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## Section 5: Training and Support Tools

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### Purpose

Training your program staff to serve as health educators, peer educators, or outreach staff is a crucial element in the success of your program.

The training and support tools consist of two components: A Program Tool and a Self-Assessment Tool to help you assess your current training and administrative support activities.

- *The Program Tool (Part 1)*, is designed to examine your current training and support practices, allowing you to assess selected elements for developing more effective training and administrative support activities.
- *The Self-Assessment Tool (Part 2)*, is a tool for education staff, which provides the opportunity to assess how comfortable and prepared your staff feel to teach or provide outreach services, and gives them a chance to share their views on the training and support they receive.
- If you use peer educators in your program, there are modified versions of each tool available. Contact your CPI Specialist or OFP Program Consultant if you are interested in obtaining copies of the peer educator versions.

### CPI Requirement

The CPI requirements for this tool are as follows:

- Complete both parts of the tool for the version you select (educator or outreach staff):
  - The Program Tool, AND
  - The Self-Assessment Tool

## Overview of Steps for these Tools

To use these tools, you will need to:

1. Determine which version of the tools to use
2. Have appropriate staff complete their assigned components: The Program Tool and the Self-Assessment Tool
3. Summarize your findings
4. Interpret the data and discuss program changes based on the data
5. Report your findings

## Materials for this Section

### CPI Tools

Use the version (Educator or Outreach) that matches your program activities best; I&E sites, use the FFP versions to maximize reimbursement, which are in Section 9.

- Health Educator Versions (Appendix 5A.1 and 5A.2)
- Outreach Staff Versions of the Tools (Appendix 5B.1 and 5B.2)
- Sample of Completed Training & Support Tools Tool (Appendix 5C)

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## *Program Tool (Part1)*

### Step 1: Complete the Training and Support

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#### Training and Support Program Tool\_Component 5A

This tool is designed to provide the program director or training coordinator an opportunity to assess current training and support practices, and identify areas for enhancing training and support. The *Training and Support Program Tool (Part 1)* is divided into three sections:

- Section A: The Type of Training Provided to Educators or Outreach Workers
- Section B: The Type of Support Provided to Educators or Outreach Workers
- Section C: Characteristics of Effective Education or Outreach Staff

There are many other important elements of training and support. For the purpose of the tool kit, however, the focus is limited to a few key elements drawn from the literature (see references at the end of this section).

#### Determine Who Will Complete the Tool

The training and support program tool should be completed by the person(s) responsible for overseeing and monitoring the educator or outreach staff. It is also recommended that the Program Director or Coordinator complete the tool as well.

## Complete the Tool

Here are the steps needed to complete the tool:

- Select the program and support training tool that is consistent with the staff used to implement your program [Health Educators (Appendix 5A.1); Outreach Staff (Appendix 5B.1)].
- Give a copy of the tool to the program staff person(s) responsible for training and overseeing the education or outreach staff.
- Have that person complete the tool individually following the instructions provided on the tool. Emphasize to staff completing the tool that it is important for them to fill out the tool based on their honest assessment of current practices. Emphasize this is a way for all of you to identify training and support areas that could be improved.

## Summary

After completing this step, all three sections of the *Program Tool* form should be complete and ready to summarize. Next, have the education or outreach staff complete the *Self-Assessment Tool* (Part 2).

## Step 2: Summarize Your Training and Support Program Tool Data

### Summarize Your Data

Start by looking at the responses in the three sections of the tool (i.e., training, support, characteristics), and then look at the responses overall to identify trends or patterns. Here is an example of how you might do this.

### Compute Responses to each Section on the Tool

If more than one person completed this tool, you can compute the average score for each item, which is discussed below. If only one person completed this tool, skip to “Summary” below.

### Example: Three program staff completed the items in Section A.

Sections A1 through C4 on the training and support tool have a five-option response scale so you can compute the average score for each item. Here is an example of how you might do this.

#### *Compute the Average Across People Completing the Tool*

- Add the point values of the selected answers from all program staff who answered item A5.
  - 2 people selected *Somewhat Well* (3 points each).
  - 1 person selected *Well* (4 points).
  - 2 people (3 points) + 1 person (4 points) = 10
- Divide this total by the number of people who answered the question.
  - 10 points divided by 3 people who answered = 3.33 (*Somewhat Well*)
- The maximum possible score of 5 points indicates that the program staff rated the current practice of adequately preparing the education or outreach staff to deliver the core elements of the curriculum as *Very Well*.
- The minimum score of 1 point indicates that the program staff rated the current practice of adequately preparing staff to deliver the core elements of the curriculum *Not Very Well*.

## Summary

- Repeat the above process for each item in each section.
- Record the average score next to each item on a blank copy of the tool.

After completing this step, you should have your training and support data summarized so that you can begin to identify common patterns. You also should have a list of possible changes that could be made to your training and support activities.

After your education or outreach staff complete the *Self-Assessment Tool*, be sure to complete the steps in Part 5B to summarize the data so that you can look across both sources of data to make final decisions about training and support refinements.

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## Step 3: Interpret Your Program Tool Data

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### What do you look for?

When interpreting your data, you want to focus on the common patterns in your results. Look at the results for each section. For example:

- What training and support areas (sections A and B on the tool) were rated Very well? Not Very Well?
- How many characteristics of effective health educators (section C on the tool) were true for all of your staff? Not true for any?
- Overall, what is working well and what is not?

Here are examples of the patterns you might observe.

### Positive Patterns

Training and support practices are working well if staff completing the tool provided high scores on the five-option scale questions related to training and support practices provided (scores of 4 or 5). For example:

- Current training practices were rated as Well to Very Well (score of 4 or 5) in preparing education staff to deliver the core elements of the curriculum.

### Areas Suggesting a Need for Improvement

There may be room for improvement to training and support in areas receiving moderate or low scores (average score of 3 or less), on the five-option scale questions. For example, you may want to refine your practices if you see these types of patterns:

- Training practices addressing training staff to deliver culturally relevant or developmentally appropriate activities and messages were rated Somewhat Well (score of 3).

## Look at Data From the Self-Assessment Tool

After your educator or outreach staff has completed the self-assessment tool, it is important to review and then compare their answers with the ratings on the training and support tool where the items overlap. This step can help you identify areas that are in agreement or disagreement.

Here are the steps to follow:

- Look across the results from the two tools side-by-side and identify the areas where there is *agreement* and areas where there is *disagreement* on the items that are similar on the two tools.
- Note: Not all of the items will overlap. The items from the Self Assessment Tool overlap most with Section A of the Training and Support Program Tool .
- Focus on the items where there is a difference between your ratings and how the educators are experiencing their training and support (particularly when you rate the level of training more positively than educators do).

## Plan Your Next Steps

After reviewing your data, take time to think about changes you may need to make in the training and support provided for your educator or outreach staff. It is ideal to discuss the results as a group. Here are some questions to consider:

- Which of the changes are most important for you to make? What makes these changes so important?
- Which changes will be the most difficult to make? What makes these changes difficult?
- Do you need more information or technical assistance to make any of the changes you identified? If so, what type of information and or assistance? Where can you get it?

There are many factors that could affect which refinements can be made (e.g., time and resources required to make and sustain the change). It may be helpful to summarize the changes you want to make, the resources needed to make the change, the benefits of making the change, and a timeline. Here's an example of what this might look like.

Desired Change	Things we need to make change	Benefits of making change	Timeline for making change

## Summary

After completing this step, you should have a sense of what aspects of training and support are working well and what areas could be strengthened to support and meet the needs of the educators.

**Ask yourself: *What changes do we want to make first to enhance our current training and support practices?***

## *Self Assessment Tool (Part2)*

### Step 1: Collect Educator Data

#### **Educator or Outreach Staff Self Assessment Tool**

This tool is designed to give educators or outreach staff a chance to rate how comfortable and prepared they feel to implement a curriculum or conduct outreach and referral activities, and to identify additional training and support needs. You may already collect this information in a different way. If not, consider the following points to help you determine if you could learn more from using this tool.

- If you have new staff or high staff turn over, consider collecting self-assessment data from each health educator after they have implemented the curriculum for the first time.
- If you are implementing a curriculum or new outreach strategies that you just started using in the last few years, or if you are working in a new setting, consider collecting self-assessment data after your educators or outreach workers have been in the field with the new material one or two times.
- To assist in your efforts to promote clinical linkages, consider collecting self-assessment data to assess outreach and referral capacity.

#### **Have Staff Record Information on the Self- Assessment Tool**

Here are the steps needed to complete the tool:

- Select the self-assessment tool appropriate for your staff: Health Educators (Appendix 5A.2); Outreach Staff (Appendix 5B.2).
- Make one copy of the self-assessment tool for each staff conducting sessions.
- Have each staff work individually to complete the tool. Emphasize that their answers will help you get more information about ways to improve the training and support provided.

## Step 2: Summarize Staff Self Assessment Data

### Summarize Your Data

Start by looking at the staff members' answers in each area (i.e., comfort, preparedness, adequacy of training and support), and then look at their answers overall to identify trends or patterns.

### Compute Level of Educator or Outreach Staff Comfort and Preparedness and the Adequacy of the Training Provided

The first three sections (Perceived Comfort, Preparedness, and Adequacy of Training) on the self-assessment tool have a five-option scale. If more than one staff completed this tool, you can compute the average score for each item. If only one staff completed the tool, skip to "Summary" below. Here is an example of how you can calculate the average score if more than one person completed the tool.

### Example: Three staff answered item 1.

- Add the point values of the selected answers from all staff who answered item 1.
  - 2 staff members selected *Somewhat Comfortable* (3 points each).
  - 1 staff member selected *Comfortable* (4 points).
  - 2 people (3 points) + 1 person (4 points) = 10
- Divide this total by the number of people who answered the question.
  - 10 points divided by 3 people who answered = 3.33 (*Somewhat Comfortable*)
- The maximum possible score of 5 points indicates that the staff members feel very comfortable working with their assigned population.
- The minimum score of 1 point indicates that the staff members do not feel at all comfortable working with their assigned population.
- Repeat the above process for each item.

### Compute Level of Staff Training Needs in Facilitation Skills

Items in the section on *Facilitation Skills and Training Needs* have a four-option scale. Repeat the process described above for calculating an average score using the four-option scale.

## Note Additional Areas of Training and Support Identified

The last two items are open-ended items. Create a list of staff members' answers to each question and cluster similar answers together.

## Summary

After completing this step, you should have your self-assessment data summarized so that you can begin to identify common patterns and how you might make training and support refinements.

Ask yourself: *Do I have input from all the health educators or outreach staff?*

## Step 3: Interpret Your Data

### What do you look for?

When interpreting your data, you want to focus on the more common patterns in your results. For example:

- In what areas did staff report feeling most comfortable? Least comfortable?
- In what areas did staff report feeling most prepared? Least prepared?
- Did educators or outreach staff identify any new areas in which they need training?
- Overall, what is working well and what is not?

Here are examples of the patterns you might observe.

### Positive Patterns

Training and support activities are working well if your staff provided high average scores on the five-option scale questions related to educators' comfort and preparedness, and related to the adequacy of the training provided. For example:

- According to the staff, their comfort and preparedness were high across the areas included on the self-assessment tool.
- The staff noted that their training and support needs are generally being met by the existing training activities.

### Patterns Suggesting a Need for Improvement

There may be room for improvement if your staff provided moderate or low scores (average score of 3 or less), on the five-option scale questions, or if they routinely noted similar training and support needs.

### Examples

*Educators' or outreach workers' average score on the five-option scale used to rate their preparedness to work with the population they are teaching was 2.50.*

- *To address this, you may want to have staff co-facilitate the program or outreach session with another staff member who is more experienced with the population so they can see a positive model. You also could provide professional development opportunities for your educators or outreach workers that will help them learn strategies for working more effectively with their assigned population (e.g., if they have experience with youth but are now working with adults, they may need additional training on adult learning).*

*The majority of educators or outreach staff reported that they need more opportunities to share their experiences addressing problematic issues.*

- *To address this, you may want to schedule an additional program staff meeting each month, or create a listserv on which staff members can post their questions and provide one another with answers on a regular basis.*

If you see patterns that suggest a need for training and support improvement, it is ideal to discuss the results as a group, encouraging discussion of the results and suggestions for addressing areas needing improvement.

## **Look At Data from the Training and Support Program Tool**

It is important to compare the data from the Self-Assessment Tool to the Training and Support Program Tool to identify areas of agreement and disagreement. Refer to Step 3 for the Training and Support Program Tool discussed earlier.

## **Summary**

After completing this step, you should have a sense of what aspects of training and support are working well and what areas could be strengthened or revised to meet the needs of the educators.

*Ask yourself: What changes can I make to improve training and support for my staff? What resources will I need to make these changes?*

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## Step 4: Report Your Findings

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### Prepare CPI Summary

#### Prepare to summarize your CPI data

In general, include the following as you are summarizing your CPI data.

- Who was involved in completing the training and support tools?
- What process was used to complete the tools (e.g., did your site work as a group)?
- What did you learn from the training and support data you collected?
- What changes you are most likely to make based on what you learned from the training and support data you collected?
- When will you implement the changes and how will you assess them?

### CPI Reporting Requirements and Next Steps

You will use this information when completing your on-line CPI summary at the end of the project year. Refer to Section 1, **CPI Requirements** for CPI due dates and instructions for *Completing CPI Summary Form* and implementing and assessing changes identified through CPI process.

## References

California Adolescent Sexual Health Work Group (ASHWG). Core Competencies for Providers of Adolescent Sexual and Reproductive Health (September, 2008).

Centers for Disease Control and Prevention, HIV/AIDS Prevention Research Synthesis Project. Compendium of HIV Prevention Interventions with Evidence of Effectiveness, November (1999). [pages 3-2 to 3-50]

Goldsmith, M., & Reynolds, S. (1997). Step by step to peer health education programs: a planning guide. Santa Cruz: ETR Associates.

Hedgepeth, E., & Helmich, J. (1996). Teaching about sexuality and HIV. Principals and methods for effective education. New York: New York University Press.

Heltizer, D., Soo-Jin, Y., Wallerstein, Garcia-Velarde, L.D. (2000). The role of process evaluation in the training of facilitators for an adolescent health education program. American Journal of School Health, 70 (4):141-147.

Peterson, F.L., Cooper, R.J., & Laird, J.M. (2001). Enhancing teacher health literacy in school health promotion: A vision for the new millennium. American Journal of School Health, 71 (4): 138-144.

Wagman, E., Cooper, L., Todd, K. (1981). Family life education. Teacher training manual. Santa Cruz: Network Publications.

**Training and Support Program Tool\_Health Educator Version\_Part 1**

<b>Section A: General Information on Current Training Practices</b>	
<b>Instructions:</b> Please provide the following information about the training you currently provide for your health education staff. For each of the statements listed below, rate how well your current training practices address each area. Circle one response for each statement.	
<b>A1.</b> How many hours of training do you currently provide to your educators to prepare them to deliver your curriculum?	
<b>A2.</b> Please describe how you train your educators to implement your curriculum (e.g., methods used such as videos, paired-practice, role plays, mentoring, etc.).	
<b>A3.</b> Would you recommend any of the materials you use to other sites?	_____Yes      _____No      If yes, which ones would you recommend?
<b>A4.</b> Please indicate what topics are covered during your trainings.	

<b>Section A: Current Training Practices</b>							
<b>Instructions:</b> Think about the training you currently provide for your health education staff. For each of the statements listed below, rate how well your current training practices address each area. Circle one response for each statement.							
Type of Training Provided to Health Education Staff	Example	How well does this happen at your agency?					List 1 –2 changes you can make to enhance your Training and Support efforts (practices) in this area.
		Not Well		Some-what Well		Very Well	
<b>A5.</b> Staff are adequately prepared to deliver the core elements of the curriculum.	Staff receive formal training (e.g., 2-3 days) on the goals and objectives, core elements, and delivery methods of the curriculum. The training also provides opportunities for staff to practice delivering the curriculum, and discuss other important issues for effective implementation.	1	2	3	4	5	

<b>Section A: Current Training Practices</b>							
<b>Instructions:</b> Think about the training you currently provide for your health education staff. For each of the statements listed below, rate how well your current training practices address each area. Circle one response for each statement.							
Type of Training Provided to Health Education Staff	Example	How well does this happen at your agency?					List 1 –2 changes you can make to enhance your Training and Support efforts (practices) in this area.
		Not Well		Some-what Well		Very Well	
<b>A6.</b> Staff are given clear expectations to adhere to curriculum content and program delivery as planned to the best of their ability.	The core elements of the intervention are clearly defined and maintained in the delivery of the curriculum. Staff follow a curriculum manual that identifies the core elements.	1	2	3	4	5	
<b>A7.</b> Staff are adequately trained to deal with/address sensitive and controversial issues of the content.	Staff are trained to maintain confidentiality, respond to parent inquires, address disclosure issues, and create a comfortable/safe atmosphere.	1	2	3	4	5	
<b>A8.</b> Staff receive training about the population and/or setting being served.	Staff are aware of the various factors that might affect how the curriculum is received by the population (e.g., cultural, developmental), and are able to use that information when implementing (e.g., use more visuals for lower literacy populations).	1	2	3	4	5	
<b>A9.</b> Staff are trained to use a variety of interactive teaching strategies and methods that address different learning styles.	Staff are skilled in using multiple teaching strategies, such as lecture, large and small group discussion, role-plays, paired group activities, etc. Staff have the ability to adjust activities to learning needs of population.	1	2	3	4	5	
<b>A10.</b> Staff receive booster trainings on a regular basis (e.g., every year).	Staff receive updated information addressing the core elements of the curriculum, implementation, and receive up-to-date health information as it relates to the content.	1	2	3	4	5	

<b>Section B: Support</b>							
<b>Instructions:</b> Think about the type of support you currently provide to your health education staff. For each statement, rate how well your current support practices address each area. Circle one response for each statement.							
Type of Support Provided to Health Education Staff	Example	Rate how well this happens at your agency.					List 1 –2 changes you can make to enhance your Training and Support in this area.
		Not Well		Some-what Well		Very Well	
<b>B1.</b> Opportunities for observation and feedback.	The project coordinator or lead health educators observe curriculum delivery performance of other health educators and provide feedback on ways to improve their delivery.	1	2	3	4	5	
<b>B2.</b> Opportunities to debrief with other educators.	There are regular group discussions with other health educators to discuss implementation issues.	1	2	3	4	5	
<b>B3.</b> Opportunities for professional development.	There are opportunities for health educators to receive additional training or attend professional conferences to improve their skills.	1	2	3	4	5	
<b>B4.</b> Opportunities for educators to assess their individual needs regarding training and support and share these with their supervisors.	There are mechanisms for staff to reflect on specific needs relevant to delivery of the curriculum, content, population or setting, culture, age-level, etc., and identify their training and support needs.	1	2	3	4	5	
<b>B5.</b> Mechanisms to provide educators with access to up-to-date health information relevant to the core content areas of the curriculum.	Staff have easy access to or receive regular updates on health-related information or statistics relevant to the core content areas from reliable sources.	1	2	3	4	5	

<b>Section C: Health Educator Characteristics</b>							
<b>Instructions:</b> Think about the characteristics of your health education staff. Below is a list of key characteristics of effective health educators. For each statement listed below, rate how true these characteristics are of your health education staff. Circle one response for each statement.							
Characteristics/Skills of Effective Health Educators	Example	How true is this for your health educators?					List 1 –2 changes you can make to your training and support practices to make this more true for all educators at your agency in this area.
		Not True For Any		True For Some		True For All	
<b>C1.</b> Experience with population, group or setting being served.	Sensitive and experience with cultural and social diversity. Use teaching methods that are culturally appropriate.	1	2	3	4	5	
<b>C2.</b> Ability to relate to population and or setting being served.	Establish trust and rapport, and are viewed as credible among the population, community, etc.	1	2	3	4	5	
<b>C3.</b> High level of comfort with content, including sensitive and controversial topics.	Establish ground rules, create safe atmosphere, use appropriate language, etc.	1	2	3	4	5	
<b>C4.</b> Personal beliefs and values are not in conflict with key messages of curriculum.	Awareness of his/her values, and the impact they may have on teaching about sexuality.	1	2	3	4	5	

**Health Educator Self-Assessment Tool\_Part2**

Since what date have you been a health educator with this agency? \_\_\_\_\_  
 (month) (year)

At which site do you teach? \_\_\_\_\_

**Directions:** For questions 1-21, please select a rating from 1 to 5, or select NA if a question does not apply to you.

Perceived Comfort						
How comfortable do you feel...	Not at all comfortable		Somewhat comfortable		Very comfortable	Not applicable
1. working with the population you are teaching?	1	2	3	4	5	NA
2. with the content of the curriculum you are teaching?	1	2	3	4	5	NA
3. with the teaching strategies (e.g., lecture, small group discussions, skill building activities, etc.) you are using to deliver the curriculum?	1	2	3	4	5	NA
4. creating a safe environment that allows participants to take part in the discussions?	1	2	3	4	5	NA
5. addressing classroom management issues (e.g., disruptive behavior by participants)?	1	2	3	4	5	NA
6. addressing controversial or sensitive topics that your participants may bring up?	1	2	3	4	5	NA
7. providing one-on-one risk assessment/education?	1	2	3	4	5	NA
Perceived Preparedness						
How prepared do you feel to...	Not at all prepared		Somewhat prepared		Very prepared	Not applicable
8. work with the population you are teaching?	1	2	3	4	5	NA
9. teach the content of the curriculum you are teaching?	1	2	3	4	5	NA
10. use the teaching strategies (e.g., lecture, small group discussions, skill building activities, etc.) you are using to deliver the curriculum?	1	2	3	4	5	NA
11. create a safe environment that allows participants to take part in the discussions?	1	2	3	4	5	NA
12. address classroom management issues (e.g., disruptive behavior by participants)?	1	2	3	4	5	NA
13. address controversial or sensitive topics that your participants may bring up?	1	2	3	4	5	NA
14. providing one-on-one risk assessment/education?	1	2	3	4	5	NA

Perceived Adequacy of Training						
How adequate is the training you receive to...	Not at all adequate		Somewhat adequate		More than adequate	Not applicable
15. work with the population you are teaching?	1	2	3	4	5	NA
16. teach the content of the curriculum you are teaching?	1	2	3	4	5	NA
17. use the teaching strategies (e.g., lecture, small group discussions, skill building activities, etc.) you are using to deliver the curriculum?	1	2	3	4	5	NA
18. create a safe environment that allows participants to take part in the discussions?	1	2	3	4	5	NA
19. address classroom management issues (e.g., disruptive behavior by participants)?	1	2	3	4	5	NA
20. address controversial or sensitive topics that your participants may bring up?	1	2	3	4	5	NA
21. provide one-on-one risk assessment/education?	1	2	3	4	5	NA

*Directions:* For questions 22-27, please select a rating from 1-4 to rate your need for additional training. Select NA if a question does not apply to you. Your answers will help your agency plan for future training opportunities.

Facilitation Skills: Training Needs					
I could benefit from training in the following skill area (s):	Very little need			Very high need	Not applicable
22. Listening effectively (e.g., look at the person who is talking, do not interrupt, check for understanding/reflect back).	1	2	3	4	N/A
23. Functioning effectively as a facilitator (e.g., creating a safe environment, establishing ground rules, connecting with participants).	1	2	3	4	N/A
24. Managing large group discussions (e.g., asking open-ended questions, non-verbal techniques to encourage participation).	1	2	3	4	N/A
25. Managing small group activities (e.g. role plays, paired activities).	1	2	3	4	N/A
26. Classroom management (e.g., keeping participants engaged, handling disruptions).	1	2	3	4	N/A
27. Recognizing and handling sensitive issues and questions (e.g., disclosures issues).	1	2	3	4	N/A

28. Please identify one or two ways that additional training could enhance your delivery of this curriculum with this population/in this setting (e.g., specific professional development opportunities that would be helpful).
29. Please identify one or two ways that additional support could enhance your delivery of this curriculum with this population/in this setting (e.g., more frequent program staff meetings in which health educators can share their experiences, solutions to problems, etc. with one another).

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### Training and Support Program Tool\_Part1 Outreach Staff Version

<b>Section A: Training Provided to Outreach Staff</b>							
<b>Instructions:</b> Think about the training you currently provide for your outreach staff. For items A1 to A4 provide information on the hours, approach, and topics you use. For each of the statements listed below, rate how well your current training practices address each area. Circle one response for each statement.							
<b>A1.</b> How many hours of training do you currently provide to your outreach staff to prepare them to conduct informational presentations/outreach activities?	<i>Please be specific:</i> Approximate number of hours per month: _____ or per year: _____						
<b>A2.</b> Please describe how you train your outreach staff to conduct outreach and referral activities (e.g., methods used such as videos, paired-practice, role plays, mentoring, on the job training, etc.).							
<b>A3.</b> Would you recommend any of the materials/methods you use to other sites?	_____ Yes      _____ No      If yes, which ones would you recommend?						
<b>A4.</b> Please indicate what topics are covered during your trainings.							
Type of Training Provided to Outreach Staff	Example	How well does this happen at your agency?					List 1 –2 changes you can make to enhance your Training and Support efforts (practices) in these areas.
		Not Well		Some-what Well		Very Well	
<b>A5.</b> Staff are adequately prepared to conduct outreach and referral activities.	Staff receive formal training on the goals and objectives and core elements of the outreach and referral activities. The training also provides opportunities for staff to practice outreach strategies and referral procedures, and discuss other important issues for effective outreach activities.	1	2	3	4	5	
<b>A6.</b> Staff are given clear expectations to adhere to outreach and referral activities as planned to the best of their ability.	The core elements of outreach and referral activities are clearly defined and maintained. Staff follow a procedure manual that outlines outreach and referral activities.	1	2	3	4	5	

Type of Training Provided to Outreach staff	Example	How well does this happen at your agency?					List 1 –2 changes you can make to enhance your Training and Support efforts (practices) in these areas.
		Not Well		Some-what Well		Very Well	
<b>A7.</b> Staff are adequately trained to deal with/address sensitive and controversial issues.	Staff are trained to maintain confidentiality, protect private information, and create a comfortable/safe atmosphere.	1	2	3	4	5	
<b>A8.</b> Staff receive training specific to the population and/or setting being served.	Staff are aware of the various factors that might affect how the pregnancy prevention, educational messages, and reproductive health service information is received by the population (e.g., faith, cultural, developmental), and are able to use that information when conducting outreach.	1	2	3	4	5	
<b>A9.</b> Staff are trained to use a variety of outreach techniques.	Staff are trained/skilled in using a variety of outreach strategies (e.g., one-to-one street outreach, community outreach, individual education, small group education).	1	2	3	4	5	
<b>A10.</b> Staff are trained to provide one-on-one counseling that may lead to a referral for clinical services.	Staff are trained to provide one-to-one counseling on risk assessment, and risk reduction. Staff are trained on referral procedures to clinical services (may include transportation and follow-up).	1	2	3	4	5	

<b>Section B: Support Provided to Outreach Staff</b>							
<b>Instructions:</b> Think about the type of support you currently provide to your outreach staff. For each statement, rate how well your current support practices address each area. Circle one response for each statement.							
Type of Support Provided to Outreach Staff	Example	How well does this happen at your agency?					List 1 –2 changes you can make to enhance your Training and Support in these areas.
		Not Well		Some-what Well		Very Well	
<b>B1.</b> Opportunities for observation and feedback.	The outreach coordinator observes informational presentations or outreach activities by outreach staff and provides feedback on ways to improve the presentations/outreach strategies.	1	2	3	4	5	
<b>B2.</b> Opportunities to debrief with other outreach staff.	There are regular group discussions with other outreach staff to discuss outreach strategies.	1	2	3	4	5	
<b>B3.</b> Opportunities to debrief with a clinical supervisor (expert).	Outreach staff have opportunities to debrief with a clinical supervisor to discuss strategies and challenging situations regarding medical or social/emotional issues that arise during outreach.	1	2	3	4	5	
<b>B3.</b> Opportunities for professional development.	There are opportunities for outreach staff to receive additional training or attend professional conferences to improve their outreach skills and their knowledge level of content.	1	2	3	4	5	
<b>B4.</b> Opportunities for staff to assess their individual needs regarding training and support and share these with their supervisors.	There are mechanisms for staff to reflect on specific needs relevant to outreach and referral strategies, and identify their training and support needs.	1	2	3	4	5	
<b>B5.</b> Mechanisms to provide outreach staff with access to up-to-date health information relevant to the core content areas of outreach and referral activities.	Staff have easy access to or receive regular updates on reproductive and contraceptive health-related information or statistics from reliable sources.	1	2	3	4	5	

<b>Section C: Characteristics/Skills of Outreach Staff</b>							
<b>Instructions:</b> Think about the characteristics of your outreach staff. Below is a list of characteristics of community outreach workers. For each statement listed below, rate how true these characteristics are of your outreach staff. Circle one response for each statement.							
Characteristics/Skills of Outreach Staff	Example	How true is this for your outreach staff?					List 1 –2 changes you can make to your training and support practices to make this more true for all outreach staff at your agency in these areas.
		Not True For Any		True For Some		True For All	
<b>C1.</b> Experience/knowledge of community served.	Sensitive to and experience with cultural and social diversity. Use outreach strategies that are culturally appropriate. Informed about what’s happening within the community (e.g. read local paper, attend community meetings, etc).	1	2	3	4	5	
<b>C2.</b> Strong interpersonal skills.	Ability to relate to people, establish trust and rapport, and are viewed as credible among the population, community, etc. Other interpersonal skills include persistence, advocacy skills and patience.	1	2	3	4	5	
<b>C3.</b> Strong communication skills.	Ability to listen, communicate and share information about health information and resources.	1	2	3	4	5	
<b>C4.</b> High level of comfort with content, including sensitive and controversial topics.	Establish ground rules, create safe atmosphere, use appropriate language, etc. Ability to create a safe environment that allows youth to take part in discussions	1	2	3	4	5	
<b>C5.</b> Personal beliefs and values are not in conflict with key messages of health education information being presented.	Awareness of his/her values, and the impact they may have on providing information about sexuality, reproductive health and contraceptive services.	1	2	3	4	5	

**Outreach Staff Self-Assessment Tool\_Part 2**

Since what date have you been an outreach worker with this agency? \_\_\_\_\_ (month) \_\_\_\_\_ (year)

*Directions:* For questions 1-24, please select a rating from 1 to 5, or select NA if a question does not apply to you.

Perceived Comfort						
How comfortable do you feel...	Not at all comfortable		Somewhat comfortable		Very comfortable	Not applicable
1. conducting outreach activities (e.g., health education at community events, health fairs, street outreach etc.)?	1	2	3	4	5	NA
2. with the content of the health education presentations you are providing?	1	2	3	4	5	NA
3. creating a safe environment that allows youth to take part in discussions?	1	2	3	4	5	NA
4. with confidentiality and protecting private information that youth may disclose?	1	2	3	4	5	NA
5. addressing controversial or sensitive topics that youth may talk about?	1	2	3	4	5	NA
6. providing one-on-one risk assessment/counseling that may lead to a referral for clinical services?	1	2	3	4	5	NA
7. providing referrals to clinical services?	1	2	3	4	5	NA
8. developing teen pregnancy prevention flyers/brochures for community awareness and mobilization (e.g., community events, advocacy or media presentations).	1	2	3	4	5	NA
Perceived Preparedness						
How prepared do you feel...	Not at all prepared		Somewhat prepared		Very prepared	Not applicable
9. conducting outreach activities (e.g., health education at community events, health fairs, street outreach etc.)?	1	2	3	4	5	NA
10. with the content of the health education presentations you are providing?	1	2	3	4	5	NA
11. creating a safe environment that allows youth to take part in discussions?	1	2	3	4	5	NA
12. with confidentiality and protecting private information that youth may disclose?	1	2	3	4	5	NA

<b>Perceived Preparedness (Cont.)</b>						
<b>How prepared do you feel...</b>	<b>Not at all prepared</b>		<b>Somewhat prepared</b>		<b>Very prepared</b>	<b>Not applicable</b>
13. addressing controversial or sensitive topics that youth may talk about?	1	2	3	4	5	NA
14. providing one-on-one risk assessment/counseling that may lead to a referral for clinical services?	1	2	3	4	5	NA
15. providing referrals to clinical services?	1	2	3	4	5	NA
16. developing teen pregnancy prevention flyers/brochures for community awareness and mobilization (e.g., community events, advocacy or media presentations).	1	2	3	4	5	NA
<b>Perceived Adequacy of Training</b>						
<b>How adequate is the training you receive for...</b>	<b>Not at all adequate</b>		<b>Somewhat adequate</b>		<b>More than adequate</b>	<b>Not applicable</b>
17. conducting outreach activities (e.g., health education at community events, health fairs, street outreach etc.)?	1	2	3	4	5	NA
18. with the content of the health education presentations you are providing?	1	2	3	4	5	NA
19. creating a safe environment that allows youth to take part in discussions?	1	2	3	4	5	NA
20. with confidentiality and protecting private information that youth may disclose?	1	2	3	4	5	NA
21. addressing controversial or sensitive topics that youth may talk about?	1	2	3	4	5	NA
22. providing one-on-one risk assessment/counseling that may lead to a referral for clinical services?	1	2	3	4	5	NA
23. providing referrals to clinical services?	1	2	3	4	5	NA
24. developing teen pregnancy prevention flyers/brochures for community awareness and mobilization (e.g., community events, advocacy or media presentations).	1	2	3	4	5	NA

*Directions:* For questions 25-31, please select a rating from 1-4 to rate your need for additional training. Select NA if a question does not apply to you. Your answers will help your agency plan for future training opportunities.

<b>Facilitation Skills: Training Needs</b>					
<b>I could benefit from training in the following skill area (s):</b>	<b>Very little need</b>			<b>Very high need</b>	<b>Not applicable</b>
25. Communication skills (e.g., active listening, verbal/non-verbal skills, conflict negotiation, etc.).	1	2	3	4	N/A
26. Problem solving skills (e.g., dealing with client resistance, helping clients access services, and overcoming barriers to seeking services, etc.)	1	2	3	4	N/A
27. Functioning effectively as an outreach worker (e.g., creating a safe environment, establishing ground rules, connecting with youth).	1	2	3	4	N/A
28. Providing risk assessment/counseling.	1	2	3	4	N/A
29. Conducting outreach activities (e.g., health education at community events, health fairs, street outreach etc.)?	1	2	3	4	N/A
30. Ways to gain credibility, visibility or acceptance when providing outreach activities.	1	2	3	4	N/A
31. Recognizing and handling sensitive issues and questions (e.g., confidentiality of disclosures, protecting private information).	1	2	3	4	N/A

32. Please identify one or two ways that additional training could enhance your outreach and referral activities with the population that you serve (e.g., specific professional development opportunities that would be helpful).

33. Please identify one or two ways that additional support could enhance your outreach and referral activities with the population that you serve (e.g., more frequent program staff meetings in which outreach staff can share their experiences, solutions to problems, etc. with one another).