

# Grantee Meeting Workbook

December 11 – 12, 2014



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# Before We Begin

#### Introduction

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) launched the Recovery Community Services Program-Statewide Network (RCSP-SN) grant initiative to expand the capacity of addiction recovery community organizations (RCOs) to be key partners in behavioral and physical health systems, and to strengthen the voice of the addiction recovery community at the local and State level. The goals of the initiative are to—

- 1. Establish sustainable mechanisms for integrating the peer voice into the service delivery and change efforts of State addiction and health systems;
- 2. Promote skill development with an emphasis on leadership and business management for RCOs;
- 3. Identify the technical assistance needs of peer programs, and provide training and support to ensure they are viable players in the delivery system; and
- 4. Develop partnerships that support (a) access to peer support and (b) development of policies and programs in behavioral health systems.

Grants were awarded to 10 organizations, including yours. The RCSP-SN grants offer your organizations opportunities to engage RCOs in your State to create influence and impact policies, programs, and systems.

People who work in designing and operating State systems have responded to enormous changes in the recent past. The idea of recovery–oriented systems of care (ROSC) has become a priority in many States, calling for a shift in philosophy and science and, thus, a major overhaul in the way that addiction services are envisioned, structured, and funded. Added to these changes are additional ones being brought about through health care reform, notably the Patient Protection and Affordable Care Act (ACA) and the Mental Health Parity and Addiction Equity Act (Parity). Simultaneous to all of these occurrences has been the evolution and maturity of peer recovery support services (PRSS), as a major addition to service programs, workforce development, and funding priorities.

With changes happening at a rapid pace, it has become imperative that members and leaders from the addiction recovery community are present at the forefront of decision making. In some cases, you are being welcomed and invited and, in others, you need to take the lead in making room for yourselves, demonstrating that inclusion of recovery community representation is valuable and necessary. As you take or prepare to take your place at "the table," you need to decide on your priorities, messages, and common themes; train and mobilize your constituents; develop representative leaders; team up with existing and new partners and allies; and negotiate rapidly changing landscapes that involve both policy and politics.

In light of all of this, SAMHSA's RCSP-SN initiative has emerged in a timely manner. The RSCP-SN funding gives grantees a vehicle to leverage community muscle in ways that will ensure that PRSS are included in all new service designs and that organizations and programs offering PRSS have the resources, tools, and capacity to participate with integrity,

authenticity, and accountability. This grantee meeting is designed to help you as you begin your work. You will—

- Become familiar with how six key practices apply to your Statewide Network activities;
- Reflect on your program models;
- Review and revise project work plans; and
- Learn a framework for evaluation of project activities, and ways for more effectively working with evaluators.

#### **How This Workbook is Structured**

This workbook is designed for you to use during each session of the grantee meeting. It is also designed to be a resource book that you will use after the meeting.

The first section, *The Six Practices*, provides an introduction to six key practices that will be important in your work: (1) community organizing, (2) community assessments and asset mapping, (3) strategic networking, (4) strategic shared learning, (5) strategic communications, and (6) evaluation.

Section 2, *Identify*, *Articulate*, *Prioritize*, focuses broadly on the first practices by looking at what you hope to achieve, who will be your key partners and allies, and whether your available resources match your ambitions. The worksheets will help you to translate the activities in your proposal into action areas.

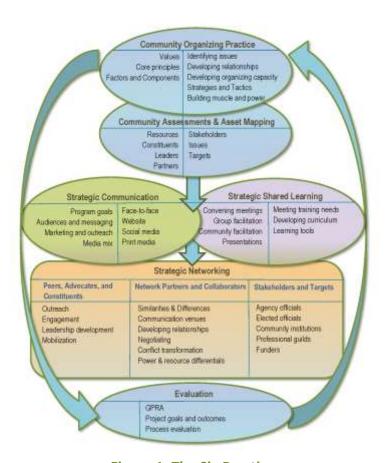
Sections 3–6 will help you take a closer look how three practices—strategic networking, strategic communications, and strategic shared learning—will further your work on the SAMHSA activities. Each of these sections contains worksheets on networking, communications, and shared learning:

- Section 3 will help you to consider how strategic networking, communications, and shared learning will move your *Workforce Development* activities forward.
- Section 4 will do the same for the *Linkages and Catalysts* activities.
- Section 5 will take you deeper into *Systems Improvement and Planning*, looking at what partnering, messaging, and learning will be needed to impact systems.
- Section 6 will consider strategic networking, communications, and shared learning to advance your goals for *Health Care Coverage and Integration*.

# Section 1: The Six Practices

#### Introduction

*The Six Practices*, shown in Figure 1, are key practices that will be important in your Statewide work. Each is described in this section of the workbook.



**Figure 1. The Six Practices** 

# **Community Organizing**

Generating influence and impact on recovery-oriented policies, programs, and systems on a State level requires a specific skillset and orientation. This way of thinking and doing moves away from a service delivery approach towards one of community organizing.

#### What is Community Organizing?

**Community Organizing** is often described as a process through which people come together to act in common interests with a common agenda. The ultimate role of the community organizer(s) is to identify, develop, and leverage community muscle— individuals, organizations, and institutions—in order to build a base of power and influence, to articulate an agenda, and to move that agenda forward in ways that create and sustain change. Figure 2 summarizes the steps in the organizing process.

For Statewide Networks Network grantees, the first question becomes: What is the change that you want to create and sustain? In other words, at the end of your 3-year grant what will be different than it is today, as a result of your work? In order to create a roadmap for your project, you need to clearly determine your projected destination. If you have a solid idea of where you want to go, you can clearly set out a series of steps and pathways to help you get there.

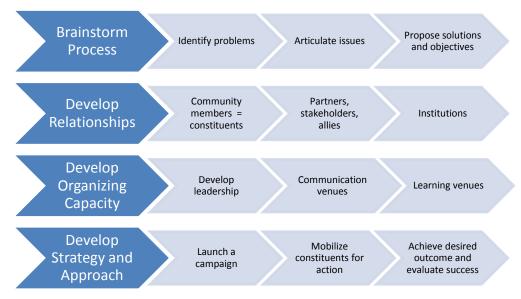


Figure 2. Steps in Organizing Process

The role of a community organizer is to convene, facilitate, design, and orchestrate. The organizer does not always demonstrate "front person leadership" and often works behind the scenes to make things happen and run as smoothly as possible. Much of the work is preparatory: creating educational materials, developing community leaders, making introductions and arrangements, training mobilizing constituents, and developing action plans. The community organizer's main focus is to gather and harness community energy to create a sense of power that will have presence, stamina, and influence. Organizers know the power that is created when people come together in an organized manner to create change.

#### What are the Core Principles?

Effective community organizing is centered on a few core principles:

- Fairness and social justice Individuals and communities deserve access to resources. Often, barriers need to be lifted to ensure that every person has the right to recover from addiction.
- Political analysis of power and resources Individuals and communities can develop
  a sophisticated sense of politically motivated power structures and access to resources
  and strategies to address them. Communities achieve power by organizing and
  mobilizing constituents, organizations and institutions, and resources.

- **Civic participation, empowerment, and responsibility** People become empowered by responsibly engaging and participating in civic and community life.
- **Growth and healing from creating change** When people come together to affect collective change, their lives become changed from the process. A sense of growth and healing can occur in individuals, families, and communities.
- **Strengths- and asset-based** Strengths-based approaches build on individual and community strengths, rather than focusing on deficits. It is a way to identify and leverage resources, rather than trying to fix what is wrong.
- All diverse voices are included and heard In order to build a broad base of constituents, it is necessary to engage all groups and communities that are affected by the issue.
- **Collaboration and partnership** A broad base of support requires creating partnerships, coalitions, and networks with citizen groups, organizations, institutions, and allies.
- **Outcome-focused** Keeping everyone focused on the issue and the outcome is essential. The question in the forefront must always be: What is it that we are trying to achieve?
- **Process/product balance** While the outcome is important, the process that people undergo while working to achieve it is equally important.

Minkler and Wallerstein<sup>1</sup> define several concepts in community organizing and community building practice that are important for improving health. These concepts and their application are summarized in Table 1.

Table 1. Key Concepts in Community Organizing and Community Building

Concept	Definition	Application
Empowerment	Social action process for people to gain	Community members assume greater power
	mastery over their lives and the lives of	or expand their power from within to create
	their communities	desired outcomes.
Critical	A consciousness based on reflection and	Engage people in dialogue that links root
consciousness	action in making change	causes and community actions.
Community	Community characteristics affecting its	Community members participate actively in
capacity	ability to identify, mobilize, and address	the life of their community through
	problems	leadership, social networks, and access to
		power.
Issue selection	Identifying winnable and specific targets	Identify issues through community
	of change that unify and build community	participation; decide on targets as part of a
	strength	larger strategy.
Participation and	Acknowledging that community	Community members create their own
relevance	organizing should "start where the people	agenda based on felt needs, shared power,
	are" and engage community members as	and awareness of resources.
	equals	

 $<sup>^{1}</sup>$  Minkler, M, 2012. Community organizing and community building for health and welfare. New Brunswick, NJ: Rutgers University Press.

**Before We Begin** 

#### How Do We Identify Issues and Strategies?

Table 2 outlines the factors involved in identifying an issue, calculating a "win," finding constituents to move the issue forward, and developing winning strategies to achieve the goal.

**Table 2. Moving From Issue to Strategy** 

Identifying a Good Issue	<ul> <li>Do a lot of people care about it?</li> <li>Do people care about it a lot?</li> <li>Does the issue span diverse groups?</li> <li>Does the issue have a solution?</li> <li>Is there a person or institution that can make the decision to solve it?</li> <li>Will the issue build alliances and further the organizing efforts?</li> </ul>
Getting an Initial Win	<ul> <li>Start with an issue that is relatively easy to resolve.</li> <li>An early success, even a minor one, will build motivation and inspire people toward further action.</li> <li>With each new success, everyone's skills and motivation will increase.</li> <li>With each new success, people become committed to taking on more complex and less easily resolved issues.</li> </ul>
Identifying People to Create Change	<ul> <li>Who cares about the issue? Find a critical mass of people.</li> <li>How is the issue tailored to align with people's self-interests?</li> <li>How are you using and creating social networks to bring and join people together?</li> <li>How are you engaging people and assigning meaningful roles?</li> </ul>
Strategy and Tactics	<ul> <li>Who (person) and/or what (institution) is the target?</li> <li>What do you calculate as the degree of opposition?</li> <li>What do you calculate as your degree of influence?</li> <li>What is your proximity to the target?</li> <li>Initially, what is your least contentious tactic?</li> <li>To what degree are you prepared to escalate to conflict, if necessary? [Remember: Conflict tends to alienate both the target and the organized]</li> </ul>

# **Ten Tools for Taking Power<sup>2</sup>**

Before reviewing the Ten Tools, it is important that grantees know the difference between advocacy, which is allowable under the grant, and lobbying, which is not. Lobbying constitutes any action that is directly related to influencing pending or existing specific legislation and is a forbidden activity for any organization receiving grant funding from the Federal Government. There are also restrictions for 501c-3 organizations concerning the percentage of overall budget funds used for lobbying.

<sup>&</sup>lt;sup>2</sup> Staples, L. 2004. *Roots to power: A manual for grassroots organizing.* Westport, CT: Praeger Publishers.

On the other hand, 501c-3 and organizations receiving federal grant awards can engage in advocacy activities that demonstrate influence on changing existing and creating new policies that support recovery from addiction, in general, and promote peer services, specifically.

- 1. **Do it yourself.** Take a community development approach to organizing, in which communities respond to a problem. An example of this approach is the development of PRSS by RCOs facing a lack of support for recovery beyond the treatment system.
- 2. **Develop persuasive arguments.** What data and materials do you need to develop in order to build and support your case and give weight to your issue(s)?
- 3. Raise awareness and consciousness. What consciousness raising tools can you create to politicize a social issue, ranging from teach-ins and popular education workshops to public forums and rallies? These tools will help demonstrate how peer services successfully address stigma, prevent relapse, and lift barriers to recovery.
- 4. **Use existing laws, policies, and processes.** What existing statutes, regulations, and policies can you leverage to push your issue forward? Things to look for might include Substance Abuse Prevention and Treatment block grant regulations or the Center for Medicare and Medicaid Services 2007 letter to State directors that offers federal guidance for State reimbursement of peer services.
- 5. **Create or change laws, policies, and processes.** What existing statutes, regulations, and policies do you need to change, and what new ones need to be created in order to achieve your goal(s)? Does your State block grant regulations need to be changed in order to earmark the funding of peer services? Do you need to help draft a policy about peer certification, qualifications, and supervision? Do your State agencies need to become familiar with accreditation efforts?
- 6. **Generate publicity.** Creating a broader public awareness and backing for you issue can be achieved by creating media releases for and inviting members of the press to public forums and hearings that highlight your issue(s). You can also use blogging and social media to the same end. Sometimes media attention is used to bring attention to an elected or appointed pubic official that has opposed or is lukewarm to your issue or is stalling to move it forward.
- 7. **Exercise electoral power.** Barring any lobbying activities, grassroots organizations and networks can build constituent power through voter registration campaigns, voter education, and get-out-the-vote efforts. Reminding elected officials and the public that people in recovery vote, which can build political muscle.
- 8. **Affect appointments.** What positions in your county or State are appointed and what is the process for naming or removing appointments? Your Statewide Network

can exert power and influence over who is named as well as advocating for who needs to be removed from positions, such as administrative positions or heads of policymaking or oversight boards. You can also create things like report cards that highlight issues and job performance of appointees.

- 9. **Exercise consumer power.** Consumer power can be leveraged in both positive and negative ways. On the positive side, a Statewide Network can work with stakeholder businesses to give discounts as an incentive to constituents who formally join the network. In a more negative fashion, a network can organize constituents to reject or boycott services as a means to publically highlight unlawful, unethical, or harmful practices.
- 10. **Disrupt "Business as Usual."** This final tool entails the use of nonviolent action or protest that interferes with a target's ability to operate in a normal fashion. Tactics, such as picket lines and sit-ins, should be used judiciously; they require lots of experienced planning and should not be funded with federal resources.

# **Community Assessments and Asset Mapping**

Locating and mapping community resources is an approach that was created by community organizers, notably John McKnight and John Kretzmann at Northwestern University<sup>3</sup>. For those who are not used to it, conducting this kind of assessment may present some initial challenges. Most traditional service providers have been trained to conduct community *needs* assessments, which basically locate holes to be filled with services and programs. As a counter to this way of thinking, an asset-based approach seeks and makes visible valuable resources that are inherent, but sometimes hidden, in the community. The differences in these approaches are summarized in Table 3. When the internal strengths, capacities, and resources are revealed in the community, they can be built and capitalized on before leveraging external resources. When community members develop their own capacity and increase the capacity of their institutions and organizations, they are also connecting and forming relationships that move toward taking action on shared issues and concerns.

Table 3. Differences in Assessment Approaches<sup>4</sup>

Asset-Based	Needs-Based
Proactive	Reactive
Focus on existing capacity and resources	Focus on imposed standard and deficits
Program participants and community members	Program participants and community members viewed
viewed as assets and contributors	as target groups that have activities "done to" them
Maximizes and recycles community resources	Minimizes community resources
Community seen as expert	Community seen as in need of external experts

<sup>&</sup>lt;sup>3</sup> Kretzman, J.P., and McKnight, J.L. (1993). *Building Communities from the Inside Out.* Evanston, IL: Asset Based Community Development Institute.

<sup>&</sup>lt;sup>4</sup> Kretzman and McKnight, Asset Based Community Development Institute, www.abcdinstitute.org.

Some Statewide Network grantees will be organizing throughout their State for the first time. Others have been organizing statewide for some time but may want to focus on building capacity in areas or regions that have previously been less developed. Before approaching a new area for the first time, or coming into a known area with a new approach, an asset-based assessment will give you a scan of the environment, help you locate available resources, and give you an idea of cultural realities with which you will be working. Going into communities that are not your own takes a level of mindfulness, cautionary exploration, and respect for those who live there. Locating an emissary or liaison is essential to opening doors for you to enter the community. This might be a community leader or someone who is trusted and welcomed by lots of different groups. It may be a citizens' association or organization that is well-respected and known for its community work.

It pays to be observant and to follow a few ground rules when going into a new community or working with individuals and organizations on a community level. Organizations that are used to partnering only with other organization will need to adjust their approach, as demonstrated in Table 4.

Table 4. Different Approaches: Working with Organizations and Communities<sup>5</sup>

Organizations	Communities
We know who to contact by position.	We have to research who to contact (which is not
	always obvious).
We furnish timelines and deadlines.	We ask them to give us a reasonable time frame.
We write things up (e.g., reports, memos, job	We meet and converse with them in their community.
descriptions).	
We often take the lead in projects.	We let the community lead us.
We schedule meetings during the workday.	We go to meetings at night and on weekends and help
	to figure out transportation and child care.
We draft a list of possible roles for our organization.	We ask how our organization can be most helpful.
We use our leadership structure to help us make	We look to current relationships to help introduce us
relationships.	into new communities.
We manage projects.	We negotiate our role, offer suggestions, and learn to
	be flexible.
We approach our objectives with efficiency.	We follow the community lead with patience and trust.
We assign authority through positional power.	We recognize authority in the one with the most
	relationships.

#### **Mapping**

The process of mapping helps to create a "visual" that can organize the collected information: grouping or coding resources by category and depicting where they are

<sup>&</sup>lt;sup>5</sup> Kretzman and McKnight, Asset Based Community Development Institute, www.abcdinstitute.org.

located. The map may be a literal geographic representation or lay out the information in more abstract formats. Generally, there are five categories in an asset-based inventory, listed in Table 5.

Table 5. Categories in an Asset-Based Inventory

Adapted from Kretzman and McKnight

Category		Examples	Things to Assess
1. Individuals		Members of recovery community (all	Skills
		pathways	Talents
		Family members	In-kind resources
		Peer leaders and peers	Interests and concerns
		Allies	
2.	Nonprofit community	Recovery community organizations	In-kind resources
	organizations,	Neighborhood groups	Potential partnerships
	associations, and civic	Prevention coalitions	Policy synergies
	groups	Parent/Teacher associations	Public events
		Interest/Identity groups	Potential constituents
		Treatment and social service agencies	Community leadership and credibility
		Recovery residences	
3.	Faith-based groups and	Churches, synagogues, mosques	In-kind resources
	institutions	Food and clothing pantries	Potential partnerships
		Outreach ministries	Policy synergies
		Recovery ministries	Public events
			Potential constituents
		Community leadership	
4.	Publicly-funded	Universities and community colleges	Free or low-cost meeting space
	institutions	Libraries	In-kind resources
		Hospitals and health clinics	Technical resources
		Police and fire departments	Potential partnerships
		Drug courts	Policy synergies
		Correctional facilities	Public events and conferences
		State and county agencies	Professional credibility
		Public offices Community leadership and credib	
5.	Private organizations	Local businesses	In-kind and fiscal resources
		Local business association chapters	Potential partnerships
		Trade associations and unions	Economic power
		Private treatment agencies	Community leadership and credibility
		Private recovery residences	Organizing experience
		Corporations	
		Foundations	
		Media	

The information that you gather can be mapped in a variety of ways. Figure 3 is one example of the many ways you can visualize your assessment. Because an assessment will be ongoing, the map can and should be a "living document," one that is amended, revised, and expanded on a continual basis.

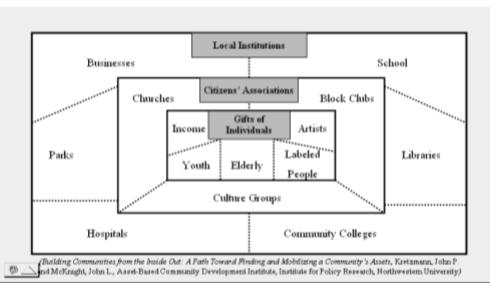


Figure 3. Community Assets Map

## **Taking Inventory**

Before taking an inventory of the community and environment, you may want to take in internal inventory of your organization, program, or base of operations. Table 6 provides items for you to consider.

**Table 6. Inventory Self-Assessment** 

	✓	We
1		Work to build and enhance the skills and capacities of community members.
2		Have mechanisms to mobilize the skills and capacities of community members.
3		Have the ability to coordinate volunteers in our community.
4		Have experience in working directly in community settings.
5		Involve community members to help us define our project objectives.
6		Value and actively build on the diversity in the community.
7		Actively engage and seek participation from marginalized groups.
8		Seek out relationships with community citizens' associations.
9		Have established common ground with other organizations.
10		Have built extensive relationships with community institutions.
11		Engage and use institutional assets (e.g., personnel/expertise, economic power, space and equipment,
		constituents and connections).
12		Use the value of local physical assets.
13		Use our community's public spaces.
14		Identify and mobilize the enterprise and skills of community members.
15		Involve local citizen associations, businesses, and institutions in activities.
16		Have built relationships with agency and elected officials.
17		Have leveraged the organizing capacity of faith-based organizations and institutions.
18		Have a history of working closely with treatment agencies.
19		Have forged cooperative efforts with drug courts.
20		Work toward developing a diverse portfolio of resources.

#### **Collecting Assessment Information**

The methods used to conduct an assessment can be as simple or complex as time and resources allow. To obtain different sources and sets of data, people generally use a blend of methods that include focus groups, town hall meetings and speakouts, surveys and questionnaires, key informant interviews, and community observation. The main point is to ask and not assume. Asking the right questions will likely reveal a range of information, resources, skills, talents, and were not previously known and certainly not developed. Plan time in advance to determine what you want to know and formulate questions and methods that will help you yield the information you need. The more you conduct assessments, the easier it will become, and it will become a part of all of the other work that you do.

An often untapped source of community knowledge in every community exists in individuals that often are referred to as indigenous leaders or community connectors. These are men and women who don't always look like "leaders," but they are revered and trusted members of the community, they are often situated in community locations where they come in contact with lots of people, and they are receptors and conduits of information. A community connector may run the local beauty shop, be a crossing guard, work in the mayor's office, or serve on the PTA. These people are held in high regard for good reasons and often share similar characteristics. They—

- See, identify, and value the gifts inherent in others;
- Have strong associations with formal and informal community networks;
- Are trusted community members and create trusting relationships;
- Have a strong belief in the community and its members;
- Receive joy through connecting, convening, and inviting people to come together; and
- Realize the power of joining people together.

Social media channels—your own and those of community leaders, partners, and government—are great for collecting and mapping community assessment data.

- Include the social media content in your environmental scan. Collect language, quotes, images, graphics, and video to add to your assessment.
- If you are conducting windshield tours or interviews, use a smartphone to capture quality photography, video, and audio.
- Use visual channels, like Pinterest, Instagram, and Facebook, to organize your assessment media, invite peer leaders and others to contribute, and promote your Statewide Network in the process.
- Remember to link all of your channels and Web site together so you can make the most of all your images and posts.

## **Strategic Networking**

The success of any public initiative lies in the interest and willingness of communities to rally together around a common issue and goal. The recovery community is vast and constantly evolving, creating an impact on communities at local, county, and State levels. Therefore, consistent efforts to build and sustain strategic networks are vital for success. Effective strategic networks rely on the development, maintenance, and evaluation of different levels of partner engagement. It is important to—

- Identify your partnership goals and objectives;
- Assess organizational readiness for partnership engagement;
- Plan for partnership development and engagement;
- Identify appropriate existing or potential partners;
- Identify partnership strategies that work; and
- Think through your intended partnership outcomes.

There is a continuum of various partnership types in any effective strategic network. These partnerships often involve an increasing degree of complexity of activities, from exchanging information to influencing policy, depending on what your organization hopes to achieve in a particular relationship. Types of partnerships and the outputs they can achieve are briefly outlined below.

- Peers, advocates, and constituents can create or extend avenues into communities
  that foster a means for effective community outreach and peer engagement.
  Partnerships of this nature can also lead to the development of an increasing number of
  influential community leaders who can eventually impact recovery-based planning.
  Another potential outcome of these types of partnerships is effective and impactful
  community mobilization. For example, your organization may align itself with a group
  of experienced peer advocates to develop a county-wide peer recovery coach mentoring
  program.
- Network partners and collaborators can combine their varied areas of expertise to impact outcomes on a local, county, or State level. These relationships can be based on an exchange of information between various community entities with similar goals. These types of partnerships can also be used to leverage power and resources and foster effective communication and change on a broader level. For example, you may partner with a group of similar organizations to develop a white paper to influence policy on the State level.
- **Stakeholders**, such as agency officials, elected officials, and funders, often serve as broad-scale agents of change with regard to partnerships. These relationships can lead to systemic, program, policy, and funding changes. For example, successfully partnering with a State agency on creating a plan for statewide workforce development can lead to greater recognition of various issues that arise when addressing workforce needs, which may lead to increased funding opportunities.

#### **Benefits of Partnering**

Establishing effective partnerships can offer many benefits to all parties involved, including tapping into outside knowledge and expertise, assistance in addressing challenging political issues, and reaching new populations with information and interventions. As you assess, plan, and engage in partnerships, you may consider a number of potential mutual benefits of partnerships, including—

- **Leveraging resources**, including financial, human, and technological;
- **Expanding the sphere of influence** for specific services or within specific communities;
- **Influencing policy** by creating a forum for public and private influential agencies and policy makers;
- **Expanding operational efficiency** by employing cost-effective practices, cutting-edge technology, and sound financial strategies to plan, promote, and implement events as well as develop impactful materials that resonate with various communities; and
- **Elevating standards** by developing and implementing improved standards for recovery efforts.

#### **Making Partnerships Work**

Successful engagement in any partnership effort often requires internal preparation, planning, and assessment prior to actually developing a partnership. Community-based organizations in particular benefit from walking through the following steps of partnership planning<sup>6</sup>:

- **Preparing for partnership** Take the time to review past experiences with partnerships, identify organizational partnership strengths and challenges, and clarify forthcoming partnership goals.
- **Planning for partnership** Work to clarify organizational partnership policies and procedures, and delegate a partnership lead.
- Prospecting existing and potential partners Make time to identify, research, and vet potential partners.
- Developing partnerships Create a written agreement, and establish plans for partnership management and communication.

<sup>&</sup>lt;sup>6</sup> Tamarack Institute. (2004). Community-based organizations: Creating effective partnerships. http://tamarackcommunity.ca/downloads/clife/mcabaj/mc cef.pdf. Accessed on November 24, 2014.

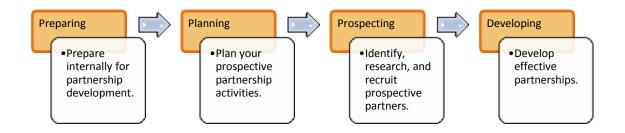


Figure 4. Stages of Partnership Engagement

# **Strategic Communication**

Strategic communication in its simplest form involves—

- Articulating the goals of an initiative;
- **Identifying the audiences** that can help you achieve those goals;
- Developing messages designed to resonate with those audiences; and
- **Disseminating those messages** through the most appropriate channels—anything from community meetings to outdoor advertising to Facebook— depending on the scale of the initiative and the resources available to support it.<sup>7</sup>

The steps in the strategic communication process are highlighted in Figure 5.



**Figure 5. Steps in Strategic Communication** 

Communication is about telling your story. *Strategic communication* is telling your story to the right people in ways that inspire *action* and support *change*. It is storytelling that delivers a message with a purpose.

Communications planning happens in parallel to asset mapping and partnership development. Together, these activities help you understand your target audiences, build

<sup>&</sup>lt;sup>7</sup> Welcoming America. (n.d.). New Affiliate Strategic Communications Toolkit. <a href="https://www.welcomingamerica.org/wp-content/uploads/2011/06/Welcoming-America-Toolkit.pdf">www.welcomingamerica.org/wp-content/uploads/2011/06/Welcoming-America-Toolkit.pdf</a>. Accessed on November 3, 2014.

up media (e.g., images, video, graphics) for future content, and pick tactics and tools to use later in your work.

#### **Goals and Audiences**

The heart of strategic communication is your *program goals and objectives* and your *target audiences*. What is the big goal for the grant? What specific, measurable objectives will help you meet the goal? Who needs to act to make your goal a reality? Who are the influencers?

Too often groups jump to tactics ("Let's plan a recovery rally!") and start using tools ("We need a Twitter account!") before they define goals, craft our key messages, or even know who they need to target. First you need to—

- Understand the connection between audience, message, and communication tools;
- Draft key messages;
- Narrow down (segment) your target audiences; then
- Brainstorm possible communications tools and tactics to use.

#### Messaging

A message is the most important information that you want your audience to hear. Use simple language to frame your work, and adjust your messages to different settings and audiences. Your goals and audiences shape key messages and determine the tools and tactics to deliver those messages throughout your grant. Remember, "It's not what you say, it's what they hear."

Tailored messaging and carefully thought-out tactics that stem from your program goals and reflect your target audiences' needs will help you reach those audiences, engage with them, and move them to action.

#### **Stay Focused**

There are many tools and types of content you can use to get your message across, but don't get distracted! Nail down your program goals and target audiences first, develop key messages for different audiences, and *then* pick the best content and channels, be it media outreach, social media, committee meetings, or a speakers bureau.

# **Strategic Shared Learning**

Learning can be a complicated process dependent on content, delivery, environment, and a number of other factors. Didactic presentation represents the easiest way to present information while controlling both content and timing. The downside to didactic presentations is that they create a strict, unidirectional pathway from instructor to learner. Structuring meetings, trainings, and workshops with strategic shared learning in mind

<sup>8</sup> Ibid.			

ensures that learners engage with and learn from each other as well as from the instructor (and vice versa). Strategic shared learning presents many benefits, strengthening the transfer of knowledge, reinforcing content to ensure memorization, and encouraging learners to become more comfortable with new information and to develop self-efficacy related to new skills.

Regardless of the type of session, it is important to—

- Plan for and design engaging learning events (e.g., meetings, trainings);
- Assess your readiness to facilitate or co-facilitate a learning event;
- Prepare the logistics for facilitation of learning events; and
- Debrief and evaluate learning events to ensure continuous quality improvement.

#### **Evaluation**

Evaluation is a key component of any program. Evaluation ensures that the program is implemented smoothly, demonstrates the effectiveness of the program, ensures that the program is held accountable to all involved stakeholders, and is essential to long-term sustainability.

SAMHSA requires that you evaluate your program to answer the following questions about outcomes:

- What was the effect of the program on raising awareness about addiction peer recovery support?
- What policy/program discussions included addiction peer recovery support as a result of your efforts?
- What changes were made in the processes and systems of RCOs based on information provided through your program?
- How durable were the effects?

SAMHSA is also concerned with how you address the following questions about process:

- With how many RCOs did you link across the State?
- What was the number and nature of messages that promoted recovery and how were they disseminated?
- In how many State-sponsored or -facilitated events did you participate?

Reporting on the data above will be required as part of the quarterly progress report. In addition, you should consider any additional questions about your project that would be helpful to have answered through your evaluation. The evaluation section in this workbook contains resources to help you develop your evaluation plan and to ensure that your evaluation activities answer the questions you have about your program while meeting the aforementioned federal requirements.

# Section 2: Identify, Articulate, Prioritize

#### Introduction

The six practices (shown in Figure 6) are used together to create change. They have an iterative flow: you start with clarifying the issues that around which you are organizing, identify who cares (or should care) about those issues, then plan and use networking, communications, and learning strategies and tactics to organize and create change.

This section of the workbook will focus on the key steps in the organizing process: identifying areas for action, articulating issues, and considering with whom to develop relationships.

In the SAMHSA request for applications, there were specific activities listed from which you had to choose. Worksheet 2.1 is structured around those activities. By answering the question "What will be different in your State

Community (Expending Provides
Control of Con

Figure 6. The Six Practices

as a result?" you will convert the SAMHSA activities into "action areas"—specific issues that you want to address or changes you want to make in your State.

Worksheet 2.2 asks you to focus on your highest priority issue and consider who are the key players, key stakeholders, and key allies for that work.

A *key player* is a person, group, organization, or institution, with power or influence in a particular issue or action area. For example, the single State agency is a key player in addiction treatment and recovery support services, the State workforce investment board is a key player in workforce development.

A **stakeholder** is a person, group, or organization that has an investment or interest in an issue, or that can be affected by the issue. For example, county behavioral health authorities are key stakeholders in systems improvement.

An **ally** is a person, group, or organization that is not a part of the recovery community but is (or could be) a supporter of your efforts. For example, a large employer in your State could be an ally for health coverage access.

There may be some overlap among the three: A group might be a player, a stakeholder, and an ally.

Worksheet 2.3 will help you to refine your priorities. It asks you to take a look at the hours of effort you estimate it will take to achieve your desired results, and consider whether your program's scope is the right size.

#### Worksheet 2.1: Action Areas – Activities and Results

#### **Instructions**

Step 1. At the top of each page, you will see a SAMHSA-required activity (in bold) and a list of supporting activities (not in bold). *If the required activity is not one that you are doing, skip that page.* 

If the required activity is one that you are doing, put a checkmark next to it, and then—

- 1. Read through the list of supporting activities, and place a checkmark beside each that you are doing, and
- 2. Use the blank lines to add other activities that aren't on the list.
- Step 2. Identify the results that you want to achieve from doing the activities.
- Step 3. List the key actions.
- Step 4. Identify, on scale, the level of priority for the action area.
- Step 5. Estimate the level of effort that will be needed to achieve desired the result.

# **Workforce Development**

What are the SAMHSA activities on which you are (Please check all that apply.)	e working?	What will be different in your State as a result of these activities? What impact will these activities have on
To develop infrastructure, we are—  □ Partnering with State and local organizations in wactivities to— □ Develop competencies and certification standar support/recovery coach services. □ Provide addiction peer recovery coach training incorporating peers into the workforce. □ Develop culturally and linguistically competent administrators. □ Mentor addiction peer recovery coaches. □ Develop strategies for licensure, credentialing, recovery community organizations. □ Other: □ O	and training for providers on peers, providers, and or accreditation of peers and	people in or seeking recovery in your State?
Tasks	Why do those tasks?	
How high a priority? ☐ High ☐ Medium ☐ Low  Identify, Articulate, Prioritize	How many hours of effort?  Estimate (a) minimum (b) n  Multiply (b) by 4 (b) x 4 = (d)   Calculate total (a) + (c)	nedium (c) maximum / 6 =

# **Linkages and Catalysts**

What are the SAMHSA activities on which you are (Please check all that apply.)  To develop infrastructure, we are—  Developing linkages with addiction recovery commendates the State in order to— Develop a collective approach around promoting supports and services. Identify needs of the addiction recovery commendates these needs. Promote infrastructure development of RCOs the issues such as operations, billing systems, recruintegration into larger systems. Other: Other: Other:	nunity organizations throughout  ng addiction peer recovery  unity and devise strategies to  hrough training and education on nitment, sustainability and	What will be different in your State as a result of these activities? What impact will these activities have on people in or seeking recovery in your State?
Tasks	Why do those tasks?	
How high a priority? ☐ High ☐ Medium ☐ Low	How many hours of effort?  Estimate (a) minimum  Multiply (b) by 4 (b) x 4 =  Calculate total (a) + (c)	(b) medium (c) maximum = (d) + (d) / 6 =

<ul> <li>□ Serving as a catalyst for organizational/structural change of activity for promoting the importance of—</li> <li>□ Trauma-informed peer support and increased sensit</li> <li>□ The availability and expansion of addiction peer record as mutual aid groups, peer mentoring/coaching, resugender, race, and ethnicity.</li> <li>□ Elimination of barriers to recovery, such as employn</li> <li>□ Addressing negative attitudes associated with addiction</li> </ul>	ivity to trauma issues. every support services, such ponsive to needs based on ment and housing.	What will be different in your State as a result of these activities? What impact will these activities have on people in or seeking recovery in your State?
What specific actions will need to happen to complete Tasks	the required activities?  Why do those tasks?	
How high a priority? □ High □ Medium □ Low	How many hours of effort?  Estimate (a) minimum (b) x 4 = (d)  Calculate total (a) + (c)	) medium (c) maximum + (d) / 6 =

Systems Improvement and Planning	What will be different in your State as
To develop infrastructure, we are—  □ Participating in local, county, and State systems improve program development for special populations, to serve □ Veterans and military families. □ Criminal justice re-entry populations. □ Sexual and gender minorities. □ Co-occurring mental health and other primary health □ Individuals with histories of chronic homelessness. □ Youth in transition/young adults. □ Communities of color and/or ethnic minorities. □ Tribal communities.	a result of these activities? What impact will these activities have on people in or seeking recovery in your State?
What specific actions will need to happen to complete	•
Tasks	Why do those tasks?
How high a priority?	How many hours of effort?

□High

 $\square$ Medium

□Low

Estimate Multiply (b) by 4

Calculate total

Estimate

(a) minimum \_\_\_\_ (b) medium \_\_\_\_ (c) maximum \_\_\_\_ (b) \_\_\_\_ x 4 = (d) \_\_\_\_ (a) \_\_\_\_ + (c) \_\_\_\_ + (d) \_\_\_\_ / 6 =

To develop infrastructure, we are—  Participating in policy, planning and program devicementations, and local level to ensure the inclusion community organizations in program and systems  Other:  Other:  Other:	impact will these activities have on people in or seeking recovery in your State?
What specific actions will need to happen to com	Why do those tasks?
Tasks	Willy do those tasks?
	·
How high a priority? ☐ High ☐ Medium ☐ Low	How many hours of effort?  Estimate (a) minimum (b) medium (c) maximum   Multiply (b) by 4 (b) x 4 = (d)   Calculate total (a) + (c) + (d) / 6 =

Health Coverage and Integration		What will be different in your State as
To address health coverage access and peer services integration, we □ Partnering with health insurance coverage outreach and enrol programs operating in the State to inform and supplement the to populations with substance use conditions.	lment assistance	a result of these activities? What impact will these activities have on people in or seeking recovery in your State?
Other:	>	
Other:		
Other:	_	
What specific actions will need to happen to complete the re	quired activities?	
Tasks	Why do those tasks?	

<b>How high a pr</b> □High	iority? □Medium	□Low	How many hours of ef Estimate Multiply (b) by 4 Calculate total	fort? (a) minimum x 4 = (d (a) x 4 (c)	(b) medium d) + (d)	_ (c) maximum

To address health coverage access and peer services int  Promoting the use of peer recovery support service and behavioral health settings.  Other:  Other:  Other:	es in integrated primary care  people in or seeking recovery in your State?
What specific actions will need to happen to comp	Why do those tasks?
How high a priority? □ High □ Medium □ Low	How many hours of effort?  Estimate (a) minimum (b) medium (c) maximum   Multiply (b) by 4 (b) x 4 = (d)   Calculate total (a) + (c) + (d) / 6 =

To address health coverage access and peer services in    Facilitating education/training efforts regarding m parity to increase awareness/understanding of the Addiction Equity Act of 2008).    Other:   Other:	ental health and addictions e law (Mental Health Parity and	What will be different in your State as a result of these activities? What impact will these activities have on people in or seeking recovery in your State?
What specific actions will need to happen to com Tasks	Why do those tasks?	
How high a priority? ☐ High ☐ Medium ☐ Low	How many hours of effort?  Estimate (a) minimum x 4 = (d) _  Calculate total (a) + (c)	(b) medium (c) maximum + (d) / 6 =

# Worksheet 2.2: Players, Stakeholders, and Allies

Who are the assets in your community and State? Who are the players, stakeholders, and allies in addressing addiction and promoting recovery in your State? This worksheet will help you to think about the different people and groups with which you may work, and how they interconnect. The result will be a sociogram, which is a visual representation or map of the relationships between individuals.

<u>nstructio</u>	<u>ns</u>
Step 1.	List your <b>highest priority action area(s)</b> :
Step 2:	In space below, list all of the individuals and organizations in your State that you think will be important to—or would be strategic to—connect with, engage, or involve.
tep 2. tep 3.	Identify the three key players on your list. Put a small circle by their names.  Identify the three major stakeholders on your list. Put a small square by their names.
tep 4.	Identify individuals or groups who are not yet partners or stakeholders but who could be
tep. 5	allies in your work. Put a small triangle by their names.  Construct a sociogram, using the following symbols:
πεμ. σ	Construct a sociogram, using the following symbols.
	Key Key Key
	Player Stakeholder Ally

#### Sociogram

Draw an oval for each key player; use the size of the circle to show relative influence or power. Put names inside the circles.

Draw a rectangle for each major stakeholder; use the size of the square to show relative influence or power. Put names inside the squares.

Draw a triangle for each ally. Put names inside the triangles.

Draw lines with arrows to show who is connected to whom.

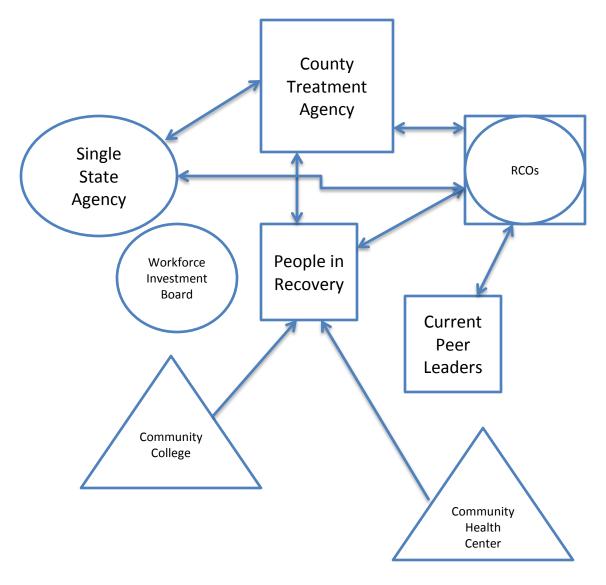
#### **Sociogram Example: Workforce Development**

Draw an oval for each key player; use the size of the circle to show relative influence or power. Put names inside the circles.

Draw a rectangle for each major stakeholder; use the size of square to show relative influence or power. Put names inside the squares.

Draw a triangle for each ally. Put names inside the triangles.

Draw lines with arrows to show who is connected to whom.



## Worksheet 2.3: Rightsizing

Step 1.		Go back through the pages in Worksheet 2.1, and count the number of <i>high-priority</i> action areas and the <i>total number</i> of hours of effort for each. Write your tally below.				
	High Priorities			Hours of	Effort	
Step 2.		he number of <b>m</b> ch. Write your t	-	rity action are	eas and the <i>to</i>	<b>etal number</b> of hours of
	Medium Priori	ities		Hours of	Effort	
Step 3.	-	t the number of ch. Write your t	-	<b>y</b> action areas	s and the <i>tota</i>	<b>I number</b> of hours of
	Low Priorities			Hours of	Effort	
Step 4.	After subtraction answering e-  27 hours  117 hours  1,400 ho	cting 2 weeks formail), a full-time per week rs per monthours in a year.	r vacation a e equivalen	nd time for e	veryday tasks work directly o	otal Hours of Effort box.  (such as reading and on a project about—  inployees (either paid or
Total H	ours of Effort	Add all hours of effort and write it in box below.	<ul> <li>pe</li> <li>pe</li> <li>11</li> <li>pe</li> </ul>	ours of effort is— r week, put in box. r month, put 7 in box. r year, put 00 in box.	If this number equ more people than have assigned to project, you will n rightsize your pro	n you the need to

#### **Ideas for Rightsizing**

Effective project management means being clear on the scope of the project—deciding what's in and what's out. The main constraint you have is the time your organization has and is willing to spend (or the number of people you have to work on the project, roughly the same thing). You need to determine the right amount of work to do to complete the project—and achieve results. That is *rightsizing*.

If you have developed a project in which you plan to do more than you can get done in the time and with the resources you have, rightsizing the project allows you to create a project scope without compromising your vision. There are tools you can use to actively rightsize the project rather than to let an overambitious or unrealistic scope of work override the project.

Right number of people? On Worksheet 2.3, how many people did you estimate you would need? How does this compare to the number of staff (or the full-time equivalents) you have in your grant proposal? To the number of individuals you have available? How will partners share in the work? What orientation and training do you need to consider as you bring on new individuals (e.g., partners, volunteers, staff) and assign tasks?

*Right scale and scope?* Have an active conversation with all the people involved to identify the essential elements for each action area. This would be a good activity to conduct with an advisory council, if you already have one. Adjust the scale and scope as needed to match results to resources—or vice versa.

*Right (key) strategies and tasks?* For each task, consider: Is this a *core* task that needs to be completed? Does it really move us toward our results? Simplify until you have the smallest set of tasks that will give the results you seek. When you think of core tasks, think about what you can build off of it, strategically creating as many ripples as possible.

After you conduct a reassessment of people, scale, and strategies that you will need to implement your project, you can begin to rightsize the scope of work that you proposed in your application. While you cannot change the actual scope of work, you can adjust the details—with the approval of your project officer—to a scale that is realistic *and* meets your project goals. As you move forward, another thing to consider is leveraging other resources, both financial and in-kind, that will build the capacity of your project and help you achieve your goals.

## Section 3: Workforce Development

#### Introduction

In the field of addiction treatment, there has been growing concern over the years about the existing and future workforce. One major issue is that as people are retiring out of the field, there has been a decrease of new recruits to take their places. The field, in general, has been forced to adjust to shrinking dollars and tighter budgets. This has resulted inability to offer competitive salaries alongside the expectation of workers taking on larger caseloads and onerous paperwork. Because of these factors, it has been difficult to entice qualified applicants, especially young people, to fill vacant staff positions.

In the last decade, there have been major breakthroughs in the science of addiction, balanced with a better understanding of how recovery works. Following SAMHSA's lead, many States, counties, and municipalities have embraced and begun to operationalize ROSC. The concept of ROSC is predicated on a number of facets:

- The concept of addiction as a chronic condition, opposing earlier assumptions that it was an acute disorder;
- The idea of that recovery from addiction can be managed over time with a variety of supports that reinforce—and sometimes replace—short episodes of treatment;
- A belief that individuals can simultaneously assume responsibility for their addiction and ownership of their recovery;
- The idea that all of the above point to individuals making choices about initiating, stabilizing, and managing their recovery; and
- The creation of a diverse menu of services and supports that address addiction as a chronic condition, individual choice and person-driven planning, and recovery management through various stages of recovery.

At the same time that ROSC was beginning to emerge both conceptually and operationally, PRSS were evolving from a developmental phase to a more mature status. The challenge of addressing addiction as a chronic condition through recovery management called for a range of services and supports that were offered before, during, after, and in lieu of treatment. In many places, the timely emergence and maturity of PRSS created a perfect storm to meet these needs. However, programs offering PRSS demonstrated variances in capacity, development, and availability across the country, creating inconsistencies and discrepancies in filling the newly created gap.

Another development that coincided with the emergence of ROSC was the introduction of ACA, addressing health care reform, and Parity, which requires health insurance companies and Medicaid to reimburse services for mental health and addiction in the same way they do for physical health conditions. Ideally, this was designed to set up parameters whereby an individual could get coverage that would include treatment for addiction, as well as supports for recovery management. In addition to critical financing changes, ACA, coupled with ROSC, created a vehicle to set a precedent that established addiction as a chronic condition—for which no one could be denied coverage—and opened doorways to argue for PRSS as reimbursable services under the medical necessity of chronic disease management.

These changes in recovery-orientation and health care reform have placed new demands on an already stressed addiction workforce. Members of the addiction treatment workforce, now joined by peer recovery coaches and other peer workers, have had to retool their practice in order to meet newly established or emerging ROSC guidelines as well as adjust to new program and funding changes that are occurring as a result of ACA. Also, peers are being introduced into the workforce, both in RCO settings and in diverse

environments, including treatment agencies and primary care settings. This sometimes creates a tension regarding turf, appropriate use and regard for the peer role, and organizational confusion. To abate these tensions, a solid, core training needs to be developed and implemented for non-peers who are currently or will be working with peers in the workforce. On a State level, this might easily fall under the auspices of an RCSP-SN grantee.

While the existing addiction workforce needs to be trained and sensitized to the introduction of peer workers, peer workers also need training and tools that will help them acclimate to the changing workforce. With so much of the present workforce "under construction," there are vast opportunities for positive change and transformation. Rather than presenting peer workers as an add-on to a stressed and uncertain workforce, there are opportunities to use PRSS and peer workers as vehicles to initiate recovery-oriented principles and practices for everyone—both peer and non-peer workers alike—in work environments. In other words, the introduction of peer workers into the workforce can help facilitate a thorough and necessary overhaul.

Peer workers also need orientation and training specific to the niche that they are creating in the present and future workforce. This is especially true to peers who are working in non-peer environments. What are the appropriate expectations and descriptions of the peer role? How does peer culture and authenticity fit into professional and clinical environments? What rates of compensation are fair and appropriate to the value of the job? How do peers self-advocate in a host environment? What say do peers have in what kinds of supervision that they can expect to receive? These are but a few questions among a multitude that must be considered as peers receive attention and preparation to join the workforce. Statewide Network grantees can facilitate much of these discussions on service and systems levels and develop training and technical assistance strategies to address the concerns of peers joining the workforce.

In the meantime, there is much capacity building that needs to be undertaken, both on an organizational/program level and a systems level. Much of this work can be overseen and facilitated by RCSP-SN grantees. RCOs and others with peer practices need to demonstrate credibility and accountability, ensuring that their peer workforce is capable, qualified, properly trained, and effectively supervised. While you are doing the capacity building "on the ground" with organizations, you can also be working to influence more systemic changes with State agencies and officials. All States are different and are at different stages of decisionmaking regarding workforce issues, such as certification of peers and accreditation of peer programs, peer core competencies and peer practice standards, and supervision of peers. RCSP-SN grantees need to secure seats at State decisionmaking tables and create vehicles to advocate for policies and programs that will promote and advance peer practice in the workforce.

PLACE YOUR COMPLETED
WORKFORCE DEVELOPMENT
WORKSHEETS FROM SECTION 2 HERE



## Worksheet 3A: Networking and Partnering for Workforce Development

## Partnership Considerations

Preparing	Notes
<ul> <li>How have the partnerships you have created fared in the past?</li> <li>What are your organization's partnership strengths?</li> <li>What are your organization's partnership challenges?</li> <li>How were issues and/or challenges with partnerships resolved in the past?</li> <li>If partnerships have already been established in workforce development, what strategies have been most effective? Why?</li> </ul>	
Planning	Notes
<ul> <li>Does your organization have partnership policies and procedures already in place?</li> <li>Does your organization have a designated lead or leads for partnership development, maintenance, and evaluation?</li> </ul>	

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Prospecting	Notes
<ul> <li>Are the current missions, visions, and activities of your identified new or existing partners in alignment with your desired workforce development outcomes?</li> <li>What has worked well with your existing partner(s), particularly with regard to workforce development?</li> <li>What can your identified new or existing partners contribute to your proposed workforce development activities?</li> <li>How do you plan to establish common goals, strategies, and tactics with your partners?</li> </ul>	
Developing	Do you have -
Consider the checklist to the right <u>prior</u> to reaching out to potential partner(s). Feel free to add your own in the blank spaces provided.	Correct contact person and contact information for your intended partner  Partnership "spiel," which may include—  • An overview of the project or activities  • Project goals and intended outcomes, and target clientele or audience, if appropriate  • Why you want to partner with the identified organization(s)  • What your organization has to offer to the partnership  • Potential ways in which the partnership can be mutually beneficial  • An approximate timeline  Memorandum of Understanding (MOU) draft or MOU outline  List of effective partnership strategies for internal review and use  Strategies for conflict resolution for internal review and use, if necessary

#### **Worksheet 3B: Strategic Shared Learning for Workforce Development**



#### **Brainstorming**

What trainings, meetings, or other strategic learning sessions are you thinking of facilitating as part of your workforce development activities? What advance preparation work needs to be done for these sessions? Do you need to design a curriculum, develop an agenda, facilitate meetings or training sessions, or engage in other preparatory activities?

Select one of the sessions you have listed below to focus on in the following worksheets. Highlight that session by marking it with an asterisk or star (\*).

Sessions	Preparation
Example: Statewide Recovery Coach Training	Design and develop a curriculum, facilitate training of trainers

ſ		
	~	_
	~	_
	~	_
	~	_

#### **Planning**

This worksheet is designed to assist you in planning for your session. Consider the following:

\*What is the name of your session?

What type of strategic shared learning session are you planning? ☐ Training ☐ Meeting ☐ Other: \_\_\_\_\_

	Considerations	Reflections
ر. د	Participants Who are they? Who needs to be there? How well do they know each other? How many will there be?	
WHO?	Facilitator/Co-facilitator How many facilitators will there be? Who will do what? What knowledge or skills do facilitators need to have?	
WHY? SO WHAT?	Purpose What is the goal of this session? What will be accomplished by the end? How will learning lead to change?	
WHEN?	Date and Time When will the session be held? How long, how frequently, and at what time of day will sessions occur?	
WHERE?	Location Where will the session be held? What setup is needed on site? What impact will the space have?	
WHAT?	Content What is the most important content? What sequence would feel most natural? Does content match the time?	



### **Preparing the Agenda**

This worksheet is designed to assist you in preparing the agenda for your session. Consider the following:

	Considerations	Reflections
WHAT FOR?	Objectives What are the achievement-based objectives for the session?  Are they SMART:  • Specific?	
W	<ul><li>Measurable?</li><li>Action-oriented?</li><li>Realistic and relevant?</li><li>Time-based?</li></ul>	
	Activities What are the most engaging ways to bring new information to this group?	
	<ul> <li>How are you using the 4-A model?</li> <li>Anchor (focus on existing knowledge)</li> <li>Add (deliver new information)</li> <li>Apply (use new information)</li> <li>Away (connect information to action)</li> </ul>	
HOW?	Introduction What kind of introduction is necessary? Should there be an icebreaker? How will you frame the session?	
	Group Norms  Have group agreements or ground rules been established? Are they needed? How should they be developed and reviewed?	

	Considerations	Reflections
ном?	Learning Types  How are you engaging the following learners?  • Visual (focused on seeing)  • Auditory (focused on hearing)  • Kinesthetic (focused on doing)  • Empathetic (focused on feeling)  • Reflective (focused on thinking)  • Experiential (focused on experiencing)  Roles and Responsibilities  How clear are the roles and responsibilities of facilitators and participants? What work needs to be done to ensure clarity?	
	Materials and Supplies What do you need for the session? Food? Technology? Handouts? Chart paper? Markers? Pencils or pens?  Closing/Summary	
	What kind of summary is needed at the end of the session? Should there be a closing activity?	
٠٠	<b>Evaluation</b> What changes in participants, services, and systems do you expect to see? How can you tell whether these changes have occurred?	
SO WHAT?	<ul> <li>Are you evaluating on the following three levels:         <ul> <li>Learning (uptake of new knowledge, skills, or attitudes)</li> </ul> </li> <li>Transfer (application of the new knowledge, skills, or attitudes)</li> <li>Impact (how individuals or organizations change as a result of learning)</li> </ul>	

#### **Worksheet 3C: Strategic Communications for Workforce Development**



## **Develop Key Messages**

Use the action areas you defined in Section 2 and develop corresponding key messages. Think of one or two supporting points for each message.

Action Area and Intended Outcome	Key Messages	Supporting Points
Example: Develop a more culturally and linguistically competent addictions recovery workforce.  What will be different?  Reach more cultural/linguistic minority populations.  Increase access to services.  Reduce disparities in recovery outcomes.	[Statewide Network] works to make recovery from addiction possible in all of Virginia's communities.  [Statewide Network] trains providers how to respond to the cultural and language needs of anyone seeking recovery services.	Not all Virginians have access to recovery services, especially in [xx] and [yy] communities.  Data points on disparities  Services will be stronger with a recovery workforce that includes peers from all cultures and language backgrounds.

#### **Tip** To refine your messages:

- Read the message out loud. Does it sound conversational? If not, edit until it does.
- Simplify the language. Remember that key messages are broad statements; they do not include many details.
- Check the length. Keep it short.
- Make sure your key messages frame the issue.



#### **Segment Your Audiences**

The smaller the target audience, the easier it is to create focused communications that will move the audience to action.

—Spitfire Strategies Smart Chart 3.0 www.spitfirestrategies.com/tools/#tab1

On Worksheet 2.3, you identified important State players in addictions recovery. Which ones can drive changes that will make your program goals a reality? List those target audiences in the table. Then, use the questions to segment each audience, think about their stage of readiness, and how to tailor your key messages to reflect their needs.

Target Audience  Who do we need to reach? (Focus on those you can persuade.)	Audience Segment  Who exactly do we need to target within this audience? (Who can make the change you want? Who can influence decisionmakers? Be very specific.)	Audience Readiness  What is the audience's perspective on our issue? What do they need to move in our direction?	Tailored Key Messages  What do they need to hear?
Sample: State Recovery Community Organizations (RCOs)	Staff and peer leaders of RCOs that gave us support letters for the grant application (existing RCO partners).	RCO communities are becoming more diverse.  Peers often only see "culture" in terms of race/ethnicity.  Peers are open to training and need credits for State certification.  Do they: Need more information? Need support to take action? Need reinforcement of existing work or actions?	The face of recovery in Virginia is changing. Let's make sure peer services change with it.

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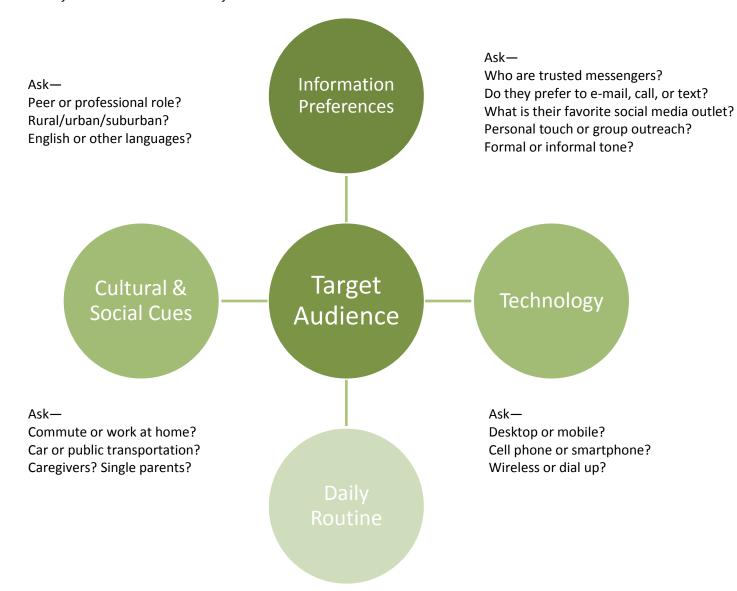
Target Audience	Audience Segment	Audience Readiness	Tailored Key Messages
Who do we need to reach? (Focus on those you can persuade.)	Who <u>exactly</u> do we need to target within this audience? (Who can make the change you want? Who can influence decision makers? Be very specific.)	What is the audience's perspective on our issue? What do they need to move in our direction?	What do they need to hear?
1.			
2.			

Your messages should make an emotional connection with your audience... [and] tap into their deeply held values and beliefs. It is much easier to build on beliefs a person already holds rather than try to get them to believe a new idea that runs counter to their understanding of the world.

—Welcoming America



Use the figure below and question boxes to think about how best to reach and talk to your target audiences. How do they like to get, use, and share information? What kind of communication will work for them?



The best communications efforts use the most direct tactics possible.

—Spitfire Strategies Smart Chart 3.0

Now brainstorm some possible communications activities using the chart.

Target Audience	Trusted Messengers	Possible Tools & Tactics
Staff and peer leaders of RCOs that gave us support letters for the grant application (existing RCO partners).	Other peer leaders Personal networks	Introduce Statewide Network one on one at RCO staff meetings.  Hold a community celebration and information session for peer leaders on changing face of recovery in Virginia; invite speakers from different demographics.  Develop infographic on the changing face of recovery in Virginia to use with multiple audiences.
1.		
2.		

## Section 4: Linkages and Catalyst

#### Introduction

Historically, some RCOs have been established as statewide organizations, while others have not. The diversity runs the gamut with some States having one statewide RCO with or without affiliates or partners, some States with one locally- or regionally-based RCO that may or may not take on statewide issues, and States with a loosely organized collection of local RCOs.

Developing linkages and a formal Statewide Network with RCOs can help to build solidarity and a consistent collective voice, important factors when working to establish sustainable change. Decisions and agreements need to be solidified on key issues and topics to "get everyone on the same page" before going public. Things like "What are the optimal and non-negotiable components of peer practice?," "What range of peer services do we want recognized for reimbursement?," and "What is our bottom line for cost per unit of service?" need to be discussed and decided in advance of any meeting, public hearing, or communication messaging.

Ideally, a Statewide Network should create some mechanisms for member learning, information sharing, mentorship, and capacity building. Each RCO will come to the Network with a different level of history, experience, and practice, but all will come with both strengths and challenges. Some may have more developed infrastructure than others; some may have more robust peer programs. One may have great leadership development training. Another may have developed trauma-informed standards for their peer program. Such diversity of skills and experience makes for a fertile learning exchange of practices, ideas, and implementation. It can also lead to a process you can facilitate to establish common ground, agreed-upon structures and practices, and a consistent outline of policies and procedures. When bringing together diverse organizations, you may need to keep agreements and program consistencies on a more general level in order to allow for parameters of autonomy, creativity, and cultural-specificity that make programs effective and community-responsive.

The new environment of health care reform has presented a variety of opportunities for RCOs and peer programs to participate in service delivery. Some organizations have achieved a sense of participation-readiness. Others are lacking in the capacity and infrastructure to formalize operations, develop billing and invoicing systems, recruit and develop a sustainable workforce, and effectively participate in integrated environments. The learning communities that have been formed by Statewide Network grantees can use shared learning, mentorship, and collective training to build capacity across all members and promote full participation in new opportunities and systems.

In like fashion, Statewide Network grantees can elevate an expectation for its members to become catalysts for change and agents of advocacy. The Network can foster a climate that leads to the expectation that everyone who wants to can recover from addiction. It can develop thinking, learning, and communication that explore the barriers that people in recovery face, including criminal justice histories, housing and job discrimination, revoked licenses, educational barriers, and stigma. The Network can address gaps in services and

supports in communities, locate resources to address the gaps, and strategies to sustain community and civic participation.

Formally linking RCOs can be challenging, especially if RCOs have not had a successful history of working together. Differences in approach to peer practice, scale of organizations, and access to resources can be factors that keep RCOs from effectively uniting. There are often challenges based on State geography that include physical size, density, and distribution of resources. For example, there may be distrust harbored by a small rural organization towards a larger, more diverse urban-based organization. Overcoming differences, mistrusts, and past histories often requires a patient and facilitated process that will bring some fresh air to the situation, let issues rise to the surface, and create a space in which silent voices can be heard. When differences can be acknowledged in a safe and neutral manner, a more balanced and productive network will emerge.

## PLACE YOUR COMPLETED LINKAGES AND CATALYSTS WORKSHEETS FROM SECTION 2 HERE



## **Worksheet 4A: Networking and Partnering for Linkages and Catalysts**

## Partnership Considerations

	Preparing	Notes
•	How have the partnerships you have created fared in the past? What are your organization's partnership strengths? What are your organization's partnership challenges? How were issues and/or challenges with partnerships resolved in the past? If partnerships have already been established in networking and partnering for linkages and catalysts, what strategies have been most effective? Why?	
	Planning	Notes
•	Does your organization have partnership policies and procedures already in place? Does your organization have a designated lead or leads for partnership development, maintenance, and evaluation?	

Do you have -
Correct contact person and contact information for your intended partner
Partnership "spiel," which may include—  • An overview of the project or activities  • Project goals and intended outcomes, and target clientele or audience, if appropriate  • Why you want to partner with the identified organization(s)  • What your organization has to offer to the partnership  • Potential ways in which the partnership can be mutually beneficial  • An approximate timeline  Memorandum of Understanding (MOU) draft or MOU outline  List of effective partnership strategies for internal review and use  Strategies for conflict resolution for internal review and use, if necessary
\ \ -

#### **Worksheet 4B: Strategic Shared Learning for Linkages and Catalysts**



#### **Brainstorming**

What trainings, meetings, or other strategic learning sessions are you thinking of facilitating as part of your activities to strengthen linkages and activate catalysts? What advance preparation work needs to be done for these sessions? Do you need to design a curriculum, develop an agenda, facilitate meetings or training sessions, or engage in other preparatory activities?

Select one of the sessions you have listed below to focus on in the following worksheets. Highlight that session by marking it with an asterisk or star (\*).

Sessions	Preparation
Example: Peer recovery support services sustainability Web series	Develop an agenda for the overall series, facilitate monthly webinars

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#### **Planning**

This worksheet is designed to assist you in planning for your session. Consider the following:

\*What is the name of your session?

What type of strategic shared learning session are you planning? ☐ Training ☐ Meeting ☐ Other: \_\_\_\_\_

	Considerations	Reflections
<u>ئ</u>	Participants Who are they? Who needs to be there? How well do they know each other? How many will there be?	
WHO?	Facilitator/Co-facilitator How many facilitators will there be? Who will do what? What knowledge or skills do facilitators need to have?	
WHY? SO WHAT?	Purpose What is the goal of this session? What will be accomplished by the end? How will learning lead to change?	
WHEN?	Date and Time When will the session be held? How long, how frequently, and at what time of day will sessions occur?	
WHERE?	Location Where will the session be held? What setup is needed on site? What impact will the space have?	
WHAT?	Content What is the most important content? What sequence would feel most natural? Does content match the time?	



#### **Preparing the Agenda**

This worksheet is designed to assist you in preparing the agenda for your session. Consider the following:

Considerations	Reflections
Objectives What are the achievement-based objectives for the session?  Are they SMART:  • Specific?  • Measurable?  • Action-oriented?	
<ul><li>Realistic and relevant?</li><li>Time-based?</li></ul>	
Activities What are the most engaging ways to bring new information to this group?	
<ul> <li>How are you using the 4-A model?</li> <li>Anchor (focus on existing knowledge)</li> <li>Add (deliver new information)</li> <li>Apply (use new information)</li> <li>Away (connect information to action)</li> </ul>	
Introduction What kind of introduction is necessary? Should there be an icebreaker? How will you frame the session?	
Group Norms Have group agreements or ground rules been established? Are they needed? How should they be developed and reviewed?	
	Objectives What are the achievement-based objectives for the session?  Are they SMART:

	Considerations	Reflections
HOW?	Learning Types How are you engaging the following learners?  • Visual (focused on seeing) • Auditory (focused on hearing) • Kinesthetic (focused on doing) • Empathetic (focused on feeling) • Reflective (focused on thinking) • Experiential (focused on experiencing)  Roles and Responsibilities How clear are the roles and responsibilities of facilitators and participants? What work needs to be done to ensure clarity?  Materials and Supplies What do you need for the session? Food? Technology? Handouts? Chart paper? Markers? Pencils or pens?	
٥.	What kind of summary is needed at the end of the session? Should there be a closing activity?  Evaluation  What changes in participants, services, and systems do you expect to see? How can you tell whether these changes have occurred?	
SO WHAT?	<ul> <li>Are you evaluating on the following three levels:         <ul> <li>Learning (uptake of new knowledge, skills, or attitudes)</li> </ul> </li> <li>Transfer (application of the new knowledge, skills, or attitudes)</li> <li>Impact (how individuals or organizations change as a result of learning)</li> </ul>	

## **Worksheet 4C: Strategic Communications for Linkages and Catalysts**



## **Develop Key Messages**

Use the action areas you defined in Section 2 and develop corresponding key messages. Think of one or two supporting points for each message.

Action Area and Intended Outcome	Key Messages	<b>Supporting Points</b>
Example: Creating linkages with recovery community organizations (RCOs) in Virginia in order to develop a collective approach around promoting peer recovery support services (PRSS).  What will be different?  • Form a work group or coalition of RCOs.  • Better serve individual communities by sharing lessons learned and advocating together for PRSS.  • Raise the profile of PRSS with health systems and providers.  • Position PRSS as integral to behavioral health care in the State.	Virginia has a strong network of organizations that provide recovery services. It's a network by people in recovery, for people in recovery.  [Statewide Network] convenes the network.  Together, we set standards for peer services and work with health systems to strengthen care by offering recovery services.	Virginia has ## of RCOs and more than ## peer providers who run support groups, provide recovery coaching, and link people to jobs and housing.  The network has helped ## people sustain their recovery in every corner of our State.  Peer services help people get find and sustain recovery, find stable housing and jobs, and get health care.

#### **Tip** To refine your messages:

- Read the message out loud. Does it sound conversational? If not, edit until it does.
- Simplify the language. Remember that key messages are broad statements; they do not include many details.
- Check the length. Keep it short.
- Make sure your key messages frame the issue.



#### **Segment Your Audiences**

The smaller the target audience, the easier it is to create focused communications that will move the audience to action.

—Spitfire Strategies Smart Chart 3.0 www.spitfirestrategies.com/tools/#tab1

On Worksheet 2.3, you identified important State players in addictions recovery. Which ones can drive changes that will make your program goals a reality? List those target audiences in the table. Then, use the questions to segment each audience, think about their stage of readiness, and how to tailor your key messages to reflect their needs.

Target Audience	Audience Segment	Audience Readiness	Tailored Key Messages
Who do we need to reach? (Focus on those you can persuade.)	Who exactly do we need to target within this audience? (Who can make the change you want? Who can influence decision makers? Be very specific.)	What is the audience's perspective on our issue? What do they need to move in our direction?	What do they need to hear?
Sample: State RCOs	Create tiers of RCO partners and prioritize outreach/partnerships:  Good relationships, statewide focus, supportive of collective effort  Good relationship, but tend to work in their own catchment area  RCOs you know peripherally  RCOs you do not work with and/or agree with or RCOs that do not get along with you	Some RCOs are on board; others are not:  Do they: Need more information? Need support to take action? Need reinforcement of existing work or actions?	Together, we can raise the profile of RCOs and peer services and influence funding and reimbursement policies.

Target Audience	Audience Segment	Audience Readiness	Tailored Key Messages
Who do we need to reach? (Focus on those you can persuade.)	Who <u>exactly</u> do we need to target within this audience? (Who can make the change you want? Who can influence decision makers? Be very specific.)	What is the audience's perspective on our issue? What do they need to move in our direction?	What do they need to hear?
1.			
2.			

Your messages should make an emotional connection with your audience... [and] tap into their deeply held values and beliefs. It is much easier to build on beliefs a person already holds rather than try to get them to believe a new idea that runs counter to their understanding of the world.

Welcoming America



Use the figure below and question boxes to think about how best to reach and talk to your target audiences. How do they like to get, use, and share information? What kind of communication will work for them?



The best communications efforts use the most direct tactics possible.

—Spitfire Strategies Smart Chart 3.0

Now brainstorm some possible communications activities using the chart.

Target Audience	Trusted Messengers	Possible Tools & Tactics
Create tiers of RCO partners and prioritize outreach/partnerships:  Good relationships, statewide focus, supportive of collective effort  Good relationship, but tend to work in their own catchment area  RCOs you know peripherally  RCOs you do not work with and/or agree with or RCOs that do not get along with you  1.	Your organization  Key leaders/gatekeepers in the RCO community  RCO board members	Conduct one-on-one meetings and steady relationship building.  Pitch a presentation with key facts on the benefits of a coalition tailored to individual meetings.
2.		

# Section 5: Systems Improvement and Planning

#### Introduction

When the original RCSP began in 1998, it was conceived as a vehicle to assist recovery communities to organize constituents and stakeholders to influence public opinion and public policy. Early grantees forged first-time relationships between recovery community leaders and State—as well as county and municipal—officials. Even when RSCP shifted focus from advocacy to peer services, the notion of having recovery community leaders "at the table" had become a norm in many places. As new RCOs began to pop up across the country, many became involved with developing both peer services and advocacy activities.

Elsewhere, by the mid-2000s, a number of States were becoming early adopters in developing ROSC. Prior to this, State agency and elected officials may not have fully comprehended the emergence of the RCOs. They were receiving newsletters from local RCOs and were being asked to attend and speak at recovery community events. Meanwhile, recovery community leaders and constituents were showing up in the offices and at their meetings. Moreover, as State officials began to review facets of a recovery orientation, they often realized the importance of soliciting and receiving input from the organized recovery community. Inviting recovery community leaders to be decision makers has taken an even stronger precedent as ACA and Parity have added to the reshaping of the current landscape.

Many factors have created a new environment in which State agency and elected officials are continually fielding questions, unknowns, and uncertainties, making for an excellent time for recovery community priorities to be heard. As recovery community leaders gain seats at tables where key programing and policy decisions are being made, there is an emerging emphasis on leveraging and maximizing influence. To be effective, Statewide Networks need to expand their composition beyond RCOs to include key allies and strategic stakeholders. Building a broad base of support will enable you to both create a program and policy agenda and a strategic plan to push the agenda forward.

Some examples of advocacy agenda items might include:

- Working with State agencies to develop community–generated core competencies, standards, and/or supervision protocols for peer practice;
- Working with State agencies to develop vehicles for credentialing (peer practitioners) and/or accrediting (peer programs);
- Assisting in changing block grant regulations to mandate funding for PRSS;
- Securing discretionary funding in the State block grant for recovery community centers;
- Developing reimbursement vehicles for peer coaches through with single State agency and/or State Medicaid office;
- Working with State Medicaid and Insurance Commissioner offices to include peer services in essential health benefits:
- Developing and facilitating training for non-peer organizations for developing peer programs and/or working with peer practitioners;
- Creating contracting mechanisms with auxiliary agencies (e.g., corrections, family services, drug courts, Veterans Affairs) for RCOs to deliver peer services; and

• Working with a State university to develop evaluation tools and protocols to develop an evidence base for peer practices.

Developing an agenda and strategies to implement will require a further expansion of your Statewide Network. Besides building relationships with RCOs and stakeholder partners, your Statewide Network will need to develop durable relationships with key State agency and legislative officials. Also, to achieve a degree of permanency, securing allies among the staff members of State offices is important. Appointed and elected positions can often be tenuous, but hired staff members usually function on a more permanent basis.

### PLACE YOUR COMPLETED SYSTEMS IMPROVEMENT AND PLANNING WORKSHEETS FROM SECTION 2 HERE



## Worksheet 5A: Networking and Partnering for Systems Improvement and Planning

## **Partnership Considerations**

Preparing	Notes
<ul> <li>How have the partnerships you have created fared in the past?</li> <li>What are your organization's partnership strengths?</li> <li>What are your organization's partnership challenges?</li> <li>How were issues and/or challenges with partnerships resolved in the past?</li> <li>If partnerships have already been established in networking and partnering for systems improvement and planning, what strategies have been most effective? Why?</li> </ul>	
Planning	Notes
<ul> <li>Does your organization have partnership policies and procedures already in place?</li> <li>Does your organization have a designated lead or leads for partnership development, maintenance, and evaluation?</li> </ul>	

Prospecting	Notes
<ul> <li>Are the current missions, visions, and activities of your identified new or existing partners in alignment with your desired systems improvement and planning outcomes?</li> <li>Have you worked well with your existing partner(s), particularly with regard to systems improvement and planning?</li> <li>What can your identified new or existing partners contribute to your proposed systems improvement and planning activities?</li> <li>What unlikely partners do you need to consider when addressing systems improvement and planning?</li> </ul>	
Developing	Do you have -
Consider the sheet distant to the night prise to	Correct contact person and contact information for your intended partner
Consider the checklist to the right <u>prior</u> to reaching out to potential partner(s). Feel free to add your own in the blank spaces provided.	Partnership "spiel," which may include—

## Worksheet 5B: Strategic Shared Learning for Systems Improvement and Planning



## **Brainstorming**

What trainings, meetings, or other strategic learning sessions are you thinking of facilitating as part of your activities for systems improvement and planning? What advance preparation work needs to be done for these sessions? Do you need to design a curriculum, develop an agenda, facilitate meetings or training sessions, or engage in other preparatory activities?

Select one of the sessions you have listed below to focus on in the following worksheets. Highlight that session by marking it with an asterisk or star (\*).

Sessions	Preparation
Example: Peer Recovery Support Services statewide taskforce meeting	Develop a meeting agenda, facilitate monthly taskforce meetings, take notes during meetings, and disseminate them to the taskforce.

|--|

#### **Planning**

This worksheet is designed to assist you in planning for your session. Consider the following:

	Considerations	Reflections
WHO?	Participants Who are they? Who needs to be there? How well do they know each other? How many will there be?	
	Facilitator/Co-facilitator How many facilitators will there be? Who will do what? What knowledge or skills do facilitators need to have?	
WHY? SO WHAT?	Purpose What is the goal of this session? What will be accomplished by the end? How will learning lead to change?	
WHEN?	Date and Time When will the session be held? How long, how frequently, and at what time of day will sessions occur?	
WHERE?	Location Where will the session be held? What setup is needed on site? What impact will the space have?	
WHAT?	Content What is the most important content? What sequence would feel most natural? Does content match the time?	



## **Preparing the Agenda**

This worksheet is designed to assist you in preparing the agenda for your session. Consider the following:

	Considerations	Reflections
R?	Objectives What are the achievement-based objectives for the session?	
WHAT FOR?	Are they SMART:	
	Activities What are the most engaging ways to bring new information to this group?  How are you using the 4-A model?  • Anchor (focus on existing knowledge)  • Add (deliver new information)  • Apply (use new information)  • Away (connect information to action)	
HOW?	Introduction What kind of introduction is necessary? Should there be an icebreaker? How will you frame the session?	
	Group Norms Have group agreements or ground rules been established? Are they needed? How should they be developed and reviewed?	

	Considerations	Reflections
ном?	Learning Types How are you engaging the following learners?  • Visual (focused on seeing)  • Auditory (focused on hearing)  • Kinesthetic (focused on doing)  • Empathetic (focused on feeling)  • Reflective (focused on thinking)  • Experiential (focused on experiencing)  Roles and Responsibilities How clear are the roles and responsibilities of facilitators and participants? What work needs to be done to ensure clarity?	
	Materials and Supplies What do you need for the session? Food? Technology? Handouts? Chart paper? Markers? Pencils or pens?  Closing/Summary What kind of summary is needed at the end of the	
SO WHAT?	Evaluation What changes in participants, services, and systems do you expect to see? How can you tell whether these changes have occurred?  Are you evaluating on the following three levels:  • Learning (uptake of new knowledge, skills, or attitudes)	
	<ul> <li>Transfer (application of the new knowledge, skills, or attitudes)</li> <li>Impact (how individuals or organizations change as a result of learning)</li> </ul>	

## **Worksheet 5C: Strategic Communications for Systems Improvement and Planning**



## **Develop Key Messages**

Use the action areas you defined in Section 2 and develop corresponding key messages. Think of one or two supporting points for each message.

Action Area and Intended Outcome	Key Messages	<b>Supporting Points</b>
Example: Participating in local, county, and State systems improvement planning, policy, and program development for veterans and military families.  What will be different?  • A consistent voice for veterans in recovery and their families  • More and better services for veterans in recovery and their families	[Statewide Network] helps health systems and providers meet the needs of veterans in or seeking recovery and their families.	Veterans, addiction, and recovery statistics in Virginia

#### **Tip** To refine your messages:

- Read the message out loud. Does it sound conversational? If not, edit until it does.
- Simplify the language. Remember that key messages are broad statements; they do not include many details.
- Check the length. Keep it short.
- Make sure your key messages frame the issue.



## **Segment Your Audiences**

The smaller the target audience, the easier it is to create focused communications that will move the audience to action.

—Spitfire Strategies Smart Chart 3.0 www.spitfirestrategies.com/tools/#tab1

On Worksheet 2.3, you identified important State players in addictions recovery. Which ones can drive changes that will make your program goals a reality? List those target audiences in the table. Then, use the questions to segment each audience, think about their stage of readiness, and how to tailor your key messages to reflect their needs.

Target Audience	Audience Segment	Audience Readiness	Tailored Key Messages
Who do we need to reach? (Focus on those you can persuade.)	Who exactly do we need to target within this audience? (Who can make the change you want? Who can influence decision makers? Be very specific.)	What is the audience's perspective on our issue? What do they need to move in our direction?	What do they need to hear?
Sample: Treatment programs	Directors of treatment programs in geographic areas with the most recently returned veterans.	Treatment programs are having a hard time reaching veterans in need, even in areas with higher numbers of veterans dealing with addictions  Some program directors will welcome the help and guidance from the Statewide Network. Which ones are they?  Do they: Need more information? Need support to take action? Need reinforcement of existing work/actions?	[Statewide Network] can provide outreach mechanisms to veterans and their families.  [Statewide Network] can provide relapse prevention services for veterans while they're in your program, and after they get out.

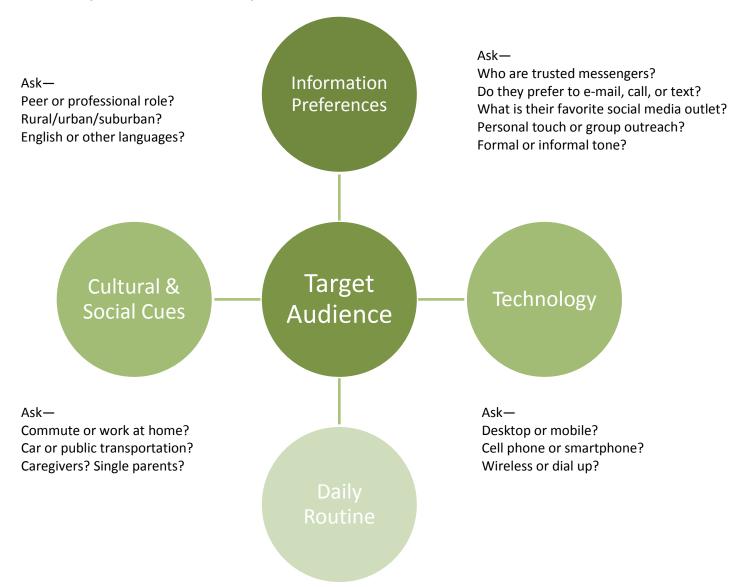
Target Audience	Audience Segment	Audience Readiness	Tailored Key Messages
Who do we need to reach? (Focus on those you can persuade.)	Who exactly do we need to target within this audience? (Who can make the change you want? Who can influence decision makers? Be very specific.)	What is the audience's perspective on our issue? What do they need to move in our direction?	What do they need to hear?
1.			
2.			

Your messages should make an emotional connection with your audience... [and] tap into their deeply held values and beliefs. It is much easier to build on beliefs a person already holds rather than try to get them to believe a new idea that runs counter to their understanding of the world.

—Welcoming America



Use the figure below and question boxes to think about how best to reach and talk to your target audiences. How do they like to get, use, and share information? What kind of communication will work for them?



The best communications efforts use the most direct tactics possible.

—Spitfire Strategies Smart Chart 3.0

Now brainstorm some possible communications activities using the chart.

Target Audience	Trusted Messengers	Possible Tools & Tactics
Directors of treatment programs in geographic areas with the most recently returned veterans	Insurance companies  Their own providers  Veterans connected to the treatment program and your program; peer leaders	Brochure/materials on veteran peer services  Direct outreach to treatment program staff by veteran peer leaders
1.		
2.		

# Section 6: Health Care Coverage and Integration

#### Introduction

The combined passing of ACA and Parity has brought enormous changes to the way that heath care is accessed, delivered, and reimbursed. These changes have had important significance for people in or seeking recovery from addiction. First and foremost is that cost for addiction treatment can be covered by health insurance plans in the same way that other medical conditions are covered. Also, because addiction is looked upon as a chronic medical condition and that insurance coverage cannot be denied based on a pre-existing chronic condition, advocates have a case to argue for recovery management reimbursement for PRSS. Further, individuals seeking treatment and recovery management services ideally will be able to find them in a number of behavioral health and primary care settings.

RCSP-SN grantees have been required to address one of three SAMHSA- identified health care reform activities in their Scope of Work: (1) enrollment, (2) integration, or (3) parity education.

#### **Enrollment**

Because addiction treatment has traditionally been outside the medical establishment, people with substance use disorders—many who have experienced poverty and health disparities—have often had limited access to the health care industry. People who have not had insurance have often accessed health care through community clinics and emergency rooms or have not sought out medical care at all. Enrollment strategies aimed at hard-to-reach individuals and communities, including those experiencing health disparities, will ultimately involve many who are seeking or in recovery from addiction. Because Statewide Networks are securely grounded in recovery communities, they can be an ideal vehicle to implement outreach strategies to enroll community members in the new insurance "marketplace" plans. The Networks can either act as a conduit to provide potential enrollees or take a more active role in providing enrollment assistance programs with peer navigators that will actually walk individuals through the enrollment process.

#### Integration

One of the key imperatives that has emerged from health care reform is integrating systems and services to be more efficient and user-friendly for individuals and families accessing services. The major intersections have been with 1) integrating mental health and addiction into what is commonly referred to as behavioral health and 2) integrating behavioral health into primary care. Integrating systems and services that have been separated for decades is never a simple or easy task. It requires a well-planned set of processes that bring people together—often for the first time—to discuss similarities and differences in both orientation and approach before design and implementation plans can be put into place. As your Statewide Network gets underway, you may want to consider collaborating or partnering with mental health peer groups in your State for the purpose of developing a strategy to advocate for the inclusion of peer services in both behavioral health and primary care settings.

#### **Parity Education**

The third and final topic identified by SAMHSA concerns developing training and educational efforts to increase community awareness and understanding of Parity. As previously stated, the enactment of Parity has pointed to great potential for the addiction field in the implementation of ACA. However, the biggest challenge has been that, although the law was passed, efforts to enforce it have been stymied. Further, no funding was earmarked to design and rollout an educational campaign. Hence, much of the general public and especially members of the recovery community know very little about it, including what it means, how to stand up for their rights, how to file claims, etc. Statewide Network grantees can address this by developing communication and learning materials, presentations, trainings, and other educational activities that address Parity.

## PLACE YOUR COMPLETED HEALTH CARE COVERAGE AND INTEGRATION WORKSHEETS FROM SECTION 2 HERE



## Worksheet 6A: Networking and Partnering for Health Care Coverage and Integration

## **Partnership Considerations**

Preparing	Notes
<ul> <li>How have the partnerships you have created fared in the past?</li> <li>What are your organization's partnership strengths?</li> <li>What are your organization's partnership challenges?</li> <li>How were issues and/or challenges with partnerships resolved in the past?</li> <li>If partnerships have already been established in networking and partnering for health care coverage and integration, what strategies have been most effective? Why?</li> </ul>	
Preparing	Notes
<ul> <li>Does your organization have partnership policies and procedures already in place?</li> <li>Does your organization have a designated lead or leads for partnership development, maintenance, and evaluation?</li> </ul>	

Prospecting	Notes
<ul> <li>Are the current missions, visions, and activities of your identified new or existing partners in alignment with your desired health care coverage and integration outcomes?</li> <li>Have you worked well with your existing partner(s), particularly with regard to health care coverage and integration?</li> <li>What can your identified new or existing partners contribute to your proposed health care coverage and integration activities?</li> <li>What new partners do you need to consider from the health care arena?</li> </ul>	
Developing	Do you have -
Consider the checklist to the right <u>prior</u> to reaching out to potential partner(s). Feel free to add your own in the blank spaces provided.	Correct contact person and contact information for your intended partner  Partnership "spiel," which may include—  • An overview of the project or activities  • Project goals and intended outcomes, and target clientele or audience, if appropriate  • Why you want to partner with the identified organization(s)  • What your organization has to offer to the partnership  • Potential ways in which the partnership can be mutually beneficial  • An approximate timeline  Memorandum of Understanding (MOU) draft or MOU outline  List of effective partnership strategies for review and use  Strategies for conflict resolution for internal review and use, if necessary

## **Worksheet 6B: Strategic Shared Learning for Health Coverage and Integration**



## **Brainstorming**

What trainings, meetings, or other strategic learning sessions are you thinking of facilitating as part of your activities related to health care coverage and integration? What advance preparation work needs to be done for these sessions? Do you need to design a curriculum, develop an agenda, facilitate meetings or training sessions, or engage in other preparatory activities?

Select one of the sessions you have listed below to focus on in the following worksheets. Highlight that session by marking it with an asterisk or star (\*).

Sessions	Preparation
Example: Integrated Behavioral Health network meeting	Develop a meeting agenda; facilitate monthly network meetings



## **Planning**

This worksheet is designed to assist you in planning for your session. Consider the following:

*What is the name of your session?			<del></del>	
What type of strategic shared learning session are you planning?	☐ Training	☐ Meeting	☐ Other:	

	Considerations	Reflections
).	Participants Who are they? Who needs to be there? How well do they know each other? How many will there be?	
WHO?	Facilitator/Co-facilitator How many facilitators will there be? Who will do what? What knowledge or skills do facilitators need to have?	
WHY? SO WHAT?	Purpose What is the goal of this session? What will be accomplished by the end? How will learning lead to change?	
WHEN?	Date and Time When will the session be held? How long, how frequently, and at what time of day will sessions occur?	
WHERE?	Location Where will the session be held? What setup is needed on site? What impact will the space have?	
WHAT?	Content What is the most important content? What sequence would feel most natural? Does content match the time?	



## **Preparing the Agenda**

This worksheet is designed to assist you in preparing the agenda for your session. Consider the following:

	Considerations	Reflections
R?	Objectives What are the achievement-based objectives for the session?	
WHAT FOR?	Are they SMART:	
HOW?	Activities What are the most engaging ways to bring new information to this group?  How are you using the 4-A model?  • Anchor (focus on existing knowledge)  • Add (deliver new information)  • Apply (use new information)  • Away (connect information to action)	
	Introduction What kind of introduction is necessary? Should there be an icebreaker? How will you frame the session?	
	Group Norms Have group agreements or ground rules been established? Are they needed? How should they be developed and reviewed?	

	Considerations	Reflections
HOW?	Learning Types How are you engaging the following learners?  • Visual (focused on seeing)  • Auditory (focused on hearing)  • Kinesthetic (focused on doing)  • Empathetic (focused on feeling)  • Reflective (focused on thinking)  • Experiential (focused on experiencing)  Roles and Responsibilities How clear are the roles and responsibilities of facilitators and participants? What work needs to be done to ensure clarity?	
	Materials and Supplies What do you need for the session? Food? Technology? Handouts? Chart paper? Markers? Pencils or pens?  Closing/Summary What kind of summary is needed at the end of the	
SO WHAT?	Evaluation What changes in participants, services, and systems do you expect to see? How can you tell whether these changes have occurred?  Are you evaluating on the following three levels:  • Learning (uptake of new knowledge, skills, or attitudes)	
	<ul> <li>Transfer (application of the new knowledge, skills, or attitudes)</li> <li>Impact (how individuals or organizations change as a result of learning)</li> </ul>	

## **Worksheet 6C: Strategic Communications for Health Care Coverage and Integration**



## **Develop Key Messages**

Use the action areas you defined in Section 2 and develop corresponding key messages. Think of one or two supporting points for each message.

Action Area and Intended Outcome	Key Messages	Supporting Points
Example: To address health coverage access, partner with ACA enrollment programs to inform and supplement their outreach efforts to populations in all stages of recovery.  What will be different?  Health insurance providers and enrollment assisters will be more aware of the needs of peers.  More people in and seeking recovery will get health insurance through the ACA marketplace.  More people in and seeking recovery will have access to primary care services via new or better insurance coverage.	[Statewide Network] helps Virginians in or seeking recovery get covered in the health insurance marketplace/get covered under ACA.  Health insurance and access to primary care helps people sustain recovery from addiction.	Number of uninsured Virginians, including the approximate percent of which are in recovery.  Barriers to enrollment  Benefits to the State of covering more peers

#### **Tip** To refine your messages:

- Read the message out loud. Does it sound conversational? If not, edit until it does.
- Simplify the language. Remember that key messages are broad statements; they do not include many details.
- Check the length. Keep it short.
- Make sure your key messages frame the issue.



## **Segment Your Audiences**

The smaller the target audience, the easier it is to create focused communications that will move the audience to action.

—Spitfire Strategies Smart Chart 3.0 www.spitfirestrategies.com/tools/#tab1

On Worksheet 2.3, you identified important State players in addictions recovery. Which ones can drive changes that will make your program goals a reality? List those target audiences in the table. Then, use the questions to segment each audience, think about their stage of readiness, and how to tailor your key messages to reflect their needs.

Target Audience	Audience Segment	Audience Readiness	Tailored Key Messages
Who do we need to reach? (Focus on those you can persuade.)	Who exactly do we need to target within this audience? (Who can make the change you want? Who can influence decision makers? Be very specific.)	What is the audience's perspective on our issue? What do they need to move in our direction?	What do they need to hear?
Sample: ACA enrollment assisters	Senior staff at Federally Qualified Health Centers (FQHCs) with ACA enrollment programs. Target programs that serve more people in and seeking recovery.	FQHCs are under a lot of pressure to enroll people, or get them to renew coverage via the State marketplace.  They don't have time to do special outreach or even spend much time with each individual trying to enroll or renew.  They need support and tools.  Do they: Need more information? Need support to take action? Need reinforcement of existing work/actions?	[Statewide Network] helps Virginians in or seeking recovery get covered in the health insurance marketplace/get covered under ACA.  We know what peers in recovery need from insurance coverage. We have a tool/simple questions to help you identify enrollees in recovery and help them get the best plan.

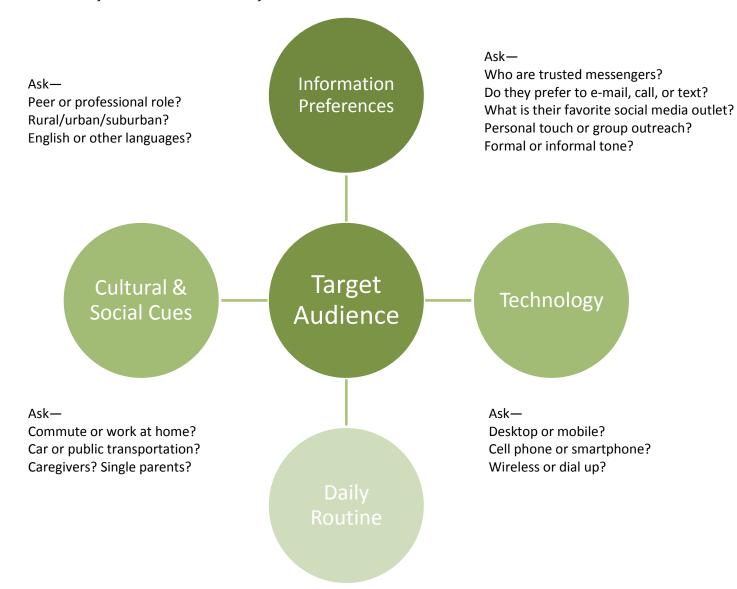
Target Audience	Audience Segment	Audience Readiness	Tailored Key Messages
Who do we need to reach? (Focus on those you can persuade.)	Who exactly do we need to target within this audience? (Who can make the change you want? Who can influence decision makers? Be very specific.)	What is the audience's perspective on our issue? What do they need to move in our direction?	What do they need to hear?
1.			
2.			

Your messages should make an emotional connection with your audience... [and] tap into their deeply held values and beliefs. It is much easier to build on beliefs a person already holds rather than try to get them to believe a new idea that runs counter to their understanding of the world.

Welcoming America



Use the figure below and question boxes to think about how best to reach and talk to your target audiences. How do they like to get, use, and share information? What kind of communication will work for them?



The best communications efforts use the most direct tactics possible.

—Spitfire Strategies Smart Chart 3.0

Now brainstorm some possible communications activities using the chart.

Target Audience	Trusted Messengers	Possible Tools & Tactics
Senior staff at FQHCs with ACA enrollment programs; target programs that serve more people in and seeking recovery.	Demand from enrollment assistance staff	Job aid for enrollment staff re: needs of uninsured in recovery  Offer to have peer leaders work onsite with enrollment assistance staff 1 day/week.  Joint press release with a partner FQHC on Statewide Network and FQHCs working together to get veterans covered
1.		
2.		

## Section 7: Evaluation

#### Introduction

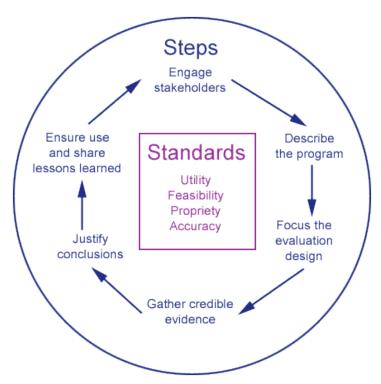
Evaluation is a key component of any program. Evaluation ensures that the program is implemented smoothly, demonstrates the effectiveness of the program, ensures that the program is held accountable to all involved stakeholders, and is essential to long-term sustainability.

This workshop, in conjunction with the resources in this workbook, will support you to:

- Review a framework for program evaluation;
- Identify key stakeholders in the evaluation of your program;
- Describe the core components of the program, including key activities and outcomes;
- Focus your evaluation design on critical evaluation questions;
- Strategize around ways to collect data efficiently and on a budget; and
- Determine how to use data to improve the program and meet key stakeholder demand.

#### **Evaluation Framework**

The evaluation framework that we will use is taken from the Centers for Disease Control and Prevention (CDC)<sup>9</sup>. The CDC's framework includes a cycle of six steps as seen in Figure 7.



**Figure 7. CDC Evaluation Framework** 

Genters for Disease Control and Prevention. Framework for program evaluation in public health. MMWR 1999;48(No. RR-11): 4

## **Worksheet 7.1: Engage Stakeholders**

The first step in evaluation design is to identify and engage with key stakeholders. Stakeholders can play a role in improving the credibility of your program and its evaluation, may be directly involved in program implementation, or may use evaluation findings to advocate for or continue funding of your program. This worksheet can help you to keep track of who your stakeholders are, who still needs to be engaged, and what role individual stakeholders will play in the evaluation process.

Stakeholder	Category	Role(s)	Involvement
Sample: Carmen West	✓ Affected by program (in recovery)  ☐ Involved in operations ☐ Will use evaluation results ☐ Other	<ul> <li>✓ Improve credibility</li> <li>☐ Implement evaluation activities</li> <li>✓ Advocate for program</li> <li>☐ Current or potential funder</li> <li>☐ Other</li> </ul>	Ms. West reviews evaluation instruments to ensure that they are easy to understand and complete. She also shares evaluation data to advocate for peer recovery support services in the State.

A detailed program description is necessary to ensure a focused and efficient evaluation process. A program description should include a discussion of the need that the program is designed to address, the specific outcomes that the program will produce, and the activities that will lead to those outcomes. It is helpful to have both a narrative and a visual program description as these will engage different stakeholders in different ways. You have already put together a visual roadmap of your program. Below is some additional space to detail your program roadmap or to write your program description narrative.	

Worksheet 7.2: Describe the Program

Once you have described the program in sufficient detail, you will want to focus on the program activities and outcomes for your evaluation design. Questions related to your evaluation activities are part of your **process evaluation** while questions related to your outcomes will be part of your **outcome evaluation**. It may be helpful to list your activities and outcomes in the table below. Your objectives will map neatly onto this worksheet.

Activities (What will the program and its staff actually do?)	Outcomes  (What changes do we hope will result in someone or something other than the program and its staff?)
Sample: Link with 15 recovery community organizations throughout	Sample: An additional 15 peer leaders/recovery coaches will be hired
the State.	or contracted to provide peer recovery support services in the State.

## **Worksheet 7.3: Focus the Evaluation Design**

Once you have a comprehensive program description that details relevant program activities and specific and realistic program outcomes, you will want to focus the evaluation design to answer the key questions that you have about the program. As mentioned earlier, these questions will either focus on the implementation of program activities (**process evaluation questions**) or on the effectiveness of the program in achieving specific outcomes (**outcome evaluation questions**). This worksheet provides space for you to brainstorm both process and outcome evaluation questions and to rate these questions on their **utility** (how useful it would be to answer the question) and **feasibility** (how easy it would be to answer the question). Questions that score high on both utility and feasibility measures should be prioritized for evaluation.

Process Evaluation Questions	Utility (Scale of 1 to 5, with 1 being low and 5 being high)	Feasibility (Scale of 1 to 5, with 1 being low and 5 being high)
Sample: With how many recovery community organizations did you link across the State?	4	5

Utility (Scale of 1 to 5, with 1 being low and 5 being high)	Feasibility (Scale of 1 to 5, with 1 being low and 5 being high)
5	4
	(Scale of 1 to 5, with 1 being low and 5 being high)

Notes:

#### Worksheet 7.4: Gather Credible Evidence

Once you have focused your evaluation design on a specific set of evaluation questions, you are ready to consider how to gather the information that you need in order to answer these questions. This worksheet will help you to determine what information you need, to identify what existing sources you can take advantage of to get this information, and what additional evaluation activities need to be undertaken in order to collect any remaining information that is needed to answer the questions. Note that the first two columns may be repeated from earlier worksheets.

Objective	Question	Measure(s)	Source	Who Will Collect Data?	Time Frame
Example: Link with 15 recovery community organizations (RCOs) throughout the State.	With how many RCOs did we link across the State?	Number of RCO linkages	Number of linkage agreements	Project manager	Collected as needed Counted quarterly

Objective	Question	Measure(s)	Source	Who Will Collect Data?	Time Frame
Example: An additional 15 recovery coaches will be contracted to provide peer recovery support services in the State.	What was the effect of program on raising awareness about addiction peer recovery support?	Number of new recovery coaches throughout the State	Follow-up surveys with trained coaches	Evaluation assistant	6 months after training is delivered

## **Worksheet 7.5: Justify Conclusions**

Justifying conclusions involves much more than analyzing the data. Preparing the data to be analyzed involves entering it into a database system (e.g., GPRA, Excel) and checking the data for errors. Once the data are analyzed, the findings need to be interpreted in a way that is meaningful to the stakeholders. In the end, judgment needs to be made about what the data signify. This worksheet will help you to organize the flow of data from once it has been collected to the point of analysis. Note that the first column is repeated from the previous worksheet.

Source	Who Enters Data?	Time Frame	Who Checks Data?	Time Frame	Who Analyzes Data?	Time Frame
Follow-up surveys with trained coaches	Evaluation assistant	Monthly	Project manager	Every 3 months	Evaluator	Quarterly

#### Worksheet 7.6: Ensure Use and Share Lessons Learned

Once the data have been analyzed and interpreted, the conclusions need to be shared with the various stakeholders identified in the first step. Internal program stakeholders, such as staff and volunteers, will find the data useful in order to inform program decisionmaking. Some stakeholders, such as funders, require the data to be shared on a regular basis. Other stakeholders, such as community members or partner organizations, will not request findings; you may want to share findings with them proactively to build rapport and relationships. This worksheet will help you to determine how to share successes, discoveries, and lessons learned with various stakeholders.

Stakeholder	What To Share?	How To Share?	When?	Goal
Sample: Carmen West	☐ Quarterly report  ✓ Newsletter or press release  ✓ Web media posting  ☐ Other	The community newsletter is shared via print copies distributed at meetings and through social media outlets.	The community newsletter is released monthly.	Ms. West shares evaluation data to advocate for peer recovery support services funding in State government meetings.

# Section 8: Putting It All Together

#### Introduction

You have done a lot of thinking, planning, rethinking, and strategizing to clarify and hone your project. After doing such a deep dive, it is good to step back and get a sense of the big picture again.

The worksheets in this section mirror those in Section 2. When working through them this time, you are encouraged to collect the key tasks related to strategic networking, strategic shared learning, and strategic communications that you identified during the breakout sessions, reframe your statements of results, revisit how each action area is prioritized, and then recalculate the estimated effort.

## **Worksheet 8.1: Action Areas, Results, and Priorities**

#### **Workforce Development**

SAMHSA Activities			
To develop infrastructure, we are—  □ Partnering with State and local organizations in wo activities to—  □ Develop competencies and certification standar support/recovery coach services. □ Provide addiction peer recovery coach training a incorporating peers into the workforce. □ Develop culturally and linguistically competent padministrators. □ Mentor addiction peer recovery coaches. □ Develop strategies for licensure, credentialing, or recovery community organizations. □ Other:	ds of addiction peer recovery nd training for providers on eers, providers, and r accreditation of peers and	RE	ESULTS REFRAMED:
Key Actions			
Strategic Networking Strategic Shared Lear	ning Strategic Com	nmunications	Rightsizing Notes
New Priority Level	How many hours of offert?		
□High □Medium □Low	How many hours of effort?  Estimate (a)  Multiply (b) by 4 (b)  Calculate total (a)	minimum (b) me	edium (c) maximum - (d) / 6 =

### **Linkages and Catalysts**

SAMHSA Activities				
				RESULTS REFRAMED:
To develop infrastructure, we ar				
□ Developing linkages with ac	ddiction recovery commu	nity organizations	throughout	
the State in order to—				
☐ Develop a collective app	proach around promoting a	addiction peer reco	overy	
supports and services.	AP - 10 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
☐ Identify needs of the adaddress these needs.	diction recovery communi	ty and devise strai	egies to	
	development of RCOs thro	augh training and e	ducation on	
	ns, billing systems, recruitn			
integration into larger sy		nent, sastamasmt,	und	
Other:	•			
☐ Other:				
Key Actions		0		
Key Actions Strategic Networking	Strategic Shared Learni	ng Stra	tegic Communications	Rightsizing Notes
	Strategic Shared Learni	ng Stra	tegic Communications	Rightsizing Notes
	Strategic Shared Learni	ng Stra	tegic Communications	Rightsizing Notes
	Strategic Shared Learni	ing Stra	tegic Communications	Rightsizing Notes
	Strategic Shared Learni	ing Stra	tegic Communications	Rightsizing Notes
	Strategic Shared Learni	ing Stra	tegic Communications	Rightsizing Notes
	Strategic Shared Learni	ng Stra	tegic Communications	Rightsizing Notes
	Strategic Shared Learni	ng Stra	tegic Communications	Rightsizing Notes
Strategic Networking	Strategic Shared Learni			Rightsizing Notes
Strategic Networking  New Priority Level	Strategic Shared Learni	How many hour	s of effort?	
Strategic Networking  New Priority Level		How many hour Estimate	s of effort? (a) minimum	_ (b) medium (c) maximum
Strategic Networking  New Priority Level		How many hour Estimate	s of effort? (a) minimum	
Strategic Networking  New Priority Level		How many hour Estimate	s of effort? (a) minimum	_ (b) medium (c) maximum

☐ Serving as a catalyst for org of activity for promoting the ☐ Trauma-informed peer s ☐ The availability and expanses as mutual aid groups, per gender, race, and ethnice ☐ Elimination of barriers to ☐ Addressing negative atti	e importance of— support and increased sensitension of addiction peer recover mentoring/coaching, respirity. To recovery, such as employments	ivity to tra overy supp ponsive to nent and he	uma issues. ort services, s needs based	such	RESULTS REFRAMED:
Strategic Networking	Strategic Shared Learning		Strategic Co	ommunications	Rightsizing Notes
New Priority Level ☐ High ☐ Medium	□Low	Estimate	(b) by 4	(a) minimum	(b) medium (c) maximum + (d) / 6 =

	Planning		RESULTS REFRAMED:
program development for sp  ☐ Veterans and military fan  ☐ Criminal justice re-entry p  ☐ Sexual and gender minor  ☐ Co-occurring mental heal	, and State systems improvent pecial populations, to serve— nilies. populations. ities. Ith and other primary health confirm of chronic homelessness.		
Key Actions			
Key Actions Strategic Networking	Strategic Shared Learning	Strategic Communications	Rightsizing Notes
	Strategic Shared Learning	Strategic Communications	Rightsizing Notes
	Strategic Shared Learning	Strategic Communications	Rightsizing Notes
	Strategic Shared Learning	Strategic Communications	Rightsizing Notes
	Strategic Shared Learning	Strategic Communications	Rightsizing Notes

To develop infrastructure, we are—  Participating in policy, planning and proceed to expense to the community organizations in program and other:  Other:  Other:	nsure the inclusion of addi and systems planning.	ction recovery	RESULTS REFRAMED:
Key Actions Strategic Networking Strategic	Shared Learning	Strategic Communications	Rightsizing Notes
New Priority Level ☐ High ☐ Medium ☐ Low	How many Estimate Multiply (b) Calculate to	hours of effort?  (a) minimum  by 4 (b) x 4 = (d) _  tal (a) + (c)	(b) medium (c) maximum + (d) / 6 =

				RESULTS REFRAMED:
o address health coverage Partnering with health programs operating in to populations with sub	insurance coverage οι the State to inform an	utreach and enrollm nd supplement their	ent assistance	
Other:			_	
□ Other:			- /	
☐ Other:			_	
				-
ey Actions				
-				
-	Strategic Share	d Learning	Strategic Communications	Rightsizing Notes
-	Strategic Share	d Learning	Strategic Communications	Rightsizing Notes
-	Strategic Share	d Learning	Strategic Communications	Rightsizing Notes
-	Strategic Share	ed Learning	Strategic Communications	Rightsizing Notes
-	Strategic Share	ed Learning	Strategic Communications	Rightsizing Notes
-	Strategic Share	ed Learning	Strategic Communications	Rightsizing Notes
-	Strategic Share			Rightsizing Notes
Strategic Networking  New Priority Level		How many	nours of effort?	(b) medium (c) maximum
New Priority Level  ☐ High ☐ Medium		How many	nours of effort?	(b) medium (c) maximum (d) + (d) / 6 =

To address health coverage acce  Promoting the use of peer in and behavioral health setting  Other:  Other:	recovery support services ngs.	in integrated	l primary c —	are	RESULTS REFRAMED:
Key Actions Strategic Networking	Strategic Shared Learni	ing	Strategic	Communications	Rightsizing Notes
New Priority Level ☐ High ☐ Medium	Low	How many Estimate Multiply (b Calculate t		(a) minimum (	b) medium (c) maximum + (d)/ 6 =

To address health coverage acc    Facilitating education/tra   parity to increase awaren   Addiction Equity Act of 20    Other:	ining efforts regarding me ess/understanding of the 008).	ental health an law (Mental H	d addictions ealth Parity	and	RESULTS REFRAMED:
Key Actions Strategic Networking	Strategic Shared Lear	rning	Strategic C	ommunications	Rightsizing Notes
New Priority Level ☐ High ☐ Medium	Low	How many h Estimate Multiply (b) b Calculate tot	(a	a) minimum (b)	medium (c) maximum + (d) / 6 =

# **Worksheet 8.2: Rightsizing Revisited**

			1		
High Priorities	5		Hours of E	ffort	
			•		
Now count to effort for ea	the number of <i>i</i> ich. Write your	-	<b>rity</b> action are	as and the <b>to</b>	<i>tal number</i> of h
Medium Prior	rities		Hours of E	Effort	
			J		
•	t the number o		action areas	and the <i>total</i>	<i>number</i> of hou
effort for ea	ich. Write your	tally below.			
effort for ea	-	tally below.	Hours of E	Effort	
Low Priorities					
Low Priorities					
Low Priorities					
Low Priorities					
Low Priorities		ort and write			
Low Priorities		ort and write  If your h  per 27	result below, pours of effort is—rweek, put in box		
Low Priorities	he hours of effo	ort and write  If your h  per 27 per 11	result below, pours of effort is— week, put in box month, put 7 in box		
Low Priorities	he hours of effo	ort and write  If your h  per 27  per 11  per	result below, in ours of effort is— week, put in box month, put		
Low Priorities	he hours of effo	ort and write  If your h  per 27  per 11  per	result below, in ours of effort is— week, put in box month, put in box year, put		
Add up all the	he hours of effo	ort and write  If your h  per 27  per 11  per	result below,  ours of effort is— r week, put in box r month, put 7 in box r year, put 00 in box	in the Total Ho	ours of Effort bo
Add up all ti	he hours of effo	ort and write  If your h  per 27  per 11  per	result below, ours of effort is— r week, put in box r month, put 7 in box r year, put 00 in box	in the Total Ho	ours of Effo

### **Worksheet 8.3: Potential Technical Assistance from Altarum**

Technical Assistance Need	Desired Outcome(s)	Mode	Product(s)
		☐ In-person training	
		☐ Conference call(s)	
		□ Document review	
		☐ Information sharing	
		☐ In-person consultation	
		☐ Webinar(s)	
		☐ Meeting facilitation	
		□ Other:	
		☐ In-person training	
		☐ Conference call(s)	
		☐ Document review	
		☐ Information sharing	
		☐ In-person consultation	
		☐ Webinar(s)	
		☐ Meeting facilitation	
		☐ Other:	
		☐ In-person training	
		☐ Conference call(s)	
		□ Document review	
		☐ Information sharing	
		☐ In-person consultation	
		☐ Webinar(s)	
		☐ Meeting facilitation	
		Other:	
		<ul><li>☐ In-person training</li><li>☐ Conference call(s)</li></ul>	
		<ul><li>☐ Conference call(s)</li><li>☐ Document review</li></ul>	
		☐ Information sharing	
		☐ In-person consultation	
		☐ Webinar(s)	
		☐ Meeting facilitation	
		☐ Other:	
		<b>–</b> Other	