

# SkillWorks

**PARTNERS FOR A PRODUCTIVE WORKFORCE**

## **Request for Proposals:**

### **Community Health Worker Career Advancement Initiative**

**Proposal Due Date: March 7, 2006**

**The SkillWorks Funders Group  
c/o The Boston Foundation  
75 Arlington Street  
Boston, MA 02116**

*SkillWorks is supported by:*

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## **PREFACE**

This Request for Proposals solicits planning applications to design strategies that will help Community Health Workers progress toward earning family-sustaining incomes.<sup>1</sup> With major new funding from the Robert Wood Johnson Foundation, the SkillWorks Funders Group seeks to apply the SkillWorks Workforce Partnership model to the career advancement of Community Health Workers and to the skilled workforce needs of employers in the public health industry.

SkillWorks will provide up to \$50,000 for a planning period of up to 10 months (April 1, 2006 to January 31, 2007) to organize a new Workforce Partnership for Community Health Workers and to research their workforce development needs. The planning grant will culminate in the submission of a full implementation proposal to the SkillWorks Funders Group. The proposal will describe a project to implement a sustainable career advancement model for Community Health Workers, with a \$990,000 implementation grant from SkillWorks over a period of three years (\$330,000 per year). The SkillWorks Funders Group expects that the implementation grant will begin in March 2007.

Under the planning grant, the grantee will convene partners, solidify the partnership membership, develop a governance and decision-making process, develop a program management and staffing plan, determine specific project goals and outcomes, define evaluation measures, design a program with specific employer partners to address career pathways, research Community Health Worker skill sets and competencies, begin curriculum development, design a Community Health Worker recruitment and assessment process, design a participant tracking database, develop a budget for the three-year implementation grant, and develop a sustainability plan.

The funded Planning Workforce Partnership will receive specific guidelines from SkillWorks for the development of the implementation business plan. These guidelines will be based on the Workforce Partnership Approaches presented in Section III. The SkillWorks Funders Group expects the Workforce Partnership will use the three-year implementation grant to deliver the career advancement services described in Section III and to work on a plan for the long-term sustainability of these services.

One planning grant will be awarded through this RFP, followed by a three-year grant upon approval by the Funders Group of an implementation plan. The Funders Group does not intend to solicit additional proposals for the implementation grant. What follows is background information on the SkillWorks model and program design elements for the implementation Workforce Partnership for Community Health Worker advancement. It is provided here to inform and facilitate the development of a planning proposal.

## **SECTION I: SKILLWORKS**

SkillWorks is an innovative response by a consortium of local and national foundations, the Commonwealth of Massachusetts, and the City of Boston to an economy that has left too many job seekers and workers in poverty, while employers are unable to meet their needs for a skilled workforce. SkillWorks capitalizes on the best practices and unique strengths of the city's workforce development system to help low- and moderate-income adults advance into family-

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<sup>1</sup> Family-sustaining incomes take into account specialized needs, such as child-care and housing, based on family composition. See Section III, page 7, for more information or consult "The Self Sufficiency Standard for Massachusetts," Dianna Pearce, The Women's Union, Boston, MA. April 2003.

supporting employment. It does so by building partnerships between Boston's employers and workforce development providers.

The Initiative focuses on three key systems-change strategies:

- Workforce Partnerships;
- Capacity Building; and
- Public Policy Advocacy.

*Workforce Partnerships:* SkillWorks makes three-year investments totaling nearly \$1 million in industry sector partnerships that collaborate with workers and employers to develop career advancement opportunities linked to education and training for low- and moderate-income individuals. Funding supports approaches that build long-lasting relationships among employers, workers, education, and training and support service providers to help low-income individuals progress toward economic self-sufficiency and to help employers meet their needs for a skilled workforce.

*Capacity Building:* SkillWorks seeks to strengthen alliances, build the infrastructure, and enhance the knowledge base of Workforce Partnerships and other members of the workforce development service delivery network in order to help them effectively meet the workforce needs of businesses and low-skill, low- and moderate-income job and skill seekers.

*Public Policy Advocacy:* SkillWorks seeks to achieve long-term, sustainable improvements in the workforce development system's ability to help low-skill, low- and moderate-income individuals achieve family-supporting incomes. The initiative works closely with city and state officials to institutionalize successful innovations emerging through the activities of the Workforce Partnership and Capacity Building components.

## **SECTION II: COMMUNITY HEALTH WORKER CAREER ADVANCEMENT**

In preparation for the development of this Request for Proposals, SkillWorks conducted a research-based planning process to obtain a better understanding of the workforce challenges facing Boston's community health workers and their employers, and of national models that could be adapted to local conditions. The research included focus groups and interviews with representatives of community health centers, hospitals, community health workers and organized labor, the city and state public health departments, multi-service agencies, and mental health and substance abuse networks. It also included a literature review and interviews with national researchers and evaluators in Arizona, Minnesota, Missouri, San Francisco, and Texas. We also looked at local efforts in Boston and Massachusetts for practices to build on. What follows is based on the lessons learned from this research process.

Community Health Workers go by many job titles and perform a wide range of services to increase access to health care for under-served communities (see Appendix E). They are employed by community health centers, hospitals, community-based organizations, multi-service centers, and other organizations that seek to improve health outcomes for hard-to-reach populations. Often, but not always, they are part of the communities targeted by specific public health programs.

This RFP defines a Community Health Worker as ***a health worker who applies his or her unique understanding of the experience, language, and/or culture of the populations he or she serves in order to carry out at least one of the following roles:***

- ***Culturally mediating among individuals, communities and health and human services, including actively building individual and community capacity;***
- ***Providing culturally appropriate health education and information;***
- ***Assuring that people get the services they need;***
- ***Providing direct services, including informal counseling and social support; and***
- ***Advocating for individual and community needs.***

Boston is recognized nationally as a leader in employing Community Health Workers to improve access to health care for under-served populations. Individuals who enter the field come with widely varying educational backgrounds and experience. Regardless of their entry skills, they find financial and professional advancement difficult as a result of factors that include a lack of agreement on the core competencies for the position, lack of a widely accepted career ladder, unstable funding and a lack of third-party reimbursement policies covering the position, and limited understanding on the part of many entry-level workers of career advancement options available to them, among other reasons.

SkillWorks seeks to build a Workforce Partnership that will engage Community Health Workers, higher education, community health centers and other employers, and other organizations to develop a career advancement program that will help Community Health Workers progress to family-sustaining incomes. The Partnership should be prepared to work with:

- Employers to develop career advancement strategies;
- Community Health Workers to clarify career advancement needs;
- Higher education institutions to develop and implement curricula leading to a certificate and/or Associate's degrees for Community Health Workers; and
- Community-based organizations and other workforce development service providers to develop and deliver a career information and coaching strategy for Community Health Workers.

In addition, the Partnership should work to develop a sustainable approach to job retention and advancement for Community Health Workers that addresses employer's challenges and needs.

SkillWorks is looking for a Workforce Partnership to develop two kinds of advancement strategies for community health workers. In one, interested community health workers are helped to advance along established career pathways that are already recognized by employers and for which education and training resources are already available. The second advancement strategy that SkillWorks is seeking is a new career pathway in the community health field.

**Administrative, Direct Care, Medical Technology, and other health-related career ladders:**

Community health work is often the first exposure to health-related jobs for immigrants and members of other under-served groups. These individuals may have limited knowledge of the different career pathways that are available throughout the industry, such as those in medical administration, direct patient care, and medical technology, among other fields. Community health workers who obtain the education and skills to enter and progress along these pathways not only are able to increase their incomes, they have the potential to help employers throughout the healthcare industry deliver more culturally competent services. Therefore, the Workforce Partnership developed through this solicitation should develop strategies to help

community health workers learn about health-related career advancement options. Those who are interested should receive help to access the education and training they will need to advance in these other health-related careers.

**Community Health Work Career Ladder:** A major outcome sought for this project is the development of one or more career advancement pathways within community health work. This new community health work career ladder will entail educational programs at the certificate level as well as the Associate's degree level and the adoption of employer human resources practices that reward increased education, competencies, and experience as a community health worker with increases in responsibilities and wages. The program design should take into account that advancement for community health workers occurs along a supervisory, management, and program design pathway, as well as along a patient education, case management, and social work pathway. The Workforce Partnership may also develop other high-priority community health work advancement pathways in response to employers' needs for specific sets of skilled workers. Progressively more responsible and more highly skilled positions should carry higher wages.

## SECTION III: PROJECT DESIGN

At the end of the planning process, the grantee will be expected to submit a plan to the SkillWorks Funders Group describing how it will deliver a career advancement program for Community Health Workers over a period of three years, based on these approaches:

### Workforce Partnership Approaches

SkillWorks Workforce Partnerships are dual-customer, sectoral intermediaries. That is, they design and deliver, or provide access to, long-term services meeting the hiring, retention, and advancement needs of *both* employers and workers in a given industry. They engage employers, workers, and workforce development providers in collaborating to build the conditions that create a skilled workforce with opportunities for advancement.

SkillWorks Workforce Partnerships develop programs and strategies on three fronts:

**A. Working with individuals,** Workforce Partnerships help low- and moderate-income individuals gain the education, skills, career awareness, and financial assets that will help them progress toward family-supporting incomes.

**B. Working with employers,** Workforce Partnerships help employers address skill shortages and improve employment conditions to retain and advance their low- and moderate-income workforce.

**C. Working within larger systems,** Workforce Partnerships act as "change agents" that introduce and seek to institutionalize new practices with their employer partners' organizations, in the workforce development delivery network, and in their industry sector.

#### A. *Working With Individuals*

SkillWorks seeks to help individuals looking to enter the community health field and/or incumbent workers progress towards household incomes that can meet a family's basic needs. Bidders for the planning grant must include at least one partner that represents Community Health Workers.

SkillWorks seeks to help incumbent Community Health Workers and those entering the field progress toward household incomes that can meet a family’s basic needs. SkillWorks adopts a standard of income known as Family Economic Self-Sufficiency. For Boston, these incomes levels are:

Family Size	One Adult	Adult + 1 child	Adult + 2 children	2 Adults + 2 children
Income	\$21,362	\$44,046	\$51,284	\$54,612

Bidders should show how they will plan for the design of a progressive, multi-year approach to a comprehensive array of interventions that help Community Health Workers progress toward these income levels by moving along a career pathway. SkillWorks understands that advancement to these income levels is a long process and may not be fully accomplished by participants during the three-year implementation grant period.

SkillWorks defines a career pathway to be a structured connection between workplace advancement and increases in a worker’s skills, experience, and education. The pathway must also meet an employer’s skilled workforce needs. The process is sometimes referred to as a career lattice or career network, among other names, because career advancement is complex and sometimes involves lateral moves in order to gain access to promotional opportunities, or even a temporary loss of income, while a worker gains credentials that lead to long-term increases in income.

### Services to be Delivered to Individuals

Not every Community Health Worker will need or want the same array of services or will enter the system with the same level of skill. Therefore, the program design should offer a flexible mix of strategies to help individuals move up a career ladder over time. These may include:

- Assessment** to evaluate participating Community Health Workers skills, education, aptitudes, specific barriers to advancement, and career goals;
- Career Coaching** to help Community Health Workers progress through the multiple steps necessary to achieve economic self-sufficiency;
- Career Information** to orient Community Health Workers to high-demand job opportunities in the health industry, including working conditions and average wages associated with those jobs, and the skills, education, and experience required for those jobs;
- Asset Development** to facilitate access to services such as the Earned Income Tax Credit, financial literacy, debt counseling, and childcare assistance;
- Literacy Services** providing access to reading, writing, math and study skills up to and including the college readiness level;
- ESOL** to meet the English speaking, listening, reading, and writing needs of Community Health Workers, with a particular emphasis on vocabulary necessary to work in a medical setting; and
- Occupational Skills Training** to provide Community Health Workers with the core competencies and academic credentials they need to prepare for their specific career goals.

**Reminder:** SkillWorks strongly desires that two community health work training designs be developed, each providing access to the above strategies:

- Training to help incumbent Community Health Workers prepare for a health-related career pathway;
- Training to lead to a certificate bearing postsecondary academic credit and/or a Community Health Worker Associate's degree program.

Please refer back to Section II, pages 5 and 6, for details.

Bidders are encouraged to incorporate **competency-based instruction** in their delivery plans to the greatest degree possible. A competency-based system measures student progress based on what a person can do. The system clearly articulates the competencies to be mastered, and it breaks the content down into discrete units with learning objectives. Unit, subject, and course tests measure mastery. Workers can demonstrate mastery and test out of some subjects, enrolling only in those courses needed to improve their skills.

### *B. Working with Employers*

The Community Health Worker Workforce Partnership must be built on the workforce needs of specific employers—one or more community health centers, hospitals, multi-service centers, or other organizations that employ Community Health Workers. Bidders for the planning grant must include at least one employer partner.

Employers of Community Health Workers are a diverse group who face substantial challenges in hiring, retaining, and providing advancement opportunities for these employees. Most rely on third party payers to cover their staff costs, sources that rarely cover the services provided by community health workers. Some employers also obtain grants to provide the services of Community Health Workers, but this funding source can be unpredictable and time limited. These conditions contribute low salaries and to high turnover for community health work.

Employers recruiting for community health services typically choose between hiring from the community targeted to receive services or hiring an individual with education and experience in public health. In the first case, workers often need training about the health care and behavioral health systems, social service resources, and the specific health conditions they will be working on. In the latter case, workers often need training in culturally competent interview, counseling, and education approaches for each community they will be working with. In either case, employers with limited staff development and training budgets must find the appropriate training resource in a timely and cost-efficient manner to assure that they are providing high-quality patient care. Too often, these training resources are hard to find.

Employers of community health workers who participate in a SkillWorks Workforce Partnership will collaborate in developing sustainable solutions to these challenges of high turnover, inconsistent hiring standards, and inaccessible training resources. Through the Workforce Partnership, they can help assure that curricula reflect industry practice and standards; they can get assistance addressing some of the problems that contribute to high turnover among low-income workers, such as child care needs and housing assistance; and they can get help developing career paths for entry-level workers that can help retain top workers by giving them a chance to get ahead.

Participating employers must make a commitment to develop career pathways that involve skill and wage advancement for Community Health Workers and to strengthen human resource practices that support the retention and advancement of Community Health Workers on their

staffs. They should plan to provide release time for employees to attend training, as well as to provide adequate program management time to support the development of the Partnership.

### **Services to Deliver with Employers**

**Career Path Development:** Partnering employers should collaborate with higher education and Community Health Workers to develop community health work career pathways. These pathways should be designed around occupations or skills for which employers have significant skill shortages and/or job vacancies, provide stable employment with good wages, and provide an avenue for advancement with appropriate training. An employer job task analysis can provide the framework for developing a community health work career path with promotional opportunities based on increased skills and improved performance.

**Improve Human Resources Policies and Practices:** Partnering employers experiencing high turnover among Community Health Workers or labor shortages in other skilled occupations may benefit from the expertise of partners with experience working with low- and moderate-income individuals. Partnerships should analyze their employers' benefits, supervisory, and worker advancement practices to develop strategies that improve worker loyalty and retention or lower recruitment costs. Examples of these services include devising an exit interview to analyze causes of turnover, adopting a promote-from-within policy, providing access to public work supports that supplement employer-paid wages and benefits, and training supervisors and managers to mentor and support the career advancement of entry-level workers.

**Access to Incumbent Worker Training:** The Workforce Partnership should help employer partners access the training and education necessary for Community Health Workers to advance along a career pathway. Examples of increasing access to training include negotiating with training organizations and educational institutions to develop customized curricula, bringing courses to the worksite, and leveraging public grants and other financial resources to pay for training and education, such as loan repayment plans, employee incentive programs, Workforce Investment Act ITAs, or the Massachusetts Workforce Training Fund, or others.

### **C. Working with Larger Systems**

To be most effective at creating opportunities for Community Health Workers to advance, the Workforce Partnership may need to look beyond the practices of individual employers and a specific group of workers. The Partnership may also need to advocate for deeper culture changes within an employer or group of employers, the adoption of new programs within the workforce delivery system, or the acceptance of new industry practices.

Based on its deep knowledge of the public health industry, the implementation Workforce Partnership will identify institutional practices, regulatory constraints, and other conditions that create barriers to the retention and advancement of Community Health Workers. To address specific barriers, the Workforce Partnership will develop practical, replicable, and sustainable solutions to problems, and it will work to institutionalize programs and services that help Community Health Workers advance to economic sufficiency. In this effort, the Partnership may want to collaborate with the Public Policy Advocacy component of SkillWorks.

Areas in which the implementation Workforce Partnership could work for system change might include:

**The Employer:** The Partnership could develop strategies to change partnering employers' culture so that the avenues for advancement created for the project's Community Health Worker participants continue to exist after the three-year grant period. Culture changes might include establishing visible, easily accessible career ladders; a routine, systematic method of training and promoting Community Health Workers; encouraging supervisors and managers to recognize the advancement potential of Community Health Workers; and integrating Community Health Workers into the clinical team.

**The Health Care Industry:** Examples of policies and practices the Workforce Partnership might undertake within the broader health care industry to support career advancement for Community Health Workers could include developing industry-specific skill standards for the jobs these workers perform; developing career pathways recognized by all employers within the industry; gaining third-party payer reimbursement for their work; or stabilizing employment conditions.

**Workforce Development and Educational Institutions:** The Workforce Partnerships could seek to improve access to education and training for Community Health Workers by offering community college classes at community-based organizations or employer work sites; developing articulation agreements between pre-college, community-based programs and college programs; developing curricula with college credit for an industry-approved certificate program; and allowing Community Health Workers to demonstrate mastery and test out of courses. SkillWorks is especially interested in designs that offer a range of instructional techniques that are accessible to adult learners.

**Note:** SkillWorks is particularly interested in achieving the following systems changes through this project:

- Employer investment in training and promoting Community Health Workers, leading to higher quality care for under-served groups;
- Industry recognized career pathways for community health work that enable employers to recruit, retain, and advance skilled Community Health Workers who are culturally sensitive to the communities they serve;
- A recognized postsecondary certificate bearing academic credit (and/or an Associate's degree program for Community Health Workers) that does not inhibit access to entry-level jobs in the field by individuals for whom community health work has provided access to employment in the health care industry.

## Outcomes

The Workforce Partnership approaches presented above suggest the range of strategies that SkillWorks will support. The priority outcomes that are sought from the Community Health Worker Partnership are:

- Community Health Workers attain higher wages;
- Community Health Workers attain higher skills;
- Reduced turnover for employers of Community Health Workers; and
- Improved quality of care for under-served populations.

To help guide their planning, bidders will need to keep in mind the additional potential outcomes listed in Attachment D when they undertake their implementation grant. Applicants for planning grants should assemble a planning team that can develop a credible strategy on all three approaches for the implementation phase of this grant.

## Evaluation and Dissemination

### *SkillWorks Evaluation:*

The implementation Community Health Worker Partnership will be assessed as part of the ongoing evaluation of SkillWorks conducted by Abt Associates and Mt. Auburn Associates. The evaluators will track the success of the Community Health Worker Workforce Partnership, once it begins the implementation phase, in advancing community health workers and achieving employer and systemic changes that support their advancement. This evaluation will consist of three phases:

- A baseline report of the status and conditions of community health workers, employers, and the systems they participate in for worker advancement and for delivering health care services;
- Annual updates on progress of the Workforce Partnership toward goals in each of these areas; and
- A final outcomes evaluation assessing the effectiveness of the SkillWorks model in advancing workers and achieving systems reform in support of this goal.

The implementation Workforce Partnership will be expected to collect and report data on program outcomes at each phase of the evaluation. In addition to outcomes on income and skill advancement, SkillWorks expects that grantees will define their own measures, tailored to the specific conditions and strategies of their project and the needs of participating workers, employers, educators, and other stakeholders. The evaluators will work with grantees to articulate these outcomes and define measures that their projects can be tracked against.

***Community Health Worker Return on Investment Evaluation:*** The Community Health Worker Partnership will participate in a separate study, over and above the evaluation of workforce outcomes, of “Return on Investment” (ROI) for health care providers. The ROI study, to be completed at the end of the three-year project, is required by the Robert Wood Johnson Foundation and focuses on “quality of care.” Grantees should be prepared to identify outcome measures of the impact of Community Health Worker advancement and systems reform on the quality of care.

Defining and collecting ROI data will enable SkillWorks and its funders to test several premises of this application of the program model to community health work. First of all, SkillWorks expects – based on a growing literature and a stock of examples of good practice – that Community Health Workers can contribute to improved care by expanding access to health care in underserved populations. A further premise is that Community Health Workers with more stable jobs, better skills, clearer roles, and more formal credentials and career paths will be better prepared and situated to expand access to and usage of health care services. It is essential for both users and providers of health care, as well as the larger fields of health care

and workforce development, to test these premises with careful documentation and data collection.

**Dissemination:** At regular intervals, SkillWorks expects grantees to reflect on and document lessons of practice that can be shared with other SkillWorks grantees and with the broader field. A vital part of the SkillWorks model is the notion that effective advancement of workers depends on systems change, expanding to the industry itself as well as individual employers. The knowledge distilled from grantee experiences, particularly as they encounter and adapt to barriers, will be invaluable to improving the understanding of practitioners and supporting industry-wide change.

The implementation Community Health Worker Partnership will be expected to document the project's progress and to disseminate information to others in the workforce development and health care industries. Dissemination can include articles in trade association journals, participation on conference panels, and publishing a replication manual, for example. The technical assistance provider will work with each grantee to develop documentation and dissemination strategies.

## **SECTION IV: PROPOSAL GUIDELINES**

This Request for Proposals offers organizations the opportunity to apply for up to \$50,000 for a planning grant for a period of up to 10 months, which will be followed by a three-year implementation grant totaling \$990,000 (\$330,000/year for three years) based on successful completion of the planning process and approval by the Funders Group of an implementation proposal. The SkillWorks Funders Group intends to award one grant through this solicitation.

### ***Participation Requirements:***

- The proposal must provide evidence of full participation by at least one community health employer partner and by representatives of Community Health Worker employees. Community health centers and networks, hospitals, multi-service agencies, and other organizations that employ Community Health Workers may be included as employer partners. The partnership should also include organizations that have the expertise and capacity to help employers address the challenges created by the lack of retention and advancement among their Community Health Worker workforce, and it must include organizations that have the capacity to provide education, training, career coaching, and other required or relevant services, technical assistance, and any other service necessary to the model that cannot be met by the employer partner(s). The number of partners in the Workforce Partnership is up to the applicant.
- Only one organization representing the partnership may apply for funds. This applicant organization may be an employer, a union or professional organization, an educational institution, or a community organization (e.g., a community-based organization or a workforce development board).
- Union representatives must be involved in the Partnership in those cases where employees receiving services are covered by collective bargaining agreements.

- The primary service area for programs funded through SkillWorks is the City of Boston. All employer partners must be located within Boston. Bidders who meet this criterion may provide services to low- and moderate-income Community Health Workers who are employees of Boston employers and who are residents of cities and towns in Greater Boston.

The funded Partnership will be expected to do the following during the 10-month planning phase:

- Submit monthly narrative reports and an expenditure report upon completion of the grant period.
- Submit an implementation plan to SkillWorks for review by January 31, 2007.

If awarded an implementation grant, the Partnership will be expected to do the following during the three-year implementation phase:

- Submit annual renewal applications that demonstrate solid evidence of progress along the three-year work plan.
- Provide quarterly narrative, quantitative, and financial progress reports to the SkillWorks Director.
- Demonstrate progress against their work plans as a condition of receiving grant installment payments and of annual grant renewal.
- Participate in the SkillWorks evaluation by providing accurate and complete data to the evaluators in a timely manner and providing access to participants, employers, and other organizations providing services through the Workforce Partnership (including collecting such data as wages and demographic information for individual participants and any proposed outcome measures). The Partnership may be asked by the third-party evaluators to share its participant tracking database and/or client files.
- Participate in Capacity Building activities sponsored by SkillWorks, including periodic meetings of the grantees across the three SkillWorks systems change components, in order to leverage impact and learning across the three strategy areas.
- Develop multiple and diverse funding sources to reduce their dependence on a single revenue stream and increase their potential for long-term sustainability. In addition to sources available through SkillWorks, Workforce Partnerships should demonstrate employer support through financial and non-financial contributions and knowledge of public and private funding sources to supplement the SkillWorks grant.

### ***General Guidelines:***

Applications will consist of two sections: a partnership planning narrative and a financial plan. Attachments should not exceed 15 pages in total. Memoranda of Understanding and Letters of Commitment will NOT be counted against the page limit. Shorter proposals are encouraged if the scope of the proposed enterprise warrants it.

Applicants should send an email indicating their intent to submit a proposal to Loh-Sze Leung, SkillWorks Director, by January 20, 2006. (See Appendix A.) Please note that submission of an email of intent is not a requirement for proposal submission. However, technical assistance will be available for bidders as they develop their proposals, and an email of intent will help the funders to coordinate technical assistance prior to the proposal submission date.

Applicants must submit one original and five copies of their proposal by 5:00 p.m. on  
Tuesday, March 7, 2006 to:  
The Boston Foundation  
Attention: Loh-Sze Leung, SkillWorks Director  
75 Arlington Street, 10<sup>th</sup> Floor  
Boston, MA 02116  
In addition, submit one electronic copy to [lohsze.leung@tbf.org](mailto:lohsze.leung@tbf.org)

**Proposal Part A. Planning Grant Narrative**

**Please address each of the following items in detail.**

**1. Cover Sheet:** Using Appendix B, provide a cover sheet with the following information:

- The name of the lead agency or employer applying for the grant and contact information for the contact person;
- The names of all partners in your project (including at least one employer partner if the lead agency is not an employer), their contact information and organizational affiliations, and their roles in the project;
- The signature of the appropriate legal authority at your institution or agency.

**2. Partnership Composition:** Describe the members of the Planning Partnership and the role that each will play during the planning year and during the implementation phase (if that has been determined).

- Describe in the lead organization's background and expertise, especially with respect to community health workers, partnership development, and workforce development.
- How will workers' voices be represented by the Partnership?
- What other members do you intend to recruit during the planning period, and what are your reasons for including them?

From *each* partner, attach a letter of commitment that describes the role it will play and the reason for its involvement.

**3. Employer Challenges:** Describe the kind of employer partners who will be participating in the implementation project and why the project will focus on these employers. Describe the challenges they face with regard to hiring, retaining, and advancing Community Health Workers, as well as of direct care workers, administrative workers, and technicians. Explain how you anticipate this project will address these challenges, focusing on the strategies

described in Section III, Workforce Partnership Approaches for low- and moderate-income individuals, employers, and systems improvements. Please draw on the expertise of employers' financial managers, HR professionals, and department heads to describe factors such as:

- Recruiting costs;
- Potential disruption to a department's operation;
- Productivity;
- Customer service;
- Quality of Care; and
- Employer growth (if applicable).

4. **Community Health Worker Education Challenges:** Describe the specific group of Community Health Workers you intend to target through this project. Provide an analysis of their educational level, showing, if possible, how an individual's educational level affects his or her ability to receive a promotion. For this analysis, please address the following questions:

- Explain how the following issues affect the ability of Community Health Workers to perform their jobs: fundamentals of math; limited English ability; computer literacy; knowledge of the allied health delivery system, including the behavioral health system; and knowledge of the social service network.
- What other skill or knowledge gaps do you see? How do they affect the ability of Community Health Workers to do their jobs effectively?

5. **Systemic and Resource Challenges to Community Health Worker Advancement:**

Describe other challenges within allied health and/or workforce development that make it difficult for Community Health Workers to advance to family-sustaining wages. Address the availability of recognized education and training programs for Community Health Workers, the role of regulatory bodies, funding problems, and other challenges that you think have an effect on advancement opportunities.

6. **Anticipated Strategies:** Explain how you anticipate addressing the challenges described in questions 3, 4, and 5 using the three categories of interventions described in Section III. What strategies do you think will be important for your Workforce Partnership to adopt to help address these challenges? Please describe any existing or recent programs or resources that you would like to build on through this project.

7. **Work Plan:** Provide a detailed work plan for the proposed planning grant period, including proposed activities, start and end dates for each activity, and the individuals or organizations that will be responsible for managing each activity. This response may be presented in chart form. The ultimate goal for this planning process will be the development of a fundable, three-year, implementation business plan. Be sure to include the following tasks in your work plan:

- Solidify the partnership membership;
- Develop a governance and decision-making process;
- Develop a program management and staffing plan;
- Determine the specific goals and outcomes for the project;
- Design a program addressing career pathways with specific employer partners;
- Research Community Health Worker skill sets and competencies;

- Develop curriculum;
- Design a Community Health Worker recruitment and assessment process;
- Develop a participant tracking database; and
- Develop a budget for the three-year implementation grant.

8. **Vision of Success:** Imagine that your organization is now ten years into a successful, sustainable, career development program for Community Health Workers. Assume you have successfully addressed all external and internal funding issues. In a half page or less, please describe your program. How many employees do you reach? Which departments? What are the educational/career ladder tracks targeted by your program? What are your primary program activities? In another half page, please answer the following questions:

- How do you define success?
- What were the biggest organizational challenges you overcame to this point?
- Has the quality of service you provide improved? If so, how and why?
- Do your managers view frontline workforce development differently than they did ten years ago? If so, how?

***Proposal Part B. Planning Grant Financial Plan***

1. Please submit a ten-month budget for planning, organizing, and researching the development of a Workforce Partnership for Community Health Worker Advancement, with a narrative explaining the foundation for these costs. Be sure to plan for the staff and non-staff expenses related to the following:

- Oversight, management and coordination;
- Research and design;
- Employer outreach and coordination;
- Worker outreach and coordination;
- Educational institution engagement;
- Database design and development;
- Financial management;
- Facilities;
- Communications;
- Transportation and meeting costs;
- Equipment and supplies;
- Other costs (please list separately and define).

2. Show how any matching funds that you will commit to the planning process will be used.

3. Describe how your Workforce Partnership plans to supplement the SkillWorks Implementation grant budget to provide advancement services to workers and employers. Include how you will solicit and use:

- Employer contributions;
- Financial Aid;
- Public sector resources;
- Philanthropic resources (other than SkillWorks);
- Other resources.

## SECTION V: PROPOSAL REVIEW PROCESS

The funders will use a two-part proposal review process. First, proposals will be read and evaluated based on the criteria below. Then, the funders will interview Partnership teams that successfully address the written design criteria and conduct additional investigations to solicit the information needed to make funding decisions. Funding decisions will be based on the vote of the SkillWorks Funders Group.

### ***Selection Criteria:***

1. Evidence of commitment to:

- Engage employers and workers in planning structured work-based and peer learning for career advancement;
- Provide access to multiple career ladders for Community Health Worker advancement;
- Use innovative learning and training strategies for adult learners;
- Map and support employer-specific career ladders;
- Reward worker achievement with financial rewards, advancement, and/or academic credit or credential;
- Coordinate with educational institutions to increase access to education/training and develop Community Health Worker curriculum;
- Convene industry-wide peers to plan for Community Health Worker advancement industry-wide.

2. The ability of the lead agency to implement the planned strategies

3. Demonstrated understanding of the workforce development and health care system barriers to advancement for Community Health Workers

4. Organizational and leadership commitment to the proposed project



**APPENDIX B:  
PROPOSAL COVER SHEET**

**Lead Organization:** \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_  
Telephone & Email: \_\_\_\_\_  
Role in Project: \_\_\_\_\_

**Partner Organization(s): (add additional partners on separate sheet if necessary)**  
Name \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_  
Telephone & Email: \_\_\_\_\_  
Role in Project: \_\_\_\_\_

**Partner Organization:**  
Name \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_  
Telephone & Email: \_\_\_\_\_  
Role in Project: \_\_\_\_\_

**Partner Organization:**  
Name \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_  
Telephone & Email: \_\_\_\_\_  
Role in Project: \_\_\_\_\_

**Partner Organization:**  
Name \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_  
Telephone & Email: \_\_\_\_\_  
Role in Project: \_\_\_\_\_

**Partner Organization:**  
Name \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_  
Telephone & Email: \_\_\_\_\_  
Role in Project: \_\_\_\_\_

\_\_\_\_\_  
Signature/Title: Lead Organization

\_\_\_\_\_  
Date

**APPENDIX C:  
PROPOSAL TIMELINE**

<b>DATE</b>	<b>EVENT</b>	<b>COMMENTS</b>
Thursday, December 22, 2005	RFP available to bidders on the SkillWorks Web site <a href="http://www.skill-works.org">www.skill-works.org</a>	
Wednesday, January 11, 2006 3:00 – 5:00 p.m.	Bidder's Conference The Boston Foundation 75 Arlington Street, 10 <sup>th</sup> Floor Boston, MA 02116	Not mandatory for interested bidders to attend; for informational purposes only. Please RSVP to Megan Briggs Reilly at <a href="mailto:Megan.Briggs.Reilly@tbf.org">Megan.Briggs.Reilly@tbf.org</a>
Friday, January 20, 2006	Letter of Intent due to The Boston Foundation	Not mandatory for interested bidders to submit; for TA purposes. Submit electronic copy to <a href="mailto:lohsze.leung@tbf.org">lohsze.leung@tbf.org</a>
Tuesday, March 7, 2006	<b>PROPOSALS DUE AT THE BOSTON FOUNDATION BY 5:00 PM</b>	Please submit five copies and one original, and send one electronic copy to <a href="mailto:lohsze.leung@tbf.org">lohsze.leung@tbf.org</a>
March 17-22, 2006	Interviews with finalists	Appropriate staff members for the bidders must be available for interviews
April 5, 2006	Notification to awardees by mail	

## **APPENDIX D: POTENTIAL OUTCOMES FOR THE COMMUNITY HEALTH WORKER ADVANCEMENT PARTNERSHIP**

### *Individual Outcomes:*

- Community Health Workers attain higher wages.
- Community Health Workers attain higher skills.
- Community Health Workers reduce their personal debt and increase their assets.

### *Employer Outcomes:*

- Employers and educational institutions adopt career advancement models for Community Health Workers, such as:
  - An advancement model leading to promotions in the field and higher pay;
  - An administrative advancement model leading to jobs managing, administering Community Health Worker or other allied health programs and projects; and
  - A patient care advancement model leading to higher-paying clinical or technician positions.
- Concrete improvements in conditions of work for Community Health Workers, as demonstrated by:
  - Greater job stability;
  - Increasing wages and access to fringe benefits; and
  - Improved or expanded supervision, mentoring, and personal supports.

### *Systemic Outcomes:*

- A postsecondary curriculum bearing academic credit and leading to a Community Health Worker certificate or Associate's degree;
- Recognition of the contributions of the Community Health Worker job within the community health field, as demonstrated by:
  - Acceptance among employers, workers, and educational institutions of a standard set of core competencies;
  - Acceptance of standard job descriptions across employers;
  - Integration of Community Health Workers as part of the clinical team;
- Dissemination of best practices and the impact of the program to field; and
- Improved access to and quality of health care for under-served populations, as demonstrated by an independent "Return on Investment" analysis.

## APPENDIX E: SAMPLE COMMUNITY HEALTH WORKER JOB TITLES

Abuse Counselor	HIV Prevention Coordinator
Adult Case Manager	Home Care Worker
Bi-lingual Health Educator	Home Visitor
Bi-lingual Health Representative	Home-Based Clinician
Bi-lingual Family Advocate	Intake Specialist
Bi-lingual Intake Specialist	Interpreter
Case Coordinator	Maternal and Child Health Case Manager
Community Coordinator	Medical Representative
Community Liaison	Mental Health Worker
Community Outreach Worker	Nutrition Educator
Community Health Educator	Outreach Advocate
Community Health Representative	Outreach Case Manager
Community Outreach Manager	Outreach Coordinator
Community Social Worker	Parent Liaison
Counselor	Parent Aide
Educator	Patient Navigator
Family Advocate	Peer Advocate
Family Education Coordinator	Peer Leader
Family Support Worker	Promotor
Health Advisor	Promotora
Health Advocate	Promotor de Salud
Health Agent	Promotora de Salud
Health Assistant	Street Outreach Worker
Health Communicator	Youth Development Specialist
Health Educator	Youth Worker
Health Insurance Counselor	
HIV Peer Advocate	

## **APPENDIX F: COMMUNITY HEALTH WORKER ADVANCEMENT RESOURCE AND REFERENCE MATERIALS**

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Association, 128<sup>th</sup> Annual Meeting. November 14, 2000.  
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