

CONSORTIUM MANAGEMENT 101:

Development and
Engagement
Strategies for
Success in
Building
Community
Resources for
those with Opioid
Use Disorder

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About Us

Behavioral health consultants with the Steadman Group, a woman-owned consulting firm in Denver, CO

Work with a variety of stakeholders across the state to write grants, manage federal grants, and consult on individual projects

Specialty: Population health for substance use disorder

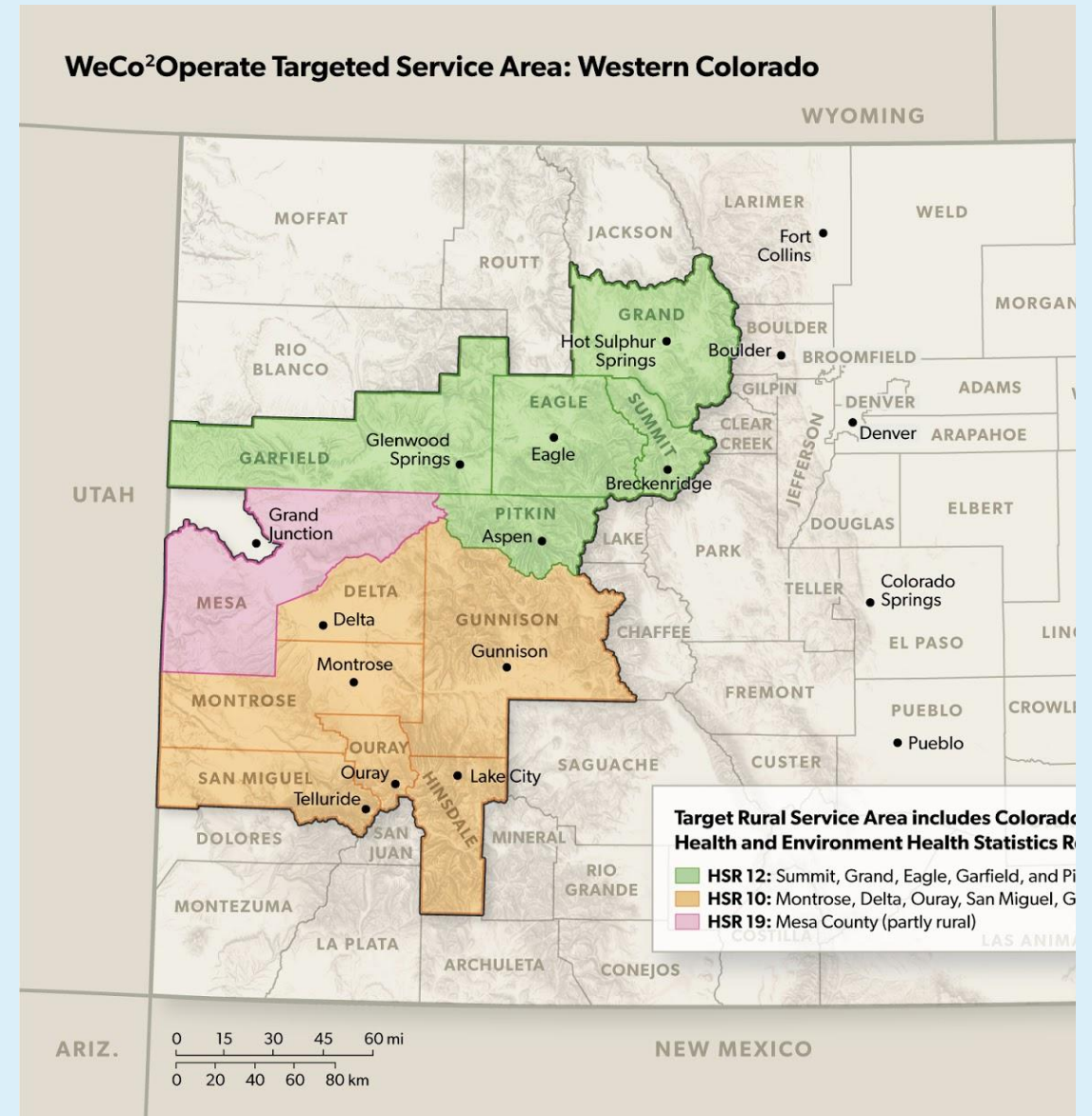
Experience with HRSA RCORP:

- St. Mary's Hospital-Planning
- St. Mary's Hospital-Implementation
- Memorial Regional Health-Implementation

* We have no conflicts of interest, or financial disclosures

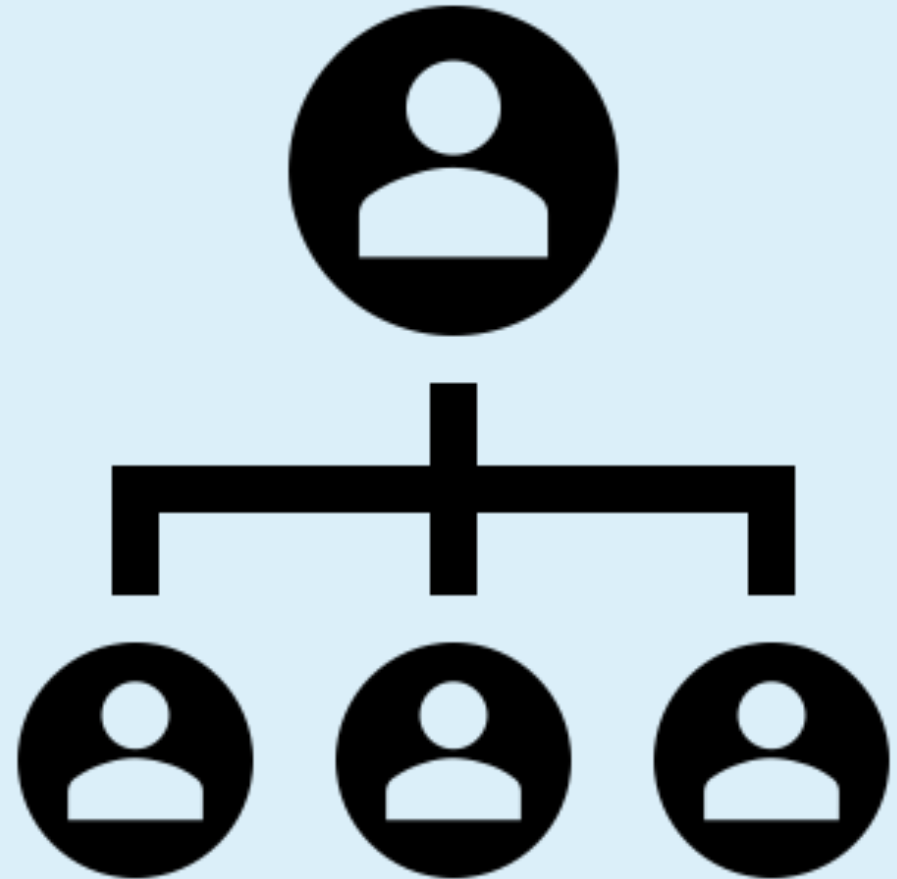
Consortium Composition

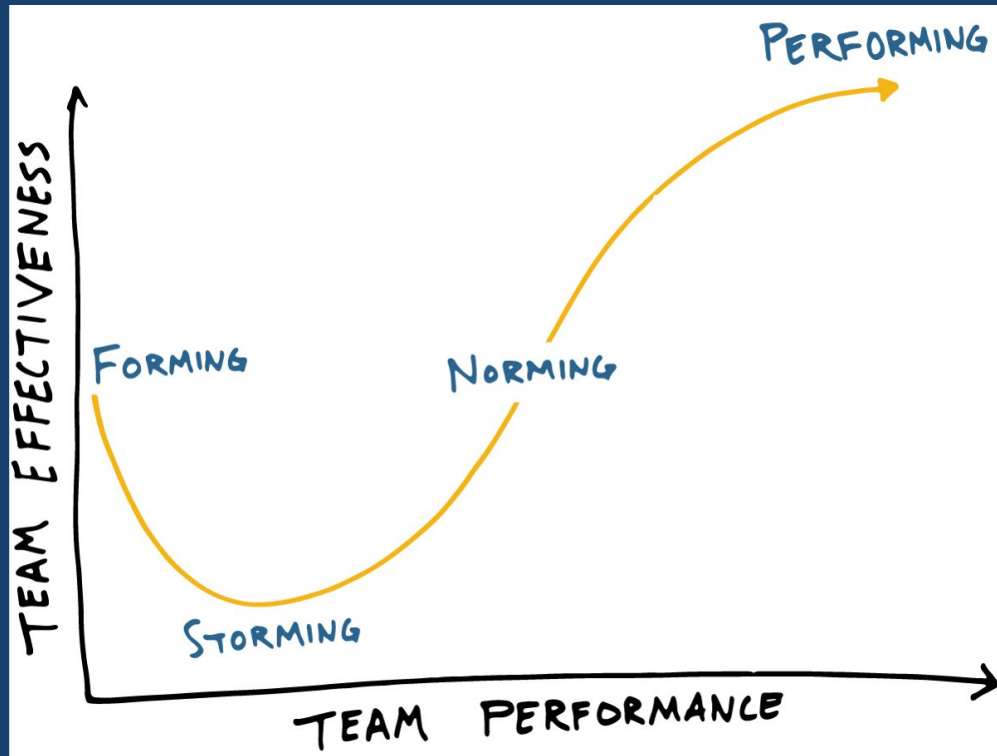
- Consortium size
- Small vs. large
- Who should join?
- What constitutes a member and how does this impact your operations and reporting?



Project Management

- Leadership on the project
- How to accomplish things?—workgroups/committees
- Subject matter or regionally focused?
- Prevention, treatment, recovery, workforce development
VS.
- Mesa/Delta, Roaring Fork Valley, Eagle





PHASES OF TEAM DEVELOPMENT IN CONSORTIUMS

FORMING

- Establish a strong team
 - *Who is at the table?*
 - *Who is missing?*
- Partners are identified early and often
 - *They are engaged while the grant is being written and totally engaged once awarded*
 - *People who drop off are followed up with and information used to improve programs*
- Demonstrate that people are valued
 - *Pay people for their time when possible and budget accordingly*



STORMING

- Choose work plan goals that are a combination of low-hanging fruit and long-term objectives
- “Lavish” time for networking, even in short meetings
- Develop a communications strategy rapidly and adapt
 - *Clear leadership with roles and point-people outlined*
 - *There is intentional learning going on in the system: no major temporal gaps in communication*



EFFECTIVE COMMUNICATION

- Regular, clear, purposeful, value-driven

Regular	Clear	Purpose	Guiding Values
1 email update a week with all consortium business, workgroup updates, and outside events	Same format every week, bullet points and action items	Inform the whole group of upcoming deliverables, achievements, and workgroup happenings	Trust, commitment to work plan
1 monthly Consortium-wide meeting	Standing meeting with voting items announced ahead of time	Voting, celebrating achievements	Transparency, community, autonomy to make decisions, recognition
Bi-monthly group workgroup meetings	Standing meetings with advance agendas	Work in smaller groups to achieve work plan goals	Contribution, responsibility
Shared Google Drive folder with all meeting minutes, submitted progress reports, and workgroup documents	Delineated subfolders that are updated after every meeting	Transparency and link to the work plan	Transparency



STRONG LEADERSHIP CAN LEAD TO NEW OPPORTUNITIES!

- Importance of early and sustained outreach with other grant initiatives in your region
- From Planning to Implementation
 - *St. Mary's and Mid Valley Family Practice*
- Combine forces to avoid duplication

HITTING YOUR STRIDE



NORMING



- **People are getting used to recovery at the center**
 - *Easy to find speakers*
 - *People working with a common goal*
- **Constantly reconvening to find new/lost organizations**
 - *Regular requests to join the Consortium from community members*
- **Attendance is constant and consistent**
- **Intentional progress that links back to prevention, treatment, and recovery**

KEY TIPS FOR LEADING SUCCESSFUL RCORP GRANTS

- **Budget**
 - *Formed enough to win the grant and spend down*
 - *Transparent enough that workgroups/consortium are making substantive decisions*
 - *Flexible enough to respond to conditions in ~3 years*
- **Focus on lived experience**
 - *>10-20% of people in consortium are in recovery*
 - *Start big meetings with a story*
- **Workgroups**
 - *Enough that there are 5-10 people in each meeting*
 - *Everyone speaks in every work group meeting*



KEY TIPS FOR LEADING SUCCESSFUL RCORP GRANTS

- **Delegate + network**
 - *Other HRSA grants to synergize on marketing, workforce, etc.*
 - *State SUD bureaus/Single State Agency/nonprofit consortia*
 - *National nonprofits (RTAP, Shatterproof, Working Partners)*
 - *HRSA/JBS*
- **Communicate successes**
 - *Internal (slide 6)*
 - *External*
 - Campaigns
 - Website
 - Conference



PERFORMING

- Minimal background info needed in workgroups
- Facilitators can leave and workgroup members self-assemble and facilitate
- Work is becoming evident to people outside the group
 - *External communications*
 - *Word-of-mouth*
- Seeking outside expertise to fill gaps
 - *HRSA/JBS guest speakers*
 - *Local/state experts*
- **A surprising amount gets done**





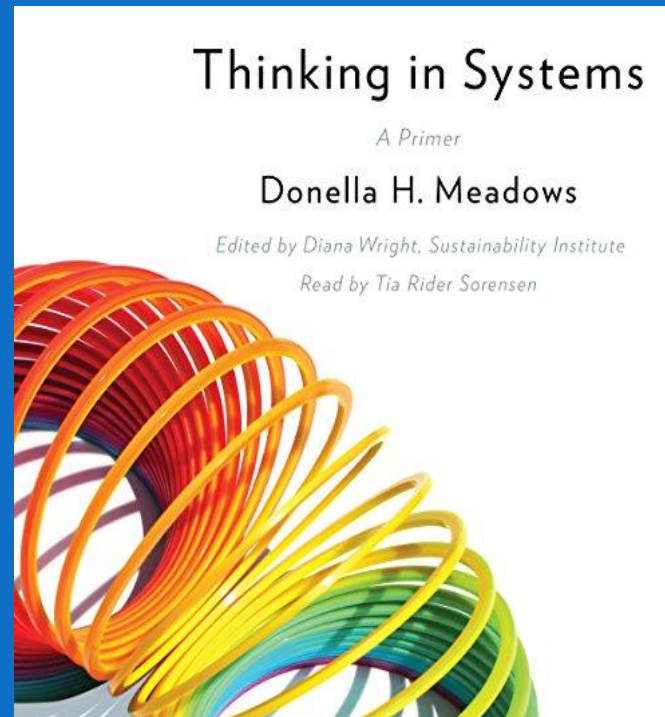
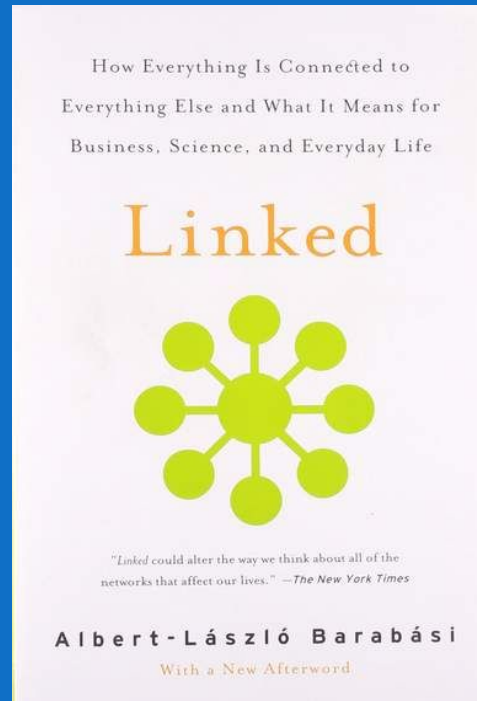
SUCCESSSES

1. What is something that has gone well in your Consortium?
 - a. *Why do you think this was successful?*
2. What does a success look like for your Consortium?
 - a. *How do you know things are going well?*
3. What was one thing that you were worried about with your work that has turned out to be okay?

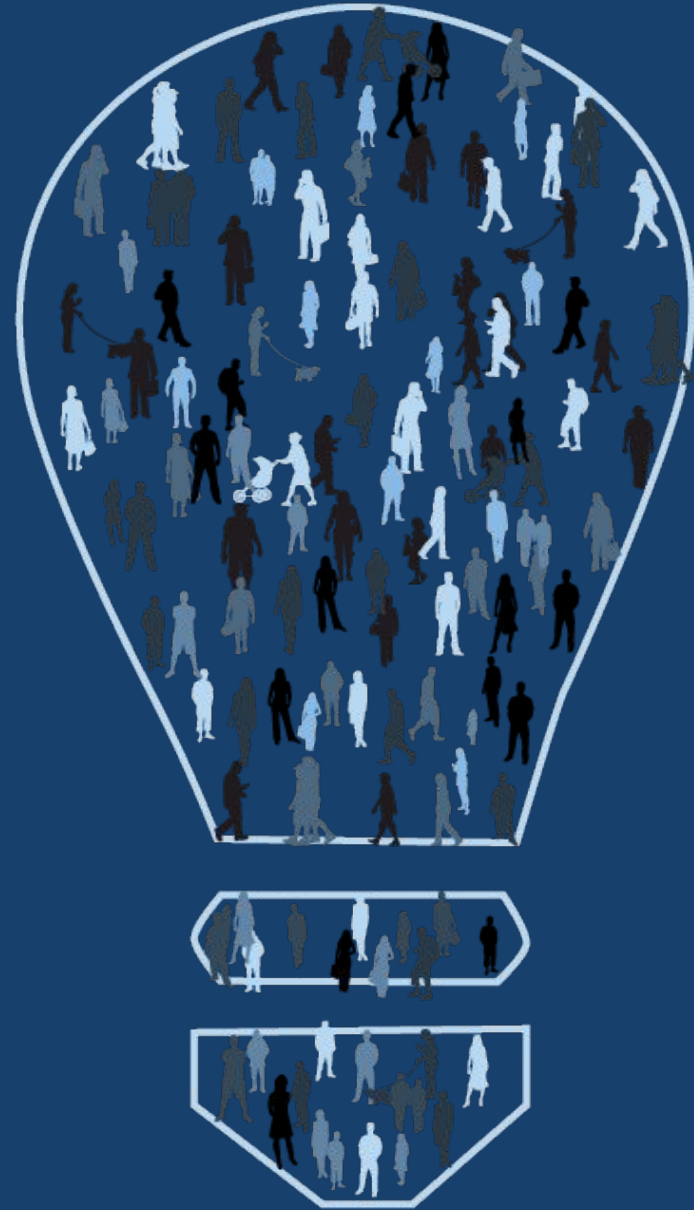


CHALLENGES

1. What is something that has been a challenge to your work as a Consortium?
 - a. *How have you worked to overcome this?*
2. What did you do in the planning phases of the grant to set up a communication plan and staffing structure?
 - a. *Is there anything you would change about this now that you are in the grant?*
3. How do you address challenges as a Consortium?
 - a. *As a group, just grant leadership, or another way?*



FURTHER READING



QUESTIONS AND CONTACT INFORMATION

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