Evaluation of Connecticut's Recovery Friendly Workplace (RFW) Toolkit Initiative funded through the CT Statewide Opioid Response (SOR) grant



A presentation to the Alcohol and Drug Policy Council Prevention Subcommittee

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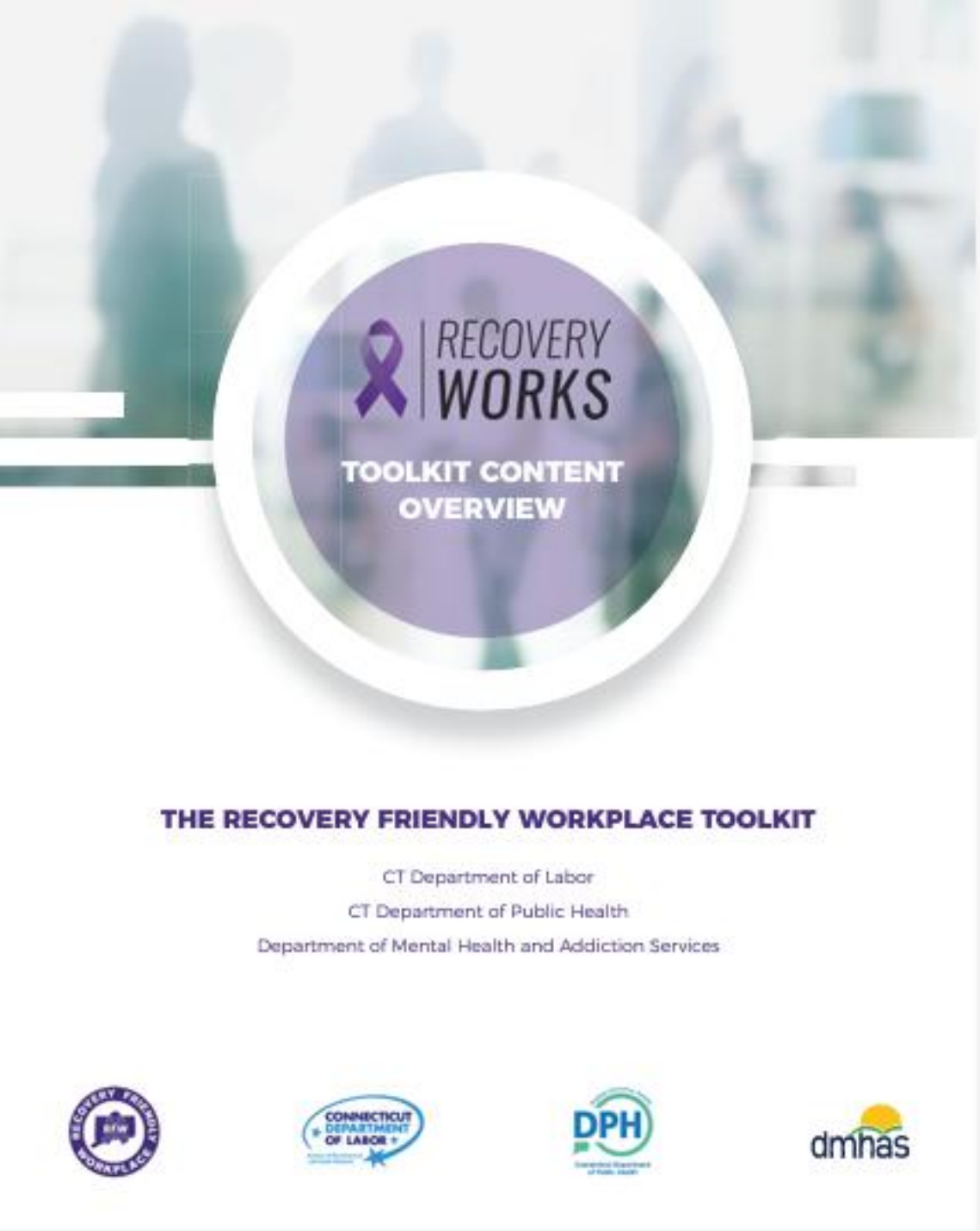
By the DMHAS Center for Prevention Evaluation and Statistics (CPES) at UConn Health



- **The RFW initiative** was launched in 2020 by the Connecticut Department of Labor (DOL) and Connecticut Department of Mental Health and Addiction Services (DMHAS).
- The initiative is based on the **development and implementation of a toolkit** that is utilized by CT-based organizations looking to assess existing organizational practices and expand resources to **support substance use disorder (SUD) recovery in their workplaces**.
- The **DMHAS Center for Prevention Evaluation and Statistics (CPES) at UConn Health** developed method(s) and tool(s) to evaluate Recovery Friendly Workplace toolkit effectiveness by assessing the barriers, facilitators to implementation and sustainability of RFW toolkit, and making recommendations based on those findings.

3.1

ASSESSMENT OF CURRENT PRACTICES

Before launching an Recovery Friendly Workplace (RFW) initiative, it is important to assess your current health and safety practices regarding substance use disorder (SUD) to know where you stand and what you may need to honor based on past practices.

Here's a list of questions to help guide your initial assessment.

- **What is your organization's history with SUD?** Is there a high incidence of substance use disorder?

  What practices and protocols have been used to handle it? What are the gaps in your policies that would prevent an employee from accessing help?

- **What resources are in place now for employees seeking help related to SUD and mental illness?** Have these resources been used – and are they effective?
- **What is the internal awareness level of what you do for employees with SUD?** Do all employees know of current offerings?
- **What is the level of sophistication among employees regarding substance use?** Do people know what it is and what to do if they see behavior they think is related to SUD?
- **Does your company hire people in safety-and security-sensitive industries?** These industries may require specific actions on your part regarding an employee with SUD.
- **What ideas do your employees have to support recovery in the workplace?** Front-line employees often have good ideas for how to deal with front line problems.





Evaluation Questions



What is the RFW recruitment process employed by project coordinators and/or peer navigators?



What are the barriers and facilitators to RFW engagement?

Why do organizations not engage in the RFW process after recruitment attempts are made?



How are the toolkit and RFW process used and adapted by RFW project coordinators to best fit with regions and/or organizations?



What are policy and practice changes within organizations before and after RFW toolkit implementation and the barriers and facilitators to changes?

Recruitment Efforts



Built on Existing Relationships

- Regions focused on local, personalized outreach to small businesses and non-profit organizations;
- Utilized existing partnerships with (e.g., Board Member organizations, union contacts, local chambers and councils);
- Networked with sister organizations to those already recruited.

Utilized Marketing Approaches

- Flyers;
- Mass mailers (Mail Chimp, Constant Contact);
- Presentations at job fairs;
- Regional Recovery events;
- Lunch and Learns.

Pooled Resources

- Standard messaging across all regions e.g., billboards, local radio stations, Spotify;
- Statewide presentation (10-15 min) shared with local businesses – collaborative effort across regions



Adaptations and Innovations

- **Tying RFW to Narcan training**: involving transportation/bus line drivers into the Narcan trainings and subsequently RFW. They used the possession of first aid kits on buses as analogy to carrying Narcan kits.
- **Putting RFW under the umbrella of behavioral health/wellness workplace** to address the stigma of "recovery friendly."
- **Developing user-friendly guide to the toolkit** for organizations committed to going through RFW program.

Key Takeaways



What are the barriers and facilitators to RFW engagement?

- **Facilitators to engagement:**
- To engage organizations, Project Coordinators:
  - shared mutual connections and referred coordinators to organizations in their regions;
  - were intentional about how they portrayed RFW to organizations to allay fears of big RFW policy changes, explaining that it is scalable and can be revamped to what it meant to these organizations and what programs they already had in place;
  - highlighted the cost saving benefits of RFW to businesses such as preventing absenteeism in the long run.

Recruitment Challenges

- Some organizations were reluctant to become RFW because they felt the process was too much work for two few tangible benefits.
- Stigma associated with the substance misuse aspect of “recovery friendly” limited the interest in RFW by come organizations, particularly those in the commercial sector. Regions’ initial focus on organizations in the “helping professions” more in tune with substance use as a concern yielded positive results, but stigma of the “recovery friendly” label still needs to be addresses.
- Other organizations were concerned about insurance premium increases and legal issues associated with becoming a RFW.
- The lack of a statewide campaign to raise awareness of the benefits of being a RFW and substance use in the workplace (reducing stigma) may have facilitated recruitment by addressing these issues.
- Limited support for peer navigators in most regions was a barrier, because peer navigators were a key resource for the organizations, bridging the gap between RFW Coordinators and workplaces, and workplaces and workers, as they considered and navigated the RFW process.

Source: Project Coordinator Feedback

Key Takeaways



What are the barriers and facilitators to RFW engagement?

- **Barriers to engagement**: The following reasons were cited for lack of engagement or participation in the RFW process:
  - Stigma associated with substance use disorders and concern about the possibility of insurance premiums increasing;
  - Workforce challenges (e.g., significant understaffing), as committing to RFW is perceived as additional work that could not be managed with the existing resources;
  - RFW policy changes are perceived as time-consuming, especially with the issue of understaffing;
  - Procedures and laws (e.g., cannabis legalization) are still poorly understood, especially as it translates to the workplace;
  - Lack of perceived financial benefits (e.g., no tax benefits);
  - No statewide efforts to back up RFW e.g., education to workplaces about RFW;
  - Organizations, especially smaller ones, do not see the immediate needs;
  - Organizations found the RFW toolkit too bulky to utilize;
  - Lack of peer navigators to help with engagement efforts;
  - Lack of funding to cover regionally customized RFW promotional materials.

Recruitment Facilitators



- Assuring employers that this initiative is an additional tool for EAP;
- No policy changes required;
- No new team of people or new hires are required to participate;
- Participation in the initiative did NOT require them to hire someone in recovery;
- Regions with peer navigators utilized them widely, which increased success;
- Adaptation of the toolkit to fit organizational contexts e.g., customizing to fit companies' circumstances;
- Development of training resources.

Source: Project Coordinator Feedback

Number of Organizations at Each Evaluation Step*

Region	Number of Organizations Completed Pre-assessment	Number of Organizations Completed RFW Certification Checklist	Number of Organizations Completed Post-assessment
1	13	7	10
2	4	3	3
3	14	15	2
4	2	2	1
5	1	3	0
Total	34	30	16

*Preliminary data, in process

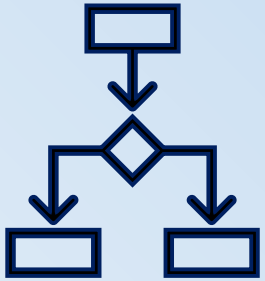
Sources: Pre-Assessment, Post-Assessment, and Project Coordinator Check-in document

Key Takeaways



RFW ACCOMPLISHMENTS





Toolkit Adaptations

- Project Coordinators adapted RFW toolkit in various forms to better fit the process to their regions and organizations
- Regions customized messaging and promotional materials by branding with their logos to fit their communities and organizations.
- The evaluation team collected toolkit documentation from project coordinators who made adaptations to the toolkit.
- Approaches from different regions were compared to describe the diversity of approaches to fit the resources to participating organizations.

Regional Adaptations: Region 1 (The Hub)

- The Hub distilled the RFW toolkit into a summary document:
  - 4-page summary document contains:
  - The internal assessment
  - Sample statement of commitment
  - Sample companywide email
  - Steps to building consensus
  - Links to resources for training and education (including full RFW toolkit)
  - Post assessment survey
  - Sample workplace policy

Regional Toolkit Adaptations: Region 3 (SERAC)

- SERAC developed an RFW Employer Orientation packet, which was available to organizations both digitally and physically.
- Packet is a 17-page document containing:
  - An overview of RFW and some benefits (Save Money, Save Lives)
  - RFW testimonials
  - Summarized RFW toolkit [8 Steps to be RFW: Internal Assessment/Employee Survey, Build A Consensus/Make A Declaration, Template: Declarations of Intent, Peer Champion/Make Resources Available, Training and Education (Links to resources, including full RFW toolkit), Receiving Certification]
  - Sample internal communications/company-wide email
  - Poster template
  - State official statement.

Regional Adaptations: Region 5 (Western CT Coalition)

- Western CT Coalition looped in mental/behavioral health in their messaging on RFW.
- Western CT Coalition in conjunction with a behavioral health network, developed a stigma free language guidance document and training videos for employers and employees that can be used as primers for highlighting the prevalence of substance misuse and the benefits of becoming Recovery Friendly.
  - ❑ Training videos included resources for staff:
    - 3 min. video on impacts of language
    - 20 min. training on the biological development of a substance use disorder.
    - Library of assorted speakers with personal experiences of substance use disorders
  - ❑ Training videos included resources for employers:
    - 1 hr. training with call to action for RFW and steps to take.
    - 42 min. training to understand COVID's impact on mental health in the workplace and what resources and tools are available to implement in the workplace.
    - 1 hr. training to learn how to use the cost calculator and the prevalence of employee substance misuse in the workplace.
    - 46 min. training to learn about how trauma-informed care principles can be infused into the supervision work to re-energize employers and increase staff satisfaction and engagement.

Thank you!

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