

California Overdose Prevention Network: Results from the Accelerator Program's Second Cohort

The California Overdose Prevention Network (COPN) is a network of coalitions, organizations, and individuals working at the forefront of the overdose epidemic. Launched in 2017 by the Center for Health Leadership and Practice (CHLP), a part of the Public Health Institute, COPN is the largest overdose prevention network in the country with active coalitions serving 85% of the people in California. COPN aims to connect local leaders, build capacity, and implement lasting change in communities.

The COPN Accelerator 2.0 program began in fall of 2020 with the aim of supporting local multi-sector coalitions advance strategic partnerships and their collaborative overdose prevention efforts. The Accelerator program supports teams through individual coaching, peer sharing opportunities, and access to experts, tools, and resources. The Center for Community Health and Evaluation, part of Kaiser Permanente Washington Health Research Institute, conducted an evaluation of COPN's Accelerator 2.0 program to understand its impact.

The following summary shares data from program bi-annual reporting, interviews with team leads, a survey conducted by COPN's AmeriCorps VISTA, and online surveys of coalition leads (n=10) conducted in April and October/November 2021.

Strengthening Coalitions

Coalitions participating in the COPN Accelerator program built and strengthened their infrastructure, developed workplans and sustainability plans, were able to navigate transitions, and stay accountable to their goals.

100% of respondents agreed that the Accelerator program had:

- Improved their ability to **strengthen partnerships**
- Helped in **progressing** their coalition's impact strategies
- Improved the coalition's **effectiveness/performance**
- Helped the coalition **develop** as a group
- Assisted them in developing **professional relationships**

A huge portion of what COPN [Accelerator 2.0 program] offered was used to create a stronger coalition.

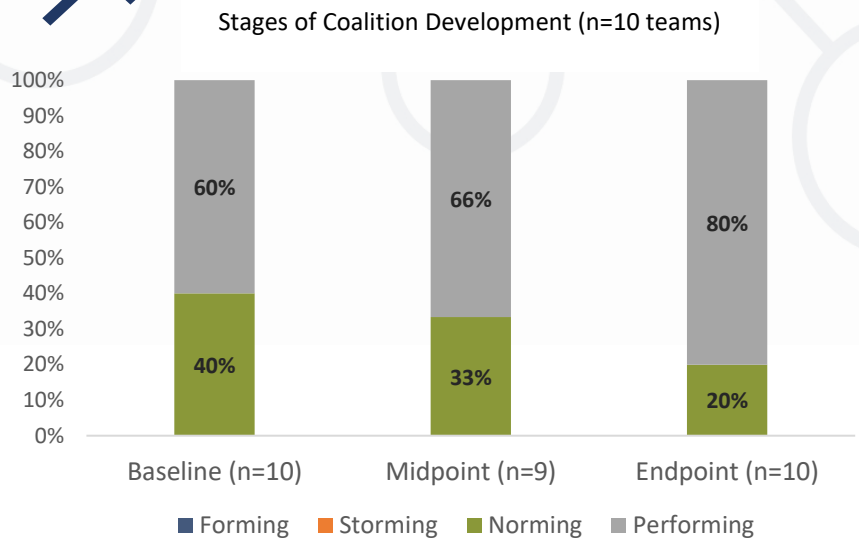
Coalitions that participated in the COPN Accelerator 2.0 program

1. Butte Glenn Opioid Safety Coalition
2. Contra Costa County MEDS Coalition
3. Drug Safe Solano
4. East Bay Safe Prescribing Coalition
5. El Dorado Opioid Coalition
6. Inland Empire Opioid Crisis Coalition
7. Safe Rx Mendocino Opioid Safety Coalition
8. SafeRx Santa Cruz County
9. San Benito County Opioid Task Force
10. Santa Barbara Fighting Back Opioid Safety Network

Coalition Stages of Development

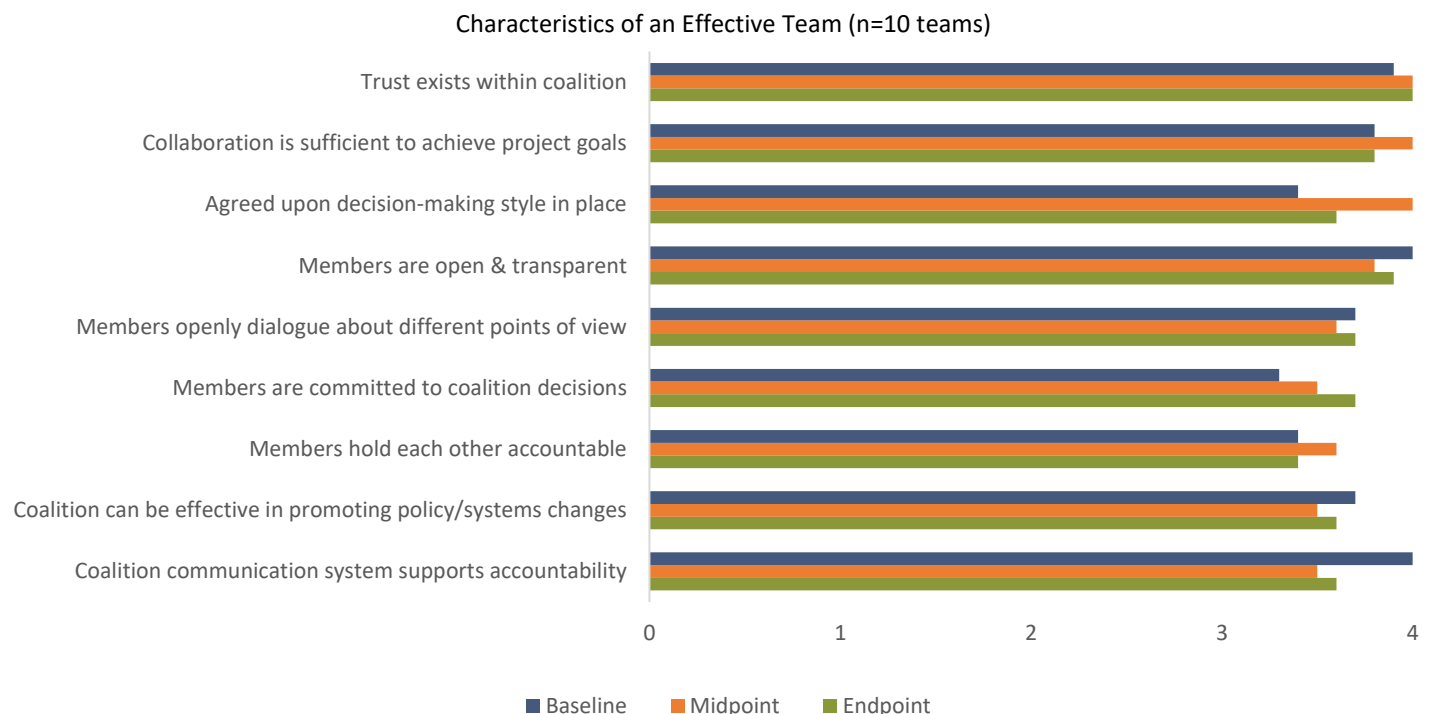


In the baseline, midpoint, and endpoint assessments, coalitions were asked about their stage of development based on Bruce Tuckman's **Stages of Group Development**. This graph displays the percentage of teams who selected each option. 80% of coalitions were in the "performing" stage at the end of the program compared to 60% at baseline.



Characteristics of an Effective Team

Throughout the program, coalitions were asked about their level of agreement on a series of characteristics of effective teams. The figure below displays the average rating across coalitions. Throughout the program, the vast majority of team leads somewhat agreed (rating of 3) or strongly agreed (rating of 4) that their coalition had established these characteristics.



Building Strategic Partnerships



The of the COPN Accelerator program was creating and cultivating strategic partnerships. **All coalitions mentioned working with new partners during their time at COPN.** The most commonly mentioned new partners were:

- Law enforcement/first responders
- Community-based organizations
- Education sector
- Medical providers

In the coming year the **sectors/partners that coalitions are hoping to recruit most** were:

- Faith-based community
- People with lived experience (i.e., who use/have used drugs)
- Businesses

The majority of coalitions said the **COPN Accelerator program encouraged them to change their approach to creating strategic partnerships** in the following ways:

- Incorporating new outreach methods
- Identifying gaps in partnerships
- Creating new opportunities for engagement through virtual options
- Promoting mindfulness, diversity, and vulnerability in their partnerships



We have a stronger relationship with school partners, harm reduction partners, and are most connected to first responders and the role they can play.



Incorporating Health Equity

[We are] incorporating native healing practices into MAT [medication assisted treatment] & SUD [substance use disorder] treatment.

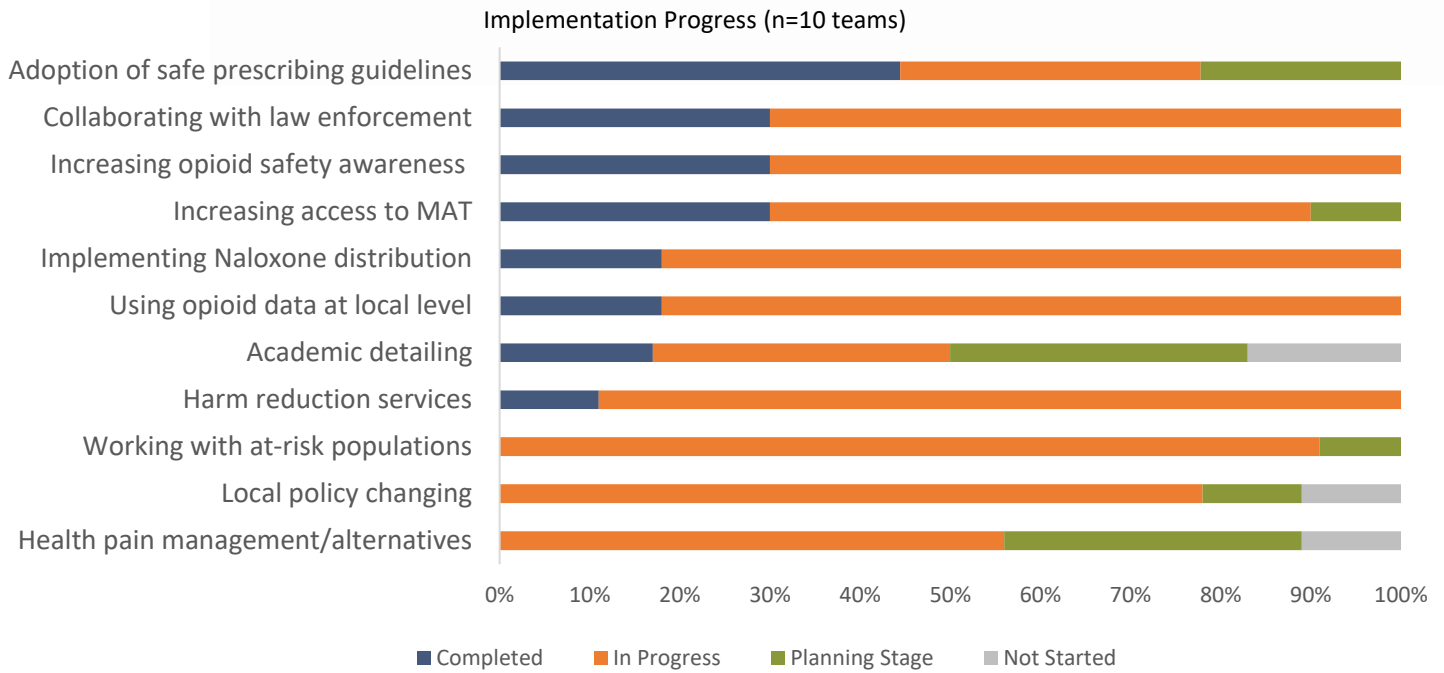
The COPN Accelerator focused on health equity throughout the program. Participants were encouraged to view their work through an equity lens to **break down barriers to health and better engage the communities they serve.** All ten coalitions were working with under-resourced communities during COPN. The most common priority populations were:

- Unhoused individuals
- People of color
- Pregnant persons
- People for whom English was a non-primary language
- Youth
- People who identify as LGBTQI+

Implementation Progress

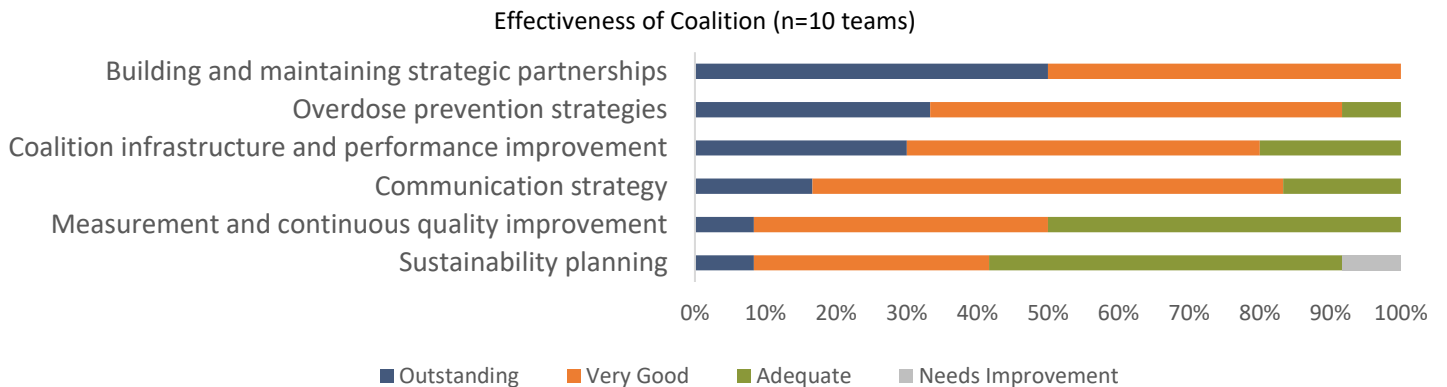


At the end of the program, COPN Accelerator coalitions were asked to rate their implementation progress on a variety of objectives related to overdose prevention. Teams either completed or were actively working on the majority of program objectives. For the majority of the program objectives teams said they were in progress or had completed the objective.



Coalition Effectiveness

At the end of the program, COPN Accelerator coalitions were asked to rate their coalition in a variety of COPN objectives related to coalition effectiveness. Coalitions all rated their efforts to build and maintain strategic partnerships (a key focus of the COPN Accelerator program) as outstanding or very good. There were more opportunities for continued development related to quality improvement and sustainability planning—about half of the coalitions rating those items as adequate or needs improvement.



Individual Development



At the end of the program COPN Accelerator team leads were asked to indicate their level of agreement on a variety of objectives related to their development and progress. For almost all of the objectives respondents strongly or somewhat agreed that the program had impacted their development. The strongest agreement was around building strategic partnerships and making progress on their coalition’s impact strategies.

Our approach is more mindful and holistic, while focusing on removing barriers to access and being integrative of both the recovery continuum and the community.

Team lead professional development (n=10 respondents)



Challenges

Staffing changes, reassignments, more job duties, and lack of internet or Wi-Fi connectivity issues were some of the challenges our coalition faced due to COVID-19.

All ten coalitions said they faced challenges while participating in the COPN Accelerator 2.0 program. The most commonly cited challenges were related to the COVID-19 pandemic including:

1. Staff shortages or lack of engagement because of competing priorities.
2. Increased difficulty with doing their work because they could not offer services or meet with community members in person.
3. Struggles with trying to maintain engagement in a virtual format.

Key Accomplishments



Coalition members mentioned several key accomplishments they achieved while participating in the COPN 2.0 Accelerator program. The frequent accomplishments were:

1. Starting a **new program or project**
2. Participating in **outreach or education** in their community
3. **Expanding their coalition** and/or adding new partnerships

Other unique accomplishments mentioned by coalitions were improving their services, conducting trainings, and gaining a better understanding of root causes of overdoses.



We have participated in 2 television news segments, 3 radio programs, a local CTV program and a podcast to increase public awareness.



Contribution & Network Connections

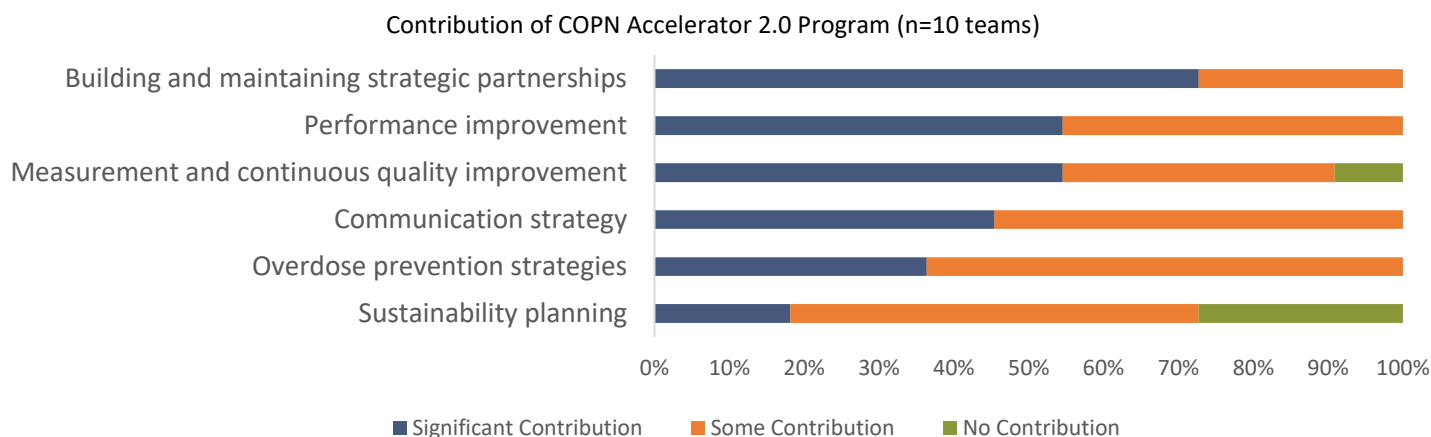
When asked at the end of the COPN 2.0 Accelerator program what the **benefits of participation** were, the most commonly cited were:

- Adding/engaging new partners
- Advancing priorities related to overdose prevention
- Learning from and sharing with other coalitions

A key focus of the COPN 2.0 Accelerator program was developing **network connections**. COPN Accelerator 2.0 program participants remarked they:

- Shared and received information and resources with other coalitions
- Formed relationships with other coalitions
- Worked with other coalitions on a project

At the end of the program, coalitions were asked to rate how the COPN Accelerator 2.0 program contributed to a variety of objectives for their coalition. Results are displayed in the figure below.



Most Useful Components



Coalitions were asked which **components of the COPN Accelerator program they found most useful**. They most frequently mentioned the tools. Of those tools the respondents ranked the following three the highest:

- [Partnership Mapping Tool](#)
- Big Picture Tool
- Feature Strategic Partnerships Tool

The other top mentioned components were the webinars/training, calls, coaching, engaging with partners, and technical assistance.



Our coalition has been built using the Partnership Mapping Tool. We were able to easily identify who is at the table and who is missing.



Program Satisfaction



[COPN Accelerator has] been extremely helpful in moving coalition in a positive way. Before we only met monthly and were less structured. Now we have a strategic plan, an elevator speech, tools to help map, chart, and we are more thoughtful about how [we] plan and organize.



Participants were very satisfied with COPN Accelerator program, rating their overall satisfaction an average of **8.8** on a 10-point scale (with 10 being very satisfied).

100%

- Would recommend the program to colleagues
- Agreed the COPN 2.0 Accelerator program model was effective in **coalition building, development, and functioning**
- Agreed that the program's use of **experimental learning** for applying program content to real projects is effective

For more information about COPN:

Contact Amy Max, program manager, Center for Health Leadership and Practice, Public Health Institute, amax@healthleadership.org, or go to the program website at <https://nopn.org/california>.