

## **COALITION ACCELERATOR PROGRAM APPLICATION – FAQ**

### **What is the coalition accelerator program?**

The coalition accelerator program is a multi-faceted opportunity offered to selected coalitions in the California Opioid Safety Network to engage in two years of intensive training and skill building. The goal of the program is to build a statewide network of robust coalitions that are well-positioned to increase opioid safety and reduce overdose deaths through addressing policy and practices at every strategic level: clinical, consumer, public health, behavioral health, within criminal justice and academic settings, and more.

### **What type of coalition should apply?**

The coalition accelerator program is open to all established coalitions - those that seek to accelerate their effectiveness as well as those in earlier stages of development that might need support in growing and/or organizing their coalition. Coalitions that have been working on other public health issues are also eligible to apply.

### **Will coalitions receive financial support?**

No. Coalitions selected to become part of the coalition accelerator program will receive intensive, customized coaching, clinical expertise and guidance, mentoring, leadership development and trainings, communications tools and templates, support with sustainability planning, and the option of one or more full-time AmeriCorps VISTA member. We have calculated that the accelerator program offers approximately \$65K of in-kind support.

### **Is CHCF providing funding for coalitions?**

Participating coalitions will be made aware of any additional resources that might become available over the course of the two-year program. Only coalitions in the Coalition Accelerator program will be eligible to apply for these resources.

### **How many accelerator coalitions will be selected?**

28 coalitions will be selected based on review of applications.

### **What are the selection criteria for the accelerator program?**

Program leadership will score applications based on a range of factors that indicate how ready a coalition is for this accelerator program. We will look for established leadership, the ability for that leadership to work in teams to advance coalition work, coalition progress to date, outlined vision articulating future goals, and a willingness of coalitions to learn and grow with this opportunity. We will also assess need based on current data and want the program to represent the geographic, political, and cultural range of our diverse state.

### **Will there be opportunities for cross-coalition learning?**

Yes. We will offer a few forms of web-based cross-coalition learning and in-person regional learning opportunities based on the needs of selected coalitions.

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**Are the strategic goals of the coalition accelerator program focused on the CDC identified goals of safe prescribing, naloxone distribution, and access to medication-assisted treatment?**

Yes, however we anticipate that coalitions may want to broaden the scope of each strategy to include correlated goals necessary to comprehensively address the opioid epidemic: supply side strategies (e.g., safe prescribing guidelines, tapering), harm reduction approaches (e.g. naloxone distribution, needle exchange), and promoting recovery (e.g. MAT access, addressing stigma).

**How will syringe exchange programs be involved with these efforts? And in addition to syringe exchange, could other infectious disease activities like HIV and Hepatitis C testing be supported?**

A syringe exchange program will reduce the risk of spread of Hep C and HIV, and will also build entry pathways for those needing treatment for opioid addiction thus coalitions that build harm reduction strategies such as a syringe exchange program will also reduce spread of communicable diseases including HIV and Hep C.

Since the accelerator program is not providing direct funding, a coalition is free to bundle additional services into their strategies that serve the community's health as they can identify resources to support that testing. The Accelerator program will provide training and technical assistance on how to build community acceptance, to help policymakers understand and support the need for such programs and bring information on best practices for effective syringe exchange programs.

**What kind of coaching and support should coalitions expect?**

Impact coaches will support your coalition. Coaching could include activities such as identifying and capturing actionable data that tells your story and persuades community members and policy makers, building a strong stakeholder community, leveraging resources for effective outreach into impacted communities, helping to support the development of robust community sensitive treatment and recovery options.

**Who will be leading the California Opioid Safety Network?**

The Public Health Institute's (PHI) Center for Health Leadership and Practice is managing the coalition network and its coalition accelerator program. Carmen Nevarez, MD, PHI's Vice President for External Relations and Preventive Medicine Advisor directs the leadership center and will be leading the network. Marin County public health officer Matt Willis, MD (also cofounder of "RxSafe Marin") will be the clinical lead for the network. Kelly Pfeifer, MD and the California Health Care Foundation support opioid safety work throughout the state. Dr. Pfeifer and CHCF will play a key role advising the network.

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### Who are the impact coaches?

- **Mary Maddux-Gonzalez, MD, MPH** Board Chair, Latino Coalition for a Healthy California; former Health Officer/Public Health Division Director, County of Sonoma; former Chief Medical Officer, Redwood Community Health Coalition; Associate Clinical Professor at UCSF, among other positions; and has previously served as a lead for an Opioid Safety Coalition.
- **Arthur Chen, MD** Senior Fellow at Asian Health Services, former Health Officer for Alameda County, former Chief Medical Officer for Alameda Alliance for Health (the public Medi-Cal managed care plan), formerly served on Board of Directors of California Endowment, and is past president of the Alameda Contra Costa Medical Association.
- **Mark Horton, MD, MSPH** former California State Public Health Officer, Chief Deputy Director at CA Department of Health Services, former Deputy Agency Director and Health Officer for Orange County, VP Community Programs at San Diego Children’s Hospital, and adjunct faculty at UC Berkeley School of Public Health.
- **Glennah Trotchet, MD** community health consultant, former primary care physician, Sacramento County Public Health Officer and Division Chief, and Medical Director of the Sacramento County Primary Care and Public Health Clinics.

### What other support do accelerator coalitions receive?

Coalitions will have access to a number of subject matter experts, leading clinicians throughout the state pioneering opioid safety work who can help coalitions execute on their goals (for example: Andrew Herring, MD, has started an MAT induction clinic at Highland Hospital Oakland and will offer help to other coalitions working to integrate MAT into emergency services). “i.e. communications,” a strategic communications and policy advocacy firm, will be developing a range of designed and network-branded tools and templates, that can be customized for local use (e.g. op-eds, fact sheets, press releases, policymaker updates) for coalition and providing technical assistance. The PHI Leadership Center will be utilizing its Sustainability Toolkit© to help coalitions build a solid foundation to support this critical work through technical assistance, coaching and customized team support.

### What is a coalition accelerator team?

Every coalition will have members who are the most relevant to the pressing issues in their communities. We are asking for teams of 4-6 people to serve as your coalition’s accelerator team. The team will work directly with your impact coach and otherwise participate in program activities. Ideally coalition accelerator teams include members representing a range of perspectives. For example: --a public health officer, a private health care provider, a law enforcement official, and a parent of a victim-- would provide the core representation required to address the complexities of achieving the coalition goals.

### What is the time commitment for accelerator team members?

Each team member should expect to spend approximately 5 hours/month during the duration of the program from through December 2019. This includes working with your impact coach, conference calls, workshops, trainings, and webinars, and other support activities appropriate for your coalition.

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### **Can a coalition apply with fewer than 4 members?**

Yes, though we have found that at least four members allows the strategies and new tools to more easily spread throughout your coalition. Shared learning amongst a core team of leaders can lead to a resilient coalition where no one person is responsible for all leadership tasks. Please see the RFP addendum for more information on accelerator teams.

### **What if my coalition is not selected as an accelerator coalition?**

Everyone working in opioid safety is welcome to be part of the broader network. Members of the network will have access to resources such as webinars and research reports, and ongoing communications regarding opioid safety strategies in the field.

### **What if my coalition is already receiving financial and/or technical support from another program in the state of California, are we still eligible for this program?**

Yes, we will coordinate closely with the state and other partners to avoid duplication, capture lessons learned, and build a strong statewide network for opioid safety.

### **Does the applying Coalition need to be a nonprofit 501(c)3 corporation?**

No.

### **What reporting is required of coalitions in the accelerator program?**

There are minimal reporting requirements attached to the accelerator program. Coalitions with AmeriCorps VISTA placements will be required to complete progress reports for the AmeriCorps program.

### **How long will the RFP take to complete?**

We recommend that you spend at least an hour discussing the RFP with your core leadership team before filling out this application. There are four sections in total and we anticipate that each section could take 30 minutes or more to complete.

### **How will AmeriCorps VISTA members be trained?**

AmeriCorps VISTA members will go through a series of AmeriCorps VISTA and coalition accelerator program trainings prior to placement with coalitions. As the sponsoring organization, PHI's Leadership Center will provide initial orientation as well as ongoing opioid safety content and network support targeted for the AmeriCorps VISTA members. AmeriCorps VISTA members will also have access to many of the opportunities that are available for their coalitions.

### **Will the AmeriCorps VISTA members be housed at the coalition site or at PHI working with the coalition?**

VISTA members will be based in the communities at their host site.

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### **If an AmeriCorps VISTA member does not work out, who will manage that?**

PHI, in coordination with the AmeriCorps program, will help coalitions address member placements that are not the right fit and will work with coalitions to bring in a new placement should an AmeriCorps VISTA member placement not work out.

### **Can counties that do not currently have a coalition join with a neighboring county's coalition to get help? Also, would multi-county coalitions get more than one AmeriCorps VISTA member?**

Yes and yes. We encourage cross-county collaboration, especially since we've seen it work in coalitions to date. Should multi-county coalitions show the need and the ability to support multiple AmeriCorps VISTA members, they are eligible to receive more than one.

### **Where will AmeriCorps VISTA members come from, who recruits, hires, and places them?**

AmeriCorps VISTA Members will be hired and matched with local communities by the AmeriCorps in cooperation with PHI's Leadership Center based on: the AmeriCorps VISTA member's skills, the coalitions' needs, and the coalitions' ability to provide appropriate supervision. Each member is placed in a 100% FTE position for a one-year period, with the possibility of an extension or a new placement through the second year of the coalition accelerator program. PHI's Leadership Center will lead recruitment and matching of the AmeriCorps VISTA members with support from AmeriCorps nationwide recruitment site and using information collected on the coalition application. After coalitions are selected for this opportunity, the PHI Leadership Center will work with host sites to match appropriate members. AmeriCorps VISTA (a federal program) will be the official employer of with PHI's Leadership Center as their sponsoring organization and the matched accelerator coalition as the host site. Salaries and benefits for the AmeriCorps VISTA members are paid for by the AmeriCorps VISTA program.

### **How much would we get to be involved in selection of the AmeriCorps VISTA member that would be placed with us? Can coalitions put forward names for potential AmeriCorps VISTA members?**

We are working with the AmeriCorps program on timing and logistics for recruitment and hiring. We will encourage local coalitions to post the AmeriCorps VISTA placement position in their own communities and put forward individual names they identify as a good fit for the opportunity.

### **What will AmeriCorps VISTA members be prepared to do as part of my coalition?**

PHI's Leadership Center will be working with AmeriCorps VISTA to prepare members for a range of projects and duties, many of which have been identified by existing coalitions (through inquiries via California Healthcare Foundation and the needs assessment conducted by PHI earlier this year). AmeriCorps VISTA members are expected to work for your coalition in a 100% FTE capacity. An AmeriCorps VISTA member may, for example, manage your meeting schedule and logistics, coordinate your social media postings, and/or help with project management support. They can also prepare materials for communication campaigns, research community assets and needs, prepare materials for funding opportunities. See the RFP addendum for more examples.

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### **What is the time commitment to support an AmeriCorps VISTA member?**

Each participating coalition must commit to providing an on-site supervisor (at least 5% FTE) that will offer guidance, input and mentoring to the member, as well as a workspace, office supplies, and equipment that meet the Corporation for National and Community Service basic federal requirements. PHI will also provide ongoing supervisory support for the cohort of AmeriCorps VISTA members working as part of the program.

### **How many AmeriCorps VISTA members will be part of the coalition accelerator program?**

There will be up to 40 AmeriCorps VISTA placements throughout the state. Each will work with an accelerator coalition for a minimum of a year, with the possibility of a new placement or extension of work through the second year of the accelerator program. The AmeriCorps VISTA member is optional and additional to the support offered through the Coalition Accelerator program.

### **Is it possible for more than one AmeriCorps VISTA member to be placed with the same coalition?**

Yes. Furthermore, it is not a competitive process: there will be enough VISTA members to provide support for each of the selected 28 coalitions, with the ability to provide multiple VISTA placements as appropriate. Priority for AmeriCorps VISTA members will be given to coalition accelerator sites first, any remaining placements will be strategically decided at a later date and are not a part of this RFP process.

### **We don't have a coalition yet but are interested in either starting one or joining our neighboring counties' joint coalition. Can you direct us to a nearby coalition that we might be able to join?**

You can only apply to the program if you are an existing coalition. However, we would be happy to connect you to any coalitions in your area with whom we have contact. You can discuss joining and/or their application directly with them. We cannot broker coalition membership and/or relationships directly.

### **Regardless of whether we are accepted into your program, can we be added to your mailing list?**

Yes. Additionally, please keep in mind that information may be updated more frequently on our website: <https://healthleadership.ning.com/ca-opioid-safety-network>

### **If I missed the webinar, would it be available to listen to?**

Yes, the informational webinar about the RFP can be found at the following link: <https://healthleadership.ning.com/ca-opioid-safety-network>. Look for a link near the top of this page called "presentation slides."

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### **Our coalition would like to apply, but we are concerned about the time commitment; how much time will coalitions need to provide?**

While the program does require a time commitment, this is an action learning program, meaning that all activities are related to your own coalition's work. The webinars, tools and activities are applied directly to your work at the point that they are most useful. The coaching is related to your coalition's development and opioid safety work, and the subject matter expert training is directly related to best practices in opioid safety. The Accelerator program is meant to make your work more effective by increasing opportunities share what is working between coalitions across the state.

### **Even if we don't get into your opioid accelerator program, can we still be part of the state network?**

Yes. All individuals, organizations, and/or coalitions who are working to combat the opioid crisis are a part of the network.

Our website (<https://healthleadership.ning.com/ca-opioid-safety-network>) is the public face of the network, and is an excellent resource for staying in touch with the best practices in the field. We intend to share best practices from the field, including the CDC, other initiatives in other states and from within our Accelerator program and wider network.