reached in a reasonable fashion, the majority vote will prevail for assessment purposes.

Make sure to record individual votes **each time a poll is taken** publically and, then circle the final score once a consensus or final decision is made.

What is "Modified Consensus"?

"Modified consensus" is reached when all individuals in the group agree to move forward with a single group vote (0, 1, or 2), and can support that vote outside the context of the original group, even if individual members retain or initially had a dissenting vote. Facilitators might build modified consensus by exploring the different initial votes within the group, asking the group to vote again, and, if voting is still not unanimous, asking the minority vote members if they can agree to move forward with the majority vote.

Following each index in this guide, there are suggested transition statements to help orient the participants to the next index. Given the large amount of information covered in this assessment, it is important to take time to explain the purpose of each set of questions so that participants can more easily make the mental "shift" to a new topic. It may also be helpful to direct them to the list of indices included in their copy of the assessment to give them a sense of progress made.

Once you have reached the end of the assessment , take a few minutes to thank everyone for their participation, explain next steps for the data collected, and remind them how this information may be used to bene-fit the scale-up of Triple P in their community. A suggested conclusion statement is included after the last index (see page 32).

The following page contains a suggested introductory script which may be beneficial as you begin learn how to best orient your participants to the assessment. It is not recommended that you read directly from this script at the assessment, however, but try to make it more your own while still covering the key points.

Introduction to Participants:

Good morning/afternoon! Thank you for being here and taking the time to meet with us.

Today, we will be using the CCA-TP to assess the capacity of your community to coordinate implement and scale-up the Triple P – , or the Positive Parenting Program, system of interventions, across your community. We'll cover a number of supports and activities related not only to the implementation of Triple P, but to any innovative practice or program being scaled across a community. Of course, this particular assessment version has been tailored for use with Triple P.

It's important to know that there are **no right or wrong answers – all communities tend to look somewhat different.** *No community will naturally have – or even need to have - all supports or practices fully in place to support effective implementation. The strengths of one area of implementation capacity may compensate for challenges in another area, and some communities may emphasize some practices rather than others. We'd simply like to learn how your community is organizing its Triple P implementation efforts.*

Do you have any questions or concerns about this?

I will read each item and give you a second to consider your individual responses. Once I have everyone's eyes back on me, I will say "ready… set…vote." At that time, if everyone will please hold up the number of fingers that correspond with your answer: "0," "1," or "2."

No or Not in Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
No activities or elements of this item are in place and/or have not yet been initiated.	Some activities or elements of this item are in place and/or initiated.	All activities or elements of the item are adhered to and there is clear evidence to support this.

If everyone voting is in agreement, then the we'll move on to the next item. If there are different scores within the group, then I'll ask you all to talk about it and try to come to some form of modified consensus, with all participants able to support a single group score, even if there remains some individual disagreements.

As we go along, please consider all Triple P interventions that your community has adopted and is actively working to implement through participating service agencies [refer participants to the list of community Triple P interventions by stage of implementation]. Also, feel free to ask clarifying questions as we go along if any particular item is confusing or not clear.

OK, let's try out the first CCA-TP item to see how it goes or if I need to answer any additional questions, and then we'll get started more formally.

This first set of questions focuses on the extent to which you all have formally and sustainably organized a leadership team from within the community-wide prevention system — and whether you all feel that the team has the commitment and authority to lead Triple P scale-up across the community.

Community Capacity Assessment for the Triple P System of Interventions (CCA-TP)

Community: _____   Date: _____

Facilitator: _____   Note-Taker: _____

Participant Name	Agency Name	Role/Position Related to Community Triple P Roll-Out

NOTE:
You can either write down this information for the participants, or simply pass this sheet around the room for them to fill out.

Community Leadership Team (CLT)

Index Description: The community has formally and sustainably organized a leadership team from within the community-wide prevention system that has the commitment and authority to lead Triple P scale-up across the community.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. There is a clearly identified <u>Community Leadership Team</u> with executive leadership of Triple P implementation and scale-up across the community.			
Please identify the Community Leadership Team:			
STOP: If CLT1 is scored "0" (no Community Leadership Team), skip to next section (Community Implement. Team). If CLT1 is scored "1" or "2", continue through the remainder of the current section.			
2. The Community Leadership Team is comprised of service agency, community, or government leaders <u>from the community-wide prevention system</u>.			
3. The Community Leadership Team includes <u>individuals with authority</u> to create systems changes to support the effective implementation and scale-up of Triple P (e.g. ability to redirect funding, direct and reassign personnel, adjust systems policy, etc.).			
4. The Community Leadership Team has a <u>document describing its organization</u>, including elements such as purpose, goals, roles and responsibilities, authority, communications, membership (e.g., a Terms of Reference, Charter, or Memorandum of Understanding).			
5. <u>At least quarterly</u>, the Community Leadership Team meets in person to review and guide the implementation and scale-up of Triple P.			

NOTE:
If undocumented or incomplete, score as a "1".

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
6. At least monthly, the Community Leadership Team communicates with individuals who support day-to-day Triple P implementation and scale-up activities across the community.			
7. The community has documented a sustainability plan for the Community Leadership Team's involvement in the implementation and scale-up of Triple P beyond the community service grant.			

NOTE:
Undocumented or incomplete plans should be scored as a "1".

Suggested Transition:
We've just completed the Community Leadership Team index, and now are moving on to the Community Implementation Team index. If you recall, the Community Implementation Team index focuses on your team's ability and capacity to coordinate and support day-to-day Triple P scale-up activities across the community.

Community Implementation Team (CIT)

Index Description: The community has formally and sustainably organized a team of three or more individuals, led by one or two identified leaders, that has the ability and capacity to coordinate and support day-to-day Triple P scale-up activities across the community.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. There is a clearly identified <u>Community Implementation Team</u>, consisting of three or more individuals, that is responsible for coordinating and supporting day-to-day Triple P implementation and scale-up activities			
2. There is a clearly identified <u>Community Implementation Coordinator</u> (or two) who is responsible for leading a Community Implementation Team and/or coordinating and supporting day-to-day Triple P implementation and scale-up activities.			

Please identify the Community Implementation Team members and indicate the Community Implementation Coordinator(s) with an "*":

STOP: If CIT1 and CIT2 are **both** scored "0" (<u>no Community Implementation Team or Coordinator</u>), **skip** to the next section (Prevention System

3. The Community Implementation Team is housed within an agency or agencies that are a <u>part of the community-wide prevention system</u>.			
4. Each member of the Community Implementation Team has <u>formally allocated time and effort</u> to support Triple P implementation and scale-up (as written into project documents or job description).			

What amount of job time (i.e., FTE) has been <u>formally allocated</u> for each Community Implementation Team member and the Community Implementation Coordinator?

NOTE:
Anything less than three team members should be scored as a "0". A team of three or more that is loosely identified should be scored as a "1".

NOTE:
When participants report that there is <u>no Community Implementation Team</u> in existence, all items mentioning a "Community Implementation Team" should still be administered. In this scenario, the Community Implementation Coordinator(s) may be fulfilling some of the functions and activities of the Community Implementation Team and these activities should be acknowledged and given credit, despite the lack of a "team" to drive these activities. **The two exceptions to this guideline are CIT #6 and CIT #10, as noted in the assessment items.**

NOTE:
"Triple P" does not have to be named in official documents, but at least something generic such as "programs."

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To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
5. Each member of the Community Implementation Team has <u>sufficient time and effort</u> to support Triple P implementation and scale-up.			
What amount of job time (i.e., FTE) <u>would be ideal</u> for each Community Implementation Team member and the Community Implementation Coordinator, based on the work that needs to be done?			
6. The Community Implementation Team has a <u>document describing its organization</u>, including elements such as purpose, goals, roles and responsibilities, authority, communications, membership (e.g., a Terms of Reference, Charter, or Memorandum of Understanding).			
7. Among Community Implementation Team members, there is <u>experience creating and managing systems changes</u> to support the implementation and scale-up of an innovation.			
8. Among Community Implementation Team members, there is <u>fluency</u> (i.e., advanced knowledge and the ability to apply that knowledge in varied contexts) <u>with Triple P and how it should be implemented and scaled-up across a community</u>.			
9. Among Community Implementation Team members, there is <u>fluency </u>(i.e., advanced knowledge and the ability to apply that knowledge) <u>with the use of evidence-informed, active implementation strategies </u>(e.g. implementation teams, implementation infrastructure and best practices, implementation phases or stages, and Plan-Do-Study-Act improvement strategies).			

NOTE:
If CIT #1 is a "0", this must be scored a "0". If undocumented or incomplete, score as a "1".

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
10. At least monthly, members of the entire Community Implementation Team <u>meet in person</u> to discuss the ongoing implementation and scale-up of Triple P.			
11. At least monthly, the Community Implementation Team <u>provides updates and communicates successes/needs related to Triple P to the Community Leadership Team</u>.			
12. At least monthly, the Community Implementation Team <u>communicates with agencies about Triple P implementation and scale-up</u>.			
13. The community has <u>documented a sustainability plan</u> for the positions on the Community Implementation Team (including the Community Implementation Coordinator) beyond the community service grant.			

Suggested Transition:
We've just completed the Community Implementation Team index, and now are moving on to the Prevention System Alignment index. If you recall, the Prevention System Alignment index focuses on the extent to which you have systematically assessed the wellbeing needs of children and families in your community, and have developed processes to select Triple P programs responsively. Likewise, whether you have assessed the strengths and needs of your community prevention system, and have developed processes to responsively select and align Triple P service agencies to foster a strong and able service coalition.

Prevention System Alignment (PSA)

Index Description: The community has systematically assessed the wellbeing needs of children and families within the community and selects and aligns Triple P interventions responsively. In addition, the community has systematically assessed the strengths and needs of the community-wide prevention system related to the scale-up of Triple P and selects and aligns agency partners responsively.

To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. Within the past five years, the community has completed a <u>systematic analysis of the wellbeing needs</u> of children and families within the community.			
2. The community has written criteria or <u>documented a process for selecting Triple P interventions</u> to effectively address identified community needs.			
3. Within the past five years, the community has <u>documented a strategic plan</u> for implementing and scaling-up Triple P within the community-wide prevention system.			
4. Within the past 12 months, the community's <u>strategic plan</u> for implementing and scaling-up Triple P has been <u>updated</u>.			
5. The <u>Community Leadership Team has approved</u> the community's most recently updated strategic plan.			
6. The community's most recently updated strategic plan has been <u>shared with key community stakeholders</u>.			
7. Within the past 12 months, the community has completed a <u>systematic analysis of the strengths and needs of the community-wide prevention system</u> (i.e., participating agencies and key stakeholders) related to the implementation and scale-up of Triple P.			

NOTE:
In order to avoid misinterpretation of some key questions, it is important to clarify the definition of a few key terms as you come across them throughout the assessment. Let participants know that in the context of the CCA-TP:
"Systematic" suggests being both regular and purposeful.

NOTE:
Undocumented or incomplete criteria/ processes should be scored as a "1".

NOTE:
Undocumented or incomplete plans should be scored as a "1".

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
8. The community has written criteria or documented a process for selecting agencies to participate in the implementation and scale-up of Triple P.			
9. The community has documented agreements formalizing the collaborative relationship between the community and each agency implementing Triple P (e.g., a Memorandum of Understanding or Agreement).			
10. The community has documented a process to improve collaboration and coordination among agencies implementing Triple P.			

Suggested Transition:
We've just completed the Prevention System Alignment index, and now are moving on to the Action Planning index. If you recall, the Action Planning index focuses on the extent to which you regularly obtain data about implementation of Triple P, and use that data to inform responsive action plans to help your scale-up efforts.

Action Planning (AP)

Index Description: The community regularly obtains data and information about the ongoing implementation of Triple P across agencies and develops, updates, and carries out responsive action plans to advance implementation and scale-up efforts.

To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. At least quarterly, the Community Implementation Team <u>reviews data and feedback</u> from agencies <u>to track progress against the community's strategic plan</u> for the implementation and scale-up of Triple P.			
2. At least quarterly, the Community Implementation Team <u>develops or updates action plans</u> to support the implementation and scale-up of Triple P across the community.			
3. At least quarterly, the Community Implementation Team <u>communicates progress updates and action plans</u> related to Triple P to the Community Leadership Team.			
4. At least quarterly, the Community Leadership Team <u>provides feedback</u> on Triple P progress updates and action plans to the Community Implementation Team.			
5. The Community Implementation Team <u>carries out action plans</u> related to Triple P as intended.			

Suggested Transition:
We've just completed the Action Planning index, and now are moving on to the Recruitment & Selection index. If you recall, the Recruitment & Selection index focuses on your work with local service agencies to ensure the use of best practices for Triple P practitioner recruitment and selection.

Recruitment & Selection (RS)

Index Description: The community works closely with local service agencies to ensure the use of best practices for Triple P practitioner recruitment and selection.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. The community has <u>documented a plan to recruit and/or select</u> a sufficient number of Triple P practitioners to serve the community's population.			
2. The Community Implementation Team ensures that <u>practitioners are recruited or selected to be trained in Triple P</u> in order to maintain the targeted number of community Triple P practitioners (i.e., creates new Triple P training opportunities and addresses turnover responsively).			
3. The Community Implementation Team ensures that <u>individuals making Triple P practitioner selection decisions are proficient</u> (i.e., advanced knowledge and the ability to reasonably apply that knowledge during selection decisions) in the key principles, skills, and abilities required to effectively deliver Triple P.			
4. The Community Implementation Team ensures that agencies have <u>Triple P practitioner job, position, or role descriptions</u> with clear expectations about Triple P activities, responsibilities, and accountability.			
5. The Community Implementation Team ensures that agencies use <u>Triple P practitioner selection criteria</u> that are aligned with Triple P philosophy, values, and principles.			

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
6. The Community Implementation Team ensures that Triple P practitioner selection processes include <u>observational assessments of key abilities related to delivering Triple P</u> (e.g., abilities to communicate core Triple P content, demonstrate parenting skills, engage in role plays, model self-regulatory processes).			
7. The Community Implementation Team ensures that Triple P practitioner selection processes include <u>observational assessments of willingness and key abilities related to practitioner professional development</u> (e.g., abilities to modify practice behaviors, accept coaching feedback, engage in conceptual thinking).			
8. The Community Implementation Team ensures that information about newly selected Triple P practitioners' strengths and needs is <u>used to inform their training and coaching supports</u>.			
9. The Community Implementation Team ensures the availability of <u>data to evaluate the effectiveness</u> of Triple P recruitment and selection practices (e.g., turnover data, data from exit interviews, training data, coaching data, fidelity data).			

NOTE:
Observation may occur through interactive interviews or observation of family services delivery.

NOTE:
Observation may occur through interactive interviews or observation of prior professional development activities.

Suggested Transition:
We've just completed the Recruitment & Selection index, and now are moving on to the Training index. If you recall, the Training index focuses on your work with local agencies and Triple P America to ensure the use of best practices for training Triple P practitioners to deliver to your community's population.

Training (T)			
Index Description: The community works closely with local agencies and Triple P America to ensure the use of best practices for training Triple P practitioners to deliver Triple P to the community's population.			
To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. The community has <u>documented a plan to provide training for each Triple P intervention</u> selected for implementation in the community.			
2. The community has <u>documented a plan to train a sufficient number of Triple P practitioners</u> to serve the community's population.			
3. The Community Implementation Team ensures that <u>practitioners recruited or selected to deliver Triple P receive Triple P training</u>.			
4. The Community Implementation Team <u>ensures that practitioners are trained in Triple P before delivering</u> Triple P interventions to children and families.			
5. The Community Implementation Team arranges trainings <u>through Triple P America</u>.		(5)	(10)
6. The Community Implementation Team ensures practitioners' full participation in Triple P training, from the initial training days through accreditation, <u>including practice providing Triple P to children and families during this period</u>.			
7. The Community Implementation Team ensures that <u>information about newly accredited Triple P practitioners' strengths and needs is used to inform their ongoing coaching supports</u>.			

Coaching (C)

Index Description: The community works closely with local agencies to ensure the use of best practices for coaching Triple P practitioners after their accreditation and as they deliver Triple P to children and families.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. The community has developed or adopted a <u>written plan that details coaching expectations</u> for Triple P practitioners following accreditation (e.g., where, when, with whom, why, methods).			
2. <u>Coaches' adherence</u> to the community's written coaching plan is <u>regularly reviewed</u>.			
3. The Community Implementation Team ensures that community <u>Triple P practitioners participate in Triple P coaching</u> following accreditation.			
4. The Community Implementation Team ensures that, among those providing coaching to Triple P practitioners, there is <u>fluency</u> in the key principles, components, skills, and abilities required to effectively deliver Triple P.			
5. The Community Implementation Team ensures that coaches make use of <u>observational data</u> (in person, audio, or video) as a primary source of information to support Triple P practitioner coaching after their accreditation.			
6. The Community Implementation Team ensures that coaches use <u>multiple sources of information to give feedback to community Triple P practitioners</u> (e.g., observational data, case or records reviews, Triple P session checklists, practitioner self-report, parent outcome measures, interviews with others who may know about the practitioner's Triple P delivery – e.g., parents, colleagues).			

NOTE:
In some communities, community-led peer support networks are a common form of "coaching." Some agencies may alternatively or additionally be doing in-house coaching, either by way of peer support or regular supervision/coaching from a supervisor.

NOTE:
Undocumented or incomplete plans should be scored as a "1".

NOTE:
To receive a "2", C #1 must be scored "2."

NOTE:
"Fluency" can be obtained from a certified Triple P Trainer/Consultant or may be developed over an extended period of delivering Triple P across diverse families/ contexts with support from a certified Triple P Trainer/ Consultant.

NOTE:
Only one source of information should be scored a "1".

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
7. The Community Implementation Team ensures the availability of <u>data about whether or not practitioners' abilities to deliver Triple P improve as a result of coaching</u>.			
8. The Community Implementation Team ensures that coaches are <u>provided feedback on their coaching from multiple sources of information</u>, such as practitioner satisfaction surveys, observational assessment of coaching, coach self-report, and practitioner fidelity data.			

Suggested Transition:
We've just completed the Coaching index, and now are moving on to the Fidelity Assessment index. If you recall, the Fidelity Assessment index focuses on your work with local agencies to ensure the use of best practices for <u>assessing</u> whether or not core Triple P components are delivered as intended by Triple P practitioners to children and families. So we're talking about <u>fidelity assessment</u> rather than <u>fidelity scores</u>.

For example, you can have high fidelity of Triple P delivery, but no assessment of that fidelity. In that case, you wouldn't know whether you were achieving fidelity or not! Conversely, you can do a great job assessing fidelity, but find out that you actually have really low fidelity scores. For these next questions, we're only talking about the assessment process—not whether your practitioners are actually delivering with fidelity.

Fidelity Assessment (FID)

Index Description: The community works closely with local agencies to ensure the use of best practices for assessing whether or not core Triple P components are delivered as intended by Triple P practitioners to children and families.

To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. The community has a <u>documented plan to conduct a sufficient number of fidelity assessments</u> to ascertain whether or not the core components of Triple P are being delivered as intended across community Triple P practitioners.			
2. The Community Implementation Team ensures that agencies have <u>practical and efficient Triple P fidelity assessment procedures</u> (i.e., not burdensome).			
3. The Community Implementation Team ensures that <u>Triple P fidelity assessments predict intended short-term child and family outcomes</u>.			
4. The Community Implementation Team ensures that Triple P practitioners have been <u>oriented</u> to Triple P fidelity assessment protocols and procedures.			
5. The Community Implementation Team ensures that Triple P fidelity assessment procedures are <u>systematically completed</u> for each Triple P practitioner.			
6. The Community Implementation Team ensures that fidelity assessments include <u>observational assessment of practitioners' skills and abilities</u> to competently deliver Triple P.			

NOTE: Undocumented or incomplete plans should be scored as a "1".

NOTE: Fidelity assessment procedures may be obtained from Triple P America.

NOTE: This may be accomplished through interactions with Triple P America or community or state partners.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
7. The Community Implementation Team ensures that fidelity assessment procedures make use of <u>multiple sources of information</u> about practitioners' delivery of Triple P (e.g., quality assessments – third-party observational assessments; adherence measures – Triple P Session Checklists; dosage – number of sessions completed; caregiver engagement – caregiver completion of session activities and homework as intended).			
8. The Community Implementation Team ensures that Triple P practitioners are <u>recognized specifically for participating</u> in Triple P fidelity assessment procedures.			

Suggested Transition:
We've just completed the Fidelity Assessment index, and now are moving on to the Decision-Support Data System index. If you recall, the Decision-Support Data System index focuses on your work with local agencies to use best practices to gather, use, and share implementation and intervention data for decision-making to improve the implementation of Triple P across the community.

Decision-Support Data System (DSDS)			

Index Description: The community works closely with local agencies to use best practices to gather, use, and share implementation and intervention data for decision-making to improve the implementation of Triple P across the community.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. The Community Implementation Team ensures that agencies have practical and efficient Triple P data collection procedures (i.e., built into practice routines, not burdensome).			
2. The Community Implementation Team ensures the collection of data about the recruitment and selection of Triple P practitioners (i.e., number of Triple P practitioners selected, selection outcomes, and quality of recruitment and selection processes).			
3. The Community Implementation Team ensures the collection of data about the training of Triple P practitioners (i.e., number of Triple P practitioners trained, training outcomes, and quality of training processes).			
4. The Community Implementation Team ensures the collection of data about the coaching of Triple P practitioners (i.e., number of coaching sessions attended, coaching outcomes, and quality of coaching processes).			
5. The Community Implementation Team ensures the collection of data about Triple P practitioners' fidelity to the intended delivery of Triple P core components (i.e., number of fidelity assessments completed, fidelity outcomes, and quality of fidelity assessments).			
6. The Community Implementation Team ensures the collection of data about Triple P service provision (i.e., number of families served, caregiver satisfaction with Triple P interventions).			

NOTE:
Some data collection materials and procedures may be obtained from Triple P America.

NOTE:
For Decision Support Data System items 2 through 6, participants should be asked to take into account the full range of data noted in parentheses. To receive a score of "2" or "fully in place," participants should report collection of each type of data (generally – output data, outcome data, and process quality data). If no data is being collected, a score of "0" or "not in place" is appropriate. Anything in between should be scored a "1" or "partially in place."

NOTE:
The following data is being collected as a part of the State Triple P Evaluation:
- occurrence of provider selection to participate in Triple P training
- occurrence of Triple P training,
- number of families served by community Triple P providers,
- Family Background Questionnaires,
- Caregiver Contact Records,
- Parenting Experience Pre-Surveys,
- Parenting Experience Post-Surveys, and
- Caregiver Satisfaction Questionnaire

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
7. The Community Implementation Team ensures the collection of data about short-term child and/or family outcomes related to Triple P (e.g., changes in parenting competence and confidence, changes in parent-child interactions, changes in child disruptive behavior).			
8. The Community Implementation Team ensures the collection of data about long-term, child and/or family outcomes related to Triple P (e.g., community-wide child abuse and neglect; community-wide school behavioral disruptions; community-wide child mental, emotional, or behavioral disorder diagnoses).			
9. The Community Implementation Team ensures that selected long-term, child and/or family outcomes are socially important (i.e., align with established community-wide goals).			
10. The Community Implementation Team ensures that Triple P data are reliable and valid.			
11. The community has documented agreements with each agency implementing Triple P to share common Triple P data (e.g., a Memorandum of Understanding or Agreement).			
12. At least quarterly, the Community Implementation Team provides feedback to agencies on their agency-specific Triple P data.			
13. The Community Implementation Team ensures that agency-specific data are being used among agencies for decision-making to improve their implementation of Triple P.			

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
14. At least quarterly, the Community Implementation Team <u>reports community-wide Triple P data to the Community Leadership Team</u>.			
15. At least quarterly, the <u>Community Leadership Team provides feedback on community-wide Triple P data to the Community Implementation Team</u>.			
16. The Community Implementation Team ensures that <u>community-wide Triple P data are being used for decision-making</u> to improve Triple P delivery, implementation, and scale-up across the community.			
17. At least quarterly, the <u>Community Implementation Team reports community-wide Triple P data to community stakeholders and appropriate external partners</u> (e.g., funders, Triple P America, community and state policymakers).			

Suggested Transition:
*We've just completed the Decision-Support Data System index. These next two sections are really flip sides of the same coin—the first is about **internal** policies and practices (inside agencies and/or the broader coalition) that may facilitate or be a barrier to the delivery of Triple P, such as service agency hours or coalition participation requirements.*

*The second section is all about **external** or larger system needs and facilitators, ones that may be outside the direct control of services agencies or coalitions, such as parent transportation or third party reimbursement systems for Triple P.*

*So first is Facilitative administration, or the **internal** policies/practices that may hinder or help the delivery of Triple P in your community...*

Facilitative Administration (FAC)

Index Description: The community uses best practices to solicit, document, and use information about Community and agency policy and practice facilitators and barriers to improve the implementation of Triple P across the community.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. Community <u>policies, plans, and practices reflect</u> evidence-informed, active approaches to implementing and scaling-up <u>Triple P</u> (e.g., practitioner recruitment and selection, training, coaching, and fidelity assessment; decision-support data systems; linked leadership and implementation teams; family access to Triple P).			
2. The Community Implementation Team <u>employs usability testing strategies</u> (i.e., plan-do-study-act cycles using manageable slices of the community Triple P delivery system) to incrementally test and adjust the scale-up of Triple P across the community.			
3. The community systematically solicits information about <u>how well Community policies, plans, and practices support the implementation and scale-up</u> of Triple P (e.g., availability of Triple P training, data reporting requirements, community networking).			
4. The community systematically solicits information from agencies about <u>agency policy and practice facilitators and barriers</u> to the successful implementation of Triple P (e.g., adequate time or resources to deliver Triple P; adequate time or resources to participate in Triple P implementation support activities – e.g., coaching, data completion; alignment of Triple P with other agency activities).			

NOTE:
Feedback may come from any number or variety of sources.

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To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
5. The Community Implementation Team systematically <u>documents common themes</u> in the information gathered about policy and practice facilitators and barriers to the implementation and scale-up of Triple P.			
6. At least quarterly, the Community Implementation Team <u>provides feedback to each agency</u> on the information the agency provided.			
7. The Community Implementation Team ensures that <u>agencies are successfully addressing internal agency policy and practice barriers</u> to the implementation of Triple P.			
8. At least quarterly, the Community Implementation Team <u>communicates to the Community Leadership Team</u> common themes in the information gathered.			
9. At least quarterly, the <u>Community Leadership Team provides feedback to the Community Implementation Team</u> on common themes in the information gathered.			
10. The Community Implementation Team ensures that common themes in the information gathered are being <u>used to strengthen Community policies, plans, and practices</u> to support the community-wide implementation and scale-up of Triple P.			
11. At least quarterly, the Community Implementation Team <u>communicates</u> common themes in the information gathered <u>to external partners</u> (e.g., funders, Triple P America, community and state policymakers).			

Suggested Transition:
We've just completed the Facilitative Administration index, and now are moving on to the more <u>external</u>, Systems Intervention index. This index focuses on the extent to which you work with local agencies and key partners to solicit, document, and use information about Triple P successes and larger systems needs to improve and sustain the implementation and scale-up of Triple P across the community. This includes activities such as the Stay Positive Media campaign and community referral networks.

Systems Intervention (SI)

Index Description: The community works closely with local agencies and other key partners to solicit, document, and use information about Triple P successes and larger systems needs to improve and sustain the implementation and scale-up of Triple P across the community. Additionally, the community facilitates key Triple P system activities, including the Triple P Stay Positive media campaign and community referral networks.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. The community has integrated the implementation and scale-up of Triple P within <u>larger community initiatives or strategic plans</u> (e.g., community wellbeing initiatives or improvement goals).			
2. The community systematically solicits information about <u>larger system needs</u> related to the implementation and scale-up of Triple P that may be <u>outside of the community's immediate influence or direct control</u> (e.g., alignment with other community initiatives, policy barriers, gaps in resources).			
3. The community systematically solicits information <u>from agencies</u> about larger system needs related to the implementation Triple P that may be <u>outside of their immediate influence or direct control</u> (e.g., community awareness of Triple P, gaps in resources, referral networks).			
4. The community systematically solicits information about <u>Triple P successes</u> in the community.			
5. As they are identified, the Community Implementation Team <u>documents</u> Triple P successes and/or commonly identified system needs.			
6. At least quarterly, the Community Implementation Team <u>provides feedback to each agency</u> on agency-specific Triple P successes and/or identified system needs.			

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
7. At least quarterly, the Community Implementation Team communicates to the Community Leadership Team Triple P successes and/or commonly identified system needs.			
8. At least quarterly, the Community Leadership Team provides feedback to the Community Implementation Team on Triple P successes and/or commonly identified system needs.			
9. The community works with appropriate partners at various systems levels (e.g. state funders or policymakers, health insurance companies, Triple P America) to address larger service system needs related to Triple P.			
10. At least quarterly, the community's Triple P successes are shared with appropriate stakeholders, partners, champions, and opinion leaders in the larger statewide prevention system.			
11. The community ensures that sufficient Triple P service materials and resources (e.g., tip sheets, parent workbooks, DVDs) are provided to active Triple P practitioners in the community.			
12. The community has documented a plan to expand the reach of or access to Triple P across the community.			
13. The community is implementing a *multifaceted* Triple P STAY POSITIVE media campaign (e.g., awareness materials – brochures/flyers/posters; TIPPAPERS; Stay Positive website; billboards; TV/Radio ads).			

NOTE:
Undocumented or incomplete plans should be scored as a "1".

NOTE:
Only one strategy should be scored a "1".

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
14. The community has <u>documented a plan to link multiple Triple P interventions</u> (e.g. through systematic client referrals) to avoid silos and optimize programming.			
15. The community has <u>documented a sustainability plan</u> for the necessary financial and programmatic resources needed to support the ongoing implementation of Triple P beyond the community service grant.			

NOTE:
Undocumented or incomplete plans should be scored as a "1".

NOTE:
Undocumented or incomplete plans should be scored as a "1".

Suggested Conclusion:
That was the last section! Congratulations, and thank you for your cooperation and input to complete this process. We will calculate and summarize scores, and send them back to you.

Please know that the goal from this assessment is not to work toward achieving "In Place" for each and every driver. No agency does all of these completely and at the same time, so expect variations and shifts. This information can be used by your community to identify priorities and action plan to strengthen your capacities to implement and scale-up Triple P. Further discussion with staff, leadership, and community partners can help to clarify issues, identify priorities, and define next right steps for addressing them.

Related Resources

Blase, K., Van Dyke, M., & Fixsen, D. (2013). *Implementation drivers: assessing best practices*. Chapel Hill, NC: National Implementation Research Network, Frank Porter Graham Child Development Institute, University of North Carolina at Chapel Hill.

Duda, M.A, Ingram-West, K., Tadesco, M., Putnam, D., Buenerostro, M., Chaparro, E. & Horner, R. (2012). *District Capacity Assessment*. Chapel Hill, NC: National Implementation Research Network, FPG Child Development Institute, University of North Carolina at Chapel Hill .

Fixsen, D. L., Blase, K. A., Naoom, S. F., & Wallace, F. (2009). *Core implementation components*. Research on Social Work Practice, 19(5), 531-540.

Fixsen, D.L., Duda, M.A., Blase, K.A. & Horner, R. (2011). *Assessment of State Capacity for Scaling-up Effective Practices/State Capacity Assessment (SCA)*. Chapel Hill, NC: National Implementation Research Network, FPG Child Development Institute, University of North Carolina at Chapel Hill.

Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M., & Wallace, F. (2005). Implementation research: A synthesis of the literature. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, National Implementation Research Network. (FMHI Publication No. 231).

Fixsen, D.L., Duda, M.A., Blase, K.A. & Horner, R. (2011). *Assessment of State Capacity for Scaling-up Effective Practices/State Capacity Assessment (SCA)*. University of North Carolina Chapel Hill.

Duda, M.A, Ingram-West, K., Tadesco, M., Putnam, D., Buenerostro, M., Chaparro, E. & Horner, R. (2012). *District Capacity Assessment*. University of North Carolina Chapel Hill.

Van Dyke, M.K., Fleming, O., Duda, M.A., Ingram-West, K., Tadesco, M., Putnam, D., Buenerostro, M., Chaparro, E. & Horner, R. (2012). *Community County Capacity Assessment*. Chapel Hill, NC: National Implementation Research Network, FPG Child Development Institute, University of North Carolina at Chapel Hill University of North Carolina Chapel Hill.

Appendix A.
CCA-TP Index Descriptions

CCA-TP Index Descriptions	
Index	**Definition**
Community Leadership Team (CLT)	The community has formally and sustainably organized a leadership team from within the community-wide prevention system that has the commitment and authority to lead Triple P scale-up across the community.
Community Implementation Team (CIT)	The community has formally and sustainably organized a team of three or more individuals, led by one or two identified leaders, that has the ability and capacity to coordinate and support day-to-day Triple P scale-up activities across the community.
Prevention System Alignment (PSA)	The community has systematically assessed the wellbeing needs of children and families within the community and selects and aligns Triple P interventions responsively. In addition, the community has systematically assessed the strengths and needs of the community-wide prevention system related to the scale-up of Triple P and selects and aligns agency partners responsively.
Action Planning (AP)	The community regularly obtains data and information about the ongoing implementation of Triple P across agencies and develops, updates, and carries out responsive action plans to advance implementation and scale-up efforts.
Community Implementation Teams Summary (CIT)	This *summary index* provides aggregate information about all items in the CLT, CIT, PSA, and AP indices. It represents the aggregate of community resources and abilities to support the scale-up of Triple P using dedicated team structures and collective processes.

CCA-TP Index Descriptions	
Index	**Definition**
Recruitment & Selection (RS)	The community works closely with local service agencies to ensure the use of best practices for Triple P practitioner recruitment and selection.
Training (T)	The community works closely with local agencies and Triple P America to ensure the use of best practices for training Triple P practitioners to deliver Triple P to the community's population.
Coaching (C)	The community works closely with local agencies to ensure the use of best practices for coaching Triple P practitioners after their accreditation and as they deliver Triple P to children and families.
Fidelity Assessment (FID)	The community works closely with local agencies to ensure the use of best practices for assessing whether or not core Triple P components are delivered as intended by Triple P practitioners to children and families.
Decision-Support Data System (DSDS)	The community works closely with local agencies to use best practices to gather, use, and share implementation and intervention data for decision-making to improve the implementation of Triple P across the community.
Facilitative Administration (FAC)	The community uses best practices to solicit, document, and use information about Community and agency policy and practice facilitators and barriers to improve the implementation of Triple P across the community.
Systems Intervention (SI)	The community works closely with local agencies and other key partners to solicit, document, and use information about Triple P successes and larger systems needs to improve and sustain the implementation and scale-up of Triple P across the community. Additionally, the community facilitates key Triple P system activities, including the Triple P Stay Positive media campaign and community referral networks.
Community Implementation Drivers Summary Index (CIDI)	This *summary index* provides aggregate information about all items in the RS, T, C, FID, DSDS, FAC, and SI indices. It represents the aggregate of community implementation team resources and abilities to support the community Triple P coalition and its individual service agencies to use implementation best practices to scale-up Triple P.
Community Sustainability Planning Summary Index (CSPI)	This *summary index* provides aggregate information about particular items from individual indices that asked about sustainability planning: CLT(7), CIT(13), and SI(15). It represents the aggregate of community level sustainability planning related to the scale-up of Triple P.

The CCA-TP generates two types of scores:

The **Individual Index Scores** are the percentage of total actual points out of total possible points accumulated across all items within the following individual indices: CLT, CIT, PSA, AP, RS, T, C, FID, DSDS, FAC, SI.

The **Summary Index Scores** is are the percentage of total actual points out of total possible points accumulated across all CCA-TP items in a defined combination of individual indices as designated.

The table below is used to build index and total scores when the CCA-TP is completed by hand instead of completed online.

Index	# of Items (110 total items)	Actual Points / Points Possible	Percentage of Points Possible:
CLT	7	___ / 14	___ %
CIT	13	___ / 26	___ %
PSA	10	___ / 20	___ %
AP	5	___ / 10	___ %
RS	9	___ / 18	___ %
T	7*	___ / 22	___ %
C	8	___ / 16	___ %
FID	8	___ / 16	___ %
DSDS	17	___ / 34	___ %
FAC	11	___ / 22	___ %
SI	15	___ / 30	___ %
Community Implementation Teams Index (CITI)	35 (CLT, CIT, PSA, AP)	___ / 70	___ %
Community Implementation Drivers Index (CIDI)	75 (RS, T, C, FID, DSDS, FAC, SI)	___ / 158	___ %
Community Sustainability Planning Index (CSPI)	3 (CLT7, CIT13, SI15)	___ / 6	___ %

Individual Indices

Summary Indices

* For calculation of index and total scale scores, the raw score for T4 should be multiplied by a factor of 5 (0, 5, 10).

Exploration: These Triple P interventions are under consideration or are in planning for future use in your community. Information is still being gathered on how these Triple P interventions may respond to identified needs in the community. Conversations with Triple P America about the characteristics and utility of these interventions may be ongoing. Conversations with community leaders, agencies, and other stakeholders about the appropriateness and timing of these interventions may be ongoing. Community resources are not yet being used to install these Triple P interventions.

Installation: Community resources are actively being used to implement these Triple P interventions in your community. Local practitioners may be training in and practicing their use of these Triple P interventions, but accreditation of practitioners in these Triple P interventions has not yet occurred. As such, these interventions are not yet systematically being delivered to community families. Agency administrators and managers may be preparing their agencies to support to the systematic use of these Triple P interventions.

Initial Implementation: Community Triple P practitioners have been accredited in these Triple P interventions and they are in the early stages of being systematically delivered to community families. Practice behaviors related to these Triple P interventions are still relatively new for your community Triple P practitioners. Agency administrators and managers are also engaging in new behaviors and supporting new operations related to these Triple P interventions. Community and agency implementation barriers and system needs may be emerging as new behaviors and operations come into contact with those prior. Practitioner, agency, and community stakeholder buy-in for these newly implemented Triple P interventions may still need support and attention. Data collection and use of data for quality improvement may be in the early stages.

Full Implementation: The majority of community Triple P practitioners are delivering these Triple P interventions as intended (i.e., with known fidelity). Although they still may require active attention and support, local agencies have accommodated these Triple P interventions as a part of their business as usual.

Appendix C.
Community Triple P
Interventions by Stage
of Implementation
Worksheet

Using the stage definitions and grid provided below, please list all Triple P interventions you are currently exploring, installing, or actively using in your community Triple P system.

Stage of Implementation for Chosen Community Triple P Interventions			
Exploration	**Installation**	**Initial Implementation**	**Full Implementation**

Appendix D.

Materials & Preparation Checklist

Materials Checklist

Materials to Prep	Complete?
Printed copies of the CCA-TP: – enough for the facilitator, note-taker, and each expected participant.	
List of expected participants, and their role within the community.	

Preparation Checklist

6 Weeks Prior to Assessment	Complete?
Reach out to coalition Triple P Coordinator to provide brief introduction to the CCA-TP	
Determine and document which leadership & staff should participate	
Coordinate a date/time/location for the assessment	
Create a plan for future coordination and communication leading up to the assessment	
Introduce the Interventions by Stage of Implementation worksheet	
Email worksheet to point of contact	
2 Weeks Prior to Assessment	**Complete?**
Email participant version of CCA-TP to point-of-contact with a letter or email explaining items and assessment process. Ask that all participants individually review the items prior to the assessment date.	
Introduce the Interventions by Stage of Implementation worksheet	
Email worksheet to point of contact	
1 Week Prior to Assessment	**Complete?**
Send a reminder email to community point-of-contact, confirming logistics of the upcoming assessment, and to address to any remaining questions or concerns they may have.	
If the Interventions by Stage of Implementation worksheet has not yet been returned, request that information again.	
Pull together materials (see Materials Checklist above)	
During Assessment	**Complete?**
Record the names and roles of all participants present	
Hand out a copy of the CCA-TP to each participant	
Provide an overview of the voting process, as well as how to reach modified consensus if there are discrepancies	
After Assessment	**Complete?**
Thank the participants for their time	
Unless participants are interested in keeping them, collect the CCA-TP copies	
Calculate the assessment scores using the scoring protocol	
Follow-through with any data or report sharing previously agreed upon with participants or other stakeholders.	

1. When communities report that there is a general implementation structure or practice in place, but it has not yet been adapted or repurposed for Triple P implementation, no credit should be given (i.e., "0" or "not in place"). For example, there may be a data system present at the community-level, but it hasn't been adapted to support Triple P intervention data. *The CCA-TP specifically assesses the presence of implementation supports for chosen Triple P interventions – not other interventions or community general operations.*

2. If a community is exploring the development of an implementation structure or practice to support their Triple P interventions, but no elements are yet formal or in place, it should still be scored as a "0" or "not in place." You may remind them that we'll be revisiting these items at later assessment points and there will be an opportunity for different scores.

3. If a community brings up a prior or historical Triple P implementation support structure or practice that has changed or no longer exists, the item should be scored as according to the degree that the structure/practice currently exists. This may mean that items that were once "fully in place" may now be "partially in place" or "not in place."

4. When a community has an implementation support structure or practice fully in place, but has not yet had the opportunity to use the structure or engage in the practice, then they don't yet have "evidence" of that the structure or practice is fully operational. For example, a community may have a conceptualized documented plan or agreed-upon processes for reporting and using data for decision-making, but they have not yet had an opportunity to report or use data for decision making. This situation is generally scored as a "1" or "partially in place" to give some credit for planning practice installation without yet having the structure or practice fully operational.

COMMUNITY CAPACITY ASSESSMENT

For the Triple P System of Interventions
(CCA-TP)

NCIC-TP
North Carolina Implementation
Capacity for Triple P

Acknowledgements & Disclosure

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Introduction

The North Carolina Implementation Capacity for Triple P (NCIC-TP) team has developed a measure of the capacity of a community to implement and scale-up the Triple P – Positive Parenting Program system of interventions. A *community* might be locally defined as a collection of neighborhoods, a single county, or even a region or cluster of counties within a state. Their *capacity* to implement and scale-up Triple P includes the resources and abilities of people and organizations needed to develop, improve, and sustain the use of Triple P as intended. It is designed to measure and describe the status of important implementation and scale-up components, information that can be used for action planning.

The assessment questions are divided into 11 separate indices, each covering a different topic related to implementation capacity and best practices. On the following page there is a table that provides an overview of each section, which may be helpful to refer to throughout the assessment. The facilitator will walk you through the purpose of each index at the start of the assessment, as well as through the scoring process for each item. However, if you need more clarification on an item or index at any point, please do not hesitate to ask.

It's important to know that there are **no right or wrong answers – all communities tend to look somewhat different.** No community will naturally have – or even need to have – all supports or practices fully in place to support effective implementation. The strengths of one area of implementation capacity may compensate for challenges in another area, and some communities may emphasize some practices rather than others. This assessment is simply designed to gather information on how your community is organizing its Triple P implementation efforts **as of the date of assessment**. Changes in capacity naturally occur over time and can be captured in future assessments.

CCA-TP Index Descriptions

Index	Definition
Community Leadership Team (pg. 3)	The community has formally and sustainably organized a leadership team from within the community-wide prevention system that has the commitment and authority to lead Triple P scale-up across the community.
Community Implementation Team (pg. 4)	The community has formally and sustainably organized a team of three or more individuals, led by one or two identified leaders, that has the ability and capacity to coordinate and support day-to-day Triple P scale-up activities across the community.
Prevention System Alignment (pg. 6)	The community has systematically assessed the wellbeing needs of children and families within the community and selects and aligns Triple P interventions responsively. In addition, the community has systematically assessed the strengths and needs of the community-wide prevention system related to the scale-up of Triple P and selects and aligns agency partners responsively.
Action Planning (pg. 7)	The community regularly obtains data and information about the ongoing implementation of Triple P across agencies and develops, updates, and carries out responsive action plans to advance implementation and scale-up efforts.
Recruitment & Selection (pg. 8)	The community works closely with local service agencies to ensure the use of best practices for Triple P practitioner recruitment and selection.
Training (pg. 9)	The community works closely with local agencies and Triple P America to ensure the use of best practices for training Triple P practitioners to deliver Triple P to the community's population.
Coaching (pg. 10)	The community works closely with local agencies to ensure the use of best practices for coaching Triple P practitioners after their accreditation and as they deliver Triple P to children and families.
Fidelity Assessment (pg. 11)	The community works closely with local agencies to ensure the use of best practices for assessing whether or not core Triple P components are delivered as intended by Triple P practitioners to children and families.
Decision-Support Data System (pg. 12)	The community works closely with local agencies to use best practices to gather, use, and share implementation and intervention data for decision-making to improve the implementation of Triple P across the community.
Facilitative Administration (pg. 14)	The community uses best practices to solicit, document, and use information about Community and agency policy and practice facilitators and barriers to improve the implementation of Triple P across the community.
Systems Intervention (pg. 16)	The community works closely with local agencies and other key partners to solicit, document, and use information about Triple P successes and larger systems needs to improve and sustain the implementation and scale-up of Triple P across the community. Additionally, the community facilitates key Triple P system activities, including the Triple P Stay Positive media campaign and community referral networks.

Your team/community resources & abilities to support the scale-up of Triple P using **dedicated team structures** & **collective processes**.

Your team/community resources & abilities to support the community Triple P coalition & its individual service agencies to use **implementation best practices to scale-up Triple P**.

Community Leadership Team (CLT)			
Index Description: The community has formally and sustainably organized a leadership team from within the community-wide prevention system that has the commitment and authority to lead Triple P scale-up across the community.			
To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. There is a clearly identified <u>Community Leadership Team</u> with executive leadership of Triple P implementation and scale-up across the community.			
Please identify the Community Leadership Team:			
STOP: If CLT1 is scored "0" (<u>no Community Leadership Team</u>), **skip** to next section (Community Implement. Team). If CLT1 is scored "1" or "2", **continue** through the remainder of the current section.			
2. The Community Leadership Team is comprised of service agency, community, or government leaders <u>from the community-wide prevention system</u>.			
3. The Community Leadership Team includes <u>individuals with authority</u> to create systems changes to support the effective implementation and scale-up of Triple P (e.g. ability to redirect funding, direct and reassign personnel, adjust systems policy, etc.).			
4. The Community Leadership Team has a <u>document describing its organization</u>, including elements such as purpose, goals, roles and responsibilities, authority, communications, membership (e.g., a Terms of Reference, Charter, or Memorandum of Understanding). *NOTE. If undocumented or incomplete, score as a "1".*			
5. <u>At least quarterly</u>, the Community Leadership Team <u>meets in person</u> to review and guide the implementation and scale-up of Triple P.			
6. At least monthly, the Community Leadership Team <u>communicates with individuals who support day-to-day Triple P implementation and scale-up activities</u> across the community.			
7. The community has <u>documented a sustainability plan</u> for the Community Leadership Team's involvement in the implementation and scale-up of Triple P beyond the community service grant. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			

Community Implementation Team (CIT)

Index Description: The community has formally and sustainably organized a team of three or more individuals, led by one or two identified leaders, that has the ability and capacity to coordinate and support day-to-day Triple P scale-up activities across the community.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. There is a clearly identified <u>Community Implementation Team</u>, consisting of three or more individuals, that is responsible for coordinating and supporting day-to-day Triple P implementation and scale-up activities across the community coalition. *NOTE. Anything less than three team members should be scored as a "0". A team of three or more that is loosely identified should be scored as a "1".*			
2. There is a clearly identified <u>Community Implementation Coordinator</u> (or two) who is responsible for leading a Community Implementation Team and/or coordinating and supporting day-to-day Triple P implementation and scale-up activities across the community coalition.			
Please identify the Community Implementation Team members and indicate the Community Implementation Coordinator(s) with an "*":			
STOP: If CIT1 and CIT2 are **both** scored "0" (<u>no Community Implementation Team or Coordinator</u>), **skip** to the next section (Prevention System Alignment).			
3. The Community Implementation Team is housed within an agency or agencies that are a <u>part of the community-wide prevention system</u>.			
4. Each member of the Community Implementation Team has <u>formally allocated time and effort</u> to support Triple P implementation and scale-up (as written into project documents or job description). *NOTE. "Triple P" does not have to be named in official documents, but at least something generic such as "programs."*			
What amount of job time (i.e., FTE) has been <u>formally allocated</u> for each Community Implementation Team member and the Community Implementation Coordinator?			
5. Each member of the Community Implementation Team has <u>sufficient time and effort</u> to support Triple P implementation and scale-up.			
What amount of job time (i.e., FTE) <u>would be ideal</u> for each Community Implementation Team member and the Community Implementation Coordinator, based on the work that needs to be done?			
6. The Community Implementation Team has a <u>document describing its organization</u>, including elements such as purpose, goals, roles and responsibilities, authority, communications, membership (e.g., a Terms of Reference, Charter, or Memorandum of Understanding). *NOTES: If CIT #1 is a "0", this must be scored a "0". If undocumented or incomplete, score as a "1".*			

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
7. Among Community Implementation Team members, there is <u>experience creating and managing systems changes</u> to support the implementation and scale-up of an innovation.			
8. Among Community Implementation Team members, there is <u>fluency</u> (i.e., advanced knowledge and the ability to apply that knowledge in varied contexts) <u>with Triple P and how it should be implemented and scaled-up across a community</u>.			
9. Among Community Implementation Team members, there is <u>fluency</u> (i.e., advanced knowledge and the ability to apply that knowledge) <u>with the use of evidence-informed, active implementation strategies</u> (e.g. implementation teams, implementation infrastructure and best practices, implementation phases or stages, and Plan-Do-Study-Act improvement strategies).			
10. At least monthly, members of the entire Community Implementation Team <u>meet in person</u> to discuss the ongoing implementation and scale-up of Triple P. *NOTE. If the community only has 1 person coordinating/supporting the scale-up of Triple P, this item must be scored "0".*			
11. At least monthly, the Community Implementation Team <u>provides updates and communicates successes/needs related to Triple P to the Community Leadership Team</u>.			
12. At least monthly, the Community Implementation Team <u>communicates with coalition agencies about Triple P implementation and scale-up</u>.			
13. The community has <u>documented a sustainability plan</u> for the positions on the Community Implementation Team (including the Community Implementation Coordinator) beyond the community service grant. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			

Prevention System Alignment (PSA)			
Index Description: The community has systematically assessed the wellbeing needs of children and families within the community and selects and aligns Triple P interventions responsively. In addition, the community has systematically assessed the strengths and needs of the community-wide prevention system related to the scale-up of Triple P and selects and aligns agency partners responsively.			
To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. Within the past five years, the community has completed a <u>systematic analysis of the wellbeing needs</u> of children and families within the community.			
2. The community has written criteria or <u>documented a process for selecting Triple P interventions</u> to effectively address identified community needs. *NOTE. Undocumented or incomplete criteria/processes should be scored as a "1".*			
3. Within the past five years, the community has <u>documented a strategic plan</u> for implementing and scaling-up Triple P within the community-wide prevention system. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
4. Within the past 12 months, the community's <u>strategic plan</u> for implementing and scaling-up Triple P has been <u>updated</u>.			
5. The <u>Community Leadership Team has approved</u> the community's most recently updated strategic plan.			
6. The community's most recently updated strategic plan has been <u>shared with key community stakeholders</u>.			
7. Within the past 12 months, the community has completed a <u>systematic analysis of the strengths and needs of the community-wide prevention system</u> (i.e., participating agencies and key stakeholders) related to the implementation and scale-up of Triple P.			
8. The community has written criteria or <u>documented a process for selecting agencies</u> to participate in a coalition to implement and scale-up Triple P. *NOTE. Undocumented or incomplete criteria/processes should be scored as a "1".*			
9. The community has <u>documented agreements formalizing the collaborative relationship</u> between the lead agency and each agency in the coalition implementing Triple P (e.g., a Memorandum of Understanding or Agreement). *NOTE. Undocumented or incomplete agreements should be scored as a "1".*			
10. The community has <u>documented a process to improve collaboration and coordination</u> among agencies in the coalition implementing Triple P. *NOTE. Undocumented or incomplete processes should be scored as a "1".*			

Action Planning (AP)

Index Description: The community regularly obtains data and information about the ongoing implementation of Triple P across agencies and develops, updates, and carries out responsive action plans to advance implementation and scale-up efforts.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. At least quarterly, the Community Implementation Team <u>reviews data and feedback</u> from coalition agencies <u>to track progress against the community's strategic plan</u> for the implementation and scale-up of Triple P.			
2. At least quarterly, the Community Implementation Team <u>develops or updates action plans</u> to support the implementation and scale-up of Triple P across the community coalition.			
3. At least quarterly, the Community Implementation Team <u>communicates progress updates and action plans</u> related to Triple P to the Community Leadership Team.			
4. At least quarterly, the Community Leadership Team <u>provides feedback</u> on Triple P progress updates and action plans to the Community Implementation Team.			
5. The Community Implementation Team <u>carries out action plans</u> related to Triple P as intended.			

Recruitment & Selection (RS)			
Index Description: The community works closely with local service agencies to ensure the use of best practices for Triple P practitioner recruitment and selection.			
To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. The community has <u>documented a plan to recruit and/or select</u> a sufficient number of Triple P practitioners to serve the community's population. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
2. The Community Implementation Team ensures that <u>practitioners are recruited or selected to be trained in Triple P</u> in order to maintain the targeted number of community Triple P practitioners (i.e., creates new Triple P training opportunities and addresses turnover responsively).			
3. The Community Implementation Team ensures that <u>individuals making Triple P practitioner selection decisions are proficient</u> (i.e., advanced knowledge and the ability to reasonably apply that knowledge during selection decisions) in the key principles, skills, and abilities required to effectively deliver Triple P.			
4. The Community Implementation Team ensures that coalition agencies have <u>Triple P practitioner job, position, or role descriptions</u> with clear expectations about Triple P activities, responsibilities, and accountability.			
5. The Community Implementation Team ensures that coalition agencies use <u>Triple P practitioner selection criteria</u> that are aligned with Triple P philosophy, values, and principles.			
6. The Community Implementation Team ensures that Triple P practitioner selection processes include <u>observational assessments of key abilities related to delivering Triple P</u> (e.g., abilities to communicate core Triple P content, demonstrate parenting skills, engage in role plays, model self-regulatory processes). *NOTE. observation may occur through interactive interviews or observation of family services delivery*.			
7. The Community Implementation Team ensures that Triple P practitioner selection processes include <u>observational assessments of willingness and key abilities related to practitioner professional development</u> (e.g., abilities to modify practice behaviors, accept coaching feedback, engage in conceptual thinking). *NOTE. observation may occur through interactive interviews or observation of prior professional development activities.*			
8. The Community Implementation Team ensures that information about newly selected Triple P practitioners' strengths and needs is <u>used to inform their training and coaching supports</u>.			
9. The Community Implementation Team ensures the availability of <u>data to evaluate the effectiveness</u> of Triple P recruitment and selection practices (e.g., turnover data, data from exit interviews, training data, coaching data, fidelity data).			

Training (T)

Index Description: The community works closely with local agencies and Triple P America to ensure the use of best practices for training Triple P practitioners to deliver Triple P to the community's population.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. The community has <u>documented a plan to provide training for each Triple P intervention</u> selected for implementation in the community. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
2. The community has <u>documented a plan to train a sufficient number of Triple P practitioners</u> to serve the community's population. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
3. The Community Implementation Team ensures that <u>practitioners recruited or selected to deliver Triple P receive Triple P training</u>.			
4. The Community Implementation Team <u>ensures that practitioners are trained in Triple P before delivering</u> Triple P interventions to children and families.			
5. The Community Implementation Team arranges trainings <u>through Triple P America</u>. *NOTE. This covers five Drivers Best Practices: integration of evidence- and skill-based approaches to adult learning; certified trainers; trainers receive ongoing coaching using data on their training practices; assessment of the intended delivery of Triple P training courses; uses pre- and post-training data to evaluate practitioner competence and confidence. For scale and index scores, raw scores should be multiplied by 5 (0, 5, 10).*		(5)	(10)
6. The Community Implementation Team ensures practitioners' full participation in Triple P training, from the initial training days through accreditation, <u>including practice providing Triple P to children and families during this period</u>.			
7. The Community Implementation Team ensures that <u>information about newly accredited Triple P practitioners' strengths and needs is used to inform their ongoing coaching supports</u>.			

Coaching (C)

Index Description: The community works closely with local agencies to ensure the use of best practices for coaching Triple P practitioners after their accreditation and as they deliver Triple P to children and families.

To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. The community has developed or adopted a <u>written plan that details coaching expectations</u> for Triple P practitioners following accreditation (e.g., where, when, with whom, why, methods). *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
2. <u>Coaches' adherence</u> to the community's written coaching plan <u>is regularly reviewed</u>. *NOTE. to receive a "2", C #1 must be scored "2."*			
3. The Community Implementation Team ensures that community <u>Triple P practitioners participate in Triple P coaching</u> following accreditation.			
4. The Community Implementation Team ensures that, among those providing coaching to Triple P practitioners, there is <u>fluency</u> in the key principles, components, skills, and abilities required to effectively deliver Triple P. *NOTE. "Fluency" can be obtained from a certified Triple P Trainer/Consultant or may be developed over an extended period of delivering Triple P across diverse families/contexts with support from a certified Triple P Trainer/Consultant.*			
5. The Community Implementation Team ensures that coaches make use of <u>observational data</u> (in person, audio, or video) as a primary source of information to support Triple P practitioner coaching after their accreditation.			
6. The Community Implementation Team ensures that coaches use <u>multiple sources of information to give feedback to community Triple P practitioners</u> (e.g., observational data, case or records reviews, Triple P session checklists, practitioner self-report, parent outcome measures, interviews with others who may know about the practitioner's Triple P delivery – e.g., parents, colleagues). *NOTE. only one source of information should be scored a "1".*			
7. The Community Implementation Team ensures the availability of <u>data about whether or not practitioners' abilities to deliver Triple P improve as a result of coaching</u>.			
8. The Community Implementation Team ensures that coaches are <u>provided feedback on their coaching from *multiple* sources of information</u>, such as practitioner satisfaction surveys, observational assessment of coaching, coach self-report, and practitioner fidelity data. *NOTE. only one source of information should be scored a "1".*			

Fidelity Assessment (FID)

Index Description: The community works closely with local agencies to ensure the use of best practices for assessing whether or not core Triple P components are delivered as intended by Triple P practitioners to children and families.

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. The community has a <u>documented plan to conduct a sufficient number of fidelity assessments</u> to ascertain whether or not the core components of Triple P are being delivered as intended across community Triple P practitioners. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
2. The Community Implementation Team ensures that coalition agencies have <u>practical and efficient Triple P fidelity assessment procedures</u> (i.e., not burdensome). *NOTE. fidelity assessment procedures may be obtained from Triple P America.*			
3. The Community Implementation Team ensures that <u>Triple P fidelity assessments predict intended short-term child and family outcomes</u>. *NOTE. this may be accomplished through interactions with Triple P America or community or state partners.*			
4. The Community Implementation Team ensures that Triple P practitioners have been <u>oriented</u> to Triple P fidelity assessment protocols and procedures.			
5. The Community Implementation Team ensures that Triple P fidelity assessment procedures are <u>systematically completed</u> for each Triple P practitioner.			
6. The Community Implementation Team ensures that fidelity assessments include <u>observational assessment of practitioners' skills and abilities</u> to competently deliver Triple P.			
7. The Community Implementation Team ensures that fidelity assessment procedures make use of <u>multiple sources of information</u> about practitioners' delivery of Triple P (e.g., quality assessments – third-party observational assessments; adherence measures – Triple P Session Checklists; dosage – number of sessions completed; caregiver engagement – caregiver completion of session activities and homework as intended). *NOTE. only one source of information should be scored a "0".*			
8. The Community Implementation Team ensures that Triple P practitioners are <u>recognized specifically for participating</u> in Triple P fidelity assessment procedures.			

Decision-Support Data System (DSDS)			
Index Description: The community works closely with local agencies to use best practices to gather, use, and share implementation and intervention data for decision-making to improve the implementation of Triple P across the community.			
To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. The Community Implementation Team ensures that coalition agencies have <u>practical and efficient Triple P data collection procedures</u> (i.e., built into practice routines, not burdensome). *NOTE. some data collection materials and procedures may be obtained from Triple P America.*			
2. The Community Implementation Team ensures the collection of data about the <u>recruitment and selection</u> of Triple P practitioners (i.e., number of Triple P practitioners selected, selection outcomes, and quality of recruitment and selection processes).			
3. The Community Implementation Team ensures the collection of data about the <u>training</u> of Triple P practitioners (i.e., number of Triple P practitioners trained, training outcomes, and quality of training processes).			
4. The Community Implementation Team ensures the collection of data about the <u>coaching</u> of Triple P practitioners (i.e., number of coaching sessions attended, coaching outcomes, and quality of coaching processes).			
5. The Community Implementation Team ensures the collection of data about Triple P practitioners' <u>fidelity</u> to the intended delivery of Triple P core components (i.e., number of fidelity assessments completed, fidelity outcomes, and quality of fidelity assessments).			
6. The Community Implementation Team ensures the collection of data about <u>Triple P service provision</u> (i.e., number of families served, caregiver satisfaction with Triple P interventions).			
7. The Community Implementation Team ensures the collection of data about <u>short-term child and/or family outcomes</u> related to Triple P (e.g., changes in parenting competence and confidence, changes in parent-child interactions, changes in child disruptive behavior). *NOTE. these examples are not requirements.*			
8. The Community Implementation Team ensures the collection of data about <u>long-term, child and/or family outcomes</u> related to Triple P (e.g., community-wide child abuse and neglect; community-wide school behavioral disruptions; community-wide child mental, emotional, or behavioral disorder diagnoses). *NOTE. these examples are not requirements; long-term, population-level child and/or family outcome data may be obtained from community or state partners.*			
9. The Community Implementation Team ensures that selected <u>long-term, child and/or family outcomes are socially important</u> (i.e., align with established community-wide goals). *NOTE. long-term, population-level child and/or family outcome data may be obtained from community or state partners.*			

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
10. The Community Implementation Team ensures that <u>Triple P data are reliable and valid</u>. *NOTE. this may be accomplished through interactions with Triple P America or community or state partners*.			
11. The community has <u>documented agreements</u> with each coalition agency implementing Triple P <u>to share common Triple P data</u> (e.g., a Memorandum of Understanding or Agreement). *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
12. At least quarterly, the Community Implementation Team provides <u>feedback to coalition agencies on their agency-specific Triple P data</u>.			
13. The Community Implementation Team ensures that <u>agency-specific data are being used among agencies</u> for decision-making to improve their implementation of Triple P.			
14. At least quarterly, the Community Implementation Team <u>reports community-wide Triple P data to the Community Leadership Team</u>.			
15. At least quarterly, the <u>Community Leadership Team provides feedback on community-wide Triple P data to the Community Implementation Team</u>.			
16. The Community Implementation Team ensures that <u>community-wide Triple P data are being used for decision-making</u> to improve Triple P delivery, implementation, and scale-up across the community coalition.			
17. At least quarterly, the <u>Community Implementation Team reports community-wide Triple P data to community stakeholders and appropriate external partners</u> (e.g., funders, Triple P America, community and state policymakers).			

Facilitative Administration (FAC)

Index Description: The community uses best practices to solicit, document, and use information about Community and agency policy and practice facilitators and barriers to improve the implementation of Triple P across the community.

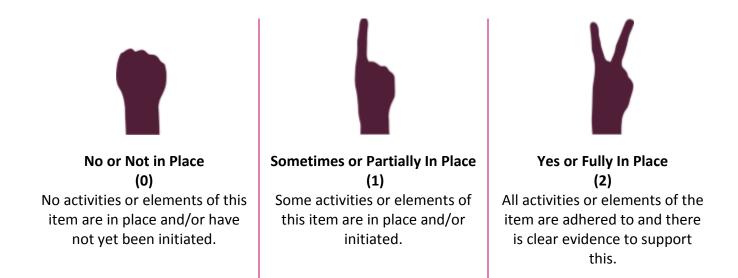| To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
1. Community coalition <u>policies, plans, and practices reflect</u> evidence-informed, active approaches to implementing and scaling-up <u>Triple P</u> (e.g., practitioner recruitment and selection, training, coaching, and fidelity assessment; decision-support data systems; linked leadership and implementation teams; family access to Triple P).			
2. The Community Implementation Team <u>employs usability testing strategies</u> (i.e., plan-do-study-act cycles using manageable slices of the community Triple P delivery system) to incrementally test and adjust the scale-up of Triple P across the community.			
3. The community coalition systematically solicits information about <u>how well coalition policies, plans, and practices support the implementation and scale-up</u> of Triple P (e.g., availability of Triple P training, data reporting requirements, community networking). *NOTE. Feedback may come from any number or variety of sources.*			
4. The community systematically solicits information from coalition agencies about <u>agency policy and practice facilitators and barriers</u> to the successful implementation of Triple P (e.g., adequate time or resources to deliver Triple P; adequate time or resources to participate in Triple P implementation support activities – e.g., coaching, data completion; alignment of Triple P with other agency activities).			
5. The Community Implementation Team systematically <u>documents common themes</u> in the information gathered about policy and practice facilitators and barriers to the implementation and scale-up of Triple P. *NOTE. Occasionally or partial documentation should be scored as a "1"; no documentation should be scored as a "0".*			
6. At least quarterly, the Community Implementation Team <u>provides feedback to each coalition agency</u> on the information the agency provided.			
7. The Community Implementation Team ensures that <u>agencies are successfully addressing internal agency policy and practice barriers</u> to the implementation of Triple P.			
8. At least quarterly, the Community Implementation Team <u>communicates to the Community Leadership Team</u> common themes in the information gathered.			

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
9. At least quarterly, the <u>Community Leadership Team provides feedback to the Community Implementation Team</u> on common themes in the information gathered.			
10. The Community Implementation Team ensures that common themes in the information gathered are being <u>used to strengthen Community coalition policies, plans, and practices</u> to support the community-wide implementation and scale-up of Triple P.			
11. At least quarterly, the Community Implementation Team <u>communicates</u> common themes in the information gathered <u>to external partners</u> (e.g., funders, Triple P America, community and state policymakers).			

Systems Intervention (SI)			
Index Description: The community works closely with local agencies and other key partners to solicit, document, and use information about Triple P successes and larger systems needs to improve and sustain the implementation and scale-up of Triple P across the community. Additionally, the community facilitates key Triple P system activities, including the Triple P Stay Positive media campaign and community referral networks.			
To what extent are the following structures or practices in place?	*No or Not In Place (0)*	*Sometimes or Partially In Place (1)*	*Yes or Fully In Place (2)*
1. The community coalition has integrated the implementation and scale-up of Triple P within <u>larger community initiatives or strategic plans</u> (e.g., community wellbeing initiatives or improvement goals).			
2. The community coalition systematically solicits information about <u>larger system needs</u> related to the implementation and scale-up of Triple P that may be <u>outside of the coalition's immediate influence or direct control</u> (e.g., alignment with other community initiatives, policy barriers, gaps in resources). *NOTE. Feedback may come from any number or variety of sources.*			
3. The community systematically solicits information <u>from coalition agencies</u> about larger system needs related to the implementation Triple P that may be <u>outside of their immediate influence or direct control</u> (e.g., community awareness of Triple P, gaps in resources, referral networks).			
4. The community coalition systematically solicits information about <u>Triple P successes</u> in the community. *NOTE. Feedback may come from any number or variety of sources.*			
5. As they are identified, the Community Implementation Team <u>documents</u> Triple P successes and/or commonly identified system needs. *NOTE. Occasionally or partial documentation should be scored as a "1"; no documentation should be scored as a "0".*			
6. At least quarterly, the Community Implementation Team <u>provides feedback to each coalition agency</u> on agency-specific Triple P successes and/or identified system needs.			
7. At least quarterly, the Community Implementation Team <u>communicates to the Community Leadership Team</u> Triple P successes and/or commonly identified system needs.			
8. At least quarterly, the <u>Community Leadership Team provides feedback to the Community Implementation Team</u> on Triple P successes and/or commonly identified system needs.			
9. The community <u>works with appropriate partners</u> at various systems levels (e.g. state funders or policymakers, health insurance companies, Triple P America) <u>to address larger service system needs</u> related to Triple P.			
10. At least quarterly, the community's <u>Triple P successes are shared with appropriate stakeholders, partners, champions, and opinion leaders</u> in the larger statewide prevention system.			

To what extent are the following structures or practices in place?	No or Not In Place (0)	Sometimes or Partially In Place (1)	Yes or Fully In Place (2)
11. The community ensures that <u>sufficient Triple P service materials and resources</u> (e.g., tip sheets, parent workbooks, DVDs) are provided to active Triple P practitioners in the community.			
12. The community has <u>documented a plan to expand the reach of or access to Triple P</u> across the community. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
13. The community is implementing a <u>*multifaceted* Triple P STAY POSITIVE media campaign</u> (e.g., awareness materials – brochures/flyers/posters; TIPPAPERS; Stay Positive website; billboards; TV/Radio ads). *NOTE. Only one strategy should be scored a "1".*			
14. The community has <u>documented a plan to link multiple Triple P interventions</u> (e.g. through systematic client referrals) to avoid silos and optimize programming. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			
15. The community has <u>documented a sustainability plan</u> for the necessary financial and programmatic resources needed to support the ongoing implementation of Triple P beyond the community service grant. *NOTE. Undocumented or incomplete plans should be scored as a "1".*			

Appendix A. Voting & Modified Consensus

Simultaneous Public Polling is a voting process intended to equalize all voices in the room on the initial vote, and prevent participants from influencing each other's' initial vote. The facilitator will ask your team about a number of items related to your capacity and practices to support the implementation and scale-up of Triple P. There are 110 items across 11 separate indices.

Your role is to individually decide if the item mentioned should be scored a "0," "fully in place", "1," "partially in place", or "2", "not in place" at the community or coalition level. When the facilitator says "one…two…three... vote", hold up the number of fingers that correspond with your answer:

No or Not in Place (0)	**Sometimes or Partially In Place (1)**	**Yes or Fully In Place (2)**
No activities or elements of this item are in place and/or have not yet been initiated.	Some activities or elements of this item are in place and/or initiated.	All activities or elements of the item are adhered to and there is clear evidence to support this.

If everyone voting is in agreement, then the facilitator will move on to the next item. If there are different scores within the group, then the facilitator will ask that your team talk about it and try to come to some form of **modified consensus**, with all participants able to support a single group score, even if there remains some individual disagreements.