# Personal Responsibility Education Innovative Strategies (PREIS) IMPLEMENTATION PLAN TEMPLATE

The PREIS implementation plan is designed to assist you with program implementation planning during Phase 1 of your grant. An implementation plan is a tool that provides detailed documentation of approaches and strategies that will be used for program implementation. This template can be used as a guide to help you map out or outline the key components of program implementation. Identifying each step in the process ensures your team and your partners have a clear understanding of what the program entails, and how it should be implemented. It can also be used to identify and think through potential challenges and proposed solutions before implementation begins.

- **Who** are the key partners involved in program implementation? Who are the key persons responsible for each program implementation component?
- **What** is the program that will be implemented?
- **When** and **how often** will the program be implemented?
- Where will program implementation take place?
- **What** are your anticipated challenges and needs for additional support?

All PREIS implementation plans should be finalized and approved by the end of Phase I. The first completed draft of your implementation plan is due to your Federal Project Officer two months before the end of your Phase I period. Please reserve approximately three to four hours to complete this template. During Phase II, your Federal Project Officer will work with you to document these changes using the table in Appendix A.

#### THE PAPERWORK REDUCTION ACT OF 1995

This collection of information is voluntary and will be used to provide the Administration for Children and Families with information on PREP grantees' implementation and evaluation plans in order to support their adolescent pregnancy prevention work. Public reporting burden for this collection of information is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0531, Exp: XX/XX/XXXX. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Jessica Johnson at Jessica.johnson@acf.hhs.gov.

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## **I. Grantee Contact Information**

Grantee Name	
<b>Grantee Address</b>	
Primary Contact	
Phone Number	
E-mail	
<b>Evaluation Organization</b>	
Evaluation Lead	
Phone Number	
Email	

# II. Program Overview

Name of Project		
Name of Curricula/Intervention		
Target Population		
(e.g., race/ethnicity, sex, age/grade)		
Location(s)/Geographic Region(s)		
Setting(s)		
Adulthood Preparation Subjects	€	Adolescent Development
	€	Healthy Relationships
	€	Healthy Life Skills
	€	Educational & Career Success
	€	Parent Child Communication
	€	Financial Literacy

## **III. Program Content**

Describe the content of the intervention by either completing the chart below or attaching program content outlines. Be sure to identify where Adulthood Preparation Subjects are addressed. If you have more than one project component where key program content is delivered, please duplicate the chart.

	Title of Lesson/Session	Lesson/Session Objectives	Topics Covered
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

## **IV. Project Components**

Complete the tables below to describe all the components of your PREIS project. For the purpose of this exercise, project components are defined as components that are implemented separately but when combined, comprise the whole project. This includes, but are not limited to, the core intervention and parts of the project that are implemented apart from the core intervention, such as community service, apps, and parent workshops.

Complete the tables that are applicable to your project. Two treatment tables are provided, one for group interventions and one for online/digital interventions. A control/comparison table is for provided for projects that plan to offer activities to the comparison group.

Row A: List each component that will be offered (including any group or individual sessions, case management, social media, service learning, other curricula or services).

Row B: For each component, describe the amount, duration, and intended dosage (e.g., Five 1-hour sessions over 3 weeks for a total of 15 hours of programming).

Row C: Briefly describe the content of each component.

Row D: Describe how the content will be delivered.

Row E: Describe the setting(s) in which the content will be delivered.

	Treatment: Group Intervention			
	Component 1	Component 2	Component 3	
A: Component	Ex: Classroom	Ex: Parent/Guardian	Ex: Case Management	
(e.g., Classroom lessons, supplemental app,	Lessons	Workshops		
supplemental parent				
workshops, community				
service)				
B: Amount, duration,				
intended dosage				
(e.g., 5 sessions over 3				
weeks for a total of 15 hours				
of programming)				
C: Content				
(e.g., Lessons on healthy				
relationships, contraceptive				
use, HIV/STIs, decision				
making, and setting				
educational goals)				
D: Method of Delivery				
(e.g., In-person, virtual)				
E. Setting(s)				
(e.g., community centers,				
clinics, schools)				

	Treat	ment: Online/Digital In	tervention
	Component 1	Component 2	Component 3
A: Component			
(e.g., Online lesson, website			
interaction or text-based			
component, app)			
B: Amount, duration,			
intended dosage			
(e.g., 5 sessions over 3			
weeks for a total of 15 hours			
of programming)			
C: Content			
(e.g., Lessons on healthy			
relationships, contraceptive			
use, HIV/STI, decision			
making, and setting			
educational goals)			
D: Method of Tracking			
Dosage & Completion			
(e.g., Time stamp of lesson			
duration, submission			
buttons, completion of			
interactive activities such as			
polls, quizzes, option			
selections)			
E. Setting(s)			
(e.g., implementation or			
recruitment setting or such			
as group homes or schools)			

	Control/Comparison		
	Component 1	Component 2	Component 3
A: Component (e.g., Classroom lessons, supplemental app, supplemental parent workshops, community service)			
B: Amount, duration, intended dosage (e.g., 5 sessions over 3 weeks for a total of 15 hours of programming)			
C: Content (e.g., Lessons on healthy relationships, contraceptive use, HIV/STI, decision making, and setting educational goals)			
<b>D: Method of Delivery</b> (e.g., In-person, virtual)			
E. Setting(s) (e.g., community centers, clinics, schools)			

## V. Fidelity Monitoring

Please describe how you will monitor fidelity for the treatment group activities and, if applicable, the control/comparison group activities. FYSB strongly recommends either formal or informal observations for a minimum of 10% of sessions for each implementation cycle. In the beginning of the study implementation phase, Phase II, PREIS grantees will be expected to conduct either informal, formal, or a combination of both on a more frequent basis than 10% of sessions. The exact frequency of fidelity monitoring observations should be determined with your Federal Project Officer.

Program Implementation Indicators	Brief Description	Person(s) Responsible
Fidelity Monitoring Tools (e.g., checklists, observation forms)		
Fidelity Monitoring Observations, including type (formal, informal, or both) and frequency		
Strategies for addressing lack of fidelity		

#### **Anticipated Challenges & Proposed Solutions**

What challenges do you foresee? What are your	proposed solutions for addressing these challenges? I	lr
what areas do you anticipate needing additional	l support and/or TA?	

Challenge #1: Proposed Solution(s):	
Challenge #2: Proposed Solution(s):	
Need for Additional Support/TA:	

## VI. Partnerships

Describe how partnerships will be maintained and managed throughout the project.

Please provide information for partners across the project, including implementation/recruitment sites and partners providing training and support services. Partners are defined as those organizations that have a third party agreement with the grantee organization to provide services and/or support.

	Name of Partner	Types of Services Partner Provides	Type of 3 <sup>rd</sup> Party Agreement (Letter of Agreement, MOU)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

#### **Anticipated Challenges & Proposed Solutions**

What challenges do you foresee? What are your propos	osed solutions for addressing these challenge	s? In
what areas do you anticipate needing additional support	ort and/or TA?	

<b>Challenge #1:</b> Proposed Solution(s):		
Challenge #2:		

Proposed Solution(s):

## VII. Implementation/Recruitment Site Plans

Describe the approach and strategies you will use to recruit implementation and/or recruitment sites.

Complete the table below to provide additional details on the plans for your implementation/recruitment sites. If the plan varies by site or groups of sites, please duplicate the table and complete one for each variation.

Implementation/Recruitment Site(s):	
<b>Site Location(s)</b> (e.g., Johnson City, Whitehall County)	
Type of Site	<ul><li>€ Intervention</li><li>€ Control/Comparison</li><li>€ Both</li></ul>
	If both, please describe the extent to which the intervention and control/comparison participants will remain separate during implementation?
Anticipated Total Number of Groups/Cohorts (e.g., 4 cohorts)	
Number of Participants per Group/Cohort (e.g., 25 youth per cohort)	
Meeting Location (if applicable) (e.g., classroom, gym, community room)	
<b>Dates/Times of Sessions (if</b> applicable) (e.g., Mondays and Wednesdays 3-4pm)	

# VIII. Service Referrals and Follow-Up

Use the table below to describe the strategies you plan to use to identity and refer youth to services and to follow-up to ensure the youth are connected to a service provider.

Program Implementation Indicators	Brief Description	Person(s) Responsible
Referral Strategies		
Follow-Up Strategies		

#### IX. Research & Evaluation

The purpose of this section is to provide a brief overview of the research and evaluation design. PREIS grantees will outline the evaluation plan in further detail in a separate Impact Evaluation Plan template.

**Impact Evaluation** 

Type of Design	<ul><li>€ Randomized Controlled Trial</li><li>€ Quasi-experimental Design</li></ul>
Unit of Randomization (e.g., individuals, schools, classes)	
Data Collection Time Points*	

<sup>\*</sup>The time points should be the same for both intervention and control group.

Annual Number of Participants (excluding pilot testing)

	# of Intervention Participants	# of Control Participants
Year 1		
Year 2		
Year 3		
Year 4		
Year 5*		
Total		

<sup>\*</sup> In order to complete this project within the 5-year grant period, PREIS grantees must complete all study data collection by March 2026.

#### **Primary Research Questions**

Please ensure the research questions and outcomes align with the program content.

Research Questions	Outcomes
1.	
2.	
3.	

**Secondary Research Questions** 

Research Questions	Outcomes
1.	
2.	
3.	

## X: Participant Recruitment, Retention, & Tracking Strategies

Provide information on the number of participants you expect to recruit, enroll, and retain in the study.

Participant Recruitment Target (e.g., 1000):
Participant Enrollment Target (e.g., 750):
Participant Retention Target (e.g., 85%):

Complete the table below to describe the materials and strategies that will be used for participant recruitment, retention, and tracking. If the approach to recruitment, retention, or tracking differs by site or groups of sites, please duplicate the table and complete one for each approach.

	Brief Description	Person(s) Responsible
Recruitment Materials		
Recruitment Strategies		
Retention Strategies		
Tracking Strategies		

#### **Anticipated Challenges & Proposed Solutions**

What challenges do you foresee? What are your proposed solutions for addressing these challenges? In what areas do you anticipate needing additional support and/or TA?

Challenge #1:
Proposed Solution(s):
Challenge #2:

Proposed Solution(s):

**Need for Additional Support/TA:** 

## XI: Staff Recruitment, Retention, & Training Plan

Provide a staffing chart that lists all project staff names, position titles, and effort (FTE), including vacant positions.

Use the table below to describe staff recruitment, retention, and training plans.

	Brief Description	Person(s) Responsible
Staff Recruitment Strategies		_
Staff Retention Strategies		
Staff Training in Curricula Model(s) (including follow-up trainings)		
Staff Training on Other Topics		

#### **Anticipated Challenges & Proposed Solutions**

What challenges do you foresee? What are your proposed solutions for addressing these challenges? In what areas do you anticipate needing additional support and/or TA?

Challenge #1:
Proposed Solution(s):

**Challenge #2:** Proposed Solution(s):

**Need for Additional Support/TA:** 

### **XII: Phase I Timeline**

All Phase I activities should be completed in the first 12 to 18 months of award. Please use the most appropriate template below to complete a timeline to show Phase I activities. Shade the blocks to indicate the start and end dates for each activity.

**12 Month Template** 

Task	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept
Ex. Hire &												•
Onboard												
Staff												
Ex.												
Curricula												
Training												

**18 Month Template** 

Task	Oct	Nov	De	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	No	Dec	Jan	Fe	Mar
			C											v			b	
		·					·	·		·			·	·				

**Appendix** 

## Appendix A.

## **Modifications to the Implementation Plan**

During Phase II, PREIS Federal Project Officers will use this chart to document changes to program implementation that occur. Modifications to program implementation includes deviations from the approach in the approved implementation plan. Modifications may include, but are not limited to, minor changes to program/curricula materials, method of delivery, the program delivery schedule, the setting, staffing structure, or the services provided.

	Brief Description	Rationale for Adaptation	Permission from Author/Develope r? (Yes/No/Not Applicable)	Date of Adaptation (Month/Year)
Modification #1				
Modification #2				
Modification #3				
Modification #4				
Modification #5				
Modification #6				
Modification #7				
Modification #8				
Modification #9				
Modification #10				