

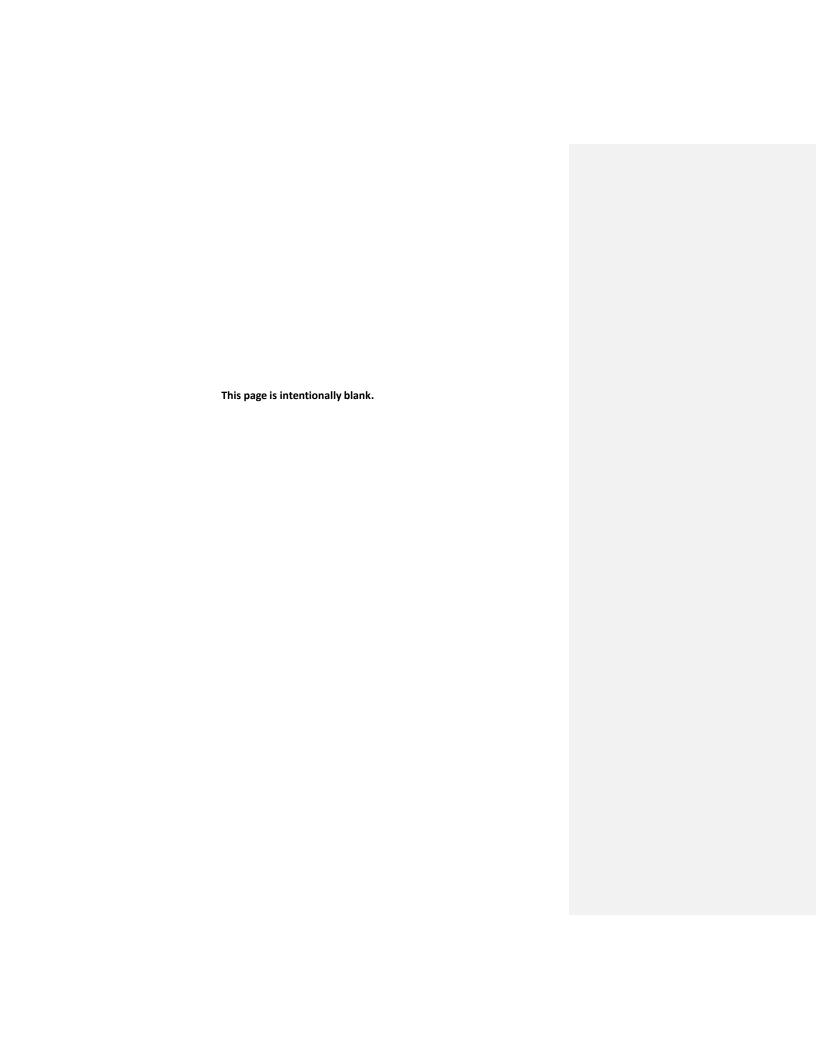
## COP-RCORP

Communities of Practice for Rural Communities Opioid Response Program

## Core Activity 5: Sustainability Plan

Sandusky County, Ohio
Health Partners of Sandusky County

Sandusky County Public Health



#### **Acknowledgements**

HRSA CoP-RCORP is funded by the HRSA Rural Communities Opioid Response Program-Planning: HRSA-18-116, CFDA: 93.912 grants G25RH32461-01-05 and G25RH32461-01-00.

Health Partners of Sandusky County acknowledges the time and efforts that consortium members and other local stakeholders contributed to this sustainability plan.

Pacific Institute for Research and Evaluation (PIRE) and Ohio University's Voinovich School of Leadership and Public Affairs (OHIO), through a shared services and braided funding approach, work directly with project directors from the five CoP-RCORP backbone organizations to provide leadership, training, capacity building, technical assistance and evaluation services, and management oversight for project activities. The project directors then bring back the shared learnings and experiences from the community of practice to their respective community-specific consortium, which is responsible for leading project activities within the five Ohio communities. This sustainability plan represents the shared work of the Health Partners of Sandusky County (local consortium), the Sandusky County Public Health (backbone organization), and the CoP-RCORP Training, Technical Assistance, and Evaluation Team (OHIO and PIRE).

#### **Table of Contents**

Introduction	1
Measuring Sustainability	2
Local Sustainability Plan	3
Conclusion	7
References	8
APPENDIX A	9
ADDENDIV D	10

### **Sustainability Plan**

#### Communities of Practice for Rural Communities Opioid Response Program (COP-RCORP)

# Sandusky County Public Health Sandusky County Health Partners September 29, 2019

Grantee Organization	Pacific Institute for Research and Evaluation			
Grant Number	G25RH32461			
Address	11720 Beltsville Dr #900, Beltsville, MD 20705			
Service Area	Sandusky County			
	Name:	Matthew Courser		
Project Director	Title:	Senior Research Scientist		
	Phone number:	502-736-7841		
	Email address:	mcourser@pire.org		
Local Project Lead	Name:	Stacey Gibson		
	Title:	Director of Heath Planning and Health Education and Accreditation		
	Phone number:	(419) 334-6377		
	Email address:	sgibson@scpublichealth.com		
	Mircea Handru, Director, Mental Health & Recovery Services Board of Seneca, Sandusky, and Wyandot Counties			
Contributing Consortium	Bethany Brown, Health Commissioner, Sandusky County Public Health			
	Judge Bradley J. Smith, Sandusky County Juvenile and Probate Court			
	Tim Wise, LPCCs, Site Director, Firelands Counseling and Recovery Services Fremont Office			
Members and Stakeholders	Cathy Glassford, Director, Sandusky County Family and Children First Council			
	Jeff Jackson, Director, Sandusky County Emergency Medical Services			
	David Collins, COP-RCORP Training, Technical Assistance, & Evaluation Team			
	Casey Shepherd, COP-RCORP Training, Technical Assistance, & Evaluation Team			
	Laura Milazzo, COP-RCORP Training, Technical Assistance, & Evaluation Team			

#### Introduction

#### **RCORP-Planning**

The Rural Communities Opioid Response Program (RCORP) is a multi-year initiative supported by the Health Resources and Services Administration (HRSA), an operating division of the U.S. Department of Health and Human Services, to address barriers to access in rural communities related to substance use disorder (SUD), including opioid use disorder (OUD). RCORP funds multi-sector consortia to enhance their ability to implement and sustain SUD/OUD prevention, treatment, and recovery services in underserved rural areas. To support funded RCORP consortia, HRSA also funded a national technical assistance provider, JBS International.

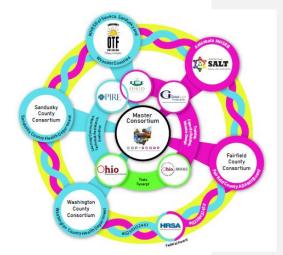
The overall goal of the planning phase of the RCORP initiative is to reduce the morbidity and mortality associated with opioid overdoses in high-risk rural communities by strengthening the organizational and infrastructural capacity of multi-sector consortiums to address prevention, treatment, and recovery. Under the one-year planning initiative, grantees are required to complete five core activities. The fifth core activity is to complete a sustainability plan for the consortium. This report contains the local consortia's sustainability plan from the planning phase.

#### **CoP-RCORP Consortium**

The Communities of Practice for Rural Communities Opioid Response Program (CoP-

RCORP) Consortium was created in 2018 when Ohio University's Voinovich School of Leadership and Public Affairs (OHIO) and the Pacific Institute for Research and Evaluation (PIRE) braided together funding from two separate awards (G25RH32461-01-05 & G25RH32461-01-00). OHIO and PIRE then offered equitable access to five backbone organizations in the rural communities of: Ashtabula, Fairfield, Sandusky, Seneca, and Washington Counties. An organizational chart of the braided CoP is included here for quick reference. More information about the organizational structure, co-developmental process, and shared economy may be found on the project website:

https://www.communitiesofpractice-rcorp.com/



#### **Measuring Sustainability**

Under the CoP-RCORP initiative, OHIO and PIRE approached the development of the sustainability plans as a process with a two-fold purpose. First, we wanted to fulfill the core planning objectives of the RCORP-Planning grant. Second, we wanted to provide local consortia with information about how to continue growing the local infrastructure they need in order to address ongoing opiate use disorder (OUD) issues beyond the planning period. This developmental process followed a format that has successfully been used in other Ohio initiatives, which involves assessing what needs to be sustained first, followed by a set of reflection questions about how to shore up the issues identified.

In particular, OHIO and PIRE wanted each local consortium to think about how they could continue to build and sustain their local capacity to plan and address OUD on an ongoing basis. We utilized this approach in part because the grant is in the planning phase and local consortia have not begun implementing any strategies yet. Moreover, our developmental evaluation and capacity building experience over the years has illustrated the importance of several points: (a) clarifying what to continue or sustain (Mancini & Marek, 2002; Weiss, Coffman, & Bohan-Baker, 2002), (b) understanding the public value, authorizing environment, and operational capacity needed for sustainability (Moore, 1995), and (c) viewing sustainability as a process rather than an outcome (Schell, et al., 2013).

At the beginning of the planning phase for the project, stakeholders in each of the five local consortia completed a capacity survey to measure readiness and capacity at the community level. That occurred from an external perspective. For the sustainability assessment, we asked the local consortia to identify two to four core members with intimate knowledge of the planning grant. Most of these core members included staff funded under the initiative. For the sustainability plan, we sought an internal perspective.

#### **Washington University Program Sustainability Assessment Tool**

Each of the five project directors conducted an online assessment utilizing the Program Sustainability Assessment Tool (PSAT) from Washington University in St. Louis. The PSAT includes 40-items arranged into eight domains: Environmental Support, Funding Stability, Partnerships, Organizational Capacity, Program Evaluation, Program Adaptation, Communications, and Strategic Planning. Using a scale from 1 to 7, project directors rated the extent to which each process or structure exists in their consortium, with a 1 meaning no extent and 7 meaning full extent. See Luke, Calhoun, Robichaux, Elliott, and Moreland-Russell (2014) for more information about the tool.

Communities were presented with two options for completing the sustainability assessment tool. In the first option, a core local planning team met as a group to discuss and rate each question. Upon reaching consensus, the group entered a score for each question and received a summary report with the results. Alternatively, each identified member of the core local planning group answered all of the questions independently. The project director then received a report that averaged the responses. Health Partners chose the option of group consensus.

#### **Local Sustainability Plan**

#### **Health Partners of Sandusky County**

Health Partners of Sandusky County serves as the local consortium for the RCORP-Planning grant, while the Sandusky County Public Health operates as the backbone organization. In order to develop and strengthen the local consortium, the following individuals engaged in a sustainability assessment and reflection process (Core Sustainability Planning Team):

Stacey Gibson Sandusky County Public Health Bethany Brown Sandusky County Public Health

Judge Brad Smith Sandusky County Juvenile and Probate Court
Cathy Glassford Sandusky County Family and Children First Council
Jeff Jackson Sandusky County Emergency Medical Services

Thomas Miller Sandusky County Public Health

#### **Sustainability Plan**

Reflection questions and assessment results. After completing the online PSAT assessment tool, communities received a summary of their assessment results that reported the average score for each domain (see Appendix A for a copy of the Summary Assessment Results). Next, each community reviewed the summary results and reflected on a number of questions developed by OHIO and PIRE based on the guidance from JBS International (see Appendix A for a copy of the Reflection Questions). Table 1 below shows the overall sustainability assessment results and prioritized domain and score for that domain.

Table 1. Sustainability Assessment Results for Health Partners of Sandusky County

County	Assessment Approach	Overall Sustainability Assessment Score	Overall Assessment Range	Prioritized Domain	Assessment Score for Prioritized Domain
Sandusky	Group Consensus	5.8	5.2 – 6.2	Communications	5.2

**Assessment summary.** To begin reviewing the assessment results, the Sandusky County Sustainability Planning Team conducted a SWOT analysis by categorizing the various domains as strengths, weaknesses, opportunities, or threats. They also discussed why they categorized a domain as a strength, weakness, opportunity, or threat (see Table 2).

Table 2. SWOT Analysis on the Sustainability Assessment Domains

#### Strengths

Program Adaptation – Health Partners periodically review research on the evidence, based programs, policies and practices. When found necessary, programs and strategies are adapted to align with the changes in our environment, culture and the needs of the community.

Environmental Support – Health Partners has very supportive partnerships in Sandusky County and within our consortium. The group is supported by public leaders and residents; and has been effective in leveraging funding and other resources takes place regularly. Collectively, partners have extensive knowledge on assessment, planning, implementation.

**Program Evaluation** – Leadership has put staff/partners in place to ensure programs have the capacity for successful evaluations. Adjustments made when needed.

#### **Opportunities**

Partnerships — Even though our rural area sometimes lacks certain resources, there are numerous coalitions, agencies, partnerships dedicated to improving the health of our community. Health Partners serves a catalyst to unite all these different groups. Health Partners membership continues to grow, by involving social service organizations as we better understand social determinates of health and the health inequities affecting our community.

Funding Stability – Unanimously, the team all agreed that collaboration takes place within our coalitions, partnerships, and community to ensure a variety of funding sources are put in place and planned for future funding. The

#### Weaknesses

Organizational Capacity – Health Partners has many supporters in the community but often just has a small 'core' of people who take on active roles. While systems are in place to support program needs, there are concerns that a limited staffing could hinder project long term goals. The team continually works to build capacity and share its vision with external partners and stakeholders. Leadership does a great job at efficiently managing staff and other resources with what has been allotted to the programs.

Strategic Planning – Health Partners has been resourceful and plans well into the future for resources that will be needed. However, there is not a specific and detailed sustainability plan put in place for other projects yet. There also need to be 'bailout plans' in case funding becomes scarce. Meetings are planned and more partners are being recruited for this project for optimal success.

#### Threats

Communications – Though Health Partners has many collaborators, supporters, and skilled individuals all working together, there is always room for improvement. It was discussed that there is limited information and data disseminated to community members. And at times, partners only pass along information pertaining to their consumers and employee needs.

team also recognizes that there is always more that can be done when looking for financial support in our specific economic climate.
Rural areas are limited to certain resources, but Health Partners is, and has always been resourceful in finding support for program sustainability even though it is sometimes difficult to find that perfect combination of stable and flexible funding at times.

**Problem statement.** The Sandusky County Sustainability Planning Team identified one domain area that represents a key weakness or threat for the sustainability of the local consortium to address OUD. The weakness or threat domain to address is: Communication. Selecting this area was prioritized because communication between partners is strong, but it was noted during sustainability discussions that there is a lack of information dissemination on data, strategies and successes to external stakeholders and to other areas throughout the community. If we are to be effective in our community change efforts, it is important that the work of Health Partners is recognized and understood throughout the entire community. Community involvement at all levels is vital, from data collection to priority selection to strategy implementation. In addition, in order to assure timely distribution of information, all partners must be actively engaged in outreach efforts.

Target population. The organizations, agencies, community leaders, and staff/personnel who need to be present to work on this problem include All members of Health Partners will be involved in expanding communication efforts. Partners include: The Bellevue Hospital, Community Health Services, Firelands Counseling & Recovery Services, Fremont City Schools, Great Lakes Community Action Partnership, Jennifer Greenslade-Hohman, MD, Mental Health & Recovery Services Board of SSW, ProMedica Memorial Hospital, Sandusky County Dept of Job & Family Services, Sandusky County Board of DD, Sandusky County Family & Children First Council, Sandusky County Juvenile & Probate Court, Sandusky County Public Health, and United Way of Sandusky County.

**Goals and objectives.** The goal this group will work toward addressing and at least one key objective follow. Table 3 lists the specific activities for the goal and objectives.

Goal Statement: Health Partners will ensure the community as well as external

stakeholders have the ability to provide input and are aware of health

partner community change efforts.

Key Objective(s): By May 2020, Health Partners of Sandusky County will host 5

community meetings to provide information on 2019-2020 CHA data and to seek input into the Community Health Improvement Plan as  $\frac{1}{2} \left( \frac{1}{2} \right) = \frac{1}{2} \left( \frac{1}{2} \right) \left( \frac{1}{$ 

evidenced by promotional flyers, sign-in sheets and priority selection sheets.

Table 3. Specific Activities for Goals and Objectives

Activity	Start Date	End Date	Responsible Party	Resources
Schedule CHA Release	January 2020	April 2020	Tim Wise, Chair	Staff, Location
Schedule 5 community outreach/input events	February 2020	May 2020	Health Partners Members	Staff, Multiple Locations
Promote events	February	May 2020	Partners Agencies	Staff, Dues Paid
Present information	April 2020	May 2020	Members of Health Partners	Staff
Record community input	April 2020	May 2020	Marsha Overmyer, Support Staff	Staff, Priority selection sheets
Include input into Community Health Improvement Plan	June 2020	August 2020	Health Partners Members/HCNO	Contract with HCNO
Schedule sessions or meetings in which goals and their status	May 2020	August 2020	Health Partners Members	Staff, Multiple Locations
are discussed and in which the input from organizations and members into the goals in				
acknowledged				

Long-term outcomes and indicators. Below are the long-term change outcomes and indicators to define how change will be demonstrated.

Long-term Outcome: Partners, organizations and community members will provide input into community health improvement goals and the organizations and members will receive updates on the status of the goals that will acknowledge and demonstrate the increased input by organizations and members.

Long-term Indicator: Data collected on the number of sessions held seeking partner and community input and on the number of sessions during which the

Commented [ML1]: Pull from Q9 in the RQ

Reformat responses to 10 point font for the table.

**Commented [CS2]:** This was added by your TA provider. Please review and approve/revise

Commented [CS3]: This line was added by your TA provider with the following note:

 $\ensuremath{\text{I've}}$  added some text around sharing the results back to the organizations and members. It will be important to do this so that they can see how their input into the health improvement goals is being incorporated.

goals are discussed (and which will also demonstrate the increased input by organizations and members).

#### Conclusion

#### Affordability and Accessibility of OUD Prevention, Treatment, & Recovery

As a part of the June 2018 Access to Care Report, Health Partners continually review and discuss issues related to access to care and forces of change that impact services in Sandusky County. This includes the affordability and accessibility of OUD prevention, treatment and recovery services. To make sure these efforts continue throughout the RCORP Implementation process, Health Partners will keep this as an ongoing Agenda item at quarterly meetings and will address matters as they arise. Health Partners will also schedule sessions or meetings in which the goals and status are reviewed and discussed, and these will provide an opportunity to show the increased input from organizations and members into the goals.

#### **Prioritization of Evaluation**

Health Partners utilizes evaluation as a method to monitoring the effectiveness of programs, strategies and services. While both quantitative and qualitative methods are used, partners have found through lessons-learned, that developing quantitative metrics is a much better tool in assessing the impact of strategies. Collaborating within multiple systems for strategy implementation and evaluation, can be difficult due at times, by using quantitative data, partners can reflect on progress more readily and locate opportunities to improve more easily.

**Commented [CS4]:** This line was added by your TA provider with the following note:

I've added some text around sharing the results back to the organizations and members. It will be important to do this so that they can see how their input into the health improvement goals is being incorporated.

**Commented [CS5]:** This line was added by your TA provider. Please review and approve/revise.

#### References

- Luke, D. A., Calhoun, A., Robichaux, C. B., Elliott, M. B., and Moreland-Russell, S. (2014). The program sustainability assessment tool: A new instrument for public health programs. Preventing Chronic Disease, 11.
- Mancini, J. A., & Marek, L. I. (2004). Sustaining community-based programs for families: Conceptualization and measurement. *Family Relations, 53,* 339-347. doi: 10.1111/j.0197-6664.2004.00040.x
- Moore, M. H. (1995). *Creating public value: Strategic management in government*. Cambridge, MA: Harvard University Press.
- Schell, S. F., Luke, D. A., Schoole, M. W., Elliott, M. B., Herbers, S. H., Mueller, N. B., & Bunger, A. C. (2013). Public health program capacity for sustainability: A new framework. *Implementation Science, 8(15).*
- Weiss, H., Coffman, J., & Bohan-Baker, M. (2002). Evaluation's role in supporting initiative sustainability. Retrieved from Harvard Kennedy School of Government website:

  <a href="http://www.hks.harvard.edu/urbanpoverty/Urban%20Seminars/December2002/Weiss.pdf">http://www.hks.harvard.edu/urbanpoverty/Urban%20Seminars/December2002/Weiss.pdf</a>

#### **APPENDIX A**

Local Consortium Sustainability Assessment Report

#### **APPENDIX B**

COP RCORP Sustainability Reflection Questionnaire