

National Health Center Training and Technical Assistance (T/TA) Needs Assessment 2023 Listening Moments Summary Report

Issued January 2024





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22 National Training and Technical Assistance Partners (NTTAPs)

- Association of Asian Pacific Community Health Organizations (AAPCHO)
- Association of Clinicians for the Underserved (ACU) Star2 Center
- Capital Link
- Community Health Center, Inc. (Moses/Weitzman Health System)
- Corporation for Supporting Housing
- Farmworker Justice
- National LGBTQIA+ Health Education Center (The Fenway Institute)
- Health Partners on IVP + Exploitation (Futures Without Violence)
- Health Outreach Partners
- Health Information Technology, Evaluation, and Quality Center (HITEQ)
- MHP Salud
- Migrant Clinicians Network
- National Association of Community Health Centers
- National Center for Equitable Care for Elders
- National Center for Medical Legal Partnerships
- National Center for Farmworker Health
- National Center for Health in Public Housing
- National Healthcare for the Homeless Council
- National Nurse-Led Care Consortium
- National Network for Oral Health Access
- Renaye James Healthcare Advisors
- School-Based Health Alliance

Partners + Contributors

- NTTAP Needs Assessment Working Group
- Georgetown University Center for Education in Maternal and Child Health/Health Center Resource Clearinghouse Contractor
- Idea 360
- North Carolina Community Health Center Association
- SASU Project Management



Purpose + Background

In Summer/Fall 2023, the National Association of Community Health Centers (NACHC), in collaboration with the National Training and Technical Assistance Partners (NTTAPs), coordinated “Listening Moments” to provide opportunities for community health center workforce to provide input on training and technical assistance (T/TA) needs and meet the Health Resources and Services Administration’s (HRSA) Bureau of Primary Health Care (BPHC) NTTAP cooperative agreement requirements regarding the development and implementation of a national community health center T/TA needs assessment (T/TA Needs Assessment).

The aforementioned T/TA Health Center Needs Assessment informs the development of T/TA requested by the community health center workforce to advance access, quality and impact. Community health centers assessed include Federally Qualified Health Centers (FQHCs) and Look-Alikes.

Utilizing a human (workforce)-centered design approach, Listening Moments’ methodology allowed for the collection of information from diverse workforce roles, locations, and learners via both in-person and virtual opportunities in English and Spanish to inform the larger T/TA Needs Assessment development and launch planned for 2024/2025. Input included:

Listening Moment Metrics

- Community Health Center Location/Size/Services
- Workforce/Respondent’s Role
- Whether T/TA needs are role-based, geography-based, or topic-based
- Preferred modalities + scheduling for T/TA offerings
- Current + emerging T/TA needs

This report summarizes three planned Listening Moment “events” and their development, implementation, and findings, as well as next steps in utilizing the information gleaned from these efforts. **Listening Moment event types included either a Listening Moment Pop Up Wall (Pop Up Wall) or Virtual T/TA Listening Moment.**

Listening Moment Events + Schedule

1) Pop Up Wall at Community Health Institute (CHI) Conference + Expo August 2023 San Diego, CA

2) Pop Up Wall at Financial, Operations Management/ Information Technology (FOM/IT) Conference + Expo October 2023 Las Vegas, NV

3) Virtual T/TA Listening Moment in English/Spanish July - December 2023 via Health Center Resource Clearinghouse



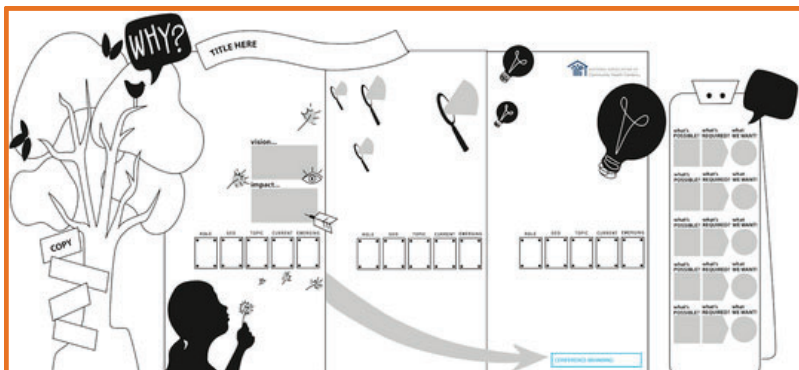
Development + Implementation

Community health center feedback from the implementation of the 2021 National T/TA Needs Assessment identified that the health center workforce were in search of a more meaningful way to share their feedback on T/TA needs and opportunities. From this, **NACHC developed and hosted a June 2023 Learning Collaborative** where community health center, Primary Care Association, Health Center Controlled Network, and NTTAP teams had the opportunity to learn about immersive listening, a method of collecting information beyond surveys or questionnaires by leaning into the authentic experiences and emotions of their staff. The Listening Moments approach **offered the opportunity to tap into previously unspoken needs and harness collective imagination** via the inspiring design and guided facilitation of an in-person Pop Up Wall structure and a Virtual T/TA Listening Moment venue.

Pop Up Wall Design, Marketing, + Implementation

To develop the in-person Pop Up Wall events, NACHC partnered with Idea 360, a contractor who specializes in “bringing visual learning and the facilitation process together to activate creative business and community strategies that engage the individual along with the entire system.” Over several weeks in early Summer 2023, numerous iterations of graphics and key information gathering elements were designed, resulting in a mobile in-person standalone wall and sandwich board pairing for facilitation at various 2023 events where community health center workforce members were in attendance.

Pop Up Wall Concept + Final Product



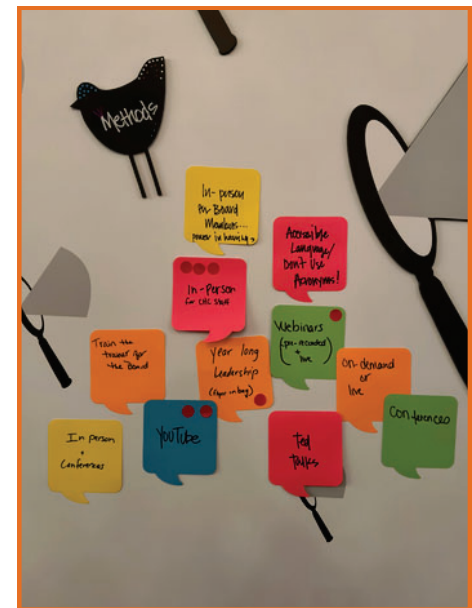
Pop Up Wall information was facilitated and collected by staff from four NTTAP organizations to ensure that community health center respondents’ unique voices and subject matter expertise were captured in a conversational/easy to access manner. An extensive Facilitators Guide (see Appendices) was provided to those NTTAP staff facilitating the Pop Up Wall events along with a virtual training provided by NACHC staff, beforehand.

Key questions asked at the Listening Moment Pop Up Wall included:

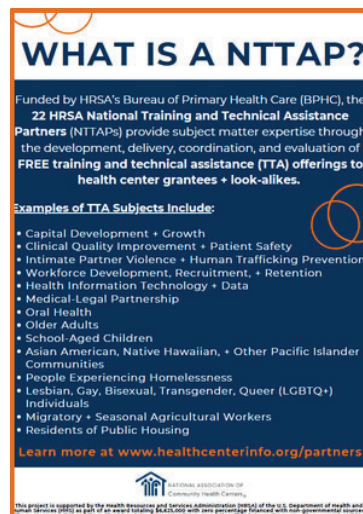
- Where is your community health center located + what is your role?
- Are the 2021 National T/TA Needs Assessment Top Needs still relevant and/or a priority?
- Where are there training gaps [e.g., topics, special populations, modality, etc.]
- What T/TA offerings are currently working or successful?
- What types/modes of T/TA are preferred (e.g., learning collaborative, videos, etc.)
- Are we evaluating the right things + are the evaluation questions useful for obtaining feedback?
- What are emerging + urgent needs that that NTTAPs should prioritize for T/TA development/delivery?
- How does the above align with the HRSA Health Center Excellence Framework?

To capture Pop Up Wall respondents' location and role, individuals were offered small colored dots, each representing a different occupational role, to place on a map located on the sandwich board. Then, respondents were engaged in conversation at the Pop Up Wall and encouraged to add sticky notes with their feedback in those sections or areas where they had ideas or comments to share. If a respondent agreed with another individual's feedback on the wall, they had the opportunity to "up-vote" that item with a sticker (see image to the right).

At the end of each event, NTTAP staff took photos of the Pop Up Wall and sandwich board for documentation and sticky notes were removed and tagged to their corresponding Listening Moment Pop Up Wall section for data entry and analysis.



Pop Up Wall Marketing



In addition to the Pop Up Wall being placed in prominent areas at conferences, Listening Moment events were also marketed via **advertisements in conference programs and apps, speaker reminders during general sessions, and signage near the Pop Up Wall and around the conference** using posters on easels (see below images). Those who did not have the time to participate in the Pop Up Wall or who felt more comfortable, were offered the opportunity to complete the Virtual T/TA Listening Moment via a QR code on the posters. (See Appendices for all full-sized marketing materials.)

Virtual T/TA Needs Assessment Design, Marketing, + Implementation

In partnership with the [Health Center Resource Clearinghouse](#) technology and communications contractors at Georgetown University, a **15-question online or “virtual” T/TA needs assessment was developed** to gather similar information as was collected at the Pop Up Wall events, providing an opportunity for wider reach and diverse feedback.

Key questions asked on the Virtual T/TA Listening Moment included:

- What state or territory are you from + your role at your health center?
- How many patients does your health center serve + who are they [e.g., general primary care population, special populations, etc.]?
- How many delivery sites + what services does your health center provide?
- What T/TA topics do you need based on the BPHC Health Center Excellence Framework?
- How do you prefer to receive your T/TA offerings + preferred time amount?
- What types of publications/T/TA materials are most useful for T/TA offerings?
- Which of the 2021 National T/TA Needs Assessment Top Needs are your current or emerging needs?

Virtual T/TA Listening Moment Marketing

The Virtual T/TA Listening Moment, available in both English and Spanish, was marketed via the Health Center Resource Clearinghouse website and e-blasts, NTTAP listservs, and at the Pop Up Wall events. One NTTAP, the National Network for Oral Health Access ([NNOHA](#)), included advertisements in their annual conference’s online program app, via speaker reminders during general sessions, and with co-branded posters on easels around the conference (see image to the right). As is discussed in more detail in *Listening Moments Findings*, **56% of all Virtual T/TA Listening Moment responses were completed during the time of the NNOHA conference** (November 2023), pointing to the success of their marketing efforts.

Alongside the Farmworker Health Network (which is made up of five NTTAPs), the [North Carolina Community Health Center Association](#) hosted the East Coast Migrant Stream Forum (November 30 - December 1, 2023) where the Virtual T/TA Listening Moment was also marketed.



Listening Moments Findings



This section **summarizes findings from the Pop Up Wall events and Virtual T/TA Listening Moment**, as is specified in the title of each table below. Data from the two Pop Up Wall events were cataloged in an Excel spreadsheet by event and Pop Up Wall section and are being reported using a thematic qualitative data analysis approach or aggregate counts, where possible. Virtual T/TA Listening Moment data was provided via Georgetown University and similarly compiled and analyzed using Excel and the same methods. No questions *required* responses for either the Pop Up Wall events or Virtual T/TA Listening Moment.

Respondent Demographics

Total Respondents by Listening Moment Event + Role

Overall, **374 individuals participated in the Listening Moments** with the large majority (85%) providing feedback via the Virtual T/TA Listening Moment. The target audience for these activities were community health center employees, not volunteer board members, given the intent to assess the T/TA needs of the community health center workforce. Just over half of respondents (51%) identified as being in a C-Suite/Leadership role, while Board Members made up the smallest number of respondents (2%) and were not a targeted audience for this assessment. *Roles noted below as “Other” included those who identified as consultants, educational/academic institution faculty, or who were from a PCA/HCCN.

| | CHI Pop Up Wall | FOM/IT Pop Up Wall | Virtual Listening Moment* | OVERALL |
|------------------------------------|-----------------|--------------------|---------------------------|-------------------|
| Total Respondents N (%) | 24 (6%) | 33 (9%) | 317 (85%) | 374 (100%) |
| <i>C-Suite/Leadership</i> | 13 | 16 | 162 | 191 (51%) |
| <i>Admin/Operations</i> | 6 | 12 | 8 | 26 (7%) |
| <i>Board Members</i> | 3 | 3 | 2 | 8 (2%) |
| <i>Provider/Clinical</i> | 2 | 2 | 87 | 90 (24%) |
| <i>Mid-Level Manager</i> | 0 | 0 | 42 | 42 (11%) |
| <i>Other*</i> | 0 | 0 | 16 | 16 (5%) |

*See Appendices for more information on Virtual T/TA Needs Assessment Occupational Roles.

Total Respondents by Location + Language

Listening Moments respondents represented **44 states and territories**, with California (14%), Colorado (8%), Texas and Michigan (both 6%) having the largest number of respondents, respectfully. Sixteen percent (N=57) of respondents did not provide their location. See Appendices for Total Respondents by State/Territory.

Two percent (N = 9) of all Listening Moments respondents provided feedback **in Spanish**.

Community Health Center Demographics

Virtual T/TA Listening Moment respondents reported the following related to their community health centers' number of patients served, service delivery sites, and communities served. **Majority of respondents saw 15k - 49,999 patients (34%), were unsure or did not answer how many service delivery sites they had (36%), and/or served an Urban community (36%).**

| Number Patients Served - Virtual T/TA Listening Moment | | |
|--|-----|-----|
| | N | % |
| Under 15k | 92 | 29% |
| 15k - 49,999 | 109 | 34% |
| 50k - 99,999 | 64 | 20% |
| 100k or Greater | 41 | 13% |
| Unsure/Blank | 11 | 3% |

| Number Service Delivery Sites - Virtual T/TA Listening Moment | | |
|---|-----|-----|
| | N | % |
| 1 to 5 | 82 | 26% |
| 6 to 20 | 91 | 29% |
| 21 to 50 | 25 | 8% |
| Over 50 | 6 | 2% |
| Unsure/Blank | 113 | 36% |

| Type of Community Served - Virtual T/TA Needs Assessment | | |
|--|-----|-----|
| | N | % |
| Rural | 103 | 32% |
| Suburban | 27 | 9% |
| Urban | 114 | 36% |
| All of the Above | 73 | 23% |
| Unknown | 0 | 0% |

In addition to being asked about the number of patients served by their community health center, Virtual T/TA Listening Moment respondents also provided the below information on the **types of populations they serve and the services provided**. Respondents were able to select all that applied, thus only counts have been provided. *Populations Served noted below as “Other” included women’s/maternal health, refugees/asylees, Indigenous Americans, and youth in residential care.

| Populations Served - Virtual T/TA Listening Moment | |
|---|----------|
| | N |
| General Primary Care | 231 |
| Special Populations | |
| <i>Migrant/Seasonal Agricultural Workers (MSAW)</i> | 191 |
| <i>Residents of Public Housing</i> | 191 |
| <i>People Experiencing Homelessness</i> | 190 |
| Other Health Center Populations | |
| <i>School-Aged and/or Elderly Individuals</i> | 227 |
| <i>Military Veterans</i> | 227 |
| <i>Persons Living with Substance Use Disorder (SUD)</i> | 227 |
| <i>Persons Living with HIV or AIDS</i> | 227 |
| <i>Persons Formally Incarcerated</i> | 225 |
| Other* | 7 |

| Services Provided - Virtual T/TA Needs Assessment | |
|---|----------|
| | N |
| Dental/Oral Health | 287 |
| Pharmacy | 22 |
| Eye Health/Vision | 84 |
| Behavioral Health | 279 |
| Other | 156 |
| <i>Primary/Family/Internal Medicine</i> | 54 |
| <i>Women’s Health/OB-GYN</i> | 26 |
| <i>Substance Use Disorder/Medication-Assisted Therapy (MAT)</i> | 12 |
| <i>Etc. (e.g., chiropractic, podiatry, physical/occupational therapy)</i> | 64 |

T/TA Modalities + Preferred Amount of Time

Overall, both Pop Up Wall and Virtual T/TA Listening Moment respondents reported the **need for diverse modalities and time scheduling in providing T/TA** with additional innovative ideas for consideration (see Other, below). Respondents were able to select all that applied.

| Modalities - All Listening Moment Events | |
|---|-----|
| | N |
| E-Learning/Online Self-Paced Modules | 165 |
| National Conferences | |
| <i>Virtual/Online</i> | 102 |
| <i>In-Person</i> | 113 |
| Large National Training Workshops or Webinars | |
| <i>Virtual/Online</i> | 85 |
| <i>In-Person</i> | 42 |
| Peer- or Role-Based Networking or Facilitated Gatherings | |
| <i>Virtual/Online</i> | 80 |
| <i>In-Person</i> | 59 |
| Small Cohort, Tailored Services of Events (e.g., Learning Collaborative) | |
| <i>Virtual/Online</i> | 95 |
| <i>In-Person</i> | 66 |
| Online Communities | 43 |
| Publications/Technical Assistance Materials* | 63 |
| Other (e.g., YouTube, Train-the-Trainer, TED talks, Role Play, etc.) | 5 |

| Preferred Amount of Time - All Listening Moment Events | |
|--|-----|
| | N |
| 30 minutes | 23 |
| 1 - 2 hours | 161 |
| 2 - 3 hours | 18 |
| 4 hours or more | 12 |
| Other (i.e., one hour at Noon) | 1 |

*See next page for more details on Publications + T/TA Materials.

T/TA Publications + Materials

Virtual T/TA Listening Moment respondents reported that **standard operating procedures, case studies, and job descriptions** were the most highly-preferred publications and materials needed.

| Preferred Types of Publications + T/TA Materials - Virtual T/TA Listening Moment | |
|--|-----|
| | N |
| Case Studies | 111 |
| Issue Briefs | 84 |
| Job Descriptions | 104 |
| Standard Operating Procedures (SOPs) | 151 |
| Marketing Templates | 49 |
| Other (e.g., workflow + financials templates, toolkits, data collection) | 4 |

Pop Up Wall respondents shared important reminders around the use of printed materials, including **being thoughtful about reading level (between 3rd and 6th grades), using accessible language, and considering doing away with them altogether to be more environmentally friendly.**

Affirming 2021 T/TA Needs Assessment Current + Emerging T/TA Needs

Virtual T/TA Listening Moment respondents affirmed that **workforce retention, wellbeing, and empowerment were still the overwhelming top needs** of their community health center as reported in the [2021 National Health Center T/TA Needs Assessment](#) conducted by the NTTAPs and publicly reported.

| Affirming 2021 T/TA Needs Assessment Current Needs - Virtual T/TA Listening Moment | |
|--|-----|
| | N |
| Developing a Comprehensive Staff Retention Plan | 129 |
| Developing Outreach Programs or Partnerships to Address Health Disparities | 73 |
| Developing Outreach Services | 75 |
| Empowerment of Health Center Staff | 108 |
| Evaluation of Outreach Programming | 59 |
| Expansion of Telehealth Delivery Provision | 71 |
| Improving Job Satisfaction + Staff Wellbeing | 161 |
| Levering Use of Data to Guide/Inform Clinical Quality/Operational + Financial Improvement | 95 |
| Collection + Use of Enabling Services and Patient-Level Data to Address Social Drivers of Health | 64 |
| Other (e.g., health literacy, oral health, cultural humility, IPV/Human Trafficking) | 4 |

| | N |
|--|-----|
| Emergency Preparedness | 10 |
| Funding | 56 |
| Management | 1 |
| Oral Health | 2 |
| Workforce | 142 |
| Other (e.g., quality, chronic disease self-management, SDOH reimbursement) | 3 |

Pop Up Wall Emerging + Urgent T/TA Needs

Pop Up Wall respondents provided important feedback on emerging and urgent T/TA, with **siloed departments/functions, artificial intelligence (AI) and cybersecurity, workforce recruitment, staffing, and skill-building, capital planning and finance, Board of Director trainings, and HRSA-specific platforms and requirements** identified as priority areas.

Pop Up Wall Emerging T/TA Needs

- **Artificial Intelligence + Cybersecurity**
 - *Strategic Planning*
- **Siloed Departments/Functions**
 - *Team Building + Cross-Clinic Communication*
- **Workforce Recruitment + Staffing**
 - *Partnerships with Historically Black Colleges + Universities and Other Types of Health Education Providers (e.g., Public Health, Certification Programs)*
 - *Outsourcing*
 - *Peer-Mentoring/Networking between Leadership + Management*
- **Workforce Skill-Building***
 - *General Emotional, Social, and Communication Skills*
 - *Health Center Model*
 - *Positive Workforce + Culture and Healthy Conflict*
 - *Change Management*
- **Capital Planning + Finance**
 - *Strategic Planning*
 - *Pay (e.g., increases in minimum wage) + Billing*
- **HRSA Platforms + Requirements**
 - *Federal Financial Report (FFT)*
 - *OSV Audits*
 - *UDS+*

*See Appendices for more information on Needed Workforce Skill-Building T/TA.

Pop Up Wall Urgent T/TA Needs

- **Artificial Intelligence + Cybersecurity**
 - *Standard Operating Procedures, Policies, Infrastructure, + Compliance*
- **Workforce Recruitment + Staffing**
 - *Trauma-Informed*
- **Workforce Skill-Building**
 - *Data Visualization + Reporting*
 - *Finance*
 - *Gender-Affirming Co-Worker Relationships*
 - *Cultural Humility + SDOH*
- **Capital Planning + Leadership Management**
 - *Succession Planning*
 - *Organizational Development*
 - *Pay (e.g., increases in minimum wage) + Billing*
- **Board of Directors**
 - *Resources/Funding for trainings + certificate programs*
 - *Continued Trainings + Boosters*
 - *Finance*
- **HRSA Platforms + Offerings**
 - *“Buddy System” for new Community Health Center workforce*
 - *Electronic Hand Book (EHB)*
 - *Marketing of T/TA Offerings [NTTAPs + Contractors]*

Conclusion + Next Steps



Conclusion

As community health centers continue to transition from pandemic response, as was a priority in 2021, workforce turnover and federal funding changes have made staffing, recruitment, retention, and skill-building, capital planning and funding, AI and cybersecurity, and HRSA-related trainings key T/TA needs in 2023.

Information in this report, gathered from the Listening Moments events, has provided a foundation on which the 2024 NTTAP National T/TA Needs Assessment can be developed. Suggested considerations include:

- **additional options related to community health center and respondent demographic questions,**
- **adjustments to current, emerging, and urgent T/TA needs,**
- **supporting community health centers with soft-skill building T/TA offerings and/or a list of resources,**
- **optimizing “buddy system” or train-the-trainer opportunities across community health centers for leadership/management, and**
- **collaborating with BPHC partners on T/TA offerings related to HRSA-specific platforms and requirements.**

Next Steps

Over the next year, NACHC, its 21 NTTAP collaborators, and newly developed - four PCA partners - will be working to select a contracted survey vendor, review and make revisions to the existing 2021 NTTAP T/TA Needs Assessment Tool, pilot the updated tool with up to 30 community health centers, send revised tool to BPHC for review/approval, and finalize dissemination, fielding, and communications planning for launch in August 2024.

While we made strides in keeping our communities safe and with essential resources during the global pandemic between 2020 and 2022, the aftermath continues to impact access, quality, and care in our community health center patients and workforce members. It is their voices that make change - and our role to provide opportunities such as these Listening Moments for them to share those voices.

Appendices



Listening Moment Pop Up Wall Facilitator Guide



NTTAP Pop-Up Wall/ Listening Moment Event FACILITATOR'S GUIDE

Health Center Training and Technical Assistance National Needs Assessment Fall/Winter 2023



THIS FACILITATOR GUIDE IS DESIGNED TO HELP YOU:

- Understand the context for the questions you are asking participants
- Connect with participants before seeking content/information
- Get started + Engage participants
- Coordinate + Facilitate a *Listening Moment* event

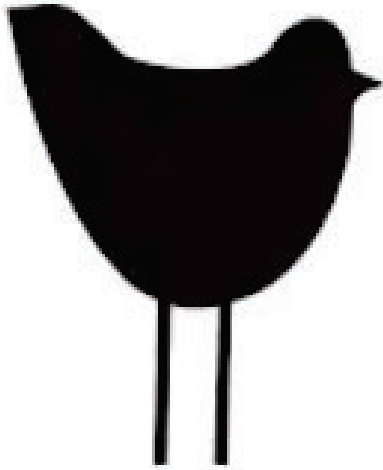


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Special thanks to Ideas360 for their contributions to the development of the Pop-Up Wall Listening Moment design.

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For more information, please visit HRSA.gov.



IMPORTANT NOTE!

Please remember that the Pop-Up Wall is a shared mechanism for gathering health center voices from several different Listening Events.

AS A FACILITATOR, YOU MUST ASSURE THAT INDIVIDUALS DO NOT WRITE DIRECTLY ON THE POP-UP WALL!

The following information will help you identify where participants can share their ideas and feedback.

WHY

The WHY phase is about providing clarity about the information you want to listen to help everyone understand the **big** picture and the needs of our communities.

THIS PORTION OF THE GUIDE WILL HELP YOU:

- Understand the purpose for creating a Listening Moment
- Learn about the development process and desired outcomes

Listening Moment Purpose

Listening Moments are a modality for directly responding to the HRSA requirements outlined in the HRSA FY 2023 National Training and Technical Assistance Partner (NTTAP) Cooperative Agreements Funding Opportunity for the National Resource Center for Health Center Training and Technical Assistance. As part of FY23, NACHC must, in coordination with all 22 NTTAP partners, obtain national feedback from the field regarding training and technical assistance (TTA) needs that will inform the development of a more comprehensive needs assessment to be fielded in FY24 as well as informing current T/TA offerings and topics.

Both in-person and virtual/online Listening Moments have been produced by NACHC, with significant input of other NTTAPs who participate in the all-NTTAP Needs Assessment Working Group (NAWG). These Listening Moment products can be easily utilized and transported to various 2023 NTTAP events where health center staff are gathered. All NTTAPs were offered the opportunity to host an in-person Listening Moment at upcoming conferences/venues to ensure that their unique voices and subject matter expertise are captured in the feedback obtained from the field. Signage containing a QR code that leads to an online Needs Assessment tool is also available for individuals who wish to participate virtually and/or to send to staff where an in-person event is not possible.

Listening Moment data is collected by the NTTAP event host via photos of the visitor input to the Pop-Up Wall with collected “sticky notes.” This is sent to NACHC to categorize and summarize in a final report that will be shared with all NTTAPs and HRSA no later than January 2024.

WHY cont.

Listening Moment Development

Below are the key questions identified when developing this Listening Moment:

- Validate the 2021 National TTA Needs Assessment Top Needs as “current needs” – *Are they still relevant and a priority?*
- Validate the 2021 National Needs Assessment Emerging Needs as “current needs” - *Have they become current needs or are they still emerging (or have fallen off)?*
- Answer the following questions:
 - Where are there training gaps [e.g., topics, special populations, modality, scheduling, by position, by region, etc.]?
 - What is currently working or successful [e.g., topics, modality, scheduling, etc.]?
 - What types/modes of training are preferred?
 - Are we evaluating the right things and are the evaluation questions useful for obtaining feedback?
 - What are emerging needs post-pandemic?
 - What feels **urgent** that the NTTAPs should prioritize for TTA development/delivery?
 - How does the above align with the HRSA Health Center Excellence Framework?



HOW

The HOW phase is about setting up your in-person Listening Moment to make the participant feel like the center of attention, creating a space for them that feels safe to share their wants and needs; to truly feel heard.

THIS PORTION OF THE GUIDE WILL HELP YOU:

- Create the personal space for listening
- Connect with participants before seeking content/information
- Accommodate the physical space you have to work with
- Identify any additional supplies needed to support your Listening Moment event



HOW cont.

The following pages demonstrate just a few ways to set up the in-person Listening Moment pop-up wall. The wall has been designed to be transportable and can be customized to the space available at various delivery locations. All pieces of the wall are mobile, allowing NTTAPs to adjust questions and include branding for their conference/event and organization(s).

Use the following as a guide to understand the concept, then feel free to use whatever pieces “fit” your space and event appropriately.

Invitation to engage and be HEARD!

The Listening Moment pop-up wall is meant to create an environment that invites participants into the space to engage in conversation and have their opinions heard in their own words. Things to consider:

1. Use the appropriate number of wall “panels” that fit your space allocation comfortably and do not feel forced or cramped. **YOU DO NOT NEED TO USE ALL PANELS OR PIECES.**
2. Consider positioning the panels in a slightly curved arc (versus straight across/flat) to invite people “in” to the space, including the floor space and table(s)/stool(s) you may need to hold supplies or provide a place for participants to write/sit. This is how you would “connect before content” – inviting the participant into the space by creating a welcoming environment before you begin conversation.
3. The sandwich board, if used, can be placed in line with the wall panels, or off-set to help further define the engagement and listening space.

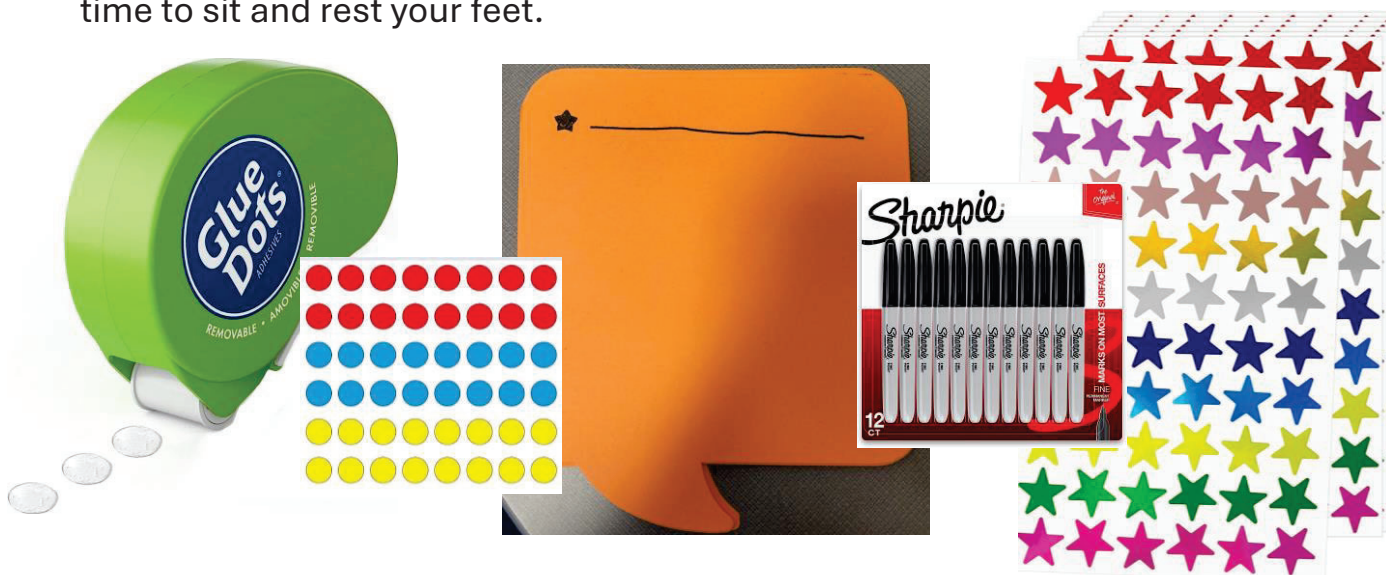


HOW cont.

Supplies

Throughout this guide we reference “sticky notes.” These may not always be sticky by design so participants can easily place them on a table to write their responses. If they are not self-adhesive, one of the supplies you will need includes “sticky/glue dots” that will then be applied to the back of the note to post on the wall panels. You may also need the following supplies depending on your setup:

1. “Sticky Notes:” NACHC has a limited supply of die cut pages that look like a comment bubble. While these could be replicated by a partner, square/rectangle pieces of paper (or [4x4 sticky notes](#)) would work just as well. It is recommended to use a variety of bright colors to add interest and engagement as the wall panels become populated with these notes.
2. [Sticky/Glue Dots](#): these can be rolled out on the back of the notes after the participant writes their comments.
3. “[Marshmallows](#)”: Small foam pieces that can be placed on the underside of pop-up wall to create depth. You will need to glue dots to adhere then to the pieces and board.
4. [Markers](#): Thick enough so comments are visible from a distance, however, not too fat to write comfortably. Due to the varying colors of the notes, the recommendation is a darker color marker.
5. [Circle Dot Stickers](#): ¼” dots can be used on the map to annotate where participants are from. Specific colors can correlate to position types of the participant.
6. [Star Stickers](#): sometimes a participant will say “my comment is already up there” – GREAT! Use a star sticker as an “upvote” or to denote more than one person agrees with the comment.
7. [High-Top Tables](#): 2-3 tables, dependent upon space available to make distribution of supplies and writing responses easy.
8. [Bar Stool\(s\)](#): 1-2, dependent upon number of facilitators – you may have some quiet time to sit and rest your feet.



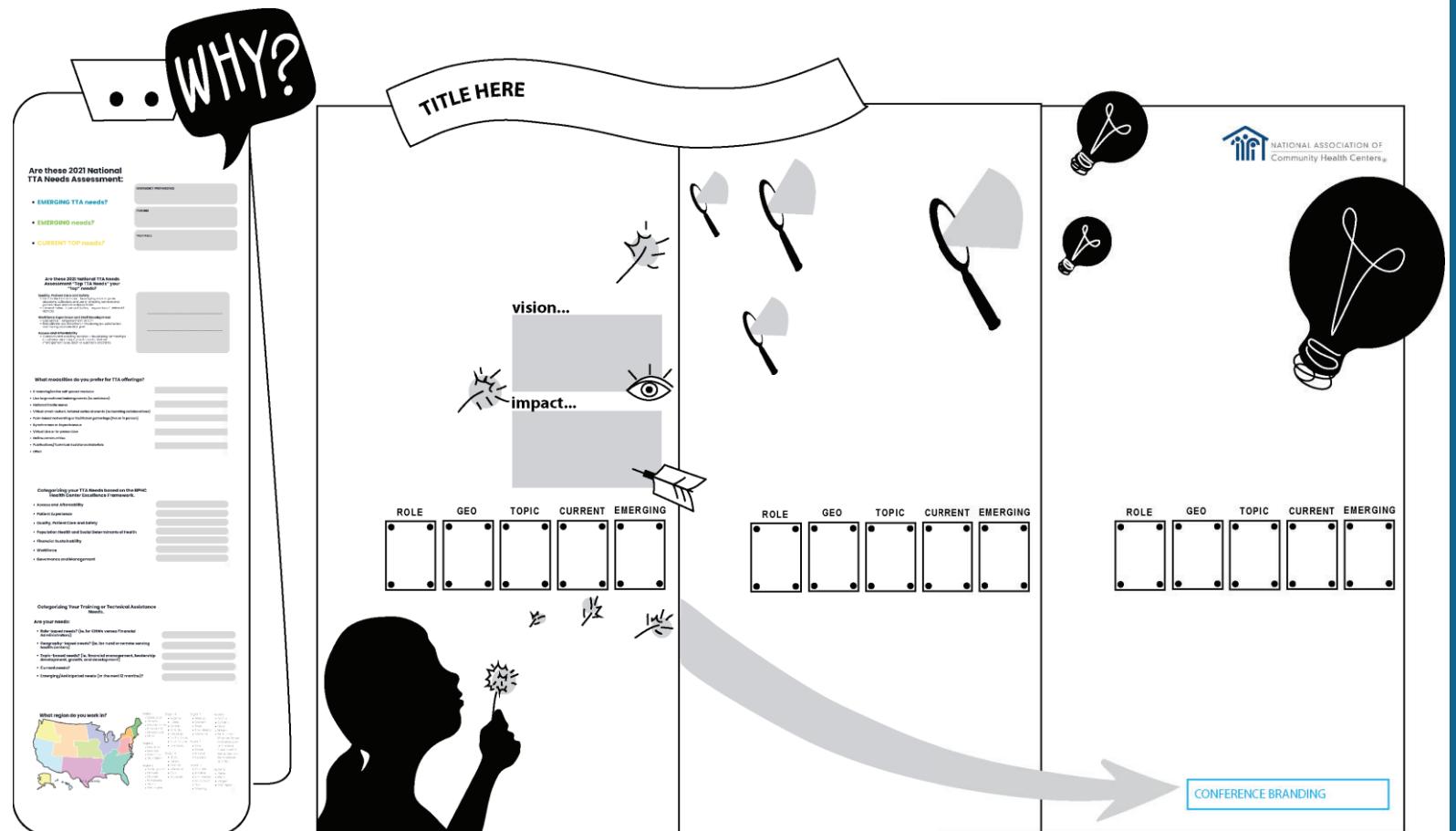
HOW cont.

The following pages demonstrate just a few ways to set up the Listening Moment Pop-Up Wall Event. It has been designed to be transportable and can be customized to the space available at various delivery locations.

Use this as a guide to understand the concept, then feel free to use whatever pieces “fit” your space and event appropriately.

SETUP EXAMPLE #1

This setup includes all pieces of the pop-up wall and the sandwich board. Remember, we suggest setting this up in a slightly curved arc and not straight across/flat.



SETUP EXAMPLE #2

You may decide to eliminate the sandwich board and capture all your participant responses on the three main pop-up wall panels. In the below example, we have inserted birds, a checkmark, and an arrow that can be labeled and used to emphasize the types of responses you would like to capture in that area of the listening wall.

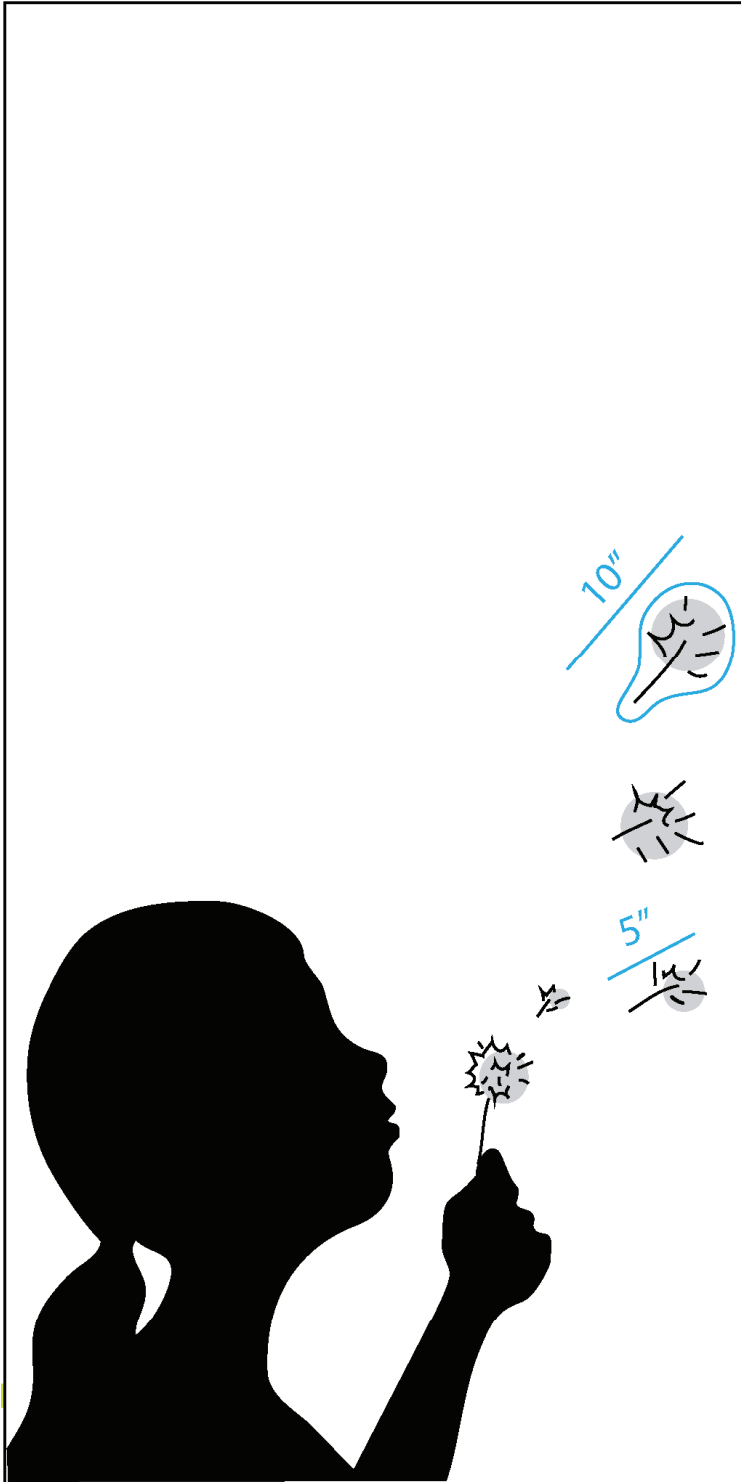
For example:

- Bird #1 – labeled “GAPS”: In this area, capture information about identified gaps in training topics, trainings for specific positions, training modalities, special populations, etc.
- Bird #2 – labeled “SUCCESS”: In this area, capture what is working well in training content, approach, timing, etc.
- Bird #3 – labeled “METHODS”: In this area, capture information about training methods including likes, dislikes, duration, scheduling, new approaches, etc.
- Bird #4 – labeled “EMERGING”: In this area, capture ideas related to emerging training needs and wants including approaches, topics, audiences, etc.
- Bird #5 – labeled “CAPABILITIES”: In this area, capture information regarding what new capabilities will our staff need to have to meet the future needs of patients.
- Checkmark – labeled “EVALUATION”: In this area, capture information regarding our standard evaluations – are we evaluating the right things, what else is needed?
- Arrow – labeled “URGENT”: In this area, capture what feels urgent, what training needs should be prioritized, etc.



SETUP PANEL #1

Use each wall panel in a series of three or independently depending on the space that you have available to you. The following diagrams provide the specifics on how to set up each individual panel.



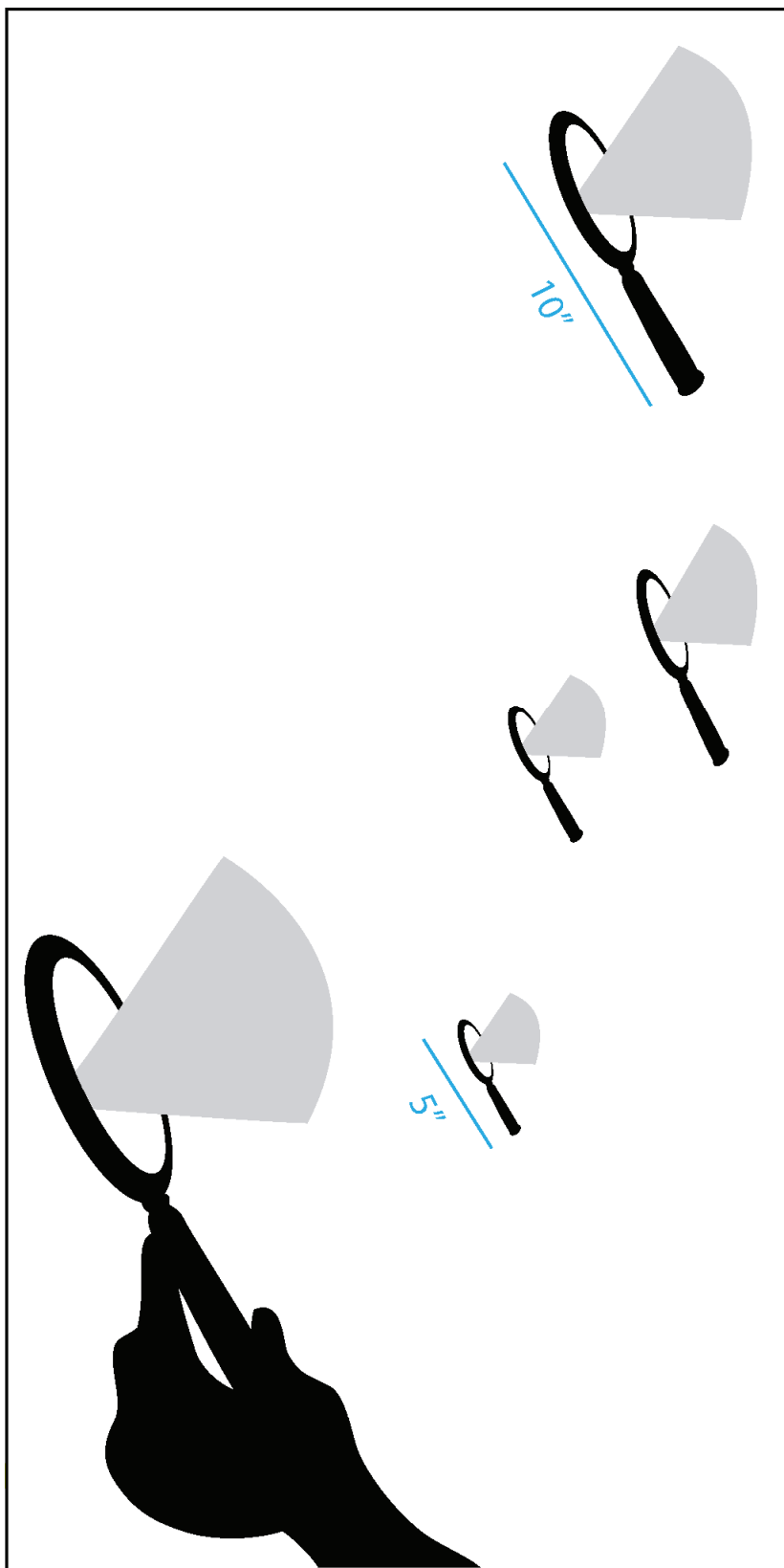
Panel #1: Dandelion

Size: 4' Wide x 8' High

Suggested Pieces:

- Black cut-out of child silhouette
- Dandelion seeds strategically adhered to show blowing across the two adjoining panels (if being used); move from smaller seeds to larger seeds across the panel(s)
- Adhere all items using stick-on "marshmallows" to give dimension and lift

SETUP PANEL #2



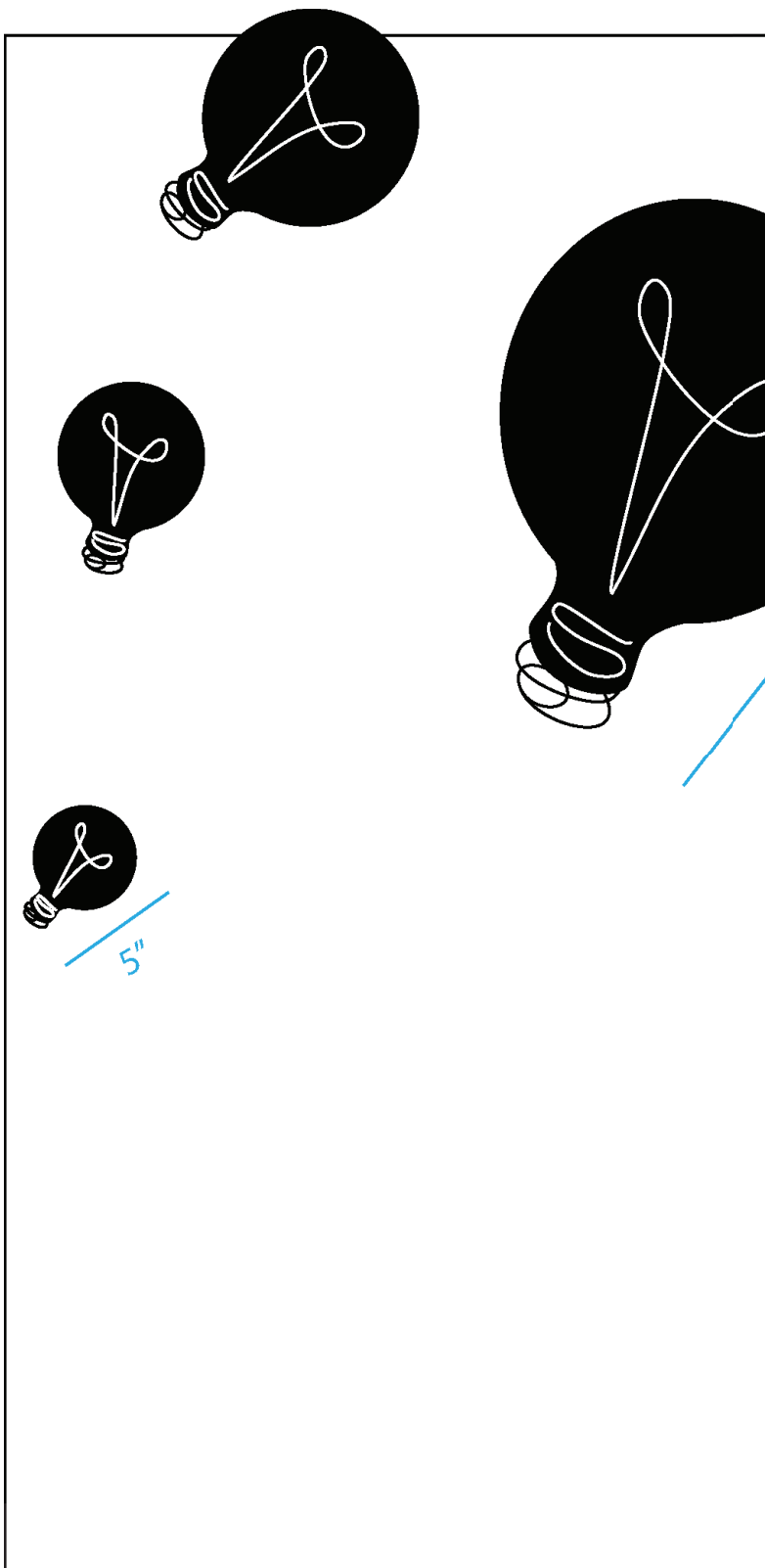
Panel #2: Magnifying Glass

Size: 4' Wide x 8' High

Suggested Pieces:

- Black cut-out of hand and magnifying glass placed on the far-left bottom of panel; remove hand and magnifying glass if adjoined to Panel #1.
- Other magnifying glass cut outs strategically placed as if the dandelion seeds from Panel #1 are turning into blowing magnifying glasses
- Adhere all items using stick-on “marshmallows” to give dimension and lift

SETUP PANEL #3



Panel #3: Magnifying Glass

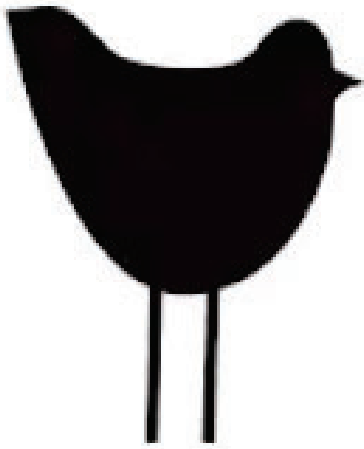
Size: 4' Wide x 8' High

Suggested Pieces:

- Black cut-out of floating light bulbs strategically adhered to continue the flow of Panel #2. Can also be placed partially off the panel, too.
- Move from smaller sized light bulbs to larger light bulbs, left to right.
- Adhere all items using stick-on “marshmallows” to give dimension and lift

ADDITIONAL DESIGN COMPONENTS

The Listening Moment pop-up wall was developed to provide as much flexibility as possible so that you can customize it to the space you have available. Shown below is a sampling of the different moveable pieces that have been made available to you by the NTTAP hosting the Pop-Up event. They can be attached using Velcro or painters' tape for ease of disassembling and reuse. Foam “marshmallows” can be used here to add depth making these pieces stand away from the flat wall panel. They can be labeled with a silver or gold marker or artist’s chalk.



WHAT

The WHAT phase is identifying and rehearsing the core questions you want to ask and answer with your participants. This section will serve as a guide; however, it is important to use the words and language you are most comfortable with so that this becomes a natural dialogue and conversation.

THIS PORTION OF THE GUIDE WILL HELP YOU:

- Know what questions to ask
- The tone/approach to use
- Insights you are trying to gather

If you take nothing else away from this guide, know that the easiest way to LISTEN – is to have a natural, candid conversation with participants. This does not need to be formal; you do not need to check a box or meet a specific requirement for someone to be engaged.

It is important to understand that **YOU DO NOT NEED TO ASK ALL QUESTIONS OF ALL PARTICIPANTS**. These sample questions are provided to help you guide your inquiry and engagement, but feel free to follow the lead of the participant.

1. If the participant approaches a specific portion of the Listening Moment, follow their lead and start a conversation specific to that section.
2. If a participant approaches you as the facilitator, take the opportunity to highlight areas you feel are lacking responses, or where you are most comfortable talking about.
3. If a participant seems like they are in a hurry – try asking them to validate a comment already on the wall panels, versus getting new input.

There is no right or wrong way to listen or to let a participant's needs be heard.



WHAT – Sandwich Board

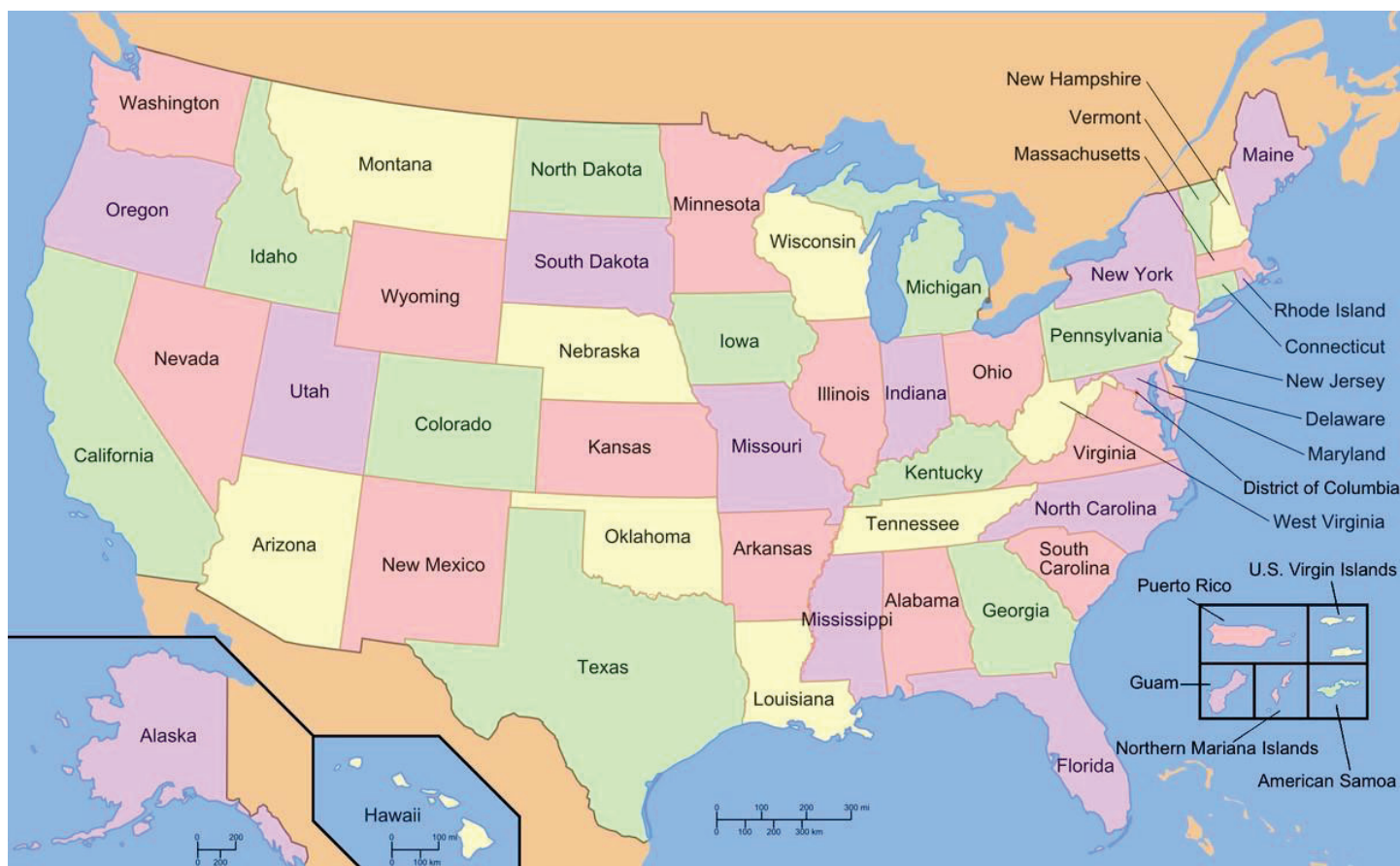
Below are some sample questions and approaches you might take when talking with participants. Please refrain from reading questions to the participant – this should be a natural conversation.

The sandwich board includes the below map at the top. Please ask the participant to note their role (by a colored dot/pin) and place it on the map where they are from. **THIS IS THE ONLY ENGAGEMENT PIECE TO ACTUALLY INTERACT DIRECTLY ON THE SANDWICH BOARD.**

Facilitator Prompts: Engage in conversation by stating/asking (in your own voice):

- **“Where are you from?”**
- **“Would you be willing to stick a dot near where your health center is located?”**

Note: Check the participant’s badge or ask the participant their role to determine the appropriate sticky dot to give them to post on the map. More information regarding sticky dots/colors can be found on page 25 of this guide. Also, for smaller states, feel free to ask participants to place their dot/pin next to or near the name of the state.



WHAT – Sandwich Board cont.

Below are some sample questions and approaches you might take when talking with participants. Please refrain from reading questions to the participant – this should be a natural conversation.

The sandwich board may include the logos and key topical areas that each of the HRSA-funded NTTAPs focus their training and technical assistance offers on.

Facilitator Prompts: Engage in conversation by stating/asking (in your own voice):

- ***“What are the types of TTA providers you've enjoyed receiving TTA from in the past?” – for example, specific NTTAPs, PCAs, etc.***

Take this opportunity to educate the participant on your organization.

- ***“Do you see a topic area that these organizations specialize in that your health center could use additional support with?”***

Dig in deeper where you are comfortable or if the conversation allows –

- ***“Do you know if your health center serve homeless, migrant, farm worker, residents of public housing, etc.?”***
- ***Could you use additional training in those areas?***

1. Follow up with:

- ***“Can I write that down?” or “Would you write that for me, I want to be sure we get that feedback up on the wall”***

2. If the participant starts talking or explaining, grab a “sticky note” and start capturing what they are sharing – use multiple sticky notes as needed. Consider follow-up questions:

- ***“Tell me more...”***
- ***“Can you clarify...”***
- ***Summarize...”I hear you saying...”***

3. Once you capture what they have shared, you can (or ask them to) put the sticky notes in the correct place on the wall panels (i.e., emerging needs, gaps in training, etc.) – use your best judgment as to where they should go based on the conversation, or if the participant is still there, ask them ***“is this where you think this belongs?”***

WHAT – Sandwich Board cont.

Here are some sample questions and approaches you might take when talking with participants. Please refrain from reading questions to the participant – this should be a natural conversation.

The top 3 needs identified in the 2021 National Needs Assessment will be highlighted on the sandwich board to help you start a conversation about them.

Facilitator Prompts: Engage in conversation by stating/asking (in your own voice):

- ***“These three topics were identified as top training needs based on the 2021 National Needs Assessment. Are they still your top needs today?”***

1. Follow up with:

- ***“Can I write that down?” or “Would you write that for me, I want to be sure we get that feedback up on the wall”***

Write their responses on a sticky note and stick them to the board.

- ***“Are these gaps in current trainings offered?”***
- ***“Do you need more on these topics? How?”***
- ***“Are we covering these topics well already?”***

2. If the participant starts talking or explaining, grab a “sticky note” and start capturing what they are sharing – use multiple sticky notes as needed. Consider follow-up questions:

- ***“Tell me more...”***
- ***“Can you clarify...”***
- ***Summarize...”I hear you saying...”***

3. Once you capture what they have shared, you can (or ask them to) put the sticky notes in the correct place on the wall panels (i.e., emerging needs, gaps in training, etc.) – use your best judgment as to where they should go based on the conversation, or if the participant is still there, ask them ***“is this where you think this belongs?”***

Are these 2021 National TTA Needs Assessment “Top TTA Needs” your “top” needs?

Quality, Patient Care and Safety

- Data Collection and Use – leveraging data to guide decisions, collection, and use of enabling services and patient-level data to address SDOH
- General Patient Care and Safety – expansion of telehealth delivery

Workforce Experience and Staff Development

- Leadership – empowerment of staff
- Recruitment and Retention – improving job satisfaction, well-being, and retention plan

Access and Affordability

- Outreach and enabling services – developing partnerships to address health equity and chronic disease management; evaluation of outreach programs

WHAT – Sandwich Board cont.

Here are some sample questions and approaches you might take when talking with participants. Please refrain from reading questions to the participant – this should be a natural conversation.

The 7 components of the HRSA Health Center Excellence Framework are listed as a reference for your discussion.

Categorizing your TTA Needs based on the BPHC Health Center Excellence Framework.

- Access and Affordability
- Patient Experience
- Quality, Patient Care and Safety
- Population Health and Social Determinants of Health
- Financial Sustainability
- Workforce
- Governance and Management

Facilitator Prompts: Engage in conversation by stating/asking (in your own voice):

- ***“Can I ask you, which of these topics resonate with you, or are areas that you would like to see more training options about?”***
- ***“Where do you see your health center [staff] having the most challenges?”***

1. Follow up with:

- ***“Can I write that down?” or “Would you write that for me, I want to be sure we get that feedback up on the wall”***

Write their responses on a sticky note and stick them to the board.

- ***“Are these gaps in current trainings offered?”***
- ***“Do you need more on these topics? How?”***
- ***“Are we covering these topics well already?”***

2. If the participant starts talking or explaining, grab a “sticky note” and start capturing what they are sharing – use multiple sticky notes as needed. Consider follow-up questions:

- ***“Tell me more...”***
- ***“Can you clarify...”***
- ***Summarize...”I hear you saying...”***

3. Once you capture what they have shared, you can (or ask them to) put the sticky notes in the correct place on the wall panels (i.e., emerging needs, gaps in training, etc.) – use your best judgment as to where they should go based on the conversation, or if the participant is still there, ask them ***“is this where you think this belongs?”***

WHAT – Sandwich Board cont.

Here are some sample questions and approaches you might take when talking with participants. Please refrain from reading questions to the participant – this should be a natural conversation.

Some core training delivery approaches will be listed on the sandwich board to serve as a prompt for a discussion about what approaches the participant likes, prefers, is missing, etc.

Facilitator Prompts: Engage in conversation by stating/asking (in your own voice):

- ***“Can I ask you quickly, how do you like to learn?”***
- ***“Why type of trainings do you prefer to participate in?”***

1. Follow up with:

- ***“Can I write that down?” or “Would you write that for me, I want to be sure we get that feedback up on the wall”***

Write their responses on a sticky note and stick them to the board.

- ***“Have you attended any other types of trainings you have liked?”***
- ***If so, “How were they delivered?”***
- ***If so, “What is your preferred length of training or day of the week?”***

2. If the participant starts talking or explaining, grab a “sticky note” and start capturing what they are sharing – use multiple sticky notes as needed. Consider follow-up questions:

- ***“Tell me more...”***
- ***“Can you clarify...”***
- ***Summarize...”I hear you saying...”***

3. Once you capture what they have shared, you can (or ask them to) put the sticky notes in the correct place on the wall panels (i.e., Modes, Gaps, Success, etc.) – use your best judgment as to where they should go based on the conversation, or if the participant is still there, ask them ***“is this where you think this belongs?”***

What modalities do you prefer for TTA offerings?

- E-learning/online self-paced modules
- Live large national training events (ie: webinars)
- National Conferences
- Virtual small-cohort, tailored series of events (ie: Learning collaboratives)
- Peer-based networking or facilitated gatherings (live or in person)
- Synchronous or Asynchronous
- Virtual Live or in-person Live
- Online communities
- Publications/Technical Assistance Materials
- Other

WHAT – Panels #1 & #2

Here are some sample questions and approaches you might take when talking with participants. Please refrain from reading questions to the participant – this should be a natural conversation.

Identify training gaps (Bird labeled “GAPS”)

- ***What do you need for you to be successful in your role?***
- ***Are there topics you would like to see more training offered that are missing, or just needs MORE?***
- ***Where do you see staff in your health center struggle?***
- ***Are there certain positions that need more training than others?***

Identify what is working well? (Bird labeled “SUCCESS”)

- ***What trainings have you attended that you have liked? Found beneficial? WHY?***
- ***What are we doing well? Topic selection? Schedule/timing? Modality? In-Person/Virtual? Opportunity to actively engage?***

Identify how they like to learn (Bird labeled “METHODS”)

- ***How do you like to learn?***
- ***Do you prefer in-person events that you have to travel to, or a virtual event you can log into from home/work?***
- ***Do you read publications or articles related to your learning needs?***
- ***Do you prefer to learn alone or in a group, self-paced or scheduled events?***
- ***Other topics could include time of day, day of week, duration you spend in one sitting, etc.***

Identify if our evaluation methods are effective (Checkmark labeled “EVALUATION”)

- ***Have you ever completed an evaluation for a NACHC or partner training?***
- ***Are the questions relevant?***
- ***Do the questions help you convey your feelings about the training appropriately?***
- ***What should we be measuring that we are not?***
- ***Is the short evaluation you receive a few months following the training a helpful reminder to you?***

WHAT – Panel #3

Here are some sample questions and approaches you might take when talking with participants. Please refrain from reading questions to the participant – this should be a natural conversation.

Identify what skills and/or capabilities will be needed to meet the needs of future patients (Bird labeled “CAPABILITIES”)

- ***What new skills will health center staff need in the future? Are they different from today?***
- ***Are they position-specific capabilities, or more general?***

Identify emerging needs (Bird labeled “EMERGING”)

- ***What are you seeing as an emerging training need in your health center?***
- ***What are new trends that you are seeing in your community? Health center?***
- ***Are there areas that you find challenging in your work that you may need support with?***
- ***Are there needs specific to your region/where you live?***
- ***Are there needs related to a specific patient population or social driver of health?***

Prioritize the URGENT needs (Arrow labeled “URGENT”)

- ***What is the one training need that you need help with right now?***
- ***What one thing would make your job easier right now?***
- ***If a learning opportunity was offered tomorrow, regardless of location or cost, would you NOT MISS?***



Facilitator Cheat Sheet

Here are some sample questions and approaches you might take when talking with participants. Please refrain from reading questions to the participant – this should be a natural conversation.

Common Approach – A conference participant will walk up and ask “WHAT IS THIS?”

- **Response:** *“We would like to learn more about your health center training needs. Can I ask you, ...”*

Secondary Approach – a conference participant is slowly walking by, but not necessarily fully engaging or trying to avoid engaging but is curious...

- **Response:** Remember, connect before content *“How is your conference going? Do you have a minute? Can I ask you...”*

Ask...

- *How do you like to learn (METHODS)?*
- *What are we doing that is working for you (SUCCESS)?*
- *Where are we missing the mark (GAPS)?*
- *Do these topics still resonate with you (refer to top needs and/or HRSA Health Center Excellence Framework on sandwich board)?*
- *What do you see as an emerging/future need (EMERGING)?*
- *What do you need RIGHT NOW (URGENT)?*

Be Inquisitive and Conversational

- *Tell me more...*
- *Can you explain that for me – can you clarify...*
- *I hear you saying....(summarize)*

Overcome Hurdles

- *Can you just confirm this comment here for me (get them to confirm a post already on the wall if they are in a rush)*
- *What do you see your new staff needing help with (if they don't think they need training)*
- Note: take notes for the participant so they don't have to put things down

Take Notes Later

- It is okay to remain engaged in conversation and take notes on sticky notes AFTER THE FACT or have the person you're speaking with write on the sticky note as you discuss the topic.
- This allows you to be fully present in the discussion, and capture as many sticky notes as you need afterwards without the participant feeling like they are waiting for you to write, or they are giving you too much information as you pile up the notes!

Use of Stickers & Annotations

SMALL ROUND DOTS: The sandwich board will have a map on the top. Please ask the participant to note their position (by a colored dot) and place it on the map where they are from.

- **Red:** C-suite/Executives/Senior Leaders/Directors
- **Blue:** Board Member
- **Green:** Administrative Staff/Operations: billing, front desk, site lead, facilities, data, etc.
- **Yellow:** Provider Team: MD, DDS, NP, PA, RN, LCSW, etc.
- **Black:** Community Health /Outreach Workers

STAR STICKERS: Use these as an “upvote” – if someone agrees with an existing comment on the boards – instead of re-writing, stick a star on it! This can be handy if someone tells you they don’t have time to talk. Or, you may interact with someone who only wants to use star stickers and read through the responses on the board, followed by an upvote to emphasize something they agree with (it’s all OKAY).

AUDIENCE PRIORITIZATION: The primary audience we want to hear from are health center staff, however, partners (NTTAP, PCA/HCCN, etc.) are welcome to engage in conversation too (we don’t want to be seen turning anyone away).

HOLD A MARKER - KEEP IT HANDY!

- If you are speaking to a board member, put a “**B**” on the sticky note
- If you are speaking to anyone other than a health center staff/board member put a “**+**” on the sticky note – this way the participant feels heard AND we can annotate that feedback separately when analyzing/compiling the results.

It’s OKAY if you miss any of these steps – they are meant to provide additional details for the analysis phase, but the important part is to actively listen –



Close-Out

DATA REPORTING

Upon completion of your Listening Moment, please following the below steps to assure the data you have collected is reported back to NACHC for documentation and analysis:

- **Sandwich Board Maps:** With your cell phone, take close-up photos of the maps on both sides of the sandwich board to send to Sarah at sarah@sasuprojectmanagement.com.
- **Pop-Up Wall Panels:**
 1. With your cell phone, take close-up photos of each section of the panel (e.g., gaps, successes, etc.) and the sticky note responses. It is ok to include multiple responses in one picture, just make sure it is obvious what section of the panel the response is aligned with. These photos can also be sent to Sarah using the above email address.
 2. Once you have taken photos of all the panel responses, carefully remove the responses, keeping them separated by section. Place the responses into the provided envelopes labeled for each section to then be mailed to:

Name/Address

Listening Moment Facilitator Feedback Form



Thank you for facilitating a Listening Moment event!

Please take a moment to let us know about your experience by completing an 8-question feedback form via the QR code or below link.

<https://www.surveymonkey.com/r/KVZPKN2>



HRSA Bureau of Primary Health Care National Training and Technical Assistance Partners (NTTAPs)

National Center for Medical  Legal Partnership



AT THE GEORGE WASHINGTON UNIVERSITY



Renaye James Healthcare
ADVISORS



NATIONAL ASSOCIATION OF
Community Health Centers®



SCHOOL-BASED
HEALTH ALLIANCE
The National Voice for School-Based Health Care



Learn more at www.healthcenterinfo.org/partners

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WHAT IS A NTTAP?

Funded by HRSA's Bureau of Primary Health Care (BPHC), the **22 HRSA National Training and Technical Assistance Partners** (NTTAPs) provide subject matter expertise through the development, delivery, coordination, and evaluation of **FREE training and technical assistance (TTA) offerings to health center grantees + look-alikes.**

Examples of TTA Subjects Include:

- Capital Development + Growth
- Clinical Quality Improvement + Patient Safety
- Intimate Partner Violence + Human Trafficking Prevention
- Workforce Development, Recruitment, + Retention
- Health Information Technology + Data
- Medical-Legal Partnership
- Oral Health
- Older Adults
- School-Aged Children
- Asian American, Native Hawaiian, + Other Pacific Islander Communities
- People Experiencing Homelessness
- Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) Individuals
- Migratory + Seasonal Agricultural Workers
- Residents of Public Housing

Learn more at www.healthcenterinfo.org/partners



SHARE YOUR VOICE ON TRAINING AND TECHNICAL ASSISTANCE (TTA) NEEDS

Help us understand YOUR:

- Health Center Role + Location
- Specific TTA Needs
- Preferred Way to Receive Training
- Priority TTA Opportunities...and More!

Please take a few moments to provide your ideas for health center training and technical assistance needs to the **22 HRSA National Training and Technical Assistance Partners** (NTTAPs) by either

Contributing to the nearby Pop-Up Wall or
Clicking on the QR code to complete a short needs assessment.



COMPARTA SU OPINIÓN SOBRE LAS NECESIDADES DE CAPACITACIÓN Y ASISTENCIA TÉCNICA (TTA)

Ayúdenos a entender SU:

- Función del centro de salud + ubicación
- Necesidades específicas de TTA
- Manera preferida de recibir capacitación
- Oportunidades prioritarias de TTA... ¡y más!

Tómese unos minutos para brindar sus ideas sobre las necesidades de capacitación y asistencia técnica de los centros de salud a los **22 Socios Nacionales de Capacitación y Asistencia Técnica (NTTAP)** de HRSA haciendo clic en el código QR a continuación para completar una breve evaluación de necesidades.



Virtual T/TA Listening Moment Tool - English

1. Which state or territory are you from?

Please select ▾

2. How do you define the community setting you serve?

- Rural
- Suburban
- Urban
- All of the Above

3. What is your role at the health center?

- Front-line with patients
- Mid-Level Manager (supervisor or non-supervisor)
- Director/Senior Leader/Executive
- Board Member [if Board Member, skip next question]
- Facilities/Administration/Data
- Other

4. More specifically, are you a...[select all that apply]

- Community Health Worker/Promoter/Patient Navigator
- Transportation Provider
- Financial Services/Administration
- Enrollment Coordinator
- Language Interpreter/Translator
- Nurse-Related Role (e.g., APN, RN)
- Clinician (e.g., NP, PA, MD, DO, DDS)
- Behavior Health Provider (e.g., PhD, PsyD, LCSW, LCPC, Case Manager)
- Operations or Site Manager
- Other

5. Does your health center serve: [select all that apply]

- General Primary Care Population
- Special Populations: Migrant/Seasonal Agricultural Workers (MSAW), Residents of Public Housing, or People Experiencing Homeless
- Other Health Center Populations: School-Aged and/or Elderly Individuals, Military Veterans, Persons Living with Substance Use Disorder (SUD), Persons Living with HIV or AIDS, and/or Persons Formerly Incarcerated
- Other

6. How many patients does your health center serve?

- Under 15,000
- 15,000 - 49,999
- 50,000 - 99,999
- 100,000 or Greater

7. What services does your health center provide: [select all that apply]

- Dental/Oral Health
- Pharmacy
- Eye Health/Vision
- Behavioral Health
- Other

Virtual T/TA Listening Moment Tool - English cont.

8. How many service delivery sites does your health center have?

- 1 - 5
- 6 - 20
- 21 - 50
- Over 50
- Do Not Know/Unsure

9. What Training and/or Technical Assistance (TTA) topic(s) do you need [based on the BPHC Health Center Excellence Framework]? [select all that apply]

- Access and Affordability
- Quality, Patient Care and Safety
- Financial Sustainability
- Governance and Management
- Patient Experience
- Population Health, Social Determinants/Drivers of Health
- Workforce
- None of These
- Other

10. Are your Training and/or Technical Assistance (TTA) needs? [select all that apply]

- Role-Based (e.g., Community Health Workers vs. Financial Administrators)
- Topic-Based (e.g., Financial Management, Leadership Management, Development)
- Geography-Based (e.g., Rural-specific, State-specific)
- Other

11. How do you prefer to receive your TTA offerings? [select all that apply]

- E-Learning/Online Self-Paced Modules
- National Conferences: Virtual/Online
- National Conferences: In-Person
- Large National Training Workshops or Webinars/Topic-Focused: Virtual/Online
- Large National Training Workshops or Webinars/Topic-Focused: In-Person
- Peer- or Role-Based Networking or Facilitated Gatherings: Virtual/Online
- Peer- or Role-Based Networking or Facilitated Gatherings: In-Person
- Small-Cohort, Tailored Series of Events (e.g., Learning Collaborative): Virtual/Online
- Small-Cohort, Tailored Series of Events (e.g., Learning Collaborative): In-Person
- Online Communities
- Publications/Technical Assistance Materials
- Other

12. What is your preferred time amount for TTA offerings?

- 30 minutes
- 1 - 2 hours
- 2 - 3 hours
- 4 hours or more
- Other

Virtual T/TA Listening Moment Tool - English cont.

13. What type of publications/TTA materials are most useful for TTA offerings? [select all that apply]

- Marketing Templates
- Standard Operating Procedures (SOP)
- Job Descriptions
- Issue Briefs
- Case Studies
- Other

14. Which of the following 2021 National TTA Needs Assessment Top TTA Needs are your top Current needs? [select all that apply]

- Empowerment of Health Center Staff
- Improving Job Satisfaction and Staff Wellbeing
- Developing a Comprehensive Staff Retention Plan
- Developing Outreach Programs or Partnerships to Address Health Disparities
- Developing Outreach Services (e.g., community health workers, chronic disease prevention)
- Evaluation of Outreach Program(s)
- Leveraging Use of Data to Guide/Inform Clinical Quality/Operational and Financial Improvement
- Collection and Use of Enabling Services and Patient-Level Data to Address Social Determinants/Drivers of Health
- Expansion of Telehealth Delivery Provision
- None of the Above
- Other

15. Which of the following 2021 National TTA Needs Assessment *Emerging TTA Needs* are your top Emerging needs?

- Emergency Preparedness
- Funding
- Workforce
- Other

Virtual T/TA Listening Moment Tool – Spanish

1. ¿De qué estado o territorio es?

¿Cómo define el entorno comunitario al que sirve?

- Rural
- Suburbano
- Urbano
- Todas las anteriores

3. ¿Cuál es su función en el centro de salud?

- Primera línea con los pacientes
- Gerente de nivel medio (supervisor o no supervisor)
- Director/Líder Sénior/Ejecutivo
- Miembro de la Junta [si es miembro de la Junta, omita la siguiente pregunta]
- Instalaciones/Administración/Datos
- Otro

4. Más específicamente, ¿es usted... [seleccione todas las opciones que correspondan]

- Trabajador de salud comunitario/Promotor/Navegador de pacientes
- Proveedor de transporte
- Servicios financieros/Administración
- Coordinador de inscripciones
- Intérprete/Traductor de idiomas
- Función relacionada con el enfermero (p. ej., APN, RN)
- Médico (p. ej., NP, PA, MD, DO, DDS)
- Proveedor de salud del comportamiento (p. ej., PhD, PsyD, LCSW, LCPC, administrador de casos)
- Gerente de operaciones o sitio

5. Su centro de salud atiende: [seleccione todas las opciones que correspondan]

- Población general de atención primaria
- Poblaciones especiales: Trabajadores agrícolas migrantes/estacionales (MSAW), residentes de viviendas públicas o personas sin hogar
- Otras poblaciones de centros de salud: Personas en edad escolar y/o de edad avanzada, veteranos militares, personas que viven con un trastorno por consumo de sustancias (TUS), personas que viven con VIH o SIDA y/o personas anteriormente encarceladas
- Otro

6. ¿A cuántos pacientes atiende su centro de salud?

- Menos de 15, 000
- 15,000 a 49,999
- 50,000 a 99,999
- 100,000 o más

Virtual T/TA Listening Moment Tool – Spanish cont.

7. Qué servicios provee su centro de salud: [seleccione todas las opciones que correspondan]

- Salud dental/oral
- Farmacia
- Salud de los ojos/de la vista
- Salud del comportamiento
- Otro

8. ¿Cuántos sitios de prestación de servicios tiene su centro de salud?

- 1 a 5
- 6 a 20
- 21 a 50
- Más de 50
- No sé/No estoy seguro

9. ¿Qué temas de capacitación y/o asistencia técnica (TTA) necesita [según el Marco de excelencia del centro de salud de BPHC]? [seleccione todas las opciones que correspondan]

- Acceso y asequibilidad
- Calidad, atención al paciente y seguridad
- Sostenibilidad financiera
- Gobernanza y gestión
- Experiencia del paciente
- Salud de la población, determinantes sociales/impulsores de la salud
- Fuerza laboral
- Ninguno de esos
- Otro

10. ¿Son sus necesidades de capacitación y/o asistencia técnica (TTA)? [seleccione todas las opciones que correspondan]

- Basado en roles (p. ej., trabajadores de salud comunitarios frente a administradores financieros)
- Basado en temas (p. ej., gestión financiera, gestión de liderazgo, desarrollo)
- Basado en geografía (p. ej., específico de zona rural, específico de estado)
- Otro

Virtual T/TA Listening Moment Tool – Spanish cont.

11. ¿Cómo prefiere recibir sus ofertas de TTA? [seleccione todas las opciones que correspondan]

- Módulos de aprendizaje electrónico/en línea a su propio ritmo
- Conferencias nacionales: Virtual/en línea
- Conferencias nacionales: Presencial
- Grandes talleres de capacitación nacionales o seminarios web/centrados en temas: Virtual/en línea
- Grandes talleres de capacitación nacionales o seminarios web/centrados en temas: Presencial
- Redes de pares o basadas en roles o reuniones facilitadas: Virtual/en línea
- Redes de pares o basadas en roles o reuniones facilitadas: Presencial
- Serie de eventos personalizados para cohortes pequeñas (p. ej., aprendizaje colaborativo): Virtual/en línea
- Serie de eventos personalizados para cohortes pequeñas (p. ej., aprendizaje colaborativo): Presencial
- Comunidades en línea
- Publicaciones/Materiales de asistencia técnica
- Otro

12. ¿Cuál es su período de tiempo preferido para las ofertas de TTA?

- 30 minutos
- 1 a 2 horas
- 2 a 3 horas
- 4 horas o más
- Otro

13. ¿Qué tipo de publicaciones/materiales de TTA son más útiles para las ofertas de TTA? [seleccione todas las opciones que correspondan]

- Plantillas de marketing
- Procedimientos operativos estándar (POE)
- Descripciones de los puestos
- Resúmenes temáticos
- Estudios de caso
- Otro

Virtual T/TA Listening Moment Tool – Spanish cont.

14. ¿Cuáles de las siguientes necesidades principales de TTA de la evaluación nacional de necesidades de TTA de 2021 son sus principales necesidades actuales? [seleccione todas las opciones que correspondan]

- Empoderamiento del personal del centro de salud
- Mejora de la satisfacción laboral y del bienestar del personal
- Desarrollo de un plan integral de retención de personal
- Desarrollo de programas de extensión o asociaciones para abordar las disparidades en salud
- Desarrollo de servicios de extensión (p. ej., trabajadores de salud comunitarios, prevención de enfermedades crónicas)
- Evaluación de programas de extensión
- Aprovechamiento del uso de datos para guiar/informar la calidad clínica/mejora operativa y financiera
- Recopilación y uso de servicios habilitantes y datos a nivel de paciente para abordar los determinantes/impulsores sociales de la salud
- Ampliación de la prestación de servicios de telesalud
- Ninguna de las anteriores
- Otro

15. ¿Cuáles de las siguientes necesidades emergentes de TTA de la Evaluación Nacional de Necesidades de TTA de 2021 son sus principales necesidades emergentes?

- Preparaciones para emergencias
- Fondos
- Fuerza laboral
- Otro

Respondent Total by State/Territory

| | |
|--------------------|----|
| Alabama | 1 |
| Alaska | 1 |
| Arkansas | 4 |
| Arizona | 9 |
| California | 45 |
| Colorado | 25 |
| Connecticut | 2 |
| Florida | 12 |
| Georgia | 4 |
| Hawaii | 5 |
| Iowa | 6 |
| Idaho | 5 |
| Illinois | 11 |
| Indiana | 6 |
| Kansas | 4 |
| Kentucky | 2 |
| Louisiana | 4 |
| Maine | 7 |

| | |
|-----------------------|----|
| Maryland | 7 |
| Michigan | 19 |
| Minnesota | 4 |
| Missouri | 10 |
| Mississippi | 1 |
| Montana | 2 |
| New Mexico | 5 |
| New York | 14 |
| North Carolina | 13 |
| Ohio | 6 |
| Oklahoma | 3 |
| Oregon | 8 |
| Pennsylvania | 11 |
| Puerto Rico | 3 |
| Rhode Island | 2 |
| South Carolina | 7 |
| South Dakota | 5 |

| | |
|----------------------|----|
| Tennessee | 2 |
| Texas | 18 |
| Vermont | 1 |
| Virginia | 6 |
| Washington | 8 |
| Washington DC | 1 |
| West Virginia | 3 |
| Wisconsin | 3 |
| Wyoming | 1 |

Respondents' Occupational Roles

| Occupational Role - Virtual T/TA Listening Moment | |
|---|------------|
| | N |
| Clinician (e.g., NP, PA, MD, DO, DDS) | 178 |
| Community Health Worker/Promoter/Patient Navigator | 37 |
| Financial Services/Administration | 18 |
| Nurse-Related Role (e.g., APN, RN) | 9 |
| Operations or Site Manager | 46 |
| Behavior Health Provider (e.g., PhD, PsyD, LCSW, LCPC, Case Manager) | 2 |
| Transportation Provider | 1 |
| Language Interpreter/Translator | 3 |
| Enrollment Coordinator | 3 |
| Other | 48 |
| <i>C-Suite</i> | 15 |
| <i>Attorney</i> | 1 |
| <i>Chaplain</i> | 1 |
| <i>Clinical Services Coordinator</i> | 1 |
| <i>Dental Hygenist/Assistant</i> | 5 |
| <i>Workforce Development</i> | 2 |
| <i>Safety Officer</i> | 1 |
| <i>Outreach/Programs/Project Management</i> | 7 |
| <i>IT</i> | 2 |
| <i>Human Resources</i> | 1 |
| <i>Grant/Risk Manager</i> | 2 |
| <i>Culture + Communications</i> | 1 |
| <i>Emergency Preparedness</i> | 1 |
| <i>Quality Improvement</i> | 2 |
| No response | 6 |
| More than 1 | 38 |

Needed Workforce Skill-Building [Listening Moment Pop Up Wall]

| Workforce Skill-Building T/TA Needs - Listening Moment Pop Up Wall |
|---|
| Frontline Staff: Customer Services + Excel Training |
| Dental + Medical Assistant Trainings: Immunizations, Core Skills |
| Mangement of Time + Effort for Staff |
| Motivational Interviewing |
| Board Meeting Facilitation Training |
| EMR Training (e.g., Continuous Updates/Offers, Behavioral Health, Dental, Interoperability) |
| Succession Planning for All Staff Levels |
| Grants Management |
| Advanced and Engaging Patient + Employee Surveys |
| JEDI (Justice, Equity, Diversity, Inclusion) 101 |
| Core Skills: Mid-Level Management (e.g., how to complete a 1 - on - 1 with staff) |
| De-escalation Strategies |

Successful T/TA Offerings [Listening Moment Pop Up Wall]

| Successful T/TA Offerings - Listening Moment Pop Up Wall |
|---|
| NACHC Revenue Cycle Management Training |
| NACHC FOM 1 - 3 Trainings |
| NACHC Board Bootcamp + Resources |
| IT Trainings |

January 9, 2024

All-NTTAP Health Center Training & Technical Assistance (TTA) National Needs Assessment Collaborative Project

January 9, 2024 – HRSA/BPHC NTTAP Forum, Rockville, MD

*Needs Assessment Working Group (NAWG) Co-Chairs:
Christine Riedy Murphy, MA, PhD, National Center Equitable Care for
Elders + Jose Leon, MD, National Center for Health in Public Housing
NACHC Staffing Support: Gina Capra, Sarah Rittner (Contractor)*

NTTAP TTA Needs Assessment Today's Agenda

Past

2018 + 2021 TTA Needs
Assessment Process +
Findings

Present

2023 Pop-Up Wall + Virtual
Listening Moments
Process + Findings

Future

Where We Are Headed +
Next Steps to Getting
There



Past: History of the National Health Center TTA Needs Assessment

- New Charge from BPHC to all National Cooperative Agreements (NCAs) 2017-20:
 - NACHC [as the “new” National Resource Center (NRC) for Health Center TTA], in collaboration with all NCAs, must design and conduct a consolidated, streamlined national health center TTA needs assessment to inform the development of operational TTA needed by health centers to advance health center access, quality and impact.
 - Reduce burden and duplication for health center receiving multiple needs assessments from NCAs (pre-cursor to NTTAPs); increase NCA collaboration in the design and delivery of TTA
- All FQHCs and Look-Alike health centers were invited to complete the “new” consolidated, national assessment in Aug-Nov 2018

2018 TTA Needs Assessment – ongoing communication, review, revision with BPHC’s NCA/SPD team; NACHC was guided by the NCAs Needs Assessment Working Group led by NNOHA (Candace Owen) and NHCHC (Alaina Boyer)

Fielding

4-week Pilot: – Spring 2018
Revisions/BPHC Review followed
Full: Deployment: Aug - Nov 2018
Qualtrics survey platform

Response Rate

56% of health centers
1373 total respondents
approx 62% C-Suite
approx 38% Frontline Staff

Promotion

BPHC Digest, BPHC Presentations
NTTAPs + PCAs
Emails, Websites, Listservs, Conferences, Social Media

Measures

Health Center Size + Location
Vulnerable Populations
Special Population Funding

Top 3 TTA Needs

- 1) Value-Based Health Care Transformation
- 2) Workforce (Recruitment + Retention, Leadership, Management)
- 3) Clinical (Behavioral Health, Quality, + Oral Health)

Products

Final Report
Fielding Guide
State Profiles for PCAs
Summary Infographic

NACHC Contractor Support: NORC

2021 TTA Needs Assessment ongoing communication, review, revision with BPHC’s NTTAP/SPD team; NACHC was guided by the Needs Assessment Working Group led by MCN (Jillian Hopewell) and NCEE (Christine Riedy)

REFERENCE: Full Report + Tool: https://www.nachc.org/wp-content/uploads/2022/03/NACHC_TTA-Assessment-Report_Final_2022_revised-3.23.22.pdf

Fielding

BPHC approved delay due to Covid Pandemic Response
4 Week-Pilot: May – June 2021
Review/Revision followed
Full: August – November 2021
Qualtrics survey platform

Response Rate

36% of health centers
1106 total respondents
36.6% C-Suite
63.4% Frontline Staff

Promotion

BPHC Digest, BPHC Presentations
NTTAPs + PCAs
Emails, Websites, Listservs, Conferences, Social Media

Measures

Advancing Health Center Excellence
Domains + Maturity Framework
Health Center Size + Location
Vulnerable Populations
Special Population Funding

Top 3 TTA Needs

- 1) Quality, Patient Care + Safety
- 2) Workforce Experience + Development
- 3) Access + Affordability

Products

Final Report
Fielding Guide
State Profiles for PCAs
Summary Infographic
Deep Dive Topical Analysis

NACHC Contractor Support: JSI, Inc.

2021 TTA Needs Assessment Products



Summary Report

- Findings Reported & Analysis
- Final Needs Assessment Tool
- Responses by Domain
- Drop-Out Responses



State Profiles

- State-level responses by number, size, and location
- Top TTA Needs by Topic



And more!

- Infographic -Summary of Findings
- Detailed micro-analysis on
- Video Summarizing Key Findings
- June 2022 Learning Collaborative

<https://www.nachc.org/resource/national-health-center-training-and-technical-assistance-needs-assessment/>

2021 TTA Needs Assessment Products



Summary Report

- Findings Reported & Analysis
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Present/New BPHC Requirement: Year 1 Assessment

Listening Moments Approach/Facilitated In-Person Pop-Up Wall

| | |
|--------------------------|--|
| Events (Physical Pop Up) | 1) NACHC CHI Conference (August 2023) 2) NACHC FOM-IT Conference (October 2023) |
| Participants | <ul style="list-style-type: none"> • 57 individuals from 27 states + Puerto Rico ✓ 51% Executive Leadership ✓ 32% Administrative/Operations ✓ 11% Board Member ✓ 7% Provider Team ✓ 4% Spanish Speaking |
| Metrics | <ul style="list-style-type: none"> • Role + Location (Map) • Emerging + Urgent Needs • TTA Gaps • Methods + Modalities for Receiving TTA • TTA Success |
| Top Themes | <ul style="list-style-type: none"> • AI + Cybersecurity (e.g., How to Keep Personal Connection, Health Education, Training, Policies/Procedures) • Siloed Department/Functions (e.g., Clinical + QI/QA + Admin) • Workforce (e.g., wellness, recruitment/retention, general skills, management/supervisory skills, staff + leadership succession) |



WHAT IS A NTTAP?

Funded by HRSA's Bureau of Primary Health Care (BPHC), the **22 HRSA National Training and Technical Assistance Partners (NTTAPs)** provide subject matter expertise through the development, delivery, coordination, and evaluation of **FREE training and technical assistance (TTA) offerings to health center grantees - look-alikes.**

Examples of TTA Subjects Include:

- Capital Development + Growth
- Clinical Quality Improvement
- Patient Safety
- Intimate Partner Violence
- Human Trafficking Prevention
- Workforce Development, Recruitment, and Retention
- Health Information Technology
- Data
- Medical-Legal Partnership
- Oral Health
- Older Adults
- School-Aged Children
- Asian American, Native Hawaiian, + Other Pacific Islander Communities
- Disaster Experiencing Homelessness
- Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) Individuals
- Migratory + Seasonal Agricultural Workers
- Residents of Prisons, Housing

Present: 2023 Virtual Listening Moment



| | |
|---------------------|---|
| Online Fielding | <ul style="list-style-type: none"> • August – December 2023 • NNOHA + East Coast Migrant Stream Forum Events • Available in English + Spanish |
| Participants | <ul style="list-style-type: none"> • 317 respondents from 39 states + Puerto Rico ✓ 51% Executive Leadership (over 55% Clinical Provider) ✓ 27% Frontline Staff ✓ 13% Mid-Level Manager ✓ 2% completed in Spanish |
| Metrics | <ul style="list-style-type: none"> • Role + Location (Map) • Health Center Size (Patient Panel + Number Clinics) • Health Center Services + Populations Served • Current + Emerging TTA Needs, Modes + Modalities |
| Top TTA Needs, etc. | <ul style="list-style-type: none"> • Health Center Excellence Framework: Workforce • TTA Based On: Topic • Length of TTA Offering: 1 – 2 hrs • Modality: E-Learning/Online Self-Paced Modules • Current Needs: Improving Job Satisfaction and Staff Wellbeing + Developing a Comprehensive Staff Retention Plan • Emerging Needs: Workforce |

Present: 2023 Virtual Listening Moment



| | |
|---------------------|---|
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Present: 2023 Virtual Listening Moment



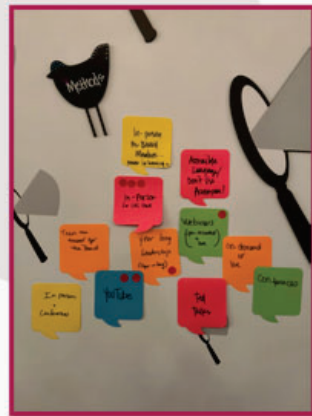
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Discussion/Q+A



Thank You!

The National Resource Center Advisory Group (NRC AG) is hosted and supported by the National Association of Community Health Centers (NACHC) in its NTTAP role as the National Resource Center for Health Center T/TA.

All NTTAPs currently have representation on the NRC AG and its' three collaborative project working groups: TTA Needs Assessment, Clearinghouse, Common Evaluation/ROI

The NRC AG is guided by a NTTAP-Volunteer Leadership Team, referred to as the Steering Committee. Their tenure, meeting cadence and criteria are part of the NRC AG Roles & Responsibilities were reviewed, revised and disseminated across all NTTAPs June-October 2023.

For more info, contact trainings@nachc.org or Gina Capra at gcapra@nachc.org

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$6,625,000 with zero percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).



Contact Us



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Community Health Centers®

