



### ANNUAL REPORT GUIDELINES 2019-2020

Below is the updated Annual Report Guidelines from The Office of Addiction Services and Supports (OASAS), Division of Prevention and Problem Gambling Services, for the 2019-2020 report period. This guidance was created to address the interruption in the delivery of prevention services as a result of the NY PAUSE response to the COVID-19 pandemic. The annual report will include outcome findings of Evidence Based Practice (EBP) and non-EBP programming completed **July 1, 2019 - Feb 29, 2020**.

For prevention services delivered by March 1, 2020 and June 30, 2020 OASAS a separate online survey has been developed to capture prevention service delivery during this time period. This online survey is designed to capture modifications to service delivery and innovative practices. This survey is mandatory.

**Due date: Both the Annual Report and the On-Line Survey will be due on November 1, 2020.**

- The completed annual report should be emailed as an attachment to: The Division of Prevention and Problem Gambling Services at [prevention@oasas.ny.gov](mailto:prevention@oasas.ny.gov). A copy of the report also should be emailed to your OASAS Regional Office (RO) Program Manager, as well as to your designated Local Government Unit (LGU) representative.
- Use the electronic file name below when submitting:
  - [InsertYourProviderNameHere]\_AnnualReport\_2020.doc
- The evaluation of services delivered should include at least a pre and posttest design using the same survey at each time period. More rigorous evaluation designs (i.e. experimental design with control or comparison group) are encouraged, but not required.
- Include in the report the evaluation results for at-least 25% of EBPs and 25% of non-EBPs delivered by the entire program (not each PRU) completed between July 1, 2019 - Feb 29, 2020. Refer to how the programming was entered into the workplan to determine the number of EBPs and non-EBPs.
  - **Example:** If 12 EBPs were delivered and completed by your program, report on the pre-post results of at least 3 of the 12 programs. If eight (8) non-EBPs were delivered during the time period, the report should include evaluation findings from at least 2 of 8 the non-EBPs. If you did not complete the full sessions of an EBP or a non-EBP because of the COVID-19 disruption, then they will not be included in your count for the annual report.
- Questions regarding the Annual Report should be directed to: [prevention@oasas.ny.gov](mailto:prevention@oasas.ny.gov)

## ANNUAL REPORT TEMPLATE

- Adhere to the report template below with each section clearly delineated in the report by subheadings. All reports should:
  - Include a cover page, page numbers, and appendices;
  - Be no longer than 10 pages (not including the title page or appendices).

### **Cover page**

- Include:
  - Agency name;
  - Prevention plan year (PPY);
  - Date submitted;
  - Names of the Director and/or the person(s) who prepared the report with email addresses.

### **Current Needs Assessment** (Approximately 1 page)

- Use data to describe the needs of the local community with regards to substance misuse and related problems. The reader should get a clear understanding of the what, where, when, why, and how of substance use in your community.
- Include data and sources within the last 3 years and be sure to mention:
  - Consumption data;
  - Consequences data;
  - Risk and protective factors associated with substance use. The risk and protective factors associated with substance (mis)use as stated in the 2014 Prevention Guidelines.

### **Prevention Program(s)** (Approximately ½ page)

- Identify and briefly summarize the prevention programs (EBPs and non-EBPs) that were evaluated;
- The summary should describe how the risk and protective factors identified in the Needs Assessment are aligned with the programs selected.
  - **Example:** if the needs assessment data demonstrate a low perception of harm, then the programmatic content should include implementation of a program to modify that perception;
- Describe how fidelity was monitored.

### **Evaluation Methods** (Approximately 1 page)

- Describe the [evaluation method](#) (i.e., pre-post design; quasi-experimental design using a comparison group, etc.);
- Describe the survey(s) used, include content covered, number of items, format of items (i.e., true/false; likert scale; yes/no, etc.);
- Briefly explain data collection procedures. The description should include the method for survey administration (i.e., surveys read out loud; Paper/pencil; Online)
- Provide an explanation and description of the data analysis.

## **Results** (Approximately 6 pages)

- Include participant information and demographics (# of participants, # surveys collected; gender; age; etc.);
- Use clearly labeled Tables and Figures (i.e., graphs or charts) and describe concisely what is contained or shown;
- Focus on presenting data and findings related to the risk and protective factors that are listed in the 2014 Prevention Guidelines, or on substance use consumption;
- The meaning or interpretation of data should not be included in this section.

## **Discussion** (Approximately 1 page)

- Summarize main findings;
- Interpret the positive, negative, or no change results. Describe possible reasons for those results.

## **Conclusion** (Approximately ½ page)

- Summarize the central point, reinforce the value and implications of the results.
- Describe how the findings will impact your future workplan and delivery of prevention services.

### **Example:**

- What risk and protective factors were impacted?
- What did you learn in general about your programming and evaluation design?
- How are you going to use those findings to plan for next year?

## **Appendices**

- **Measures.** Include copies of survey instruments used.