

## PROFESSIONAL SERVICES AGREEMENT

**THIS PROFESSIONAL SERVICES AGREEMENT** (hereinafter “AGREEMENT”), dated this 3 day of April, 2023, made between Southern Colorado Harm Reduction Association (hereinafter referred to as “Grantee”) and Pueblo County, Colorado, (hereinafter referred to as “County”) on behalf of the Southeast Colorado Opioid Response Settlement Region 19 (hereinafter referred to as “SECOR”). County and Grantee may individually be referred to as “Party”, or collectively as “Parties”.

**WHEREAS**, Grantee agrees to provide services for prevention and education services related to the Opioid Epidemic for the Southeast Colorado Opioid Response Settlement Region 19, as more fully defined in the Scope of Work provided by Grantee in response to the Request for Proposal; and

**WHEREAS**, County on behalf of SECOR agrees to fulfill the responsibilities and to pay Grantee for said services, as more fully defined below;

**WHEREAS**, Grantee is a professional evidence-based organization with comprehensive services in prevention and education related to the opioid epidemic and is qualified to provide the services as described in RFP 2022-01, attached to this Agreement and incorporated herein as Exhibit A, for the Life Empowerment and Fulfillment (LEAF) Program as described in Grantee’s Response, attached to this Agreement and incorporated herein as Exhibit B.

**WHEREAS**, the parties have reached an agreement concerning the engagement of Grantee for the LEAF Program only, the work to be performed, payment for the work, and related matters and now desire to set forth the same in writing.

**NOW THEREFORE**, in consideration of the promises and considerations herein contained, County and Grantee hereby agree as follows:

### ENGAGEMENT OF SERVICES

County, on behalf of SECOR, hereby engages and Grantee hereby accepts such engagement for the LEAF Program only and is hired to perform the work and services as described in provider’s response to RFP 2022-01 and upon all the terms and conditions set forth in this Agreement. Noncompliance may result in cancellation of the Contract by County, on behalf of SECOR. SECOR did not approve funding, and County does not contract for services for, the remainder of the proposal in Exhibit B including the Maternal Opioid Misuse Program.

### SCOPE OF WORK AND ESTIMATED COST

The Scope of Work (or Work) to be performed by Grantee is more particularly described in Exhibits A and B, hereto and incorporated herein by this reference. The parties agree that the Scope of Work includes the items set forth in Exhibit A and B. The parties further agree that as Work commences, the Scope may change and, in such case, the parties agree to jointly prepare a written Amendment or an Addendum to this Agreement to reflect any such change, definition,

and/or refinement as may occur and be agreed upon by both parties, after approval by the SECOR Board. Specifically, the parties agree that they will undertake such procedure if the Scope changes as a result of updates from the State regarding the Opioid settlement and related funds.

Based upon the information provided by Grantee, SECOR has awarded Grantee \$100,000 for the year following execution of this contract and payment shall be provided at the commencement of the contract and any unexpended funds remaining at the end of the contract term must be returned to County for SECOR.

### **COMPENSATION**

All costs shall be in the performance of the Work in accordance with Exhibits A and B as described for Fiscal Year 2023, not to exceed the stated amounts.

As the Work commences and proceeds, Grantee agrees to keep County informed if it anticipates the existence of any unexpended funds. Any unexpended funds existing at the termination of this agreement must be returned to County for SECOR.

No Multi-Fiscal Year Obligation on County. This Agreement is expressly made subject to the limitations of the Colorado Constitution. Nothing herein shall constitute, nor deemed to constitute, the creation of a debt or multi-year fiscal obligation or an obligation of future appropriations by the County, contrary to Article X, § 20 Colorado Constitution or any other constitutional or statutory debt limitation. The obligations of the County under this Agreement are subject to annual appropriations made for that purpose. Additionally, the obligations of the County under this Agreement are subject to the continued funding pursuant to the State Contract.

### **MONITORING ACTIVITIES**

The County shall review the progress reports, a sample of which is incorporated herein as Exhibit B, quarterly. In addition, the County may require the Grantee to provide copies of other program progress or financial reports or documentation, including those reports or documentation that the Grantee may submit to other funding entities. The County may conduct other monitoring activities as necessary throughout the period of this Agreement to determine program progress and for purposes of data base computation and/or program evaluation. Such monitoring activities may include, but not be limited to, receipt of Grantee's monthly Board meeting agenda, minutes, etc.; attendance at Grantee's Board meetings; and on-site visits, including access to all records and documentation maintained by the Grantee.

### **ADDITIONAL RESPONSIBILITIES OF COUNTY**

The County, at its sole cost and expense, shall cooperate with Grantee in all respects, including but not limited to, the provision of information pertaining to the Scope of Work to be performed by Grantee.

County designates Sabina Genesisio, County Manager, to act as County representative(s) for the Work to be performed under this Agreement. Such person(s) shall have the authority to transmit instructions to Grantee through Grantee designated representative(s), to receive information, and

to interpret and define County's policies and decisions with respect to all aspects of the Work covered by this Agreement.

### **ADDITIONAL RESPONSIBILITIES OF GRANTEE**

Grantee agrees to perform Work with the same degree of care, skill and diligence as is ordinarily possessed and exercised in the same profession under similar circumstances. Grantee shall ensure that its subcontractors, if any, have the level of skill in the area commensurate with the requirements of the scope of services to be performed, and that any work performed by such subcontractors will comply with SECOR Policies. Grantee shall at all times serve the best interests of County in connection with such services and shall advise County when services it requests are not in the County's best interests.

Grantee designates Danielle Harwell, Adriana Venegas to act as Grantee's representative(s) for the Work to be performed under this Agreement. County acknowledges and understands that Grantee personnel involvement will be based on specific task needs.

Grantee agrees to undertake the following obligations during the term of this Agreement and perform such services in accordance with the terms of this Agreement. Grantee shall adhere to principles of harm reduction when delivering all services.

### **INVOICING AND EXPENSE TRACKING**

Full disbursement of monies will commence within fourteen (14) days of the execution of this agreement. The funds shall remain available to Grantee for one (1) year from the date of execution. Grantee shall submit quarterly reports in the format provided by the Reporting Template, attached and incorporated into this contract as Exhibit C. Such reports shall be provided every four (4) months following the execution of this contract. Reports shall include all relevant receipts. Such reports shall be provided electronically to the following contacts for the County and SECOR:

Rose Pugliese  
SECOR Facilitator  
puglieselawfirm@gmail.com

Sabina Genesio  
Pueblo County Manager  
genesios@pueblocounty.us

### **AMENDMENTS**

SECOR may, from time to time, request changes in the Scope of Services of the Grantee to be performed hereunder. Such changes that are mutually agreed upon by and between SECOR and the Grantee shall be incorporated in a written amendment to this agreement executed by County, on behalf of SECOR, and Grantee.

### **COMMENCEMENT AND COMPLETION**

Grantee agrees to begin performance of the Work following disbursement of the funds. Thereafter, Grantee shall execute the Work with due diligence and the Work shall be completed in a timely manner commensurate with the tasks involved in the Exhibits A and B, which Grantee has agreed to perform.

Grantee will take reasonable steps to mitigate the impact of any delay in performing the Scope of Work, even if it results from causes beyond the reasonable control or contemplation of Grantee. This Agreement shall remain in effect for one (1) calendar year following the execution of this Agreement. Any extension of time or further award to Grantee by SECOR must be approved by the SECOR Board and shall require a written amendment or addendum to this Contract executed by the County, on behalf of SECOR, and Grantee.

### **CONFIDENTIALITY AND WORK PRODUCT**

Grantee and County agree that all work product, including data gathered and reports generated pursuant to this engagement, are to be kept confidential between County and Grantee, except for disclosures required pursuant to SECOR. The parties agree that County and SECOR will be free under this contract to make any disclosure of information required by the Colorado Open Records Act. It is the expectation of County that much of the Work performed including data gathered and reports generated may become public records and at such time as the County and/or SECOR makes the same public records then the obligation of confidentiality shall expire and be of no further force and effect as to those records made public by the County.

Grantee and County recognize and agree that any work product submitted by Grantee and any subcontractors in the performance of this Agreement are a part of the services rendered and are intended only for SECOR and County's use and benefit.

### **LIABILITY INSURANCE**

Grantee shall procure and maintain until all of their obligations have been discharged, including any warranty periods under this Agreement are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by Grantee, agents, representatives, employees or sub-consultants.

The insurance requirements herein are minimum requirements for this Agreement and in no way limit the indemnity covenants contained in this Agreement.

The County in no way warrants that the minimum limits contained herein are sufficient to protect Grantee from liabilities that might arise out of the performance of the work under this Agreement by Grantee, its agents, representatives, employees, or sub-consultants. Grantee shall assess its own risks and if it deems appropriate and/or prudent, maintain higher limits and/or broader coverages. Grantee is not relieved of any liability or other obligations assumed or pursuant to the Agreement by reason of its failure to obtain or maintain insurance in sufficient amounts, duration, or types.

Grantee shall provide coverage with limits of liability not less than those stated below. An excess liability policy or umbrella liability policy may be used to meet the minimum liability

requirements provided that the coverage is written on a "following form" basis.

Workers' Compensation Insurance. Grantee and all subcontractor(s), if any, engaged by Grantee shall comply with the requirements of the Workers' Compensation Act of Colorado, as amended, and shall provide Workers' Compensation Insurance, including Occupational Disease Provision, to protect Grantee and its subcontractors, if any, from and against any and all Workers' Compensation claims arising from performance of Work under the Agreement. This requirement shall not apply when Grantee or a subcontractor is exempt under the Workers' Compensation Act of Colorado.

Professional Liability (Errors and Omissions Liability). Grantee shall procure and maintain at its own expense during the term of this Agreement and for such additional time as Work is being performed, Professional Liability Insurance covering all Work to be performed under this Agreement. This insurance shall be written with a minimum limit of \$1,000,000.00 for each claim and annual aggregate. In the event that any professional liability insurance required by this Agreement is written on a claims- made basis, Grantee warrants that any retroactive date under the policy shall precede the effective date of this Agreement; and that either continuous coverage will be maintained, or an extended discovery period will be exercised for a period of three (3) years beginning at the time work under this Agreement is completed. Policy shall contain a waiver of subrogation against the County.

## **SUSPENSION OF WORK**

Work under this Agreement may be suspended in accordance with the following provisions:

By County. Upon written notice to Grantee, SECOR, through the County, may suspend all or a portion of the Work under this Agreement if unforeseen circumstances make normal progress of the Work impracticable. Grantee shall be compensated for its reasonable expenses resulting from such suspension including the expenses of mobilization and demobilization, subject to the availability of grant funding. If any such suspension is greater than 30 days, then Grantee shall have the right to terminate this Agreement in accordance with the termination language provided herein.

By Grantee. Upon written notice to County, Grantee may suspend the Work if Grantee reasonably determines that circumstances not caused by Grantee substantially interfere with normal progress of the Work.

## **TERMINATION**

This Agreement may be terminated as follows:

**By County.** (i) SECOR, through the County, may termination this Agreement for its convenience with 30 days' notice to Grantee, or (ii) for cause if Grantee materially breaches this Agreement through no fault of SECOR or County and Grantee neither cures such material breach nor makes reasonable progress towards cure within ten days after County has given written notice of the alleged breach to Grantee .

**By Grantee.** (i) For cause, if County materially breaches this Agreement through no fault of Grantee and County neither cures such material breach nor makes reasonable progress towards cure within ten days after Grantee has given written notice of the alleged breach to SECOR and County, or (ii) upon five days' notice if Work under this Agreement has been suspended by either County or Grantee in the aggregate for more than 30 days.

**Payment Upon Termination.** In the event of termination, Grantee shall perform such additional work at the direction of the SECOR and County as is reasonably necessary for the orderly closing of the Work. Grantee shall be compensated for all work performed prior to the effective date of termination, plus work required by SECOR and County for the orderly closing of the Work. All remaining funds shall be returned to County for SECOR within seven (7) days of termination of all Work.

### **INDEMNIFICATION**

Grantee agrees to indemnify, hold harmless and, not excluding SECOR or the County's right to participate, defend SECOR and/or County, its subsidiary, parent, associated and/or affiliated entities, successors, or assigns, its elected officials, trustees, employees, agents, volunteers, and any jurisdiction or agency issuing permits for any work included in the project, hereinafter referred to as indemnitee, from all suits and claims, including attorney's fees and cost of litigation, actions, loss, damage, expense, cost or claims of any character or any nature arising out of the work done in fulfillment of the terms of this Agreement or on account of any act, claim or amount arising or recovered under workers' compensation law or arising out of the failure of Grantee to conform to any statutes, ordinances, regulation, law or court decree. It is agreed that Grantee will be responsible for primary loss investigation, defense and judgment costs where this Agreement of indemnity applies. In consideration of the award of a contract, Grantee agrees to waive all rights of subrogation against SECOR and/or County, its subsidiary, parent, associated and/or affiliated entities, successors, or assigns, its elected officials, trustees, employees, agents, and volunteers for losses arising from the work performed by Grantee for SECOR and County. By requiring this right to indemnification, SECOR and/or County in no way waives or intends to waive the immunity protections provided to the County and its employees under the Colorado Governmental Immunity Act, C.R.S. § 24-10-101, et seq.

### **INDEPENDENT CONTRACTOR**

The parties understand and agree that Grantee shall, at all times during the term of this Agreement, be deemed an independent Grantee and not an employee of the County, and shall be responsible for, and obligated to pay on behalf of its employees, all withholding taxes, social security, unemployment, Workers' compensation, and/or other taxes and shall indemnify and hold the County harmless from and against any and all claims for the same period. Grantee acknowledges and agrees that all of its personnel are its employees only, and not employees or agents of the County for any purpose whatsoever, including for purposes of Workers' Compensation. Grantee has no authority to enter into contracts or other binding obligations on behalf of the County.

### **NOTICES**

Any notices required or permitted under this Agreement shall be by personal delivery, electronic

IN WITNESS WHEREOF, the parties have executed this Agreement effective the day and date first set forth above.

**Grantee**

**BY:**

Judith Solano                      3/29/23  
Date

**Pueblo County**

**BY:**

[Signature]                      4/3/2023  
Pueblo County Manager                      Date

mail, or Certified Mail sent the United States Post Office at the addresses set forth below:

**Notice to County**

Pueblo County  
ATTN: Sabina Genesio, County Manager  
215 W. 10<sup>th</sup> St.  
Pueblo, CO 81003-2810  
E-Mail: genesios@pueblocounty.us

**Notice to Grantee**

\_\_\_\_\_  
ATTN: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
E-Mail: \_\_\_\_\_

**GOVERNING LAW**

This Agreement shall be construed and interpreted under the laws of the State of Colorado.

**SEVERABILITY**

In the event one or more, but not all, of the provisions of this Agreement are declared to be unlawful or unenforceable by a Court of competent jurisdiction, such determination shall not affect the legality or enforceability of the remainder of the terms and provisions of this Agreement.

**BINDING**

When executed by the parties hereto, this Agreement shall be a binding agreement and shall inure to the benefit of and be binding upon the parties hereto, their successors and permitted assigns. Neither party may assign this Agreement without the express written permission of the other party which permission may be denied for any reason, including an arbitrary reason.

**DUPLICATES**

This Agreement may be executed in duplicate original counterparts, each of which shall constitute an original but all which shall constitute one and the same document.



**SOUTHEAST COLORADO REGION 19**  
Request for Proposals (“RFP”)  
Prevention and Education  
RFP No. 2022-01



**SOCO HARM REDUCTION  
ASSOCIATION**

**Name of the Organization:** Southern Colorado Harm Reduction Association (SCHRA)

**Mailing Address:** 1249 E Routt Ave, Pueblo, CO 81004

**Applicant Contact Name and Title:** Jude Solano, CEO/Co-founder

**Applicant Contact email and phone number:** [judysolano15@gmail.com](mailto:judysolano15@gmail.com); 719-320-0360

**Financial review for the past (3) years:** attached

1. Explanation of Financials
2. 990s for three years (2018, 2019, 2020)
3. Year-to-Date Financial Report

**Letters of Support:** attached

1. Cathy Michopoulos, Chief Operations Officer—Colorado Health, Inc. (RAE 4)
2. Dr. Jonathon Savage, DO, CEO—Care on Location
3. Randy Evetts, Public Health Director—Pueblo Department of Public Health and Environment
4. Sarah Martinez, Pueblo City Council—District 3

**Applicant Attestation and Signature:** attached

**Total Request:** \$250,000 per year for two years (\$500,000 total)

## NARRATIVE QUESTIONS

### 1. Brief description of the program.

#### Overview of Foundational Prevention and Education Services

Using a collective impact model, Southern Colorado Harm Reduction Association's (SCHRA) focus is to create enhanced systems and delivery of prevention, education, treatment, and supportive intervention by collaborating with partners to provide greater access for individuals who struggle with substance use disorders (SUD), mental health challenges, and the negative impacts of Social and Structural Determinants of Health. SCHRA's work is unique in that we have a vision to move beyond typical Harm Reduction practices by applying this approach to the entire community and engaging systems to change the landscape and opportunities for people experiencing adverse social determinants of health.

Many of our founding initiatives fall under our overdose prevention and education services. These services continue to directly reach hundreds of people each year and indirectly reach thousands more through averted medical and behavioral health crises, drug use, and lives saved. These prevention and education services include Naloxone (Narcan), Fentanyl Test Strips, and Auricular AcuDetox.

Data from the Colorado Department of Public Health and Environment show that 1,881 Coloradans died of drug overdose in 2021. Of these, 1,154 involved some form of opioid (prescription, fentanyl, or heroin), and over 60% of all drug overdose deaths involved some form of opioid. Fentanyl is raging through our state, with fentanyl-associated deaths more than quadrupling in 2 years—from 222 deaths in 2019 to 912 in 2021.<sup>1</sup> Specific to Pueblo County, the overdose death rate rose in 2020 from 32.7 per 100,000 in 2019 to 38.7 and remained higher in 2021 than 2019 at 34.8.<sup>2</sup>

To combat this surge, SCHRA distributes Naloxone to people who walk through our door as well as to the community. Part of distributing this overdose reversal medication is to educate and train people about what signs to look for when someone is overdosing and how to use Naloxone to save a life. Of the Naloxone we are able to track, we have helped save 123 lives across 2020 and 2021 through the administration of Naloxone.

Family members and loved ones who attend our peer-led support groups, Community Reinforcement and Family Training (CRAFT), all have access to Naloxone and receive training. SCHRA staff reach schools by getting this information and reversal medication to school counselors, resource officers, and administrative personnel. We extend these prevention services to private businesses and government workers such as law enforcement and park rangers. We even help doctors' offices access Naloxone.

In addition, the opioid epidemic has led to an increase in Fentanyl abuse, whether directly or because other drugs are laced with Fentanyl. Testing of opioids before consumption has been shown to alter drug use behaviors, including discarding the drug supply and keeping Naloxone nearby.<sup>3</sup> Thus, we distribute Fentanyl test strips and engage in open dialogue about the importance of testing before use to prevent overdose.

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<sup>1</sup> Colorado Department of Public Health and Environment (CDPHE) (2021). Colorado health data and statistics.

<sup>2</sup> Pueblo County Coroner. Coroner Annual Report. 2021.

<sup>3</sup> Goldman, J. E., Waye, K. M., Periera, K. A., Krieger, M. S., Yedinak, J. L., & Marshall, B. (2019). Perspectives on rapid fentanyl test strips . . . <https://doi.org/10.1186/s12954-018-0276-0>

Finally, we have trained Auricular AcuDetox Specialists on staff to provide AcuDetox as an overdose prevention service. AcuDetox is an evidence-based and non-invasive tool in someone's journey to a healthy life. It has been shown to provide relief of pain, anxiety, depression, and cravings associated with substance use. AcuDetox is successfully used to help people with addiction and individuals experiencing mental health problems, trauma, PTSD, and chronic stress.<sup>4</sup>

In the past couple of years, we have complemented these prevention and education services by adding programs that include targeted programming for youth and outreach for people who are pregnant or have a newborn. Currently, the two programs that exhibit the greatest needs serve these populations and are the basis for our request for funding.

## **Youth Life Empowerment and Fulfillment (LEAF)**

Our Life Empowerment and Fulfillment (LEAF) program focuses on underserved youth who demonstrate risk of having or developing a substance use disorder. SCHRA staff visit two GOAL High School sites per week to deliver the LEAF course. Though the curriculum is informed by the "What If? What Else? What Now?" book, SCHRA's Program Director, Danielle Harwell, used feedback from youth in the program to design an interactive experience that draws from community guest speakers to help support topics addressed in the book. During some sessions, an informal approach is used, allowing these young people to guide the course.

We have witnessed life-transforming outcomes in the LEAF program. Youth ranging from 15-25 years of age in the first cohort explored topics such as what was happening in their home life and in their relationships. As topics changed, commonalities surfaced. Many wanted to talk about topics such as what to do when their dad yells at their mom and how can someone find peace when their mom who gave them up for adoption surfaces in and out of treatment ("how do I show her love when I am still hurt?"). Throughout the process of letting this program unfold, we have created a space that helps young people build an inner vocabulary and dialogue so they can come to know who they are beyond what messaging they might be receiving from their surroundings.

Guest speakers, journaling, meditation, talking in order to process, community field trips, and creating art help participants understand themselves and how to practice healthy boundaries, healthy eating, and healthy thinking. Dream-building and goal setting is addressed through free form writing, and the curriculum is used to guide the practice of creating a life plan. These young people also learn how to track strong emotions in order to practice mindfulness, cope with stressors, and develop resilience. Though the class touches on career goals and relationship building, the heart of the course is about how to develop processes to work toward self-healing. Additionally, wellness as prevention is emphasized using meditation and yoga.

Feedback from participants demonstrates the impact SCHRA is making to help build a resilient community in the face of adversity and environmental conditions that make youth susceptible to substance abuse. In the two years LEAF has been part of our programming, and with interruptions caused by the COVID-19 pandemic, we have reached 63 young people.

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<sup>4</sup> Stuyt, E. B., & Voyles, C. A. (2016). The National Acupuncture Detoxification Association protocol, auricular acupuncture to support patients with substance abuse and behavioral health disorders: current perspectives. *Substance abuse and rehabilitation*, 7, 169–180. <https://doi.org/10.2147/SAR.S99161>

## **People Who are Pregnant Maternal Opioid Misuse (MOM)**

Chosen by the Colorado Department of Health Care Policy and Financing to deliver the Maternal Opioid Misuse (MOM) program to the Pueblo region, SCHRA works closely with partner agency, Care on Location, to provide support and care to people who are pregnant or postpartum with opioid use disorders. (Please see attached Letter of Support.) Care on Location is a statewide leader in medical telehealth services. They staff an EMT to provide telehealth services to patients/clients coming into our agency.

Merging a community-based setting with medical telehealth care offers people non-traditional access to maternal health care and supportive services. Due to the external and internal stigma a person in this situation might experience, this model is effective at engaging pregnant people experiencing opioid misuse or at risk of opioid misuse.

In addition to telehealth care, participants have access to SCHRA's continuum of supportive services, such as peer support, AcuDetox, meditation and yoga, and help with basic needs like baby supplies, food, clothing, and housing resources. As with all clients, they also receive guidance accessing other community resources through our referral and warm handoff approach. We are seeing a great need in this program as the opioid epidemic continues and stressors, such as inflation, worsen.

### **2. For existing programs, please explain how your program will be expanded, the amount of funding requested and why additional funding is required. Please indicate which counties are currently served and will be served, if expanded.**

Currently, Pueblo County is the primary region SCHRA serves. However, we are open to all and do see some clients from neighboring counties. For instance, we just expanded our AcuDetox services to Lamar, and we have been supplying Naloxone and Fentanyl test strips to a volunteer in La Junta who is doing street outreach. Our staff has always been accessible to provide these communities with support when developing their own programs. It has been our vision from day one to not only impact Pueblo but to also help bridge Southern Colorado to the education and funding that will help move all of us forward as we collectively tackle the opioid epidemic.

## **Youth Life Empowerment and Fulfillment (LEAF)**

SCHRA is requesting \$100,000 each year for two years (\$200,000) to enhance our LEAF Program being offered in schools. Half of that request (\$50,000/year) will go toward engaging youth outside of class time with prosocial events that build interpersonal skills and promote goal setting. In the past, some of the activities students have identified as areas of interest include karate, kick boxing, gym memberships, art classes, and music lessons.

The other half of the request (\$50,000/year) for the LEAF program will support basic needs for the young people engaged in this program such as school supplies to set them up for success, clothing, food, and in some cases, rental assistance if their family is on the verge of getting evicted for not having the funds to pay. This support will promote safety and prevention by keeping these young people off the streets, helping them thrive despite unhealthy or

vulnerable living environments such as living in poverty or with parents and family members who abuse drugs.

It was just made official in October of this year that students at these two GOAL High Schools can earn an elective credit when they complete our LEAF course. Support for this program will help with this expansion, as we continue to serve more youth.

### **People Who are Pregnant Maternal Opioid Misuse (MOM)**

We are requesting \$50,000 each year for two years (\$100,000) to help us connect pregnant people experiencing an opioid use disorder or at risk of experiencing an opioid use disorder to supplies and resources that prevent unhealthy pregnancies for both mother and child. In addition to helping these families with baby supplies, food access, and other supportive interventions that help maneuver pregnancy, parenthood, and a substance use disorder, we will use funds to expand what we can offer. For instance, funds will directly support peer support services and safe housing through rental assistance and eviction prevention. Further, we will expand this program to serve more people by opening the program to our clients with small children and not just pregnant people

### **3. Describe any new initiatives that you intend on launching, the amount of funding requested and why additional funding is required. Please indicate which counties will be served by the new initiative.**

Not applicable: though SCHRA is in the process of developing a vacant business space in one of Pueblo's most under-resourced areas to move and expand our programs and services, we are not requesting funds for this initiative under this Request for Proposals. It is important to note that with the completion of this renovation project, we intend to expand the programs outlined in this proposal to reach more youth, people who are pregnant or have young children, and anyone needing overdose prevention services and education.

### **4. What is the preliminary timeline estimate for your program?**

Each of the programs outlined in this proposal for which we are requesting funding adhere to established programmatic timelines and are ongoing. Support from Region 19 funds will expand these programs to meet the high demand for services and offer more comprehensive support. The timeline for this expansion is immediate and upon approval of funding.

### **5. How does your plan address the diverse needs of populations specific to Region 19 (LGBTQ+, BIPOC, immigrants, rural communities, low income, etc.)?**

With a population of 111,876 and 168,162 throughout the county, Pueblo is positioned as the closest major city for many Southern Colorado rural and secluded communities.<sup>5</sup> Small towns and census-designated areas include Avondale, Beulah Valley, Blende, Colorado City, Pueblo West, Salt Creek, and Vineland. Demographics across the city and county demonstrate

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<sup>5</sup> United States Census Bureau. Quickfacts. 2021.

higher proportions of marginalized groups and significantly higher rates of poverty than other parts of Colorado.

Almost half (49.9%) of Puebloans identify as Hispanic and are historically under-resourced, with 21.8% of Pueblo city living in poverty compared to 9.7% statewide. Only 20.4% have earned a bachelor's degree or higher compared to 41.6% statewide. Also, Pueblo's unemployment rate (5.6) trends higher than the state (3.3).<sup>6</sup> Research has shown the critical need for equitable health and human services to combat these disparities as prevention against substance abuse.

Further, most clients SCHRA sees belong to marginalized communities who experience unstable housing and medical complications due to the risks of drug usage and difficulties accessing resources. Some clients report social stigma around gender identity and sexual preference decisions. Many of our current services specifically engage people who suffer with an IV drug addiction. This population experiences hardships around their struggles with substance use, and it can be difficult for them to seek supportive services that will help them stay safe. Often, they struggle not only with societal stigma but their own mental health challenges around addiction. Importantly, the existence of services does not guarantee that people will access them.

Our plan for this proposal, and our agency motto, is to bring compassion, dignity, understanding, non-judgement, and inclusive approaches to everything we do. We exist to reach underserved communities facing social, racial, and structural biases. SCHRA provides a safe place for these populations to access vital lifesaving services and expose them to a supportive network that gives them a platform to engage their community.

We have a strong foundation in using relationship building and education to combat stigma around marginalized populations. We purposely place ourselves in spaces throughout our community, taking part in cultural events, resource fairs, and hosting our own annual Overdose Awareness festival which promotes art, music, and education. These events are not only a means to reach people in need of our services, but also a significant part of who we are as an agency.

SCHRA's work was developed from love for the Pueblo community and responding to a need to connect people suffering from an SUD to safe, equitable, and healthy lifelines. Staff, volunteers, and members of the board of directors have been directly impacted by the opioid epidemic, either watching family or friends progressively live on the outskirts of society or watching the neighborhoods around us fill with contaminated syringes. We understand and reflect the people we serve. This is especially true of our Peer Support Specialists who are uniquely qualified to help others experiencing similar triggers and systemic barriers to wellness. Peers are available to all who access our programs and services.

In addition, we use a whole-team approach, so people do not fall through the cracks. Some clients might demonstrate higher needs and barriers receive more contact and attention by SCHRA staff and our partners. We follow-up with external systems of care and community resource agencies to work on reducing barriers and increasing protective factors, which demonstrates efficacy in preventing substance misuse.

Finally, we promote collaboration to reach shared goals. This does not only apply in Pueblo City where our physical office is located. It extends to rural parts of Pueblo County and Southern Colorado. We welcome partnerships and combined efforts to reach siloed communities and will continue to offer support to these areas.

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<sup>6</sup> United States Bureau of Labor Statistics. July, 2022.

**6. Please describe any infrastructure currently in place or anticipated infrastructure needs and what funding is required.**

Programmatically, all of SCHRA’s education and prevention programs are established and fully funded. Staff are hired and in place to deliver these programs, and the curriculum is developed and being implemented.

As we expand, especially upon the completion of renovations to our new building, we will need funding to support a Project Manager, two full-time Peer Support Specialists, and general operating support such as rent, accounting services, and insurances. These staff and overhead costs will generally support all prevention and education services. We are requesting \$100,000 per year for two years (\$200,000) to cover these expenses.

**7. Will this program be utilizing “braided” funding streams (utilizing funds from other sources in conjunction with the Opioid Settlement Funds)?**

Yes. Current and established funding will be blended and braided to support proposed activities including staff time to track and report outcome data to show efficacy of the programs. Presently, we manage successful grant contracts with:

- Colorado Department of Human Services (Office of Behavioral Health)
- Colorado Department of Corrections
- Colorado Department of Public Health and Environment
- Colorado Health Foundation
- Health Colorado, Inc. (RAE 4)
- Pueblo County and City of Pueblo, Community Services Advisory Commission
- Health Care Policy and Financing (HCPF)

Some of these funding streams will directly fund the proposed programs (please see question 11), and some contribute to general operating expenses or percentages of staff salaries and benefits that support all prevention and education programs.

**8. What are the anticipated outcomes of your program after applying this funding? How will you measure those outcomes? What does success look like?**

We have found throughout our work that success is not always a narrowly defined metric. Success is unique to each person we engage depending on their background, goals, support systems around them, and their unique approach to life. Success for some is that they are functional, safe, and have access to basic needs. For others, success is securing a job, supporting a family, and working toward life goals. Success is also how many people we are reaching and who we are reaching. Thus, some of the metrics we track across programs to measure impact are:

- if the target population is being reached
- numbers of people served and how often services are accessed (in-take forms and sign-in sheets)
- referrals to make sure clients are connecting with community supports



- outcomes of accessing services (are people housed, do they have employment, are they making progress toward goals, are they accessing medical and behavioral health services, are they using overdose prevention)
- outcomes related to personal growth and self-esteem
- engagement in and completion of education, specifically for our high school LEAF participants

We also use community education and public awareness events as tools to understand our impact throughout Pueblo. Open discussion, verbal feedback, and pre/post surveys are used to monitor the quality of services clients receive.

**9. Provide information evidencing that Applicant has a proven track record of experience and success with their program or as an entity for the past three (3) years.**

SCHRA grew from a community, like many others across Colorado, riddled by the opioid epidemic that surged over the past decade. Established by two medical professionals with a drive to address this public health crisis, SCHRA was created under the umbrella of the Human Relations Commission in July 2017. By December of that same year, SCHRA was granted 501(c)(3) status. Since then, we expanded Harm Reduction practices, including prevention and education, through a public health lens to the broader Pueblo community and serve as a support system to smaller communities in Southeast Colorado.

SCHRA’s deep partnerships from every sector in the community including business, education, healthcare, and social service agencies is further demonstration of our experience and track record. Our partnerships with other organizations, as well as our volunteers, have become the lifeblood of SCHRA. Some of our key partners and areas of collaboration include:

|  |   |
|--|---|
| <p><b>Healthcare, Providers, and Treatment</b></p> | <ul style="list-style-type: none"> <li>• Care on Location—MOM Program, bringing tele-health medical and behavioral health treatment to our clients</li> <li>• Colorado Treatment Services—treatment/behavioral health</li> <li>• Front Range Clinic—onsite Medication Assisted Treatment</li> <li>• Health Colorado, Inc. (RAE 4)—MOM Program</li> <li>• Health Solutions—Treatment and behavioral health</li> <li>• Pueblo Community Health Center—bi-directional referral source for testing, treatment, medical and behavioral health, as well as family wellness programs</li> <li>• Signal Behavioral Health—access to Naloxone and CRAFT (Community Reinforcement and Family Training), a peer-led support group for family and loved ones</li> <li>• Vivent Health—provides HIV/Hepatitis C testing</li> </ul> |
| <p><b>Local Government</b></p>                     | <ul style="list-style-type: none"> <li>• Pueblo Department of Human Services—enrollment in SNAP, Medicaid, and other supportive services such as housing, transportation, and financial assistance</li> <li>• Pueblo City-County Library District—COVID-19 vaccination clinics; satellite adult education and certification services (coming soon)</li> <li>• Pueblo County Sheriff’s Office—transitional services; Pueblo Harm Reduction Project</li> </ul>  |



|  |  |
|--|--|
|  | <ul style="list-style-type: none"> <li>• Pueblo Department of Public Health and Environment—vaccination clinics to combat Hepatitis A; Pueblo Harm Reduction Project</li> </ul>  |
| <b>Education</b>                                   | <ul style="list-style-type: none"> <li>• GOAL High School—Life Empowerment and Fulfillment Program (LEAF)</li> <li>• Pueblo Community College—referral pathway</li> </ul>  |
| <b>State</b>                                       | <ul style="list-style-type: none"> <li>• CDPHE—Syringe access supplies and condoms; Naloxone, Fentanyl test strips; Pueblo Harm Reduction Project</li> <li>• The Colorado Consortium for Prescription Drug Abuse Prevention—support accessing funding streams</li> <li>• Colorado Department of Health Care Policy &amp; Financing—MOM Program and Community Reinvestment</li> </ul> |
| <b>Foundations &amp; Professional Associations</b> | <ul style="list-style-type: none"> <li>• The Colorado Health Foundation—LEAF Program</li> <li>• The National Hispanic Nurses Association—furnishes hygiene items and protective masks</li> </ul>   |
| <b>Private Business</b>                            | <ul style="list-style-type: none"> <li>• Stylist from Roots Republic Salon &amp; Microspa donates her time to cut and style hair for SCHRA clients</li> </ul>  |

(Please see attached Financials and Letters of Support for additional organizational experience and success.)

**10. Is there any current or anticipated opposition to your program?**

There is no current or anticipated opposition to our education and prevention programs that will benefit from the funding of this proposal. As a Harm Reduction agency, we have worked diligently to educate community leaders, neighbors, and systems of care about the benefits of a Harm Reduction approach to heal people and communities impacted by substance abuse. We continue to break down stereotypes and replace them with education, understanding, and positive outcomes.

Without this education and outreach, some people do not fully grasp that Harm Reduction goes beyond safe syringe services and includes prevention, education, and striving to provide equitable access to basic needs and support that bridges marginalized communities to the resources they need.

**11. Excluding the funds sought in this RFP, do you have the funds necessary for the current operation of the program? Please explain.**

SCHRA is fortunate to have been awarded multiple grants to carry out our education and prevention programs, including:

| <b>Program</b> | <b>Secured Funding</b>  |
|----------------|---|
| LEAF           | Colorado Health Foundation                                    |
| MOM            | Health Care Policy & Financing (Maternal Opioid Misuse grant) |

Other grants and sources of income not specific to these programs help cover personnel, program supplies, and general operating costs. These sources include Caring for Colorado,

Packard Foundation, United Way of Pueblo, Community Services Advisory Commission, Health Colorado, Inc. (RAE 4), Colorado Department of Corrections, Colorado Department of Human Services (Office of Behavioral Health), and Colorado Department of Public Health and Environment. Partners who provide services at our location also pay rental fees to SCHRA, which supports overhead and program costs.

## **12. How do you plan to fund future management and/or operating costs of the program to ensure sustainability?**

Our staff play an important role representing Pueblo and Southern Colorado at legislative hearings, advocating for the needs of our clients, bringing resources to the region, and creating bridges toward expansion and sustainability. Current relationships with funders include local, city-county, state, and foundation entities. These funding partnerships help us rapidly grow and create pathways to funding streams and approaches that sustain SCHRA's operations. Further, our experience as a Harm Reduction agency creates opportunity for this work as opioid settlement funds continue to become available.

SCHRA has also developed a collective impact model that will help sustain our operations. Once we complete renovations to our new building which will act as a community center, we will open a for-profit fresh food store. We will expand income by renting out space in the center to other agencies belonging to healthcare, behavioral health, prevention services, and education and vocational sectors. We already have some of these rental partnerships in place at our current location, such as Care on Location and Front Range Clinic. With the larger building, we will also rent conference room space for the community and other agencies to access, leading to longevity of our organization and the proposed programs.

## **13. If your organization is not successful in securing funding for your program from SECOR, what is the future of your program?**

If SCHRA is not selected to receive funding from SECOR for our prevention and education programs and services, we will not be able to grow these programs and meet the high demand for these services by expanding and offering comprehensive support. SCHRA has worked diligently to double and even triple in size and scope each year since 2017.

Part of this success is shared success with partner agencies. Our diverse partnerships and collaborations help us fill gaps in program needs. At times, some program needs can be absorbed by a partner agency. SCHRA's model to bring services to our location also acts as a protection from placing all of our resources into one service or program, strengthening sustainability and longevity. These partnerships are local, regional, and statewide.

We have also worked with the Colorado Consortium for Prescription Drug Abuse Prevention's Grant Writing Assistance Program to develop strategies around grant writing, leading to opportunities that fund our work and has allowed us to expand. If not funded by SECOR, we will continue to seek funding sources that align with our mission; however, it will take time, and we will not be able to reach as many people in the interim.