

2017

ORGANIZATIONAL ASSESSMENT TOOL

for sexually transmitted and blood-borne
infections (STBBIs) and stigma



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INTRODUCTION

The prevention, diagnosis, treatment and management of sexually transmitted and blood-borne infections (STBBIs), such as HIV, hepatitis, chlamydia, gonorrhea, syphilis and human papillomavirus, are important public health issues. However, stigma and discrimination within health and social service settings often complicate public health efforts by acting as barriers to clients who try to access and use STBBI-related services.

Reducing stigma and discrimination requires a multifaceted approach. Stigma and discrimination arise from the attitudes, values, beliefs and practices of individuals, in addition to the policies, procedures, culture and environment of service organizations.

This organizational assessment tool will assist health and social service organizations create settings where clients feel welcomed and respected when seeking care, and where staff and volunteers are supported in providing care in a safe and inclusive environment. The tool helps identify the policy, environmental and cultural factors that contribute to stigma and discrimination and which affect individuals' access to and use of available STBBI prevention and treatment services.

THE ASSESSMENT TOOL WILL HELP ORGANIZATIONS TO:

- identify their strengths and challenges related to stigma and discrimination;
- increase awareness of organizational issues (e.g., policies, procedures, culture and environment) that create stigmatizing and/or discriminatory experiences for clients; and
- develop strategies to decrease stigma and discrimination and create safer and more supportive environments.

USING THE TOOL

This assessment tool is suitable for any health or social service organization, including clinics that specialize in sexual health, harm reduction or STBBI services, as well as organizations that provide a broad range of services. While the tool is primarily targeted at those organizations providing STBBI-related services, ensuring a safe and respectful environment is imperative for all health and social service organizations, and particularly for those working with traditionally marginalized populations.

One of the greatest benefits of this tool is that it can foster open discussion among all staff (including administrative staff, intake workers, clinical staff and community outreach workers) about their various roles in creating a positive environment for clients. Rather than being treated as a stand-alone exercise, the assessment process should be integrated into an organization's ongoing quality improvement process.

THE ASSESSMENT TOOL CONSISTS OF THREE SECTIONS:

- **Section 1 - Completing the organizational assessment:** describes the steps involved in preparing for and completing the organizational assessment;
- **Section 2 - Organizational assessment tool:** includes the assessment questions and rating scale that can be used by organizations to identify their strengths and challenges related to the reduction of stigma and discrimination; and
- **Section 3 - Developing the improvement plan:** describes the process for developing an action plan that addresses the priority issues identified through the organizational assessment.



ONE OF THE GREATEST BENEFITS OF THIS TOOL IS THAT IT CAN FOSTER OPEN DISCUSSION AMONG ALL STAFF ABOUT THEIR VARIOUS ROLES IN CREATING A POSITIVE ENVIRONMENT FOR CLIENTS.



SECTION 1

COMPLETING THE ORGANIZATIONAL ASSESSMENT

1.1 LONG-TERM GOAL

The long-term goal of the organizational assessment process is to create an environment where clients feel welcomed and respected when seeking care, and where staff and volunteers are supported in providing care.

FOR THIS LONG-TERM GOAL TO BE ACHIEVED, THESE THREE CONDITIONS SHOULD BE MET:

1. organizational policies, procedures, culture and environment are supportive and inclusive;
2. service providers possess the core competencies relevant to their professional roles; and
3. clients feel comfortable, welcomed and supported when interacting with the organization.

With this tool, organizations can assess their capacity and progress towards achieving these three conditions.

1.2 REFLECT ON THE NEEDS OF YOUR COMMUNITY AND YOUR CLIENTS

Before using the tool, reflect on the needs of your current clients and the community at large, and on potential factors contributing to stigma and discrimination amongst your clients and community.

- What is the role of your organization in the community?
- What is the profile of your existing clients? Why do you think these individuals come to you for services?
- What members of the community, if any, are not coming to your organization? In your view, why are they not accessing your services?

If some people in your community are not seeking services from your organization, they may be experiencing or perceiving some form of stigma, they may be choosing to access services elsewhere, or they may not be accessing services at all. The best way to determine whether there is an unmet need in your community is to reach out to these people. If your organization does not have a relationship with a particular group, consider partnering with another organization or volunteer group that does.

Once you have determined whether people are able to access the services they need, you can plan accordingly. If they are accessing services elsewhere, then providing them with information and referrals may be sufficient. If, however, a group of people are not able to access the services they need, then you must determine what your organization can do for them given available resources.

IF SOME PEOPLE IN YOUR COMMUNITY ARE NOT SEEKING SERVICES FROM YOUR ORGANIZATION, THEY MAY BE EXPERIENCING OR PERCEIVING SOME FORM OF STIGMA.



1.3 START THE ASSESSMENT PROCESS

FOLLOW THESE STEPS TO BEGIN THE ORGANIZATIONAL ASSESSMENT PROCESS:

1. Identify who should participate in the organizational assessment process. In some cases, only one part of the organization (e.g. sexual health clinic) will do the assessment, and in others the whole organization will be involved.
2. Engage the entire “chain” of staff and volunteers with whom clients come in contact.¹
3. Identify where/how this assessment process fits within your organizational policies and processes. Ideally, the tool can be incorporated into regular quality improvement practices as a way of reinforcing a welcoming and supportive culture throughout the organization, rather than being seen as an “extra” process.
4. Encourage all staff and volunteers involved in the assessment process to complete the [Self-assessment tool for STBBIs and stigma](#) and reflect on their own attitudes, values and beliefs related to STBBIs.

¹ If it is not possible to engage the entire group of staff and volunteers in completing the assessment, consider using it with a smaller, representative group of staff and volunteers involved in the various stages of client engagement. Bring their responses to the larger group for further discussion and action.

1.4 COMPLETING THE ASSESSMENT PROCESS

STAFF AND VOLUNTEERS SHOULD FOLLOW THESE STEPS TO COMPLETE THE ASSESSMENT PROCESS:

1. Complete the assessment individually using the rating scale and assessment questions provided in Section 2. Managers should ensure a supportive, constructive environment, so that staff and volunteers feel they can respond openly to the assessment questions.
2. Meet to discuss their responses to the questions as well as their reflections on the process. This is an important learning opportunity and should foster frank and constructive discussion of organizational challenges and strengths.
3. As a group, choose an average rating for the organization for each of the assessment questions.
4. As a group, identify priority areas for action.

1.5 DEVELOPING THE IMPROVEMENT PLAN

Next, your organization should develop an improvement plan to address the priority issues identified in the assessment process. This plan should reflect the time and resources available to ensure that the plan's deliverables are reasonable and achievable.

1. Bring together a working group to develop the plan, consisting of staff and volunteers who have an understanding of the primary organizational challenges, strengths and decision-making power.
2. Obtain senior management approval of the plan.
3. Circulate the plan to relevant staff and volunteers so they know what actions are required on their part.
4. Keep the working group regularly informed of the plan's progress.
5. Revisit your organizational assessment at regular intervals (at least yearly) to assess progress and enhance awareness of stigma and discrimination.



SECTION 2

ORGANIZATIONAL ASSESSMENT TOOL

This tool is divided into three areas of assessment based on the conditions necessary to achieve a safe and supportive organizational environment:

1. organizational policies, procedures, culture and environment are supportive and inclusive;
2. service providers possess the core competencies relevant to their professional roles; and
3. clients feel comfortable, welcomed and supported when interacting with the organization.

Each section includes background information on the criteria, examples of how criteria have been applied and a series of assessment questions that will help identify priorities for action at the organizational level. Document the answers to the assessment questions using the rating system below:

- Y - Yes, we have addressed this issue
- R - We have recognized this issue and are starting to work on it
- N - No, we have not yet addressed this issue
- NR - This issue is not relevant to our work

For each question, there is a comments section for you to reflect on the contextual factors that your organization will need to consider in order to address the given issue.

Complete the assessment form individually, and then discuss your ratings and comments as a group to determine an average rating for your organization. Then, together you can identify priorities for action.

2.1 ORGANIZATIONAL POLICIES, PROCEDURES, CULTURE AND ENVIRONMENT ARE SUPPORTIVE AND INCLUSIVE

In order to act on any given issue, each organization requires institutional support, often expressed through a statement of organizational values or a formal policy. If your organization does not have a policy or values statement that specifically mentions STBBIs, sexual health or harm reduction, look for statements that address stigma reduction and the provision of services that are free of discrimination. Staff and clients should be made aware of such policies and should understand the mechanisms available to them for reporting instances of stigma or discrimination.

Respect for privacy and confidentiality is the basis of any trusted relationship between an organization, a provider and clients. Providers and organizations have a duty to protect the privacy of their clients and ensure the confidentiality of any information clients disclose to them. This respect should be formalized through organizational policies and procedures. Further, clients should be explained their right to privacy and should be made aware of the mechanisms available to them in the case of a breach of information.

Finally, management and other individuals involved in leadership should play a key role in reinforcing a culture of respect and inclusivity. They act as models of organizational expectations through their communication with staff and volunteers.

EXAMPLE

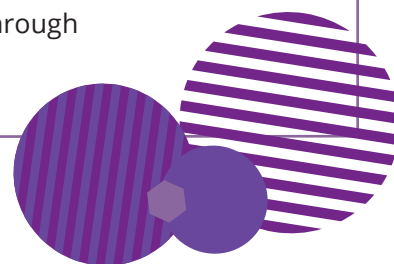
One community health centre developed the following policy statement on stigma and discrimination.

The Centre believes in the uniqueness and potential of every individual, and values diversity as an asset to the organization, to our society and to community life. We strive to ensure that every staff person, student, service user, board member, community member and volunteer feels welcome and respected at our Centre.

The Centre is non-discriminatory in its practices and policies, and takes an active role to eliminate discrimination on the basis of race, ancestry, place of origin, skin colour, ethnic origin, citizenship, creed, religion, age, gender, sexual orientation, marital status, family status, health status, job position, economic status, ability, or physical attributes and appearance.

The Centre will not tolerate discrimination of any kind, whether engaged in by employees, directors, students or volunteers. Centre programs and activities are conducted in a manner that is sensitive to diversity and an individual's right to appropriate services.

Issues of discrimination that are not resolved will be addressed through the Centre's conflict resolution policy.



Assessment questions	Rating (Y, R, N, NR)	Comments
1. Does your organization have a formal commitment to a non-discriminatory approach (i.e., a values or policy statement)?		
2. Does your organization have a formal policy related to respect for privacy of clients and confidentiality of personal information?		
3. Are the policy/values statements prominently displayed in places where clients can see them (waiting rooms, reception areas)?		
4. Does your organization support the implementation of these policies (i.e., conduct regular reviews of policy implementation)?		
5. Does your organization have a complaints mechanism for clients who have experienced discrimination or a violation of their privacy/confidentiality rights? Are clients made aware of this mechanism?		
6. Does your leadership reinforce the organization's commitment and implementation of these policies (via staff meetings, communications materials, day-to-day interactions)?		

2.2 SERVICE PROVIDERS POSSESS THE CORE COMPETENCIES RELEVANT TO THEIR PROFESSIONAL ROLES

The Canadian Public Health Association (CPHA) developed a set of STBBI-related core competencies that reflect the knowledge, skills, attitudes and behaviours that front-line service providers need in order to strengthen services and improve health outcomes for those at risk of or living with STBBIs.²

It is imperative that organizations assist providers in developing and maintaining these core competencies through the provision of training and ongoing support, along with ensuring access to resources and expertise.

2.2.1 TRAINING

Both clinical and non-clinical providers should receive regular training tailored to their professional role to enable them to deliver services that acknowledge and address stigma and discrimination.

Equally important, service providers should be aware of their own attitudes, values and beliefs related to STBBIs, sexuality, substance use and harm reduction, and how these factors affect their ability to provide effective STBBI prevention, diagnosis, treatment and management services.

Assessment questions	Rating (Y, R, N, NR)	Comments
1. Do clinical staff receive training to support the provision of STBBI prevention, diagnosis, treatment and management services (e.g., knowledge of STBBIs and of various prevention, testing and treatment options)?		
2. Do all staff and volunteers receive training on the factors that make individuals more vulnerable to STBBIs, stigma and discrimination (including individual, community and systemic factors ³)?		
3. Do all staff and volunteers (clinical and non-clinical) receive training to support service provision in a safe and respectful environment (e.g., training on language, cultural safety, stigma reduction, trauma- and violence-informed services, etc.)?		

² Canadian Public Health Association, 2014. *Core Competencies for STBBI Prevention*.

³ Canadian Public Health Association, 2014. *Factors Impacting Vulnerability to HIV and other STBBIs*.

2.2.2 SUPPORT

Working as a frontline staff member or volunteer in a health or social service setting can be challenging. For example, you may experience vicarious trauma because of repeated exposure to the experiences of your clients.

Staff and volunteers need to feel supported within the organization and must be provided with avenues to raise questions, concerns and experiences openly with their supervisors and colleagues, without fear of repercussion.

Assessment questions	Rating (Y, R, N, NR)	Comments
1. Do staff and volunteers feel they have easy access to personal and professional support (support from supervisors and co-workers) to deal with challenging cases/issues?		
2. Do staff and volunteers feel they work in an environment that supports open discussion about issues related to stigma and discrimination?		
3. Are management, staff and volunteers trained to recognize the signs of compassion fatigue, vicarious trauma and burnout in themselves and their co-workers?		

2.2.3 ACCESS TO RESOURCES AND EXPERTISE

Some clients may experience issues that require access to specialized services. For example, you may need to refer to specialized clinical services for people living with HIV, harm reduction services for people who use substances, support services for people with mental health problems, clinical and psychosocial support services for trans or gender diverse people (e.g., hormone therapy, gender confirming surgery), or services addressing social determinants of health such as poverty, food insecurity and precarious housing. For such cases, having pre-established relationships with agencies or groups dealing with these issues allows providers to consult with them for advice or to refer clients to these organizations.

However, clients should never be referred elsewhere as a matter of course; do so only if your organization cannot meet their needs. Addressing the client's needs in a safe and effective manner should be the paramount concern.

EXAMPLE

A health centre has a referral agreement with an organization that specializes in counselling people living with HIV. This allows clients to access peer counsellors through the referral organization while continuing to receive their primary care services from the health centre. In addition, the health centre seeks out advice from the counselors for its own program design, resource development and training.



Assessment questions

Rating (Y, R, N, NR)

Comments

1. Has your organization developed relationships with other organizations in the community that offer specialized services (both clinical and non-clinical) and/or deal with issues frequently faced by traditionally marginalized communities?

2.3 CLIENTS FEEL COMFORTABLE, WELCOMED AND SUPPORTED WHEN INTERACTING WITH THE ORGANIZATION

Following every interaction with your organization, clients will form strong and lasting impressions about how they will be received in the future and whether their concerns will be taken seriously. Reflect on the following questions:

- How do people learn about your organization?
- Is it easy for people to access your organization and its services?
- Do you create a welcoming and safe environment for your clients?
- How are clients treated during the intake process?
- Does your organization actively engage with different community groups?

2.3.1 HOW DO PEOPLE LEARN ABOUT YOUR ORGANIZATION?

Often people learn about your organization through ads, posters or pamphlets, or through your organization's website. What image is presented in these materials? Does the 'public face' of your organization reflect the population groups you serve (e.g., different socio-cultural groups, sexual orientations, ages, abilities, etc.)?

Some clients do not have access to commonly used media, so communicating with them will require special tactics. Some examples include working with outreach workers/volunteers who regularly engage with marginalized individuals, or developing formal partnerships with organizations and groups that work with specific population groups.



Assessment questions	Rating (Y, R, N, NR)	Comments
<p>1. Do the images and language used in your organization's communications (e.g., ads, posters, pamphlets, websites) include positive images of the population groups you serve?</p>		
<p>2. Within your health promotion messaging, do you refrain from the use of fear-based campaigns that stigmatize specific behaviours or groups of people?</p>		
<p>3. Does your organization have specific strategies to reach different population groups in your community?</p>		

2.3.2 IS IT EASY FOR PEOPLE TO ACCESS YOUR ORGANIZATION AND ITS SERVICES?

Some clients, particularly those from marginalized communities, experience more challenges than others in accessing services. For example, your location and its proximity to public transit, accessibility for people living with disabilities or your hours of operation can be inhibiting factors for clients.

EXAMPLE

Recognizing that many of their clients did not have regular access to health care, an emergency housing shelter developed a partnership with a community clinic so that a nurse practitioner was available to provide basic primary care and preventative services on-site once a week. This addition increased client access to essential health services and fostered an ongoing relationship with a health care provider.

Assessment questions	Rating (Y, R, N, NR)	Comments
1. Does your organization provide services at hours and locations that are convenient for clients, particularly individuals from marginalized communities?		
2. Does your organization provide after-hours assistance to clients?		
3. Does your organization provide other assistance to address accessibility issues (e.g., childcare services, assistance with transportation)?		

2.3.3 DO YOU CREATE A WELCOMING AND SAFE ENVIRONMENT FOR YOUR CLIENTS?

The tone you set at the door of your organization creates a strong first impression for clients. This includes the first encounter with a staff person or volunteer; the kinds of posters, artwork and magazines⁴ in the reception area or waiting room; or the way clients are greeted on the phone.

Clients will feel more welcomed when they meet staff or volunteers who come from their community, look like them and speak the way they do. Similarly, when the reception and waiting rooms have artwork or magazines that reflect their lived experiences, clients will feel more at ease.

⁴ These could include lifestyle and fashion magazines; consider how they depict gender roles, relationships and beauty standards.

EXAMPLE

A social services agency employs greeters in its reception area and waiting room. The greeters come from different cultural groups in the community and speak the various languages spoken in the community. They interact with clients and help them feel comfortable in the space. They are familiar with the agency's services and resources as well as the other resources available in the community so they can help direct clients to what they need.

Assessment questions	Rating (Y, R, N, NR)	Comments
1. Have staff and volunteers received training about stigma and discrimination (e.g., cultural safety training)?		
2. Does your organization recruit volunteers and staff from different population groups to reflect the diversity of your community?		
3. Is your organization's public space (reception area, waiting rooms) welcoming of people from different population groups? Do posters, pamphlets, signage, artwork and magazines depict different types of relationships, sexual orientations, gender identities, ethno-cultural groups in a positive way?		
4. Is there signage in the public spaces that conveys positive messaging (e.g., "This is a welcoming, non-judgmental space. Welcome!")?		
5. Is there material of interest to attract members of different population groups (e.g., relevant newsletters, information about events in the community, etc.)?		

2.3.4 HOW ARE CLIENTS TREATED DURING THE INTAKE PROCESS?

The intake process is one of the first indicators to clients that they can feel safe within an organization. The process may involve conversations with reception staff or clinicians completing intake forms. If done sensitively, this process can help build a trusting relationship with the client; if not, clients may see your organization as disrespectful or threatening.

Consider the availability of space for private conversations with clients, the language used in intake forms and the approach used for data collection. Organizations should also be sensitive to a client's desire to be accompanied by family members (or not) during the intake process.

EXAMPLE

One health clinic reviewed the language used in their intake forms to make sure it was inclusive for LGBTQ clients. They made changes to the forms so that all clients felt reflected in the answer choices, and also included more open-ended questions so that clients could respond in a way that reflected their lived experiences. They also made sure clients had space for private conversations with reception staff. These measures helped clients feel understood and respected and also contributed to more accurate data collection.

Assessment questions	Rating (Y, R, N, NR)	Comments
1. Do the intake forms use language that is clear and inclusive (e.g., using gender-neutral terminology)?		
2. Does your organization adopt each client's definition of family, which may include but not be limited to relatives by blood, adult caregivers, same-sex partners or friends?		
3. Are confidentiality and privacy respected through the intake process (e.g., a safe, private space for completing the intake process)?		

2.3.5 DOES YOUR ORGANIZATION ACTIVELY ENGAGE WITH DIFFERENT COMMUNITY GROUPS?

By “tailoring” rather than “targeting” programs to particular client groups, there is a better chance of avoiding stigma and the more subtle ways that programs can isolate, rather than integrate, different population groups. To be effective, community/client engagement needs to be respectful and authentic.

Involving prospective clients – especially those from marginalized groups – in the tailoring process offers your organization three valuable resources:

1. insight into how clients perceive your organization, which is a good way to address potential “blind spots” around stigma within your organization;
2. the experience and expertise of clients, as well as their energy to help your organization develop or review initiatives; and
3. commitment because when clients believe in what your organization is doing, they can act as “ambassadors” for you within the community.

If your organization does not have a relationship with marginalized groups in your community, develop a partnership with a group or organization that does (e.g., groups working with the LGBTQ community, people living with HIV, or newcomers to Canada).



Assessment questions	Rating (Y, R, N, NR)	Comments
1. Does your organization solicit input from different population groups (especially marginalized groups) when designing programs?		
2. Does your organization intentionally recruit members of different population groups in your community as volunteers (e.g., peer workers, greeters) or staff?		
3. For this assessment, did your organization get input from groups or organizations working with different population groups?		

SECTION 3

DEVELOPING THE IMPROVEMENT PLAN

As part of the assessment process, priority issues need to be identified and action taken in a timely manner. Organizations have multiple issues and demands to address at any one time, so planning is paramount. Identify clear priorities for action and what resources are available so a reasonable improvement plan can be developed.

REVIEW THE STEPS BELOW AS YOU DEVELOP AN IMPROVEMENT PLAN.

- 1. Pick your priorities for action.** It is better to focus on a few important areas and take action rather than to scatter your efforts. What were the priority issues identified through the organizational assessment? Are some of these issues more urgent than others? Where is the energy and resources to start improvements?
- 2. Bring together a working group.** Who has the knowledge, experience and understanding of the priority issues to develop the plan? Involve an outside group or organization if you need additional perspective or expertise (e.g., an organization already working closely with a marginalized group). Make sure there is a clear link to your management to ensure access to resources and consistency with organizational policies and direction.
- 3. Clarify the problem/issue you are trying to address.** Consider the comments captured during the organizational assessment and group discussion process. Do you need additional information to better understand the issue? You might want to get the perspective of clients, which could involve conducting a survey, key informant interviews or a focus group.
- 4. Identify potential solutions to address the issue(s).** Once you understand the issue(s), consider different potential solutions. How have other organizations approached this issue(s)? Is there an opportunity to build on other initiatives that are already happening in your organization or community? What are the challenges in moving forward, and how could they be addressed? What are the resource implications of different potential solutions?
- 5. Develop the improvement plan.** The plan should identify the issue you are going to address, the outcome you are hoping to achieve, various action items, who is responsible for each, and the timeline and resources.
- 6. Get approval from management.** This will ensure that the necessary permissions and resources are in place.
- 7. Circulate the improvement plan.** Relevant staff, volunteers and management need to stay informed. The people who completed the organizational assessment need to see how their comments are being addressed. It might not be possible to address all comments at once, but people who were involved in the assessment process need to know they were heard.
- 8. Check-in and evaluate progress on the plan.** Has the implementation gone as planned? Have you achieved the outcomes you were hoping for? If not, adjust the plan.
- 9. Celebrate your achievements!** Recognize the work that went into addressing the identified issue(s) as well as the people who contributed. Celebrating accomplishments will help to develop a positive organizational culture committed to safe and inclusive services.

IMPROVEMENT PLAN - SAMPLE TEMPLATE

What are the issue(s) you are trying to address?

What are the outcome(s) you hope to achieve?

	Item 1	Item 2	Item 3
Action Item			
Timeline			
Resources required			
Lead role			
Progress			