



# Workforce Integration of Peer and Community Health Worker Roles

## Action Planning and Implementation Guide

**NYC PEER AND COMMUNITY HEALTH WORKER  
WORKFORCE CONSORTIUM**

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# INTRODUCTION

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This action planning and implementation guide was created by the New York City Department of Health and Mental Hygiene's Peer and Community Health Worker Workforce Consortium to help organizations translate knowledge to action. Specifically, it is a supplement to the Consortium's toolkit, *Workforce Integration for Peer and Community Health Worker Roles: A needs-based toolkit to advance organizational readiness*. While the toolkit and the action planning and implementation guide can be used independently of one another, this guide builds on the assessment and resources in the toolkit. This guide shows how the use of the toolkit can be a part of a more extensive change implementation process. With this action planning and implementation guide, you will learn how to address potential barriers and use supportive, collaborative approaches at each stage of the implementation process.

## About the NYC Peer and Community Health Worker Workforce Consortium

The NYC Peer and Community Health Worker Workforce Consortium ("The Consortium") was created in 2016 to guide the expansion, integration and strengthening of workforce roles for Peer Specialists and Community Health Workers (PS/CHWs). Since its initiation, the Consortium has convened policy leaders, formed a steering committee of leaders, distributed multiple surveys and conducted semi-structured key informant interviews of program employees and managers. The Consortium consulted with leaders of local workforce development and training programs and received input from providers across a variety of roles.

### The Consortium's Focus on Organizational Readiness

A critical goal of the Consortium is to increase employment opportunities for PS/CHWs, which means that potential employer organizations need to pay attention to their level of preparedness. This preparedness, or organizational readiness, is demonstrated by the attitudes, knowledge and practices that drive an organization's capacity to fully support PS/CHWs.

### Defining Principles of Our Needs-Based Approach

The online toolkit is built to address the diverse needs of various organizations. By viewing content in the toolkit that is automatically selected according to their self-assessment responses, organizations can focus on the needs most relevant to them while building on their successes in other areas.

Organizations can then use this Action Planning and Implementation Guide to guide the design of a customized action plan focused on evidence-based and adaptable core processes. Using adaptable resources like this guide, the Consortium strengthens its capacity to deliver needs-specific support to widely diverse organizations.

## Organizational Empowerment Built Into a Structured Model for Practice

Employees often express concerns that the requirements around implementing evidence-based practices restrict their flexibility to operate in the way that they deem most appropriate or familiar. The concerns detract from the motivation and commitment that are core components of successful change. By engaging employees collaboratively in the assessment process, organizations encourage all employees to take an active role in improvement processes.

### Key Terms

#### Implementation

The National Implementation Research Network explains implementation as “a specified set of activities designed to put into practice an activity or program of known dimensions.” According to this definition, implementation processes are purposeful and are described in sufficient detail such that independent observers can detect the presence and strength of the “specific set of activities” related to implementation. In addition, the activity or program being implemented is described in sufficient detail so that independent observers can detect its presence and strength (Fixsen, D.L, Naoom, S.F, Blase, K.A, Friedman, R.M. & Wallace, F. 2005).

#### Organizational Readiness

Researchers in the fields of implementation science and organizational behavior change have posed numerous constructs to explain what defines organizational readiness. Weiner (2009), for example, suggests that a blending of two foundational components is most reflective of organizational readiness. The first of the two components is the willingness and commitment experienced by those involved, and the second is their belief in their collective capacity to create change (Weiner, 2009). It is challenging to commit to action while feeling that the knowledge and skills needed to initiate the action are absent.

#### Buy-In

Buy-in means having everyone “on board” with what will take place. Buy-in is a critical factor in engaging employees in practice transformation. Getting everyone on board is not always easy. Achieving buy-in is only possible if employees are made aware of upcoming changes. Employees across all disciplines should be fully involved in the planning process when changes in programming or staffing take place. This ensures that the program’s design responds to all employees’ needs and concerns.

#### Sustainability

Often, initiatives move into the startup phase of programs or improvement projects quickly and at full intensity. This is sometimes driven by immediate availability of resources, or even by strong excitement about a new, innovative opportunity. We recommend taking time for thoughtful planning and consideration of short-term and long-term needs prior to starting the program. Thinking through the program’s needs in advance increases the chance that a program can maintain the changes that it adopts. Ultimately, the program

will grow and impact a larger number of settings by replicating successful practices. This growth is often referred to as “scaling” the program or intervention. Sustainability requires availability of funding to meet the program’s financial needs, as well as the competency and ongoing commitment of any employees who will be involved in creating change.

## OVERVIEW OF ACTION PLANNING AND IMPLEMENTATION PROCESS

<b>Stage 1</b>	Collaborative Assessment, Review, and Planning	Objective: Identify strengths and needs, and create a plan to address them	Activities <ul style="list-style-type: none"> <li>• Conduct organizational readiness self-assessment of organization’s strengths and needs</li> <li>• Work together to formulate concrete and measurable outcomes</li> <li>• Discuss identified strengths and gaps and outline steps of action planning</li> <li>• Produce written action plan</li> </ul>
<b>Stage 2</b>	Implement the Plan	Objective: Use the activities outlined in the plan to improve integration practices	Activities <ul style="list-style-type: none"> <li>• Prior to the initiation of the action plan, review the plan with all employees</li> <li>• Develop a calendar with all dates that are relevant to the plan</li> <li>• Gather all appropriate materials or resources</li> <li>• Discuss opportunities for leadership and interests in involvement, including holding primary responsibility for aspects of the plan</li> </ul>
<b>Stage 3</b>	Re-evaluation and Ongoing monitoring	Objective: Assess change and impact of implementation Engage in Continuous Quality Improvement Process	Activities <ul style="list-style-type: none"> <li>• Review suggested trends from the data gathered</li> <li>• Reflect on achievements or barriers that impeded achievement of original goals</li> <li>• Review plan for addressing remaining needs</li> <li>• Consider strategies to sustain positive change</li> </ul>

# Self-Assessment in the Needs-Based Toolkit

The New York City Peer and Community Health Worker Workforce Consortium created a free online toolkit that features an organizational self-assessment in response to input from subject-matter experts, PS/CHWs and their employers. The toolkit addresses the diverse needs of organizations that have an interest in the support and integration of PS/CHWs, and it provides organizational support for those needs.

The toolkit is available to the public. You can access it by visiting [nyc.gov/health](https://nyc.gov/health) and searching “peers.” This page will offer you the option to complete the online assessment.

The site also offers a PDF version (full content, including non-automated assessment with self-scoring guide) of the toolkit available for download. If you are unable to access the website and would like a PDF copy, please contact the Consortium at 347-396-7126.

When engaging in the action planning and implementation process, the assessment included in the Consortium toolkit is part of stage 1 in the implementation process outlined earlier: collaborative assessment, review and planning. The self-assessment will help an organization evaluate its organizational readiness and identify what needs to be addressed in the action plan. It serves as a baseline measure of readiness prior to implementing change, which helps to monitor progress over time.

After completing the self-assessment, a customized toolkit will be generated based on the entered responses. The toolkit’s guidance helps organizations to address low readiness areas suggested by the self-assessment. Included practice areas are divided into nine sections, or domains:

1. Recruitment
2. Attitudes and Beliefs
3. Diversity and Inclusion
4. Finances and Sustainability
5. Role Clarity and Workflows
6. Career Advancement Opportunities
7. Supervision
8. Orientation and On-Boarding
9. Program Monitoring and Evaluation

## Plan to Engage Employees in the Assessment

Why involve all employees in the self-assessment process?



To create an organizational culture that values input of employees



To build awareness of processes within the organization and avoid intra-disciplinary tunnel vision



To highlight areas of strong consensus as well as those on which perspectives diverge



To share priorities for creating change instead of imposing a response to a directive



To expand awareness of practices considered in workforce integration and related challenges. As relevant dynamics manifest while working together, new insight to these issues can inform the levels of readiness reported.

## Ensure That All Employees Are Informed About the Process



Background materials, including the link to review the toolkit independently, should be widely distributed to all employees.



Give employees adequate time to review the information.



Create a process for communication (for example, open forum, Q&A session, shared document/online portal).

## Recognize Potential Barriers to Engagement in the Assessment Process

- Some individuals may not be interested in the task being presented.
- The willingness to invest time, or reallocate time used on required tasks, is necessary for full participation.
- Existing power dynamics can make a cooperative process tense or impede open communication.
- Contextual understanding of the purpose for this activity varies across employee roles.

## Review Pragmatic Considerations

- Coordinating schedules to convene employees
- Available space
- Interference with employees' availability to provide services at regular times
- Awareness of background information for assessment items can vary greatly
- Access to the internet and available technology is needed for use of online self-assessment

## Consider Processes That Encourage Representation of Employees

Involving a larger number of people doesn't always mean convening as one large group.

- The challenge of coordinating schedules may not be as problematic as initially believed.
- Strategic formation of smaller groups or subcommittees also solves issues of space or access to technology for all.
- Power dynamics that may stifle open discussion can be better addressed in smaller groups.



The best structure will vary depending on organizational needs.  
Some suggestions for formation of smaller groups include:

Send an organization-wide survey asking about preferences for timing. Create sections that will meet on different dates or times.

Assign groups randomly, but structure them with proportionate representation of departments within each sub-group.

Allow employees to first engage in small group discussions and self-select groups according to the topic of greatest interest.

Upon receiving background information, employees can be given time to complete the self-assessment independently and anonymously, and can send results to a few individuals willing to review all results and report back to all in the organization.

# COLLABORATIVE ACTION PLANNING

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## Share the Self-Assessment Findings

### Assessment Review

Make use of the toolkit's option to download a PDF of all responses and suggested toolkit content, which is presented upon the assessment's conclusion.

It is important to review the combined self-assessment findings with employees.

There are multiple ways that an organization may review the self-assessment and create a summary of all the submitted responses. These may include:

- most frequently reported selections
- items with significant variation between employees

For example: A summary of assessment responses may note:

*On the following item, 75% of the 35 employees who participated in the organizational self-assessment selected: "A structured workflow exists but does not include everyone's roles or tasks." The remaining 25% of responses were evenly distributed between: "I do not believe that we have a workflow" and "a routine is followed but is not formally presented in a workflow."*

Provide all employees with a copy of this summary and consider meeting as a larger group to review the outcomes and general trends noted across responses.

## Conduct a Collaborative Planning Session

After self-assessment findings have been shared, discuss how to use the information.

Employees should be full participants in the process of selecting three focus areas for an action plan. This will help to build motivation and investment in change that is meaningful.

### Explain the primary goal of a collaborative planning session

Before beginning the discussion, make sure all participants understand the purpose of the discussion.

Goal: To collaboratively consider the strengths and needs of the organization in preparation for our development of a customized plan that is:

Aligned with the goals of the organization

Supportive and an effective approach to address gaps that are identified in this process

Reflected in a shared, written plan

Review the self-assessment findings collaboratively and gather more information about items that indicate room for improvement. When these items have been identified, select no more than three of the nine organizational readiness domains as areas of focus to address at one time. This will help to maintain the feasibility and focus of change efforts.

- Divide employees into small groups to engage in discussion about the assessment items and re-convene as a larger group to review the perspectives of the smaller groups.
- Leaders of the planning session should closely review the self-assessment results prior to meeting for the collaborative planning session. This familiarity will help to address questions or concerns.
- The leaders should offer additional options for employees to follow up, as individuals may not feel fully comfortable raising concerns publicly when convening.

The information from the combined assessment results will inform the Goal Setting and Evaluation Planning stage of the Action Planning and Implementation Process.

### Discuss Strengths and Needs

Sometimes, strengths may seem difficult to identify if relying solely on assessment scores. Employees hold many kinds of strengths, and some may be more obvious than others. Acknowledgement of strengths is a necessary step in the process of building an implementation action team. Emphasize supportive, rather than critical guidance, and recognize resources that may be helpful to draw upon when facing other barriers.

If you are not familiar with all programs of an organization, or how it operates, the challenge may seem even more daunting. This is a good opportunity to remember that the goal is to facilitate the planning and to offer support, but to ensure that the employees can lead the way in establishing an understanding of their needs.

You may consider gathering input about the process of doing the assessment, and whether there was a general willingness to participate, for example. Even on its own, the willingness to participate demonstrates a strength, as it indicates a basic level of commitment or buy-in among the employees.

If there seems to be a bit of apprehension in the discussion of their strengths or needs, you may want to engage in a creative exercise to think about it as a group.

You can look for common themes by asking each participant to answer the question:

*What were three things that you appreciated about the workplace during the past week?*

Responses might include:

**Employee A:**

*I appreciated how my co-workers offered to explain things that I found confusing, since it's still new to me.*

**Employee B:**

*I appreciated how people always make sure to say "good morning" to everyone else.*

**Employee C:**

*I appreciated how our manager made sure to check in with everyone about their preferences before deciding on a date for the event we were planning.*

At this point, you can reflect on the input people are sharing in the discussion. You may respond by saying something like:

*I'm hearing that there is a strong sense of respect between employees, and that this is a workplace that values the comfort of those working here. Does that sound right to you?*

## Setting Goals

As a central aspect of the action plan, clearly define the organizational goals and decide how their achievement will be defined. Based on the selected domains for improvement, develop goals that point to the specific needs of the organization in those domains.

Creating **SMART** goals helps to establish a shared understanding that is clearly defined and enables evaluation of progress over time.

## SPECIFIC

What will be accomplished? What actions will you take?

## MEASURABLE

What data will measure the goal? (How much? How many? How well?)

## ACHIEVABLE

Is the goal doable? Do you have the necessary skills and resources?

## RELEVANT

How does the goal align with broader goals? Why is the result important?

## TIME-BASED

What is the timeframe for reaching the goal?

### How will we know when we're there?

A chart like the one here can help to facilitate a discussion that first establishes priorities and then considers how they can be understood in measurable terms.

Desired outcome		How it will be measured
1.		
2.		
3		

Consider the goals from the onset to inform the scheduling and intensity of program activities and determine when evaluation will take place next.

## Creating a Collaboration Structure

Assess whether the formation of task forces, workgroups or subcommittees will be useful.

### *Potential Benefits of Smaller Focus Groups*

- **Depth and Focus**

Allows participants to more closely focus in on the details of a particular domain and may even allow the group to more directly address each of the best practices that have been outlined within the nine domains.

- **Meaningful Investment and Motivation**

If involvement focus areas have been established based on genuine interest and desire to create change in a particular area of practice, the process is driven by the shared goals and motivation that contribute to positive, collaborative organizational culture.

- **Efficient Use of Time**

For many, participating in a smaller group may be a more realistic expectation than full involvement in all areas. This supports the capacity to plan thoughtfully and create a high-quality action plan during time dedicated to specific focus areas.

### *Risks of Smaller Focus Groups*

- **Lack of coordination**

Without a structure that integrates subcommittees or task forces, the very efforts that aim to improve an integrated work environment run the risk of occurring without a cohesive framework or plan to address the change as a whole.

- **A less direct connection between input of all employees and the action plan**

The initial self-assessment data should offer a comprehensive view of diverse employee perspectives. There is a risk of any subgroup looking more closely at internal discussions and goals and losing sight of the organization's broader goals.

### *Strategies to Combat These Risks*

- To address the risk of poor coordination, consider regularly reconvening all subgroups, or have a centralized group of liaisons from each section facilitate collaborative processes, review other activities and assess progress across all focus areas.
- To protect against losing focus on all employees' input, the larger action plan can be established prior to dividing into subgroups. Objectives should be established and agreed upon with consideration of the initial assessment information. Employees should remain informed to maintain accountability and address any concerns — sharing regular reports and updates on progress is one way to do this.

## Developing a Written Action Plan

*Make sure that this plan reflects the input of employees.*

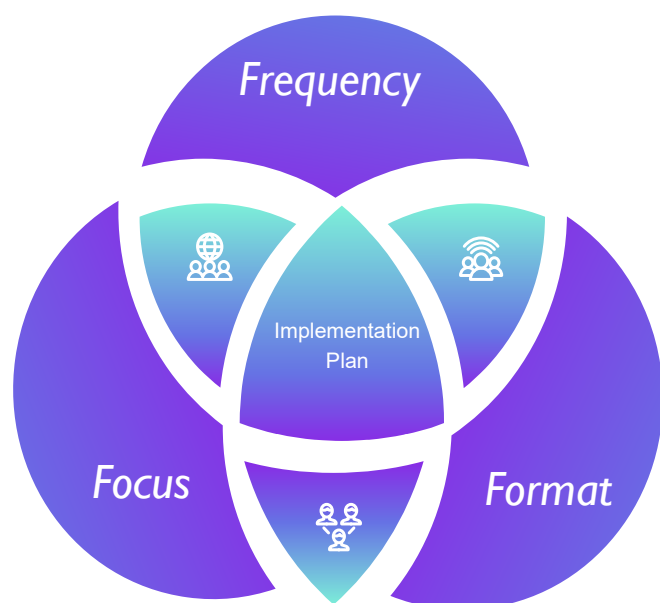
Determine leadership and primary responsibilities:

- ✓ What is the availability of those who will be involved?
- ✓ How much time is the organization able to set aside for training-based meetings or other support needed to drive the implementation?
- ✓ Does the organization have the infrastructure for online or webinar-based support?
- ✓ How feasible is it to bring employees together at a mutually convenient time?
- ✓ Is in-person discussion the best way to facilitate collaboration within the workplace?
- ✓ What differences may be present in the preferences of employees in various roles?
- ✓ What has worked well in the past, and what barriers have been present when conducting similar activities?

Specific divisions/programs involved in action planning and implementation	Individuals involved in organizing and action plan steps

The Consortium suggests thinking about a “3-F” Blueprint when developing an action plan:

### Focus, Frequency and Format



## Frequency

- How often will implementation activities in the plan occur?



## Focus

- Based on an initial assessment of needs, which of the nine organizational readiness domains should be addressed during this time?



## Format

- Which training approaches best meet the needs discussed?
- Have we discussed how we will consider the different ways that adults learn best?
- Are there any logistical concerns about the settings and methods?

# IMPLEMENTATION ACTIVITIES

## Tip

### Follow the plan.

Attention to the shared implementation plan agreement supports the fidelity of the program. It meets the expectations that have been established and helps to evaluate the efficacy and replicability of the planned strategies.

### Communication and Regular Updates

All employees should receive a copy of the agreed-upon action plan and should be given an opportunity to offer feedback, including the contact information needed to direct questions or concerns that may come up at a later point.

### Training and Technical Assistance

Training can provide highly structured guidance related to a specific area for improvement. Appendix B offers a list of resources to learn more about how to deliver training and technical assistance.

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**The NYC Peer and Community Health Worker Workforce Consortium suggests these techniques to keep employees engaged in the activities and discussions throughout the implementation process:**

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#### 1. Get to know everyone in the room

Allowing people to be introduced to one another in a relatable way helps to bridge gaps in a relaxed and communicative environment. Even when names are known, consider asking people to answer one question as an icebreaker when they introduce themselves.

Ask about:

- A hidden talent
- The best part of your week so far
- Your favorite dessert
- The last movie you saw
- The last place you have traveled, or where you would like to travel

... and many other possibilities!

Be creative, gauge the comfort of the attendees, and do not worry (yet) about making it directly relevant to the training topic. Developing comfort and trust first helps to engage everyone in the discussion that follows.

It is also important not to exclude yourself from the icebreaker. This helps to establish trust and create a connection as someone available to discuss things that may not always be comfortable.

## **2. Take a Deeper Dive into Domains for Improvement**

### **Recruitment Activity: Mock Interview**

Conduct a role-playing game in which you, or another facilitator, serve as the candidate interested in being hired as a PS/CHW. Ask for a volunteer, or multiple volunteers (as a group) to conduct an interview that aims to achieve the practices highlighted in the recruitment section of Practices to Advance Workforce Integration (Appendix C). This can include asking strategic questions, understanding what is and is not permissible, and providing accurate information in response to concerns about benefits eligibility. The “audience” or other participants will be evaluating the interview and will look for these elements as it is conducted. They will then offer their feedback and explain their observations.

### **Attitudes and Beliefs/Diversity and Inclusion Activity: Small Group Discussion**

This topic can often include personal or sensitive experiences. Employees may not be used to speaking with coworkers about how they, or their family members, are impacted by challenges with mental health, substance use, physical wellness or other struggles. The stigma attached to many of those challenges also tends to inhibit open discussion about them. Gauge the comfort of the attendees and do not force them to disclose more information than they are comfortable disclosing.

Issues of stigma, personal discomfort, uncertainty about best practices or other concerns can impact any workplace. Often the same attitudes and beliefs that perpetuate concerns also contribute to avoidance of respectful discussion about them.

Depending on the size of the larger group, break off into small groups of two or three people. Consider the physical space available and allow groups their own space to whatever extent possible. Encourage people to sit with those they may not speak with as regularly.

Encourage discussion about some of these difficult topics by providing some “food for thought” questions. Develop your own or use some of these examples:

- Describe a time when you falsely assumed something to be true about another person. What do you think contributed to this assumption? How did you find out it was not correct, and what was that like for you?

- What about a time when this kind of assumption was made about you? What was that experience like for you?
- Are there ways we can create a supportive, more accepting workplace?

Re-group, and gather feedback about the experience of having the discussion. If there seems to be resistance to this, offer a more structured prompt. Examples may include:

- Was there anything that surprised you?
- How might you engage in these kinds of discussions in the future?
- Did your experience change at all as you heard from other group members?

# CONCLUSION OF ACTION PLAN IMPLEMENTATION

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## Debriefing

Feedback from program recipients helps to assess the program and identify its strengths and needs. Collect information through a specific form, an exit interview or debriefing session.

## Helpful questions to consider in evaluation

**Overall, how would you rate your satisfaction with your organization's action planning and implementation process?**

- ☐ Extremely dissatisfied
- ☐ Dissatisfied
- ☐ Neither satisfied nor dissatisfied (Neutral)
- ☐ Satisfied
- ☐ Extremely Satisfied

**How well did the support you received meet your expectations?**

- ☐ Not at all
- ☐ Slightly
- ☐ Moderately
- ☐ Very well
- ☐ Extremely well

**How would you rate the readiness of your organization to implement the strategies and suggestions provided?**

- ☐ Not ready at all
- ☐ Slightly ready
- ☐ Moderately Ready
- ☐ Very ready
- ☐ Extremely ready

### Open-Ended Questions:

What was most helpful about the process?

How will you use the process going forward?

What else would you like to learn?

What can be improved in the process?

### Organizational Feedback Report

Providing an organizational feedback report is an important tool for sustainability. It reinforces the value in continuing to look at the “big picture.” Through review of the summarized process in the feedback report, participants in implementation efforts can reflect on the point at which they began, appreciate progress that has been made and continue to look ahead and set goals to address any new or residual needs.

It is important to make sure that progress — or ongoing need — doesn’t lose attention as time goes on. Distribution of a post-implementation feedback report helps to highlight collaborative efforts and to open up discussion about remaining needs.

An organizational feedback report may include:

- Summary of implementation program activities and closing evaluation
- Accomplishments and successes
- Improvement areas and next steps
- Summary of practices recommended for organizational readiness

A sample feedback report (with the organization's name removed for privacy) can be reviewed in Appendix B.

There is great value in conducting a self-assessment at the onset or before the introduction of a new initiative. Defining a baseline from this assessment holds several purposes:

1. A collaborative review will offer all employees a chance to voluntarily reflect on the day-to-day practices in their organizations and consider the impact in ways that may not have been considered in full.
2. All employees will have a chance to highlight and draw upon areas in which organizational readiness appears especially strong and identify areas for improvement.
3. A quantifiable, well-defined measure can be used as a point of comparison, or a defined starting point, when measuring progress over time.

# APPENDICES

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## APPENDIX A: Resources for Training and Technical Assistance

### Core principles of training and learning styles

The guidebook *Delivering Training and Technical Assistance* was originally developed by the National Resource Center with assistance from Dr. James C. Galvin, Ed.D. It was updated in 2010 for the Department of Health and Human Services by the National Resource Center. The guide offers comprehensive information, strategies and tools that can help organizations to create sustainable change by using training and technical assistance.

[https://www.acf.hhs.gov/sites/default/files/ocs/delivering\\_tta.pdf](https://www.acf.hhs.gov/sites/default/files/ocs/delivering_tta.pdf).

### Videos to Inform Employees About the Peer Role

The Substance Abuse and Mental Health Services Administration (SAMHSA) provides a collection of videos that provide guidance on the role of peers in the workforce.

<https://www.samhsa.gov/brss-tacs/video-trainings#peer-support>

### Resources to Teach About the Peer Workforce

This list is from the Technical Assistance Strategy of Bringing Recovery Supports to Scale (BRSS-TACS), a SAMHSA initiative. It provides resources that educate employees about peer support practices, supervision and practices that are based on a recovery orientation.

[https://www.samhsa.gov/sites/default/files/programs\\_campaigns/brss\\_tacs/guidelines-peer-supervision-3-resources-cp4.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tacs/guidelines-peer-supervision-3-resources-cp4.pdf)

### Implementation Tools and Templates

University of North Carolina's National Implementation Research Network operates an Active Implementation Hub, which contains a large collection of usable tools and training resources to support implementation efforts.

<https://nirn.fpg.unc.edu/ai-hub/resources>

# APPENDIX B: Sample Feedback Report

## WORKFORCE INTEGRATION OF PEER AND COMMUNITY HEALTH WORKER ROLES



### Organizational Readiness Self-Assessment Summary and Feedback Example

Dear [organization name removed for privacy],

As the NYC Peer and Community Health Worker Workforce Consortium, we value the growth of opportunities that understand, support, and recognize what peers and community health workers contribute to the workforce. Your use of *Workforce Integration of Peer and Community Health Worker Roles: A Needs-Based Toolkit* indicates that your organization has taken an important step in advancing these goals.

We have developed this feedback report and summary to help you consider your organization's strongest workforce integration practices and areas where organizational readiness can be improved. We hope that our feedback will be useful to you in identifying your organization's strengths and needs, and in working towards implementation within the practice areas identified.

Please let us know if you have any questions or concerns about this feedback. You can contact us by email at [PeerConsortium@health.nyc.gov](mailto:PeerConsortium@health.nyc.gov) or by phone at 347-396-7194.

*The NYC Peer and Community Health Worker Workforce Consortium*

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### Review of Organizational Self-Assessment Response Selections

This review looks at the responses to each of the items on your self-assessment. We encourage organizations to engage as many employees as possible in the self-assessment process, as this encourages workforce integration and more representatively reflects the actual organizational readiness as it appears in the workplace. We also encourage distribution of the assessment feedback report to all employees, along with opportunities for employees to respond, ask questions, or offer additional insight.

The responses entered by employees of your organization are presented within each of the nine measured domains for organizational readiness:

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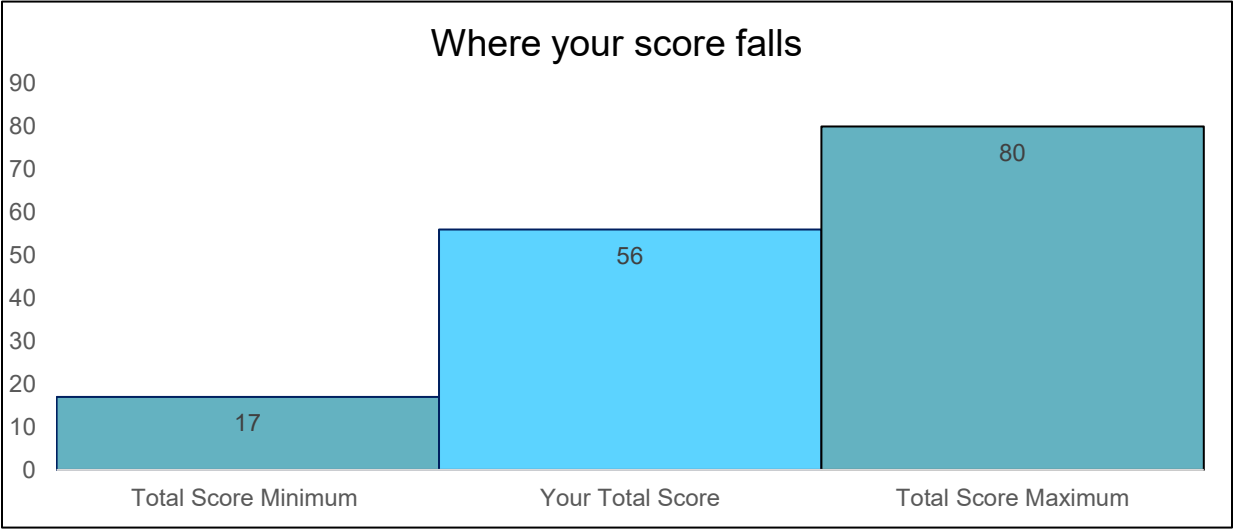
1. Recruitment
2. Attitudes and Beliefs
3. Diversity and Inclusion
4. Finances and Sustainability
5. Role Clarity and Workflows
6. Career Advancement Opportunities
7. Supervision
8. Orientation and On-boarding
9. Program Monitoring and Evaluation

Note: All Response selections are considered on a 5-point scale (according to their listed order). These reflect a range lower to higher organizational readiness level for the practices indicated.

Domain	Total of domain item scores (based on average of multiple entries)	For Reference: Number of Items and Domain Score Range (Minimum-Maximum)	
Recruitment	12 out of 15 (80%)	3 items	3-15
Attitudes and Beliefs	4 out of 10 (40%)	2 items	2-10
Diversity and Inclusion	10 out of 10 (100%)	2 items	2-10
Finances and Sustainability	3 out of 10 (30%)	2 items	2-10
Role Clarity and Workflows	(7 out of 15) (46.7%)	3 items	3-15
Career Advancement Opportunities	5 out of 5 (100%)	1 item	1-5
Supervision	n/a (No Supervision assessment items were presented based on your response to “Has your organization ever recruited, or attempted to recruit, PS/CHWs?”)		
Orientation and On-Boarding	5 out of 5 (100%)	1 item	1-5

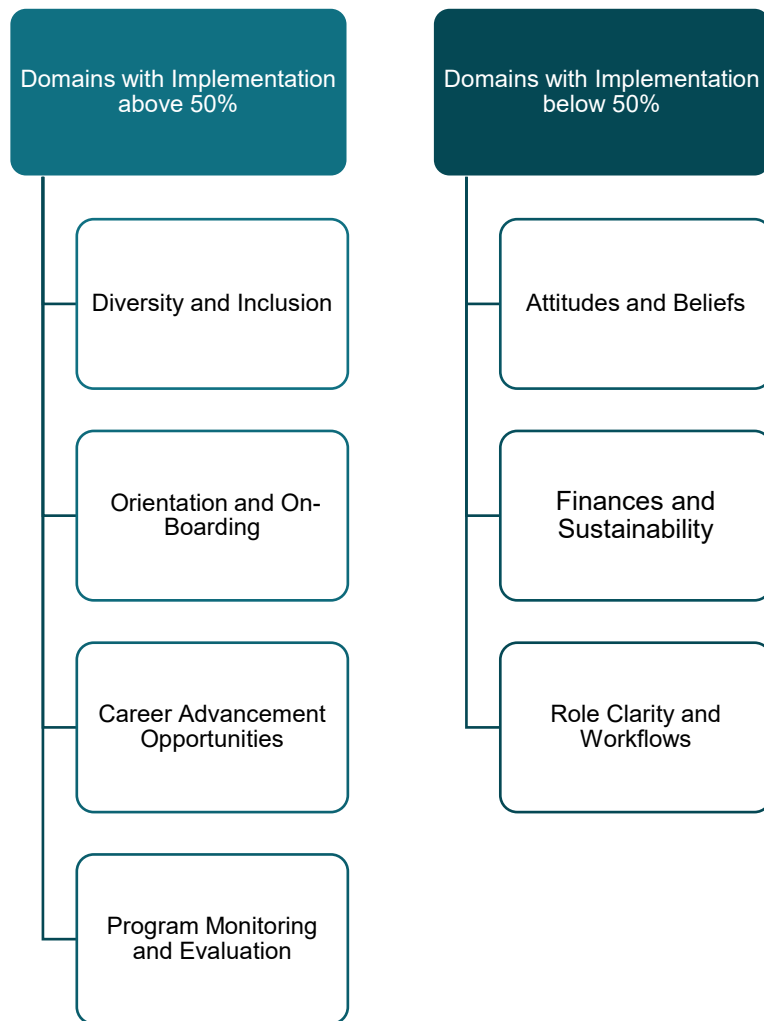
Program Monitoring and Evaluation	15 out of 15 (100%)	3 items	3-15
Total Across All Domains	56 out of 80 (70%)	17 items	Lowest possible score=17 Highest possible score=80

Summary of Your Readiness Levels Across Domains



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Domains with stongest organizational readiness and domains with greatest room for improvement



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## Recommendations and Implications of Your Organizational Readiness Assessment

Based on the collected self-assessments of your organization's employees, the analysis above highlights strengths and areas for improvement in practices to support integration of the peer workforce. As you prepare to address any gaps that have been noted, consideration of this analysis can help you to:

- Understand the relationship between various practices, and how they impact one another
  - Draw upon your organization's strengths to improve other areas
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It is critical to consider the scores presented within the context of [organization's] prior and current engagement with peers. Based on the initial response, which noted that [organization] has not ever recruited, or attempted to recruit, PS/CHWs, lower levels of readiness cannot be assumed to reflect active barriers to workforce integration. Some practices may not occur now merely because they have not been relevant to the employee roles within the current model of operation. Therefore, a distinction should be made between responses that would be likely to shift with the employment of peers and those that are impacted by consistent difficulties.

For example, domains of Attitudes and Beliefs, Finances and Sustainability and Role Clarity and Workflows indicated readiness that is below 50% of the maximum readiness. However, if we look more closely at the items that these domains comprise, we see that questions are mostly about practices or awareness specific to the peer role. Many of the items are typically part of the pre-hire planning, or even the early development of a peer program.

The items within the Role Clarity and Workflows domain demonstrate the importance of this distinction. Responses were "Not at all" to, "Overall, how knowledgeable are employees about the role of PS/CHWs?" and "None" to "How much opportunity are employees given to learn more about PS/CHW principles and responsibilities?". On the third Role Clarity and Workflows item, [organization] was asked more generally about its use of a workflow and the inclusion of employees in workflow-related processes. On this item, the response noted that, "All employees are familiar with the workflow, are included in its described roles and contribute to reviews and updates as needed" which suggested the maximum readiness level.

This is important to recognize not only when considering your scores and their implications, but for the purpose of incorporating strengths in any future peer program development or pre-recruitment planning.

In fact, the recommended practices we have shared with you are generally applicable in any workplace environment. They have intentionally been noted as focus areas for peer employment based on the information, we gathered about gaps experienced by many organizations. Stigma and inequity have historically impacted peers disproportionately in the workplace.

For this reason, it will be helpful to look more closely at the items within the Attitudes and Beliefs domain. The reason for responding "None" to "How much attention is given to the questions or concerns of non-PS/CHW employees about working with PS/CHWs?" may simply be because this attention has not been relevant or necessary. Similarly, the response, "Neither positive nor negative" when asked "Which best describes the attitudes of non-PS/CHW staff towards PS/CHWs?" may be suggesting that this information that is not known as it has not been an area of focus.

Your levels of readiness in Diversity and Inclusion practices are excellent. Nonetheless, we advise proceeding with caution avoiding any assumption that if peers were to be hired, the generally accepting and sensitive culture that leads to that high readiness would protect against the possibility of attitudes towards peers that are negative or rooted in stigma.

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Even when a staffing change is not peer-specific, if other employees are not informed or given the opportunity to offer input, those in a new position may be targets of frustration or confusion, which can also interfere with the collaborative processes that are outlined in a workflow.

We recommend reviewing the items in which room for improvement was noted and discussing whether you would expect a similar response if actively employing peers (based on your understanding of the organization, but with the recognition that barriers cannot always be predicted).

The levels of 100% readiness across 4 domains is exceptional and would be a valuable asset to workplace practices in the potential integration of peers in the future.

Please let us know if you have any questions about our review of this assessment, or about recommendations for strengthening implementation in any areas. We can be reached by email at [peerconsortium@health.nyc.gov](mailto:peerconsortium@health.nyc.gov) or by phone at (347)396-7484.

We hope that you have found the Toolkit helpful and we look forward to hearing more about your efforts in these areas!

Sincerely,

The NYC Peer and Community Health Worker Workforce Consortium

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# Appendix C: Recommended Practices for Workforce Integration



## Practices to Advance Workforce Integration

NYC Department of Health and Mental Hygiene, Office of Consumer Affairs

The practices outlined below are recommended by the NYC Peer and Community Health Worker Workforce Consortium. The purpose of these recommendations is to help organizations overcome barriers to organizational readiness. Barriers that impede readiness prevent organizations from fully drawing upon the strengths that PS/CHWs contribute to the workforce and to those receiving their services.

The categories and practices that are outlined here respond to the strengths and needs suggested by data collection processes, including surveys and community-based semi-structured interviews. The Consortium identified domains of practice in which barriers appeared most frequently. For some organizations, the greatest barriers are in the initiation of a peer or community health worker program, and for other organizations offering these services, significant challenges are more evident in the type or intensity of support offered to PS/CHWs in the workplace. The practices below are intended to address the variety of organizational needs experienced, with the recognition that the circumstances facing organizations and impacting their readiness and needs are diverse.

While some recommendations may be more specific to the integration and support of PS/CHWs, many of the practices are universally recommended for a supportive and equitable workplace. PS/CHWs have faced longstanding discrimination and inequity in the workplace. This necessitates directed emphasis on the consistent use of the outlined practices to ensure that PS/CHWs are not excluded from the support offered to other employees.

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### Recruitment

- Organizations should identify job posting networks that will reach appropriate PS/CHW applicants.
  - Interviewers should be familiar with questions that will evaluate competencies held by PS/CHW applicants.
  - Interviewers should be familiar with prohibited questions about an applicant's illness, disability or diagnosis.
  - Interviewers should be able to respond accurately to PS/CHW applicant concerns about potential loss of benefits with a change in employment status.
  - Job descriptions for PS/CHWs should include the components below:
    - Core responsibilities and examples of duties to be assigned
    - Overview of the organization's main programs
    - Required schedule
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- Instructions for applying
  - The teams and employees who will work/interact with the PS/CHW
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### Attitudes and Beliefs

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- Leaders should understand the general attitude of most non-PS/CHWs towards PS/CHWs and proceed accordingly.
  - Organizations should attend to questions or concerns of non-PS/CHW employees about working with PS/CHWs.
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### Diversity and Inclusion

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- Organizations should identify and eliminate workplace barriers to equity that are related to race, ethnicity, culture, gender, sexuality, age or other personal characteristics.
  - Organizations should be highly familiar with the specific ways that inequity can manifest according to the type of role an employee holds (e.g. youth peer advocates who experience ageism or criminal justice-involved peers facing hiring barriers because of prior records).
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### Finances and Sustainability

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- Rates of pay relative to work performed should be as reasonable as the rates for other roles within the organization.
  - Organizations should be familiar with New York State standards for billing and Medicaid reimbursement of PS/CHW services.
  - Funding should be allocated to hire and maintain support of PS/CHWs.
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### Role Clarity and Workflows

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- All employees should be knowledgeable about the role of PS/CHWs.
  - Employees should be given the opportunity to learn more about the roles and responsibilities of PS/CHWs.
  - PS/CHWs should be included in the organization's team projects.
  - All employees should be familiar with a workflow that defines and guides how the team operates by outlining each role. All roles should be described in the workflow, and those with roles included in the workflow should contribute to its reviews and updates as needed.
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## Career Advancement Opportunities

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- Organizations should have advanced PS/CHW positions (e.g., supervisors, mentors, workplace advisers) for PS/CHWs who demonstrate success and experience in their roles.
  - Higher pay should be provided for more advanced PS/CHW positions.
  - Organizations should inform PS/CHWs of training opportunities that align with their needs and interests.
  - Events or training sessions should be scheduled so that employees from a variety of disciplines can attend.
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## Supervision

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- When identifying an appropriate supervisor for a PS/CHW, the following should be considered as important factors:
    - Availability and schedule
    - Prior experience working in a role similar to PS/CHW
    - Willingness to supervise others
    - Familiarity with the use of standard supervision materials
    - Will continue to receive professional supervision
    - Awareness of the difference between supervising PS/CHWs and the clinical support of PS/CHWs
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## Orientation and On-Boarding

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- Prior to the start date of a new employee, a designated workspace should be assigned with access to supplies and technology.
  - When beginning a position, new PS/CHWs should be provided with information about each of the following:
    - Standards of conduct and employee rights and responsibilities (e.g. privacy, emergency or crisis protocol).
    - Contact information for staff, including a point person on site for questions about daily operations
    - Descriptions of coworker roles
    - Dates of recurring meetings or upcoming events
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## Program Monitoring and Evaluation

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- Relevant data about the organization's programs should be shared with staff in a meaningful and understandable way.
- Evaluation measures should incorporate feedback from all employees.
- Evaluation of the organization should include feedback from service recipients.

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