

*Note: The following pages outline the questions included in the online application. All applications must be submitted using the online system. You may use the pages below as a reference when collaborating with other team members on your responses.*

### **Application**

*Required fields are marked with an asterisk (\*)*

**Before filling out this application, please carefully read the instructions and program information on pages 1-8 of this document.**

☒ **YES**, our team has read the application instructions and program information.

### **Applicant Information**

Please answer the following as the person completing the application on behalf of your team.

1. Name \* Joy Beeler
2. Email \* beelerj@mendocinocounty.gov
3. Role or Title \* Staff Services Administrator

## **Community Description**

1. Team/Coalition Name \* Safe Rx Mendocino
2. Name of the city(ies), county(ies), tribal area(s), and/or regions in which your team works \* Mendocino County
3. If your team works in multiple counties, where does it have its headquarters? Please specify city and county, if possible. N/A
4. Please choose what best describes your community: \*  

Urban	Suburban	Small Town	Rural
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5. If your team targets a specific age group, racial/ethnic group, and/or special population that is disproportionately impacted in your community, please describe in more detail (~100 words) Safe RX Mendocino promotes all local efforts to expand harm reduction activities, with the goal of reducing drug overdose deaths. Overdose rates in Mendocino County are highest among Native American populations. By specifically addressing these historically marginalized populations in Mendocino County, including their representation in the planning and implementation of intervention modalities, negative outcomes of substance use will be more equitably mitigated. This includes a reduction in the number of overdose death for Native populations, who are disproportionately at risk.

## Team Description

1. How long (in years) has your overdose team or coalition been operating? \* 5+ years
2. Describe the structure of your coalition or collaborative. How large is it? How is membership defined? Does the team have action teams or task forces? How often does the team meet? How is it governed and how are decisions made? If you do not have an operational coalition or collaborative, please describe the current leadership structure in your community.\* Our Coalition meets monthly, and has had action teams over the years with respect to specific areas. Behavioral Health manages all administrative responsibilities, including correspondence, meeting facilitation, agendas, and minutes. The invite list is extended to around 120 people involved across dozens of organizations, and we average attendance of around 30 people each month.
3. How would you describe your team's stage of development using Bruce Tuckman's Stages of Team Development scoring scheme below? \*

Forming

Norming

Storming

Performing

### Tuckman's Stages of Team Development:

**Forming** – working to establish expectations, develop trust, and agree on common goals;

**Storming** – identifying power and control issues, developing communication skills, and reacting to leadership;

**Norming** – working within an atmosphere of agreement on roles and problem-solving processes, with decisions made through negotiations and consensus;

**Performing** – achieving effective and satisfying results, working collaboratively, and caring for each other.

4. What are the top 2-3 challenges your team, coalition or collaborative is currently facing? The largest challenge we are facing right now is staff turnover and coalition attrition. There is a need to reinforce the solidarity of our members and build trust in the community as a committed, recognizable team. We have had inconsistent attendance at meetings through the COVID years and as members join and resume attendance it has impacted the stage of development and moves us between Norming and Performing.
5. What are the top 2-3 successes your team, coalition or collaborative has had over the past year? Our coalition has improved Naloxone saturation countywide through the acquisition and donation of 25 Opioid Overdose Emergency boxes to even the most remote locations in our County, including those with large tribal communities. We have implemented HIDTA's ODMAP system in Mendocino County to provide real-time overdose analytics, which will inform our County's overdose hotspot alert system. We have recently submitted a 12-page, comprehensive Naloxone Distribution Policy and Procedure to the State for consideration so that we may be able to order enough Naloxone to fill demand countywide, providing free Naloxone to all agencies and individuals requesting it.

6. How has your team adapted your work in light of COVID-19? \*We adapted to regular virtual meeting formats, and when necessary, we distributed Narcan via drive thru.
7. What approach does your team take, if any, to address health equity and disparities? \*Safe Rx uses social media, print, on physical ad spaces throughout the County, such as billboards, and banners, on the radio, and on websites to eradicate the stigma associated with addiction in both Spanish and English. We have been engaging stakeholders from priority populations such as the Native communities, Latinx communities, LGBTQ (youth in particular), and are working on encouraging additional representatives from these communities to attend Safe Rx.
8. What approach does your team take, if any, to address polysubstance use? \*We are presently discussing action steps for addressing polysubstance use specifically.
9. Check the core partners in your team:
- ☐ Medical societies
  - ☐ Pharmacies
  - ☐ Law enforcement, jails, and corrections
  - ☐ Schools and academic institutions
  - ☒ Public health department
  - ☒ Health care providers, hospitals, and clinics
  - ☒ Local government
  - ☒ Consumers, families, advocates, and the community
  - ☒ Mental health and addiction treatment services (behavioral health)
  - ☐ First responders
  - ☐ Faith-based community
  - ☐ Business
  - ☒ Tribes
  - ☒ Payors/Health Plans
  - ☐ People who use drugs
  - ☐ Harm Reduction Services/Syringe Services Program
  - ☒ Other, please describe Harm Reduction Services/Syringe Services Program.

10. Note if a particular organization or sector serves as the leading agency for the team. \*

- ☐ Medical Societies
- ☐ Pharmacies
- ☐ Law enforcement, jails, and corrections
- ☐ Schools and academic institutions
- ☐ Public health department
- ☐ Health care providers, hospitals, and clinics
- ☐ Local government
- ☐ Consumers, families, advocates, and the community
- ☒ Mental health and addiction treatment services (behavioral health)
- ☐ First responders
- ☐ Faith-based community

- ☐ Business
- ☐ Tribes
- ☐ Payors/Health Plans
- ☐ People who use drugs
- ☐ Harm Reduction Services/Syringe Services Program
- ☐ Other, please describe



## **Accelerator 5.0 Interest and Goals**

1. Did your team or coalition participate in the Accelerator 1.0? Y/N
2. Did your team or coalition participate in the Accelerator 2.0? Y/N
3. Did your team or coalition participate in the Accelerator 3.0? Y/N
4. Did your team or coalition participate in the Accelerator 4.0? Y/N
5. If your team or coalition participated in any past Accelerator program, how did it improve your performance? \*The Accelerator program has improved our County's ability to combat the overdose epidemic by bringing key community partners together with a common purpose to formulate and carry out equitable actions plans best suited to our County populations.
6. Why is your team interested in joining Accelerator 5.0? How would participating in Accelerator 5.0 Program help you achieve your goals? Accelerator has been an invaluable networking and resource sharing tool that we would be grateful to have the opportunity to continue being a part of. The program will help our efforts to bring consistency in membership and additional key stakeholders (especially to improve equity) to coalition meetings.
7. No question number 7.
8. The Accelerator 5.0 Program is about creating sustainable practices in overdose prevention on in your coalition/ collaborative. Please indicate your team's current stage in incorporating sustainability into your work:
  - a. Awareness – aware of the need for sustainability in your work
  - b. Desire – desire to incorporate sustainability into your work
  - c. Preparation – building confidence and commitment to sustainability in your work
  - d. Action – implementing plans and strategies to address sustainability
  - e. Maintenance – sustainability practices are embedded in your work
9. What are the main challenges or gaps your community currently faces with respect to sustaining your work in substance use prevention and treatment? Staff turnover has created challenges with ensuring the community knows they can turn to Behavioral Health as a harm reduction champion.
10. Which learning group best defines your team in COPN Accelerator 5.0 program?
  - a. General learning group for well-established coalitions in mixed urban and suburban areas
  - b. "Rural hub" learning group for peer learning and exchange among rural communities
  - c. "Reboot" learning group for local leaders looking to revitalize their coalition and has less than the required 4 – 6 Accelerator team members
11. Can your full team commit to participating in the activities outlined from October 2023 through June 2024? We anticipate 5-6 hours a month per team member for program-

specific activities including web-based workshops, team-based work, and learning group calls with Impact Coaches and peer teams. \*

Yes No



## Accelerator Team

Your team, coalition, or collaborative must select four to six team members who will commit to participating in this program from October 2023 through June 2024. Please enter information about each member in the next few sections, starting with the Team Coordinator. If you cannot assemble a full team, you will be assigned to the “reboot” learning group and only need to list a team coordinator, plus an additional team member if one is available.

### Team Member 1 – Team Coordinator \* Lindsey Daugherty

The Team Coordinator will play a leadership role on behalf of your team. He/she/they will serve as the main point of contact between your team and the CHLI program office, and coordinate logistics with your team’s Impact Coach. The Team Coordinator will also ensure that program requirements are met, including submission of tools and biannual requests for team progress reports and feedback.

A1. First Name:

A2. Last Name:

A3. Position/Title:

A4. Degree(s):

A5. Organization:

A6. Address:

City:

County

Zip Code:

A7. E-mail:

A8. Phone Number:

A9. Select the sector in which you work.

Public/ Government

Non-Profit

Private

Other

A10. Indicate the discipline that you use to describe your work:

Business

City / Urban Planning

Community Building, Development, or Social Services

**Team Member 2** Gary Thomas

B1. First Name:

B2. Last Name

B3. Position/Title:

B4. Degree(s):

B5. Organization:

B6. Address:

City:

County

Zip Code:

B7. E-mail:

B8. Phone Number:

B9. Select the sector in which you work.

Public/ Government

Non-Profit

Private

Other

**B10. Indicate the discipline that you use to describe your work:**

Business

City / Urban Planning

Community Building, Development, or Social Services

Consulting

Economic Development

Education / Academia

Environmental Health

Faith-Based Organization

Health Care

**Team Member 3** Sonia De Los Santos

C1. First Name:

C2. Last Name

C3. Position/Title:

C4. Degree(s):

C5. Organization:

C6. Address:

City:

County

Zip Code:

C7. E-mail:

C8. Phone Number:

C9. Select the sector in which you work.

Public/ Government

Non-Profit

Private

Other

**C10. Indicate the discipline that you use to describe your work:**

Business

City / Urban Planning

Community Building, Development, or Social Services

Consulting

Economic Development

Education / Academia

Environmental Health

Faith-Based Organization

Health Care

**Team Member 4 Karen Lovato**

D1. First Name:

D2. Last Name

D3. Position/Title:

D4. Degree(s):

D5. Organization:

D6. Address:

City:

County

Zip Code:

D7. E-mail:

D8. Phone Number:

D9. Select the sector in which you work.

Public/ Government

Non-Profit

Private

Other

**D10. Indicate the discipline that you use to describe your work:**

Business

City / Urban Planning

Community Building, Development, or Social Services

Consulting

Economic Development

Education / Academia

Environmental Health

Faith-Based Organization

Health Care

## AmeriCorps VISTA Assignee

Visit our [website](#) for more information about the COPN AmeriCorps VISTA program.

1. Has your organization hosted an AmeriCorps VISTA member through COPN in the past?\*

Yes No

2. Would your team like to recruit an AmeriCorps VISTA assignee? \*

Yes No

*\*\*Note: Teams that currently have an AmeriCorps member or have hosted one in the past may continue with the VISTA program and do not need to complete this section of the application.*

## AmeriCorps VISTA Support

1. VISTAs must be placed at a host site that will execute a signed memorandum of understanding (MOU) with CHLI. Please list the organization that would be responsible for signing the MOU and serving as the official host site for an AmeriCorps member.

- Organization Name:
- City:
- County:
- Zip Code:

2. VISTA members are assigned to help boost local capacity, infrastructure, and sustainability (*note: VISTAs cannot be in a direct service role*). Which of the following types of tasks would provide the greatest benefit to your team if performed by an AmeriCorps VISTA member? Please check all that apply. \*

- ☐ Meeting scheduling, logistics, and follow-up to keep action groups on task
- ☐ Keep coalition leads up-to-date by providing notes from committee meetings and/or activities
- ☐ Provide project management support
- ☐ Identify new intervention or advocacy opportunities
- ☐ Outreach and communication with a wide range of stakeholders
- ☐ Community engagement efforts, including identifying new resources and prevention opportunities
- ☐ Manage public service events and support efforts to institute ongoing services (e.g., take-back bins available at all times)
- ☐ Develop draft reports for funders
- ☐ Develop draft presentations for Coalition leads to deliver to external stakeholders