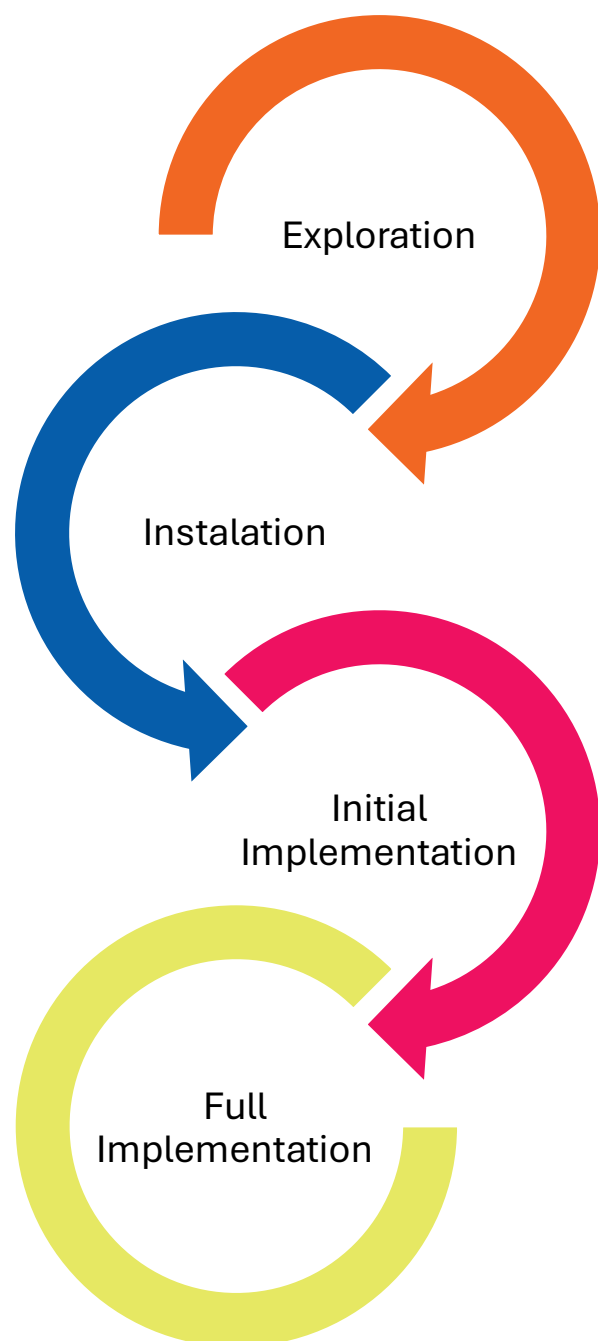


PREVENTION PROGRAMS IMPLEMENTATION GUIDE



Implementation for impact is the goal for all organization when implementing evidence-based and evidence informed programs.

This guide outlines key considerations for organizations exploring the implementation of the following programs:

- Circle of Parents®
- Incredible Years®
- Triple P Level 3 Discussion®
- Triple P Level 3 Primary Care®
- Triple P Level 4 Group®
- Triple P Level 4 Standard®

Organizations can use the included information to guide team-level readiness discussions as well as to explore how to ensure that organizational structures are in place to support high quality implementation and ensure model fidelity.

Finally, this guide outlines how staff from Positive Childhood Alliance North Carolina (PCANC) is positioned to support organizations as they enhance their operational policies and processes in support of evidence-based / evidence-informed programming. This includes options for organization-level and one-to-one coaching support for organizational leaders and practitioners.



INCREASING FAMILIES' PROTECTIVE FACTORS FOR LASTING IMPACT

Organizations across North Carolina are working hard to support children and families through the availability of services and programs uniquely designed to achieve positive outcomes such as increased parental resilience, greater knowledge of parenting and child development, improved social and emotional competence in children, stronger social connection, and greater access to concrete supports. Together, these core goals represent the five protective factors for strengthening families.

Through the implementation of highly effective programs and services, communities across the state are assembling coordinated ecosystems of support for families so that professionals working with children and families can support caregivers, promote positive childhoods and protect children from adverse childhood experiences, including maltreatment.

IMPLEMENTATION CAPACITY

What does an *organization* need to have in place (e.g., resources, processes, procedures, etc.) to support successful implementation of evidence-based or evidence-informed programs? This is the *crucial question* for organizational leaders and practitioners alike.

There are eight “drivers” of implementation that set the context in which a new program or service is

provided. These drivers represent organizational and individual actions / activities that are necessary to support successful, high quality program implementation. While drivers are characterized as either focusing on individual ability or organizational practice; to achieve consistent use of the intervention and improve outcomes for participants, these drivers must be integrated and used in complementary practice.

Positive Childhood Alliance North Carolina (PCANC) provides technical assistance to agencies as they explore, prepare for, and implement evidence-based and evidence-informed programs and practices. Through this highly individualized approach, organizational leaders and staff have access to expertise and support as they navigate drivers and install sustainable practices leading to improved program outcomes.



Central to program success is the ability for an organization to assemble a ***team*** of leaders and practitioners that are focused on incorporating the “language” of the program into the policies, processes, and procedures in the organization. Collectively, and with the support of their PCANC coach, this implementation team is responsible for the following organization-level program coordination activities:

<ul style="list-style-type: none">• Market program and build relationships with community partners and referral sources• Create promotional materials• Recruit and conduct intakes for potential group members• Coordinate paid childcare providers/volunteers• Purchase supplies and incentives• Promote program at community engagements• Solicit and coordinate donations• Reserve meeting location• Plan and coordinate meals/snacks	<ul style="list-style-type: none">• Develop and support parent leaders• Confirm arrangements for transportation, as needed• Make referrals for other services, as needed• Monitor and ensure compliance with funding requirements and manage program budget• Oversee the collection of process and outcome evaluation data• Gather community resources to share• Complete and review paperwork and reports• Organize activities and speakers, as needed
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Organizational leadership should ensure their availability to participate in **once-per semester** planning calls with PCANC. These calls will support exploration of organizational processes and policies that, in turn, develop capacity for full implementation of the chosen model(s) and the *development of reflective practice* related to the overall implementation strategy within the agency. Additional time models for Supervisor/Coordinator and Facilitator engagement in PCANC support are outlined in the following pages. For further consideration, PCANC has compiled model-specific implementation guidelines for each of the models supported through NC DSS funding.

Finally, as you continue to plan your implementation practice, please see the following exploration questions in the next section. These are best reviewed and considered along with your full implementation team. Take time to discuss and ensure that you have a plan for success in the readiness item.

EXPLORATION QUESTIONS FOR ORGANIZATIONS

With your entire implementation team, review each exploration/readiness item and assign a status as well as assign ownership around this item. Finally, as a group define any needed resources to support overall success (high quality implementation).

EXPLORATION / READINESS ITEM	STATUS	OWNER / TEAM MEMBER	RESOURCES FOR SUCCESS
Model Selection: Our organization has a clear understanding of community priorities and needs; and has selected the prevention model(s) that align with these priorities and needs.	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		
Model Selection: Our organization receives, or has access to, a regular flow of referrals for the population served by selected program model(s).	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		
Staff Selection: Our organization has selected staff members for core roles (e.g. Supervisor, Coordinator, Facilitator, Parent Leader, etc.) with clarity regarding accountability and expectations.	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		
Model Selection: Leadership within our organization actively supports the selected model(s) and has explicitly allocated the necessary time and materials for the implementation team (Coordinator, Facilitators, Parent Leaders, etc.).	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		

EXPLORATION / READINESS ITEM	STATUS	OWNER / TEAM MEMBER	RESOURCES FOR SUCCESS
Staff Training: Organization has ensured that staff have access to model-specific training before staff attempt to, or is required to, use selected model(s). Where possible, staff are supported in achieving accreditation in selected model(s) through model purveyor training and accreditation processes.	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		
Organizational Support: Leadership has considered any policies or procedures that must be adjusted to support the work of practitioners and others to implement the selected model(s).	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		
Organizational Support: Organization leadership and staff understand and can articulate how the selected model(s) fit with other existing organizational initiatives and programs. It is clear how the new model(s) will, alongside other initiatives, achieve desired outcomes for the target population.	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		
Organizational Support: Organization has the capacity to collect and use data to inform operations and improvement of the selected model(s). This includes selection and monitoring key performance indicators (e.g., recruitment, retention, adherence, fidelity and participant feedback)	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		
Organizational Support: Organization has internal or external access to coaching for all implementation team members related to the selected model(s). Leadership values coaching and ensures adequate time is allotted for staff member engagement in coaching practice.	<ul style="list-style-type: none"> ○ Not yet in place ○ In progress ○ In Place 		

The table below breaks down staff time for one Circle/IY/Triple P coordinator or supervisor participating in support for one semester (half a year, 2 semesters per year).

Core Support Activities	
Activity	Estimated Time
Assessments & Beginning Goal formation / mid-year goal check-in	1 ½ hours
Coaching Call to plan for observation (live or taped sessions)	1 hour
Review and reflect re. observation with PCANC coach to inform supervision of staff and enhance internal reflective practice.	2 hours X number of facilitators/groups being observed
Incorporate reflective practice related to observation within supervision of staff	2 hour X number of facilitators/groups being recorded
Additional coaching sessions to address capacity goals or other needs	2 hours
Total Hours for Core Activities	8 ½ hours
Additional Supports	
<p>The rows above outline the <i>minimum</i> number of hours that coordinators should plan for engaging in support for a given semester. Many coordinators may also benefit from additional support. Examples are listed below.</p> <p>Although every coordinator may not need to participate in all activities, we encourage agencies to also consider these additional activities when planning for staff time.</p> <ul style="list-style-type: none"> • <i>Coaching sessions before a series begins. These might also include support around recruitment and retention.</i> • <i>Additional coaching sessions to support implementation (e.g., developing, refining, or implementing fidelity assessment plans, staff selection plans, etc.)</i> • <i>Participation in Small Group Discussions or Professional Development Topics</i> • <i>Additional time to participate in the video review process with facilitators (e.g., more time to review video and reflect, additional check-in with coach about the process, etc.)</i> 	Up to 8 additional hours depending on needs

The table below breaks down staff time for one facilitator participating in support for one semester (half a year, 2 semesters per year).

Core Support Activities

Note: We encourage agencies to check with funders about their requirements for participation in core activities.

Assessments and beginning goal formation / mid-year goal check-in	1 hour
Coaching call to plan for observation	1 hour
Facilitator reviews and reflects on their session in preparation for coaching session	4 hours
Coaching sessions to review feedback and identify areas of strength, goals, etc.	2 hours
Coaching sessions to review feedback and identify areas of strength, goals, etc.	2 hours
Additional Coaching Session (as needed)	1 hour
Small Group Discussion / PDO (as needed)	1 hour
Total Hours for Core Activities	12 hours

Additional Supports

The rows above outline the *minimum* number of hours that facilitators should plan for engaging in support for a given semester. Many facilitators, both new and experienced, may also benefit from additional support. Examples are listed below. Although every facilitator may not need to participate in all activities, we encourage agencies to also consider these additional activities when planning for staff time.

- *Coaching sessions before a series begins. These might also include support around recruitment and retention.*
- *Additional coaching sessions during or after a series for more support and or practice*
- *Participation in Small Group Discussions or Professional Development Topics*
- *Additional time for review of observation or extra time to reflect and make notes.*
- *Additional time for feedback and practice (e.g., multiple facilitators participating, multiple goals being addressed, or extra time for more practice)*

Up to 9 additional hours depending on needs

NORTH CAROLINA IMPLEMENTATION GUIDELINES

CIRCLE OF PARENTS® PROGRAM

These guidelines reflect the components necessary for effective implementation with program fidelity. Positive Childhood Alliance North Carolina (PCANC) provides support for high quality implementation of Circle of Parents® through its Implementation Support Network.

TARGET POPULATION

Circle of Parents is a parent-led, mutual self-help support group open to anyone in a caregiving role. Circle of Parents groups strive to address the five protective factors which include: resilience, social connections, concrete support in times of need, knowledge of parenting and child development, and social and emotional competence. It is often beneficial for recruitment and retention purposes that Circle of Parents groups have an identified target population (i.e., single parents, young parents, grandparents raising grandchildren, etc.). Providers should also ensure that their target population aligns with any funder requirements.

STAFFING

Implementation of Circle of Parents required one trained facilitator and at least one main parent leader for each active group. Organizations should ensure that they have adequate resources to support stipends / hourly compensation for parent leaders.

FACILITATORS

- Attend the NC Circle of Parents Core Training prior to implementation.
- On an ongoing basis, identify, develop, and support at least one main parent leader for each group.
- Encourage group members to build shared ownership within the group by taking on helping roles based on their strengths and interests.
- Support families in using positive discipline strategies and developing new skills.

PARENT LEADERS

- Attend the NC Circle of Parents Core Training (prior to facilitating when possible).
- While maintaining group membership, facilitate and manage group discussions and encourage input and ownership from all participants using a strength-based approach.

SUPERVISOR

- Provide regular, ongoing one-on-one supervision for facilitators.
- Organize regular meetings with group facilitators, parent leaders, and children's program staff to plan for upcoming Circle of Parents groups and to discuss successes and challenges.
- Support facilitators in the implementation of Circle of Parents and the continual development of parent leaders.
- Encourage facilitators and parent leaders to plan for the logistics of their groups on a weekly basis.
- Conduct at least two fidelity assessment observations per year for each facilitator to ensure model fidelity and provide strength-based feedback based on these observations.
- Encourage and track facilitators time and engagement in coaching and PCANC implementation support, including video reviews.

BEST PRACTICES

- Weekly group meetings are parent-owned and parent-led.
- Weekly discussion topics, speakers, and activities are identified by the group members, with at least

half of the meeting dedicated to open discussion among parents.

- Groups have a consistent structure with opening and closing statements or rituals, group rules, and agendas defined by group members.
- Groups are open, free, confidential, ongoing, and typically last from 1 ½ to 2 hours.
- Facilitators and group members share community resources that support healthy families and positive parenting.
- Support is encouraged inside and outside group meetings.
- Priority should be given to activities, speakers, and discussions that relate to the five protective factors.

CHILDREN'S GROUP

- Each parent group should have, or be working towards, a free, structured, parallel children's group, except where the location or composition of the parent group precludes it (i.e. groups in schools, parents of teens, etc.).
- Link themes between parent group and children's group and include children in developing processes, when possible.
- The goal of the children's group is to provide developmentally appropriate, skill-building activities that will increase children's confidence and self-worth while providing fun and enjoyment.
- Children's group facilitators, staff and volunteers should be knowledgeable of child development (typical and atypical) and utilize positive behavior management practices.

CHILDCARE

- Quality childcare is acceptable if a structured children's group is not possible.
- Agencies will continually assess appropriate child to caregiver ratios to ensure safety and staff availability.

GROUP SIZE AND RECRUITMENT

- Although the Circle model does not define a minimum or maximum group size, many agencies find that groups with between 5 and 12 caregivers are ideal. Group size should be continually assessed to ensure families can adequately engage in the mutual self-help group model.
- Each agency is encouraged to adhere to their funder's requirements for group size.
- When possible, talk with prospective families prior to their first group meeting to determine goodness of fit. This includes discussing expectations and barriers to attendance, confirming family members participating, and sharing meeting logistics.
- Agencies should enroll custodial caregivers as well as other adults in a parenting role.
- Recruitment should be ongoing, intentional, and target population driven.
- Incentives are encouraged to support recruitment and retention.

LOCATION

- Groups should be held in a meeting site that is safe, convenient, comfortable, and secured for at least a year.
- The meeting location should minimize travel barriers for families.
- Agencies should select a meeting location that provides separate spaces for parent group and children's group/childcare.

PROGRAM EVALUATION

Network agencies participate in an annual statewide evaluation process and receive agency level and statewide reports as part of this process. Agencies are encouraged to collect and use both process and outcome evaluation data to inform their work.

NORTH CAROLINA IMPLEMENTATION GUIDELINES

THE INCREDIBLE YEARS® BASIC PARENT PROGRAM

Positive Childhood Alliance North Carolina (PCANC) provides support for high quality implementation of The Incredible Years Basic Parent Program. These guidelines reflect the components necessary for effective implementation with program fidelity. For more complete information on The Incredible Years and model fidelity please refer to <http://www.incredibleyears.com/>.

TARGET POPULATION

IY BASIC programs are designed for a target audience of families experiencing challenges with their children's behavior. Custodial caregivers and other adults who help parent the identified child are appropriate group participants. IY BASIC Preschool program serves adult caregivers of children ages 3-6; IY BASIC School Age program serves adult caregivers of children ages 6-12.

Providers should also ensure that their target population aligns with any funder requirements.

STAFFING

COORDINATORS AND/OR SUPERVISORS

- Provide regular, ongoing one-on-one supervision for facilitators.
- Conduct at least two fidelity assessment observations per year, for each facilitator, to ensure model fidelity and provide strength-based feedback based on these observations.
- Provide opportunities for peer support within your team that could include the review of video clips and discussion of group dynamics.
- Ensure facilitators' weekly planning time for curriculum review and session delivery.
- Reflect on and ensure that facilitators' time and engagement in coaching and implementation support (both internally and from PCANC) is supported with opportunities for observation of practice built into internal process and procedure.

FACILITATORS

- Attend IY facilitator training prior to implementation.
- Each group requires two trained facilitators. A trained back-up facilitator is recommended.
- Commit to implementing the manualized curriculum as intended.
- Support caregivers in using positive discipline strategies and developing new skills.
- Review curriculum and plan before each session, individually and with co-facilitator.

LOCATION & CHILDCARE

- Organizations should have child safeguarding policies in place and ensure adherence to safety practices.
- Agencies should select a meeting location that provides a space for the group as well as childcare.
- The meeting location should minimize travel barriers for families. Transportation should be provided for families if needed.
- Quality childcare should be provided during group, with attention given to child to caregiver ratio.

GROUP DURATION AND DOSAGE

- IY Preschool is a minimum of 14 weeks of content; IY School Age is a minimum of 12-14 weeks of content; **16 weeks of implementation is required** for both programs to allow for outcomes surveys and graduation.
- Dosage is one, two-hour session, per week. Providing two sessions in one week should be avoided

because caregivers need time to practice new skills.

- Program content should be covered as intended and presented in the same order as outlined in the curriculum.

GROUP SIZE, RECRUITMENT, ENROLLMENT, & COMPLETION

GROUP SIZE

- Optimal group size is 8 to 12 adults with a range of 6-14 participants recommended by the model purveyor.
- We encourage all groups to begin with at least 8 enrolled participants.

RECRUITMENT & ENROLLMENT

- Recruitment should be an ongoing process. At a minimum, agencies should plan for at least 6 weeks of recruitment and preparation prior to each series start date.
- Providers should speak with each prospective family prior to a series to determine goodness of fit, review goals and expectations, discuss barriers to attendance, and confirm family members who will be participating.
- Agencies should enroll custodial caregivers as well as other adults in a parenting role.
- No new participants should join a series after content-based sessions have begun.

COMPLETION

- Participants should be encouraged to attend as many of the 16 sessions as possible to graduate.
- Providers should check with their funders regarding other specific requirements for completion.
- A make-up session should be offered within one week of the missed session to support a caregiver in returning to group after an absence.
- Make-up sessions should be offered in person or via a virtual platform. Make-up sessions by phone should be avoided.
- Incentives are encouraged throughout the series to support participant retention.

PROGRAM EVALUATION

Network agencies participate in a statewide evaluation process and receive agency level and statewide reports as part of this process. Agencies are encouraged to use both process and outcome evaluation data to inform their work.

NORTH CAROLINA IMPLEMENTATION GUIDELINES

TRIPLE P LEVEL 3 Discussion Group

Positive Childhood Alliance North Carolina (PCANC) provides support for quality implementation of Triple P Level 3 DISCUSSION GROUP. These guidelines reflect the components necessary for effective implementation with program fidelity. For more complete information on Triple P Level 3 DISCUSSION GROUP model fidelity please refer to <https://www.triplep-parenting.net/provider>.

TARGET POPULATION

Triple P Level 3 Discussion Group designed for parents and caregivers with children up to 12 years old experiencing mild to moderate levels of behavioral concerns. Families who are a good fit may engage in one or more of the four sessions focused on common behavior concerns (two hour small-group format discussions). Providers should also ensure that their target population aligns with any funder requirements.

STAFFING

Coordinators and/or Supervisors

- Provide regular, ongoing one-on-one supervision for practitioners.
- Conduct at least two fidelity assessment observations per year, for each practitioner, to ensure model fidelity and provide strength-based feedback based on these observations.
- Provide opportunities for peer support within your team that could include the review of video clips and discussion of family needs.
- Ensure practitioners' weekly planning time for curriculum review and session delivery.
- Encourage and track practitioners' time and engagement in coaching and implementation support from PCANC, including opportunities for observation (via video) as available.

PRACTITIONERS

- Attend Triple P Level 3 Discussion Group training prior to implementation.
- Commit to implementing the manualized curriculum as intended.
- Support caregivers in using positive discipline strategies and developing new skills.
- Review curriculum and plan before each session.
- Administer and review assessment tools and discuss feedback with families.

LOCATION & CHILDCARE

- Sessions may take place at an agency, community location or school setting.
- The meeting location should minimize travel barriers for families, and transportation should be provided for families if needed.
- Agencies should plan for providing quality childcare depending on the location selected.

DURATION

- Triple P Level 3 Discussion Group consists of 1-4 sessions (2 hours each) provided in person with optional follow-up either in person or over the phone. Topics are allowed to be offered as stand-alone discussion group or as a series of discussion groups.

ENROLLMENT & COMPLETION

- Recruitment should be viewed as an ongoing process.
- Providers should speak with each prospective family prior to a series to determine goodness of fit, review goals and expectations, discuss barriers to attendance, and confirm family members who will be participating.

NORTH CAROLINA IMPLEMENTATION GUIDELINES

TRIPLE P LEVEL 3 PRIMARY CARE

Positive Childhood Alliance North Carolina (PCANC) provides support for quality implementation of Triple P Level 3 Primary Care. These guidelines reflect the components necessary for effective implementation with program fidelity. For more complete information on Triple P Level 3 Primary Care model fidelity please refer to <https://www.triplep-parenting.net/provider>.

TARGET POPULATION

Triple P Level 3 Primary Care designed for parents and caregivers with children up to 12 years old experiencing mild to moderate levels of behavioral concerns. Families who are a good fit may engage in brief individual sessions where they set their personal goals, develop parenting plans and learn to use positive parenting strategies to encourage children to learn the skills and competencies they need. Providers should also ensure that their target population aligns with any funder requirements.

STAFFING

COORDINATORS AND/OR SUPERVISORS

- Provide regular, ongoing one-on-one supervision for practitioners.
- Conduct at least two fidelity assessment observations per year, for each practitioner, to ensure model fidelity and provide strength-based feedback based on these observations.
- Provide opportunities for peer support within your team that could include the review of video clips and discussion of family needs.
- Ensure practitioners' weekly planning time for curriculum review and session delivery.
- Encourage and track practitioners' time and engagement in coaching and implementation support from PCANC, including opportunities for observation (via video or in-person) as available.

PRACTITIONERS

- Attend Triple P Level 3 Primary Care training prior to implementation.
- Commit to implementing the manualized curriculum as intended.
- Support caregivers in using positive discipline strategies and developing new skills.
- Review curriculum and plan before each session.
- Administer and review assessment tools and discuss feedback with families.

LOCATION & CHILDCARE

- Sessions may take place at a medical office setting or other setting as determined by the practitioner and family.
- The meeting location should minimize travel barriers for families, and transportation should be provided for families if needed.

DURATION

- Triple P Level 3 Primary Care consists of 3-4 brief (15-30 minute) weekly sessions done in person, over the phone or as a combination of both. Families usually complete this series in 4-6 weeks.

ENROLLMENT & COMPLETION

- Recruitment should be viewed as an ongoing process.
- Providers should speak with each prospective family prior to a series to determine goodness of fit, review goals and expectations, discuss barriers to attendance, and confirm family members who will be participating.

NORTH CAROLINA IMPLEMENTATION GUIDELINES

TRIPLE P LEVEL 4 GROUP

Positive Childhood Alliance North Carolina (PCANC) provides support for high quality implementation of Triple P Level 4 Group. These guidelines reflect the components necessary for effective implementation with program fidelity. For more complete information on Triple P Level 4 Group model fidelity please refer to <https://www.triplep-parenting.net/provider>.

TARGET POPULATION

Triple P Level 4 Group is designed for parents and caregivers with children up to 12 years old. These parents may have concerns about their child's behavior or may simply be interested in promoting their child's development while preventing behavior problems from developing. Parents and caregivers need to be able to commit to all eight sessions (five two-hour group sessions and three 30-minute individual home visit or telephone support sessions).

Providers should also ensure that their target population aligns with any funder requirements.

STAFFING

COORDINATORS AND/OR SUPERVISORS

- Provide regular, ongoing one-on-one supervision for practitioners.
- Conduct at least two fidelity assessment observations per year, for each practitioner, to ensure model fidelity and provide strength-based feedback based on these observations.
- Provide opportunities for peer support within your team that could include the review of video clips and discussion of group dynamics.
- Encourage practitioners' weekly planning time for curriculum review and session delivery.
- Encourage and track practitioners' time and engagement in coaching and implementation support from PCANC, including video reviews.
- Ensure back-up support is available to a practitioner during group in case extra support is needed.

PRACTITIONERS

- Attend Triple P Level 4 Group training prior to implementation.
- Commit to implementing the manualized curriculum as intended.
- Support caregivers in using positive discipline strategies and developing new skills.
- Review curriculum and plan before each session.
- Administer and review assessment tools and discuss feedback with families.

LOCATION & CHILDCARE

- Sessions may take place at an agency, community location, or within a family's home.
- The meeting location should minimize travel barriers for families, and transportation support should be provided if needed.
- Agencies should plan for providing quality childcare depending on the location selected. When childcare is provided, organizations should have strong child safeguarding policies and practices in place.

DURATION AND DOSAGE

- Triple P Level 4 Group consists of 8 sessions. This includes 5 group sessions and 3 individual telephone or home visit support sessions for each family. Additional sessions to allow more time for assessment and/or practice may also be helpful.
- Dosage is generally one session per week, with the 3 practice sessions scheduled at a frequency that aligns with each family's needs.
- Each group session is two hours. Individual support sessions are 15 to 30 minutes.
- Program content should be delivered as intended and presented in the same order as outlined in the curriculum.

RECRUITMENT ENROLLMENT AND COMPLETION

RECRUITMENT AND ENROLLMENT

- Recruitment should be viewed as an ongoing process.
- Providers should speak with each prospective family prior to a series to determine goodness of fit, review goals and expectations, discuss barriers to attendance, and confirm family members who will be participating.
- Agencies should enroll custodial caregivers as well as other adults in a parenting role.

COMPLETION

- Participants should be encouraged to complete all 8 sessions.
- Providers should check with their funders regarding other specific requirements for completion.
- Incentives are encouraged throughout the series to support participant retention.

PROGRAM EVALUATION

Network agencies participate in a statewide evaluation process and receive agency level and statewide reports as part of this process. Agencies are encouraged to use both process and outcome evaluation data to inform their work.

NORTH CAROLINA IMPLEMENTATION GUIDELINES

TRIPLE P LEVEL 4 STANDARD

Positive Childhood Alliance North Carolina (PCANC) provides support for quality implementation of Triple P Level 4 Standard. These guidelines reflect the components necessary for effective implementation with program fidelity. For more complete information on Triple P Level 4 Standard model fidelity please refer to <https://www.triplep-parenting.net/provider>.

Target Population

Triple P Level 4 Standard is designed for parents and caregivers with children up to 12 years old experiencing moderate to severe levels of behavioral problems across various settings. Families who are a good fit usually prefer a one-on-one intervention and are able to commit to 10 regular one-hour sessions. Providers should also ensure that their target population aligns with any funder requirements.

Staffing

Coordinators and/or Supervisors

- Provide regular, ongoing one-on-one supervision for practitioners.
- Conduct at least two fidelity assessment observations per year, for each practitioner, to ensure model fidelity and provide strength-based feedback based on these observations.
- Provide opportunities for peer support within your team that could include the review of video clips and discussion of family needs.
- Ensure practitioners' weekly planning time for curriculum review and session delivery.
- Encourage and track practitioners' time and engagement in coaching and implementation support from PCANC, including video reviews.

Practitioners

- Attend Triple P Level 4 Standard training prior to implementation.
- Commit to implementing the manualized curriculum as intended.
- Support caregivers in using positive discipline strategies and developing new skills.
- Review curriculum and plan before each session.
- Administer and review assessment tools and discuss feedback with families.

LOCATION & CHILDCARE

- Sessions may take place at an agency, community location, or within a family's home.
- The meeting location should minimize travel barriers for families, and transportation should be provided for families if needed.
- Agencies should plan for providing quality childcare depending on the location selected.

DURATION AND DOSAGE

- Triple P Level 4 Standard consists of 10 sessions. This includes 3 telephone or home visit practice sessions to assist caregivers in using behavior change strategies. An additional session to allow more time for assessment and/or practice may also be helpful.
- Dosage is generally one session per week, with the 3 practice sessions scheduled at a frequency that aligns with each family's needs.
- Sessions 1-4 and 8-10 are one hour. Practice Sessions (sessions 5-7) are 40 to 60 minutes.
- Program content should be covered as intended and presented in the same order as outlined in the curriculum.

ENROLLMENT & COMPLETION

- Recruitment should be viewed as an ongoing process.

- Providers should speak with each prospective family prior to a series to determine goodness of fit, review goals and expectations, discuss barriers to attendance, and confirm family members who will be participating.
- Agencies should enroll custodial caregivers as well as other adults in a parenting role.

COMPLETION

- Participants should be encouraged to complete all 10 sessions.
- Providers should check with their funders regarding other specific requirements for completion.
- Incentives are encouraged throughout the series to support participant retention.

PROGRAM EVALUATION

Network agencies participate in a statewide evaluation process and receive agency level and statewide reports as part of this process. Agencies are encouraged to use both process and outcome evaluation data to inform their work.