

COP-RCORP

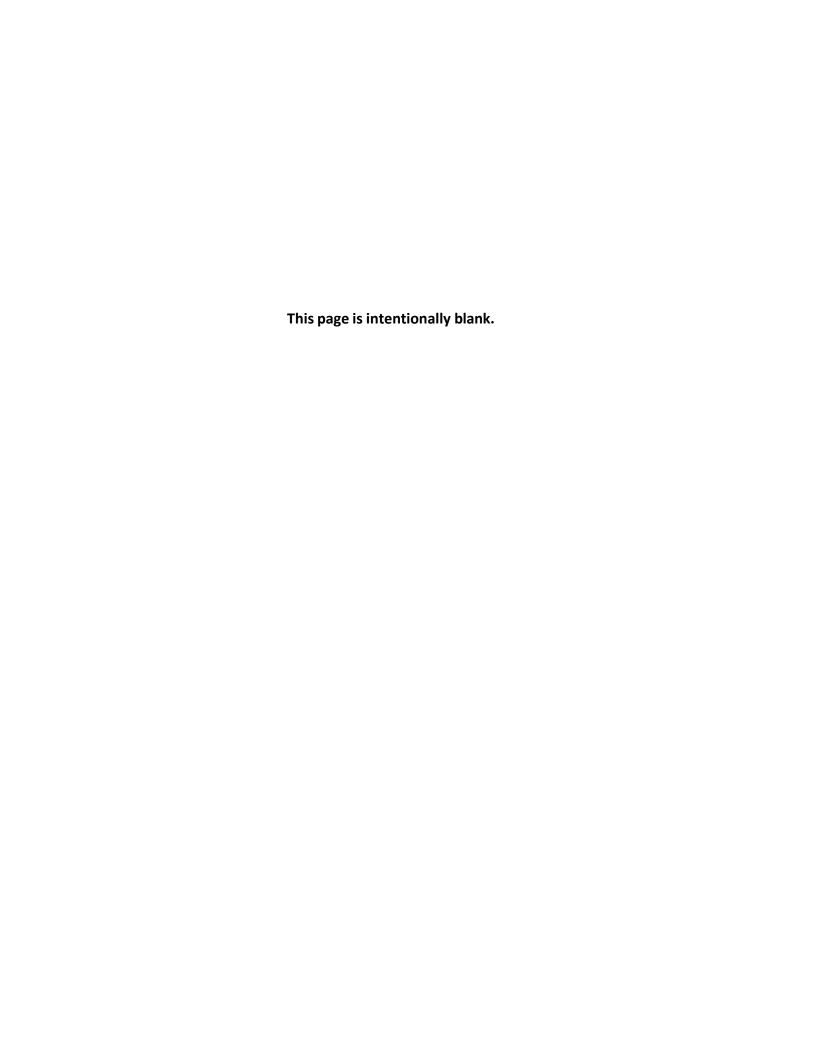
Communities of Practice for Rural Communities Opioid Response Program

Local Sustainability Plan

Ashtabula County, Ohio

Ashtabula County Substance Awareness Leadership Team (SALT)
Ashtabula County Mental Health and Recovery Services Board

2024



Acknowledgements

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The Ashtabula County Substance Awareness Leadership Team (SALT) acknowledges the time and efforts that consortium members and other stakeholders contributed to the development of this local sustainability plan.

As the convening leads for the CoP-RCORP master consortium, the Pacific Institute for Research and Evaluation (PIRE) and Ohio University's Voinovich School of Leadership and Public Affairs (OU-VS) braid their funding through a shared services approach and work collaboratively with project directors and staff from the local CoP-RCORP backbone organizations to provide leadership, training, capacity building, technical assistance and evaluation services, and management oversight for project activities. This local sustainability plan represents the shared work of the Ashtabula County Substance Awareness Leadership Team (SALT) (local consortium), the Ashtabula County Mental Health and Recovery Services Board (backbone organization), and the CoP-RCORP Training, Technical Assistance, and Evaluation Team (Ohio University Voinovich School of Leadership and Public Service and PIRE).

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Ashtabula County Substance Awareness Leadership Team (SALT) CoP-RCORP Ashtabula County, OH Sustainability Plan March 2025

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Introduction

RCORP Initiative

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. The overall goal 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. To support funded RCORP consortia, HRSA also funded a national technical assistance provider, JBS International.

COP-RCORP Consortium

In 2018, with support from the state of Ohio (viz. Ohio Department of Mental Health and Addiction Services and Ohio Department of Health), Ohio University's Voinovich School of Leadership and Public Affairs (OU-VS) and the Pacific Institute for Research and Evaluation (PIRE) applied and received two \$200,000 RCORP planning grants. In turn, OU-VS funded community organizations in Ashtabula and Fairfield counties and PIRE funded those in Sandusky and Washington counties. Through a shared services agreement, OU-VS and PIRE braided their funding together and created fiscal efficiencies to fund a fifth in Seneca County. In addition, the efficiencies allowed a project website to be created to organize, share, and archive innovative project strategies.

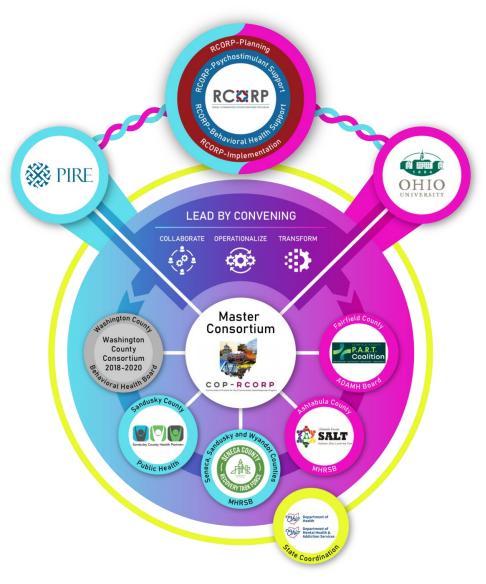
As system conveners (Wenger-Trayner & Wenger-Trayner, 2015) of the Communities of Practice for Rural Communities Opioid Response Program (CoP-RCORP), faculty and staff from OU-VS and PIRE brought together representatives from three county behavioral health authorities in Ashtabula, Fairfield, and Seneca counties and two county health departments in Sandusky and Washington counties during the planning phase. Each of the five community-based organizations acted as backbone fiscal support for a local consortium and oversaw the project activities being carried out in their community. The CoP-RCORP master consortium utilized a community of practice (Wenger & McDermott, 2002) approach where representatives from the local consortia collaboratively engaged in peer learning and grant activities facilitated by OU-VS and PIRE.

At the end of the planning grant, OU-VS and PIRE each led efforts with respective community representatives and submitted separate proposals for RCORP-Implementation funding. HRSA awarded OU-VS and PIRE each \$1 million over three-years. In August 2019, OU-

VS and PIRE entered into another shared services agreement and braided funding to continue growing the community of practice model being utilized with the master consortium. The implementation funding includes 15 required core activities, which span the continuum of care and include prevention, treatment, and recovery to reduce the morbidity and mortality associated with opioid overdoses in high-risk rural communities. Sustaining those local efforts is a critical overarching goal.

Process-wise, the CoP holds monthly master consortium meetings to learn from one another. At the conclusion of Year 1, the Washington County Behavioral Health Board and the

CoP-RCORP Master Consortium separated. Currently, the master consortium includes representatives from the following four communities: Ashtabula, Fairfield, Sandusky, and Seneca counties. As the convening lead for the master consortium, OU-VS and PIRE work with members of the master consortium to advance the core activities at the local level. The master consortium also draws on state-based resources to inform policies, programs, and practices. See the figure below for an organizational graphic. More information about the organizational structure and initiative may be found on the CoP-RCORP website: communities of practicercorp.com.



Schweinhart, A., Raffle, H., Courser, M., & Dacanay, J. (2024). COP-RCORP Organizational Chart.

Pacific Institute for Research and Evaluation: Calverton, MD and Ohio University's Voinovich School of Leadership and Public Service: Athens, OH.

This project was made possible by grants #G25RH32461, #GA1RH33532, #G25RH32459, #GA1RH33529, #H7NRH42563, #H7NRH45748, and #G28RRH46290 from the Health Resources and Services Administration (HRSA), an operating division of the U.S. Department of Health and Human Services. This figure is solely the responsibility of the authors and does not necessarily represent the official views of HRSA or the U.S. Department of Health and Human Services.

Measuring Sustainability

Under the CoP-RCORP initiative, OU-VS and PIRE approached sustainability as a process with a two-fold purpose. First, we wanted to make sure we fulfilled the RCORP grant requirements. Moreover, we wanted to ensure local consortia had the information they needed to continue supporting their local infrastructure in addressing ongoing opiate use disorder (OUD) issues. This locally driven type of process follows 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, OU-VS 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 based on our developmental evaluation and capacity building experience over the years which has illustrated the importance of: (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).

All grantees completed a set of sustainability assessments and developed a sustainability plan based on the findings. This process occurred during the planning and implementation grant phases (2019, 2020, 2021) and has continued into the behavioral health care support grant (2024) at the master consortium level. Each community organization completed a local sustainability process, the balance of this report describes the local process, the findings and plan for next steps. All previous community sustainability information and reports are available on the CoP-RCORP website.

Washington University Program Sustainability Assessment Tool

Each of the four 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.

Community organizations were offered 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. The Ashtabula County Substance Awareness

Leadership Team (SALT) chose the option of group consensus.

Local Sustainability Plan

The Ashtabula County Substance Awareness Leadership Team (SALT)

The Ashtabula County Substance Awareness Leadership Team (SALT) serves as the local consortium for the RCORP- Planning grant, while the Ashtabula County Mental Health and Recovery Services Board 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):

Kaitie Hart, Bridget Sherman, Christy Fisher

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 several questions developed by OU-VS 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 Ashtabula County Substance Awareness Leadership Team (SALT)

County			Overall Assessment Range	Prioritized Domain(s)	Assessment Score(s) for Prioritized Domain(s)
Ashtabula	Group	5.1	4.0 – 6.0	Communications	4.0
County	Consensus				

Assessment summary. To begin reviewing the assessment results, the Ashtabula 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	Weaknesses
Environmental Supports	Communication
We have strong support from leadership	The consortium has struggled to
and outside the organization that can	consistently communicate messaging
come together to discuss local issues and	
the best way to address them.	and value to the public. While individual
,	campaigns have successfully changed
Program Evaluation	public opinion on harm reduction, the
We discuss outcomes consistently within	r ·
the organization and use the outcomes	new membership and reaching the
to adjust goals and solutions.	general community has been a struggle.
Organizational Capacity- the consortium	, 33
is the Opiate Hub we are required to	
maintain, and we have created an	
environment where the stakeholders can	
bring ideas and concerns to the group to	
mete out the best responses to	
community needs.	
·	
Program Adaptation	
The consortium allows for emergent	
community needs to be addressed by	
consortium members with the passion,	
strengths and resources needed to	
address the new concerns.	
Opportunities	Threats
Strategic Planning	Political agendas
Within the consortium, often the same	Local changes to our political landscape
people are doing the majority of the	have forced delicate messaging.
work. We can improve how we engage	
all members, reach other stakeholders,	Stigma
and increase the involvement of all.	Sometimes attempts stigma either
	reinforce or alienate some of the
Funding Stability	population.
The consortium provides opportunities	
to share new funding opportunities and	Tentative public support
requests for community needs.	Often the general public is apathetic to
	community needs until they experience
Partnerships	a personal connection.
Dynamic changes to local workforce may	
, , ,	Workforce turnover
diversity of the consortium and open the	While COVID-related turnover has

door to new members and fresh ideas.	slowed, we continue to see a lot of
	workforce turnover for multiple reasons.
	Partnership stability has helped sustain
	the consortium through many changes,
	but relationships will require vigilance to
	maintain.

Problem statement. The Ashtabula 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 during our Sustainability Assessment, the group discussed communication. The consortium has struggled to consistently communicate messages that generate new interest, awareness, and value to the public. While individual campaigns have successfully changed public opinion on harm reduction, the overall outreach of the consortium for new membership and reaching the general community has been a struggle. By prioritizing communication, we may also be able to mitigate the threats of political agendas and stigma.

Population of focus. The organizations, agencies, community leaders, and staff/personnel who need to be present to work on this problem include all members of the Ashtabula County Substance Awareness Leadership Team (SALT) with leadership from the Ashtabula County Mental Health and Recovery Services Board, and stakeholders such as:

UH Hospitals
Ashtabula County Medical Center
Ashtabula County Children Services Board
local behavioral health provider agencies
Ashtabula City Health Department
Conneaut City Health Department
Ashtabula County Health Department
Juvenile Court
Conneaut Municipal Court
Ashtabula County Job and Family Services
Ashtabula County Commissioners
local business stakeholders
Ashtabula County Sheriff's Department
Ashtabula County Educational Service Center
Kent State University (Ashtabula Campus)

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.

<u>Goal Statement</u>: Increase the public's awareness, perceived need for, and value harm reduction, mental health and substance use disorder treatment, and recovery services

<u>Key Objective(s)</u>: Develop a communication plan that incorporates the needs of our community partners to promote unified messaging pertaining to behavioral health in Ashtabula County

Table 3. Specific Activities for Goals and Objectives

Activity	Start Date	End Date	Responsible Party	Resources
Convene Stigma	July 1, 2024	July 31,	Kaitie Hart	SALT
Work Group and		2024		members,
Communication				ACPC
Committee				members
Develop	July 15,	July 31,	Kaitie Hart	SALT
Communication Plan	2024	2024		members,
				ACPC
				members
Conduct Stigma	October 1,	October	Kaitie Hart	SALT
Survey	2025	31, 2025		members,
				ACPC
				members

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

<u>Long-term Outcome</u>: A long-term change we hope to see by addressing the weakness of communication is to increase the community interest and perceived value of Ashtabula County

<u>Long-term Indicator</u>: The 2025 Stigma Survey will indicate increased community awareness and decreased stigmatizing beliefs regarding harm reduction, mental health, and substance use.

Conclusion

Affordability and Accessibility of OUD Prevention, Treatment, & Recovery

The Ashtabula County RCORP Consortium is aware of behavioral health disparities present in our communities and considers individuals with low SES as a priority population. The Ashtabula County RCORP consortium keeps potential and current disparities in mind when planning and implementing strategies within our communities. For individuals with low SES, affording copays and coinsurance can make accessing care cost prohibitive. Although there has been some ongoing public education, more work is needed to ensure the prioritized population continues to be aware of services and programs available. For example, local treatment providers offer

sliding fee scales for uninsured or underinsured individuals, but the general community may not be aware. The Ashtabula County SALT Consortium is committed to ensuring that the prioritized population is a constant and consistent stakeholder in planning efforts. The local consortia view this as an ongoing and multi-layered effort, which includes encouraging direct participation in the local consortia, in workgroup activities, and in activities and services to address substance use, mental health, harm reduction.

Prioritization of Evaluation

The Ashtabula County RCORP Consortium develops an annual action plan to assess the impact of the Consortium's activities. The Consortium has access to the Ashtabula County MHRS Board's data collected through Partner Solutions that includes demographic information, treatment services rendered, and diagnosis information for Ashtabula County residents. The Consortium will also utilize the data available from the CHIP/CHA surveys through Ashtabula County Health Department, and the Stigma Survey conducted by the Ashtabula County MHRS Board. The Ashtabula County RCORP Consortium is committed to utilizing the data currently available to determine quantifiable metrics to review regularly to assess the impact and outcomes of planned activities and implemented strategies.

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: http://www.hks.harvard.edu/urbanpoverty/Urban%20Seminars/December2002/Weiss.pdf

Wenger E, McDermott R, Snyder W. (2002). *Cultivating Communities of Practice: A Guide to Managing Knowledge*. Cambridge, MA: Harvard Business School Press.

Wenger-Trayner, B, Wenger-Trayner E. (2015). System conveners in complex landscapes. In: Wenger-Trayner E, Fenton-O'Creevy, F, Hutchinson, S, Kubiak C, Wenger-Trayer B, eds. *Learning in Landscapes of Practice: Boundaries, Identity, and Knowledgeability in Practice-Based Learning*. New York, NY: Routledge; 132-147.

APPENDIX A

Local Consortium Sustainability Assessment Report

Sustainability Report

INDIVIDUAL

SALT

Submitted by:

kpark@ashtabulamhrs.org March 20, 2024 Date:

Many factors impact a program's ability to continue providing services and producing benefits over time. For example, funding, quality evaluation, infrastructure, strong partnerships, and clear communication all have a role to play in supporting program sustainability. The Program Sustainability Assessment Tool (PSAT) allows stakeholders to rate their programs on the extent to which they have processes and structures in place that will increase the likelihood of sustainability. This report summarizes the current sustainability capacity for your program. Results are based on your program's responses to the Program Sustainability Assessment Tool. Assessment results can then be used to identify next steps in building program capacity for sustainability in order to position efforts for long-term success.

Interpreting the Results

The table presents the average rating for each sustainability domain based on the responses that you provided. The remainder of the document presents the ratings for indicators within each domain. There is no minimum rating that guarantees the sustainability of a program. However, lower ratings do indicate opportunities for improvement that a program may want to focus on when developing a plan for sustainability.

Next Steps

- These results can be used to guide sustainability planning for your program. NA = not able to answer
- Areas with lower ratings indicate that there is room for improvement.
- Address domains that are most modifiable, quicker to change, and have data available to support the needed changes.
- Develop strategies to tackle the domains that may be more difficult to modify.
- Make plans to assess your program's sustainability on an ongoing basis to monitor program changes as you strive for an ongoing impact.

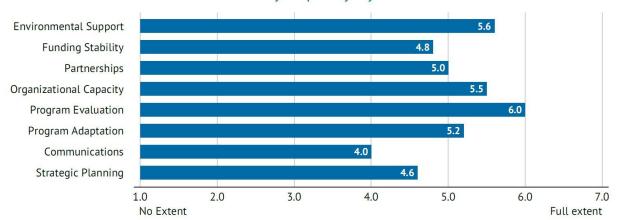
Here is your sustainability score:

Domain	Domain Score
Environmental Support	5.6
Funding Stability	4.8
Partnerships	5.0
Organizational Capacity	5.5
Program Evaluation	6.0
Program Adaptation	5.2
Communications	4.0
Strategic Planning	4.6

1 = program has this to no extent

7 = program has to the full extent

Sustainability Capacity By Domain



For more information about the Program Sustainability Assessment Tool and sustainability planning, visit https://sustaintool.org/

Environmental Support	Rating
1. Champions exist who strongly support the program.	7.0
2. The program has strong champions with the ability to garner resources.	6.0
The program has leadership support from within the larger organization.	7.0
 The program has leadership support from outside of the organization. 	5.0
5. The program has strong public support.	3.0
Partnerships	Rating
 Diverse community organizations are invested in the success of the program. 	e 4.0
2. Community leaders are involved with the program.	5.0
	5.0
Community members are passionately committed to the program.	
	6.0

\$ Funding Sta	ability	Rating
1. The program exists in a s climate.	upportive state economic	4.0
2. The program implements sustained funding.	policies to help ensure	5.0
3. The program is funded th	rough a variety of sources.	5.0
4. The program has a combine flexible funding.	nation of stable and	5.0
5. The program has sustained	ed funding.	5.0
Organization	nal Capacity	Rating
1. The program is well integor of the organization.	grated into the operations	7.0
2. Organizational systems a various program needs.	re in place to support the	6.0
3. Leadership effectively art program to external parti		5.0
 Leadership efficiently maresources. 	nages staff and other	NA
5. The program has adequate	ce staff to complete the	4.0

Program Evaluation	Rating
The program has the capacity for quality program evaluation.	6.0
2. The program reports short term and intermediate outcomes.	7.0
3. Evaluation results inform program planning and implementation.	7.0
 Program evaluation results are used to demonstrate successes to funders and other interested parties. 	6.0
5. The program provides strong evidence to the public that the program works.	4.0

that the program works.	2000
Communications	Rating
The program has communication strategies to secure and maintain public support.	6.0
Program staff communicate the need for the program to the public.	3.0
3. The program is marketed in a way that generates interest.	2.0
4. The program increases community awareness of the issue.	5.0
5. The program demonstrates its value to the public.	4.0

Program Adaptation	Rating
1. The program periodically reviews the evidence base	. 4.0
2. The program adapts strategies as needed.	7.0
3. The program adapts to new science.	5.0
The program proactively adapts to changes in the environment.	5.0
5. The program makes decisions about which components are ineffective and should not continue	5.0

Strategic Planning	Rating
1. The program plans for future resource needs.	6.0
2. The program has a long-term financial plan.	4.0
3. The program has a sustainability plan.	6.0
The program's goals are understood by all intereste parties.	d 4.0
The program clearly outlines roles and responsibilities for all partners.	3.0

Results based on responses to the Program Sustainability Assessment Tool, ©2012, Washington University in St Louis. For more information about the Program Sustainability Assessment Tool and sustainability planning, visit https://sustaintool.org/

APPENDIX B

CoP RCORP Sustainability Reflection Questionnaire



HRSA's Communities of Practice: Rural Communities Opioids Response Program Reflection Questions for Developing a Sustainability Plan

Name of Person (s) Completing Form:		:	
Date:	C	County Name:	

Step 1 – Decide How to Complete these Reflection Questions

- 1. For communities using group consensus, you will want to reference your assessment report and the notes from your group consensus discussion. It is up to you to decide if you want to pull the core group back together to answer these questions.
- 2. For communities using average scores, you will need to pull together the 2-4 core planning members who completed the assessment and hold a group discussion with them to reflect on the findings from the Sustainability Assessment Report.

Step 2 - Begin by Reviewing Your Sustainability Assessment

- 1. Review the Next Steps section of the report (on page 1), which provides some helpful guidance for selecting domains that you may want to strengthen.
 - a. Note that the selection of domains that you want to focus on in your sustainability plan is not always governed solely by how low a domain's score is.
 - b. The guidance also notes the importance of having data available to support the needed changes, and the importance of the domain being modifiable.
 - c. In addition to these considerations, you and your team will want to take into consideration local culture, history of prior efforts, and new trends that may be just emerging.

Step 3 – Reflect on Your Assessment and Document Your Plans

- 1. On page 2 of the Assessment report, look across the eight domains and complete a SWOT analysis.
 - a. What domains represent strengths and why?
 - b. What domains represent weaknesses and why?
 - c. What domains represent opportunities and why?
 - d. What domains represent threats and why?

e.

Strengths – Capture these domain(s)	Weaknesses – Capture these	
and why they are strengths in this box.	domain(s) and why they are	
	weaknesses in this box.	
Type your response here		
	Type your response here	
Opportunities – Capture these	Threats – Capture these domain(s) and	
domain(s) and why they are	why they are threats in this box.	



	Type your response here
Type your response here	

- 2. Prioritize one key domain area that represents either a key weakness or key threat for your Local RCORP Consortium.
 - a. You will need to gather information about how you intend to shore up and address this weakness or threat. Guiding questions have been included below to help you capture that information.
 - b. Please type your responses were noted below. OU/PIRE will take your information and format it into a formatted Sustainability Plan document.
 - c. You only need to select one domain to address. It may be either a weakness or a threat from your SWOT analysis. You will then answer questions 3-9 below regarding that domain.
 - d. If you want to select an additional domain area to address, you will then need to answer questions 3-9 again for that domain.
- 3. Name the weakness or threat domain area that you have selected to address.

Weakness or Threat Domain to Address: Type your response here

4. How and why did you prioritize this weakness or threat domain?

Type your response here

5. Who needs to help address this weakness or threat domain? Include organizations, agencies, community leaders, staff/personnel, etc., as appropriate for the domain selected.

Type your response here

6. What is the goal you want this group of organizations, agencies, leaders, and/or staff to address related to the domain weakness or threat that you have prioritized? Please write a goal statement that you could provide to this group that would represent what they need to work toward addressing.

Type your response here

- 7. What is the change you are seeking?
 - a. Define the long-term change (outcome(s)) you want to see occur.

Type your response here

b. How will know that you have achieved that outcome? (List at least one indicator.)



Type here

8. List one or more objective for the group.

Objective: Type here

9. For the objective, identify a few key activities (e.g., convene the group, engage the issue, report back) and for each list a key person who will be responsible; other resources needed (staff, volunteers, space, money); and a planned start and end date.

Activity	Start Date	End Date	Responsible Party	Resources
Type here	Type here	Type here	Type here	Type here

10. HRSA is prioritizing the following outcome:

Maintain affordability and accessibility of OUD prevention, treatment, and recovery services provided to individuals.

Please write a one-two paragraph statement about how your Local RCORP Consortium will keep this outcome in mind throughout the implementation process.

Type response here.

11. HRSA would like all Local RCORP Consortium to demonstrate that they are prioritizing evaluation.

Please write a one-two paragraph statement about how your Local RCORP Consortium is committed to developing quantifiable metrics that will be used to assess the impact of future activities.

Type response here.

Step 4 – Submit Your Reflection Report & Assessment Report to OU/PIRE

- 1. Save your Sustainability Reflection response document.
- 2. Send your completed Sustainability Reflection document to your TTAE.
- 3. Include a PDF copy of your online Assessment Report from Washington University.
- 4. OU/PIRE will transfer your information into a formatted Sustainability Plan and share it with you for final review and approval.