# Final Evaluation of the **Christian Community Health Center Home Health Agency and Workforce Development** Program<sup>1</sup>

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www.luc.edu/curl

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The mission of the Christian Community Health Center is to provide high quality primary health care and related services to the community regardless of their ability to pay; provide services in a manner which demonstrates in word and deed, the love of Jesus Christ.

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#### EXECUTIVE SUMMARY

The Christian Community Health Center (CCHC) was founded in 1991 and is a 501(c) 3 Not For Profit Corporation. They have operated a health center in Roseland, on the far south side of Chicago, since 1993 and became a Federally Qualified Health Center look-alike in 1996. Today, CCHC operate health clinics on the South and West sides of Chicago, South Holland and Calumet City, and also operate Amani House (a homeless interim shelter for women and children), Footprints (a social service organization for women involved in the sex trade), Supportive Housing units throughout Chicago and a Mobile Van Medical Unit. CCHC's Corporate Office is located in Lansing, IL.

In 2006, CCHC received a grant from the Office of Community Services, U.S. Department of Health and Human Services, to create 70 new entry-level jobs in the agency while serving the health care needs of seniors living in the south side of Chicago and south Chicago suburbs through the development of their Home Health Agency. In early 2007, CURL partnered with CCHC to serve as the evaluator of their Home Health Agency program (see Appendix I: CCHC HHA Evaluation Plan). This partnership was a natural choice given that Loyola CURL has a long history of collaborating on program evaluations for various CCHC programs. Loyola CURL is a research center that specializes in collaborative, community-based research in the Chicago area. For many years, CURL has been conducting research that meets the needs of their community partners. Faculty, staff and students at CURL have extensive experience in both outcome and process-based program evaluations.

Below are the general questions of interest in this evaluation:

- 1) Was CCHC able to provide various services, including job training, employment with benefits and improved economic conditions, to sustain employment for those employees classified under the OCS definition of "low-income beneficiaries"?<sup>3</sup>
- 2) How successful was CCHC in recruiting target employees and how successful were they in working with various city and state employment offices?
- 3) How many patients did the Home Health Agency serve during this grant period, what were patient revenues, and what factors affected both of these elements?
- 4) What were some of the benefits and challenges of this project implementation?

#### Methodology

Both quantitative and qualitative data were collected through three rounds of surveys conducted with CCHC employees who had been hired after September 30, 2006. The first survey (baseline) asked respondents about various aspects of their job, including their perceptions of the work environment, current and former pay and benefits, prior work experience, current and former government assistance, and former instances of incarceration(see Appendix II: CCHC Baseline Employee Phone Survey). Responses to baseline survey questions were used to select out those employees who qualified as low-

<sup>&</sup>lt;sup>3</sup> The Office of Community Services defines low-income beneficiaries as those who, "may be unemployed; public assistance recipients, including recipients of Temporary Assistance for Needy Families (TANF); atrisk youth; custodial and non-custodial parents; residents of public housing; persons with disabilities; persons who are homeless; or individuals transitioning from incarceration into the community."

income beneficiaries. The second round of surveys was completed approximately six months after the baseline survey among those who qualified as target participants. The six-month survey also asked respondents about their current and former pay and benefits, current and former government assistance, how they became aware of their current job, and satisfaction with various aspects of their job as compared to their former job (see Appendix III: CCHC Six-Month Employee Phone Surveys). The third round of surveys was completed approximately 12 months after the baseline survey and asked participants a variety of questions about their experience with job training, professional development, and perceptions of their work environment at CCHC (see Appendix IV: CCHC Twelve-Month Employee Phone Surveys). Survey data collection began in March 2008 and ended on September 30, 2009.

CURL also received data from CCHC staff on the numbers of employees recruited through various employment agencies, and on all relevant HHA financial information. A focus group with CCHC-HHA staff was conducted in October 2008 to address all process issues associated with the execution of the project (see Appendix 5: OCS-HHA Staff Focus Group Questions). Finally, demographic data was collected through the U.S. Census on those community areas from which many of the surveyed employees live.

#### **Key Findings**

Delays in the accreditation of the Home Health Agency led to a delay of almost one year in operation. Today, the Home Health Agency continues to run without accreditation. This has affected the extent to which CCHC can hire high-salary positions and funnel funds from revenues back into the agency overall. Additionally, these

challenges have affected the schedule for project implementation and the number of new patients being served. However, the goal of providing employment has surpassed the target level.

#### Employment Opportunities:

- Between September 30, 2006 and September 30, 2009, CCHC hired a total of 269 new employees. As of September 30, 2009, 188 (69.8%) of these hires were still employed with the agency.
- During this evaluation, CURL completed 93 telephone surveys with new employees. Of these, 72 employees were identified as "low-income beneficiaries," the groups that were targeted for employment through this grant.
- The majority of all new employees, as well as the targeted employees, live on the
   South side of Chicago and the surrounding south suburbs.
- Additionally, the majority of targeted employees self-reported a variety of "benefits" from employment, such as useful job trainings, professional development opportunities, and a comfortable work environment.

#### Employee Recruitment:

 Unofficially, CCHC has recruited 35 individuals through the various employment programs with which they have partnered to assist in the objectives of this grant.

#### Home Health Agency Patient Revenues:

To date, CCHC has been referred 80 Medicare/Medicaid patients and has served
 50 through the Home Health Agency. However, due to challenges with securing

#### Project Implementation:

- Due to the elimination by the State of Illinois of a surveyor to oversee the accreditation process for Medicare/Medicare service facilities, CCHC was unable to secure this accreditation through the State. As a result, the agency had to hire a private accreditation firm, which took both time and funds away from CCHC. This delay pushed back the intended progress of the Home Health Agency by one year. Additionally, CCHC has been unable to bill the Medicare/Medicaid individuals who have received services from the Agency.
- Nevertheless, CCHC is scheduled to receive their Medicare accreditation by early
   2010.

#### **Summary and Conclusions**

In general, CCHC has met its goal of providing entry level employment opportunities for residents of the surrounding community. Additionally, the benefits associated with this employment are not only steady pay and employee benefits, but also such supplemental benefits as job training, professional development opportunities, and an overall friendly and comfortable work environment.

Even though CCHC has had challenges with regard to the start-up of their Home Health Agency, they have continued to operate the Agency and provide services for Medicare and Medicaid patients in the surrounding communities. CCHC is on schedule

to receive their Medicare accreditation in early 2010, from which funds can be used to self-sustain the Home Health Agency.

#### **Overall Recommendations**

Below are key recommendations for CCHC. Additional supplemental recommendations are included throughout this report:

- Continue to hire new employees who fall under the criteria of "low income beneficiary," specifically by maintaining and strengthening their relationships with the various Chicago-area employment offices.
- Receive the State of Illinois Medicare Accreditation, in order to begin receiving funds from patients in order to continue hiring HHA staff and strengthen the services provided by the HHA.

#### INTRODUCTION

The Christian Community Health Center (CCHC) was founded in 1991 and is a 501(c)3 Not For Profit corporation. They have operated a health center in Roseland, on the far south side of Chicago, since 1993. In 1996, they became a Federally Qualified Health Center look-alike and in 1999 they moved their base of operations to 9718 South Halsted. Since 2001, the center has been a Federally Qualified Health Center (FQHC) Section 330 Clinic. Among all of their locations, CCHC provides health care and social services to residents of the Chicago-area. CCHC's mission states that they provide care to all patients regardless of their insurance status or ability to pay.

In October 2006, CCHC received a grant from the Office of Community Services, U.S. Department of Health and Human Services, for the creation and operation of their Home Health Agency. The aims of this project were to create 70 new entry-level jobs in the agency while serving the health care needs of seniors living in the south side of Chicago and south Chicago suburbs.

Due to many challenges in the implementation of this project (to be discussed further in this report), most critically the delays for the Home Health Agency to become a certified Medicare facility, project implementation was delayed approximately one year. This delay not only held up the delivery of services, but also those activities associated with the start-up of the Home Health Agency, including advertising and new hiring. Nonetheless, CCHC continued to hire new employees for all branches of their agency and have continued to move forward on program development and implementation. The

results of all of their efforts related to the implementation of this project are documented in this report.

#### ABOUT THE EVALUATION

The primary objectives of this grant were to create 70 new entry-level jobs for the low-income residents of the surrounding community, while also serving the health care needs of senior citizens in the surrounding areas with the creation of their Home Health Agency (HHA) to complement their existing Christian Community Health Center facilities.

Through the Home Health Agency, CCHC created a number of new entry-level positions, including Home Health Aides, Schedulers, and Custodial and Laborer positions. The creation of entry-level jobs was aimed at addressing the needs of the community, specifically the high unemployment rates of nearby residents and the lack of employment opportunities available to them. The lack of public transportation options in the surrounding areas contributes to opportunities for finding and maintaining employment. The percentages of those in the surrounding areas who are below the federal poverty level also reflect the lack of resources available in these areas. Additionally, the majority of residents in the targeted areas are African-American, which also speaks to historical and systemic trends in employment inequality for minority groups.

CCHC aimed to serve 240 low income seniors who are in need of health care services in the surrounding areas. Targeting these communities is especially crucial, as many of the senior citizens in these areas are in need of home care and unaware of the services available to them through Medicare and Medicaid.

#### **About CURL**

In 2007, the Center for Urban Research and Learning (CURL) at Loyola University Chicago was asked to evaluate the initiative primarily due to a relationship via a previous evaluation contract in 2001. The partnership was a natural choice, given Loyola's many years of experience with program evaluations and community-based, participatory action research.

The Center for Urban Research and Learning (CURL) seeks to promote equality and to improve people's lives in communities throughout the Chicago metropolitan region. CURL pursues this goal by building and supporting collaborative research and education efforts. These partnerships connect Loyola faculty and students with community and nonprofit organizations, civic groups, and government agencies. Such collaborations link the skills and wisdom present within every community with the specialized knowledge and academic discipline of a vital urban university. Working together, community needs are addressed and the academic experience is enriched.

The CURL evaluation team was comprised of CURL staff members, CURL Graduate Fellows and Undergraduate Fellows. The evaluation team was also responsible for data analysis and report writing

#### **Evaluation Research Design and Methodology**

Consistent with its mission, Loyola CURL uses a model of participatory and collaborative evaluation that recognizes and utilizes the resources, values and knowledge of both community partners and university researchers. Participatory and collaborative approaches to evaluation research are gaining momentum in the social sciences. This

model has particular value in ensuring that knowledge gained from the research can be disseminated through both the academic and practice communities. Given this participatory approach, the project evaluation team for this project included both CURL and CCHC staff.

#### Goals of the Evaluation

The main evaluation questions for this project were included in the OCS grant application, and included both process and outcome criteria (see Appendix I: CCHC HHA Evaluation Plan). These evaluation goals were initially formulated by CCHC, with input from CURL, and guided the project. As the project began, the senior management and staff of CCHC and CURL met in 2007 to begin developing the detailed evaluation plan. Regular meetings continued between CURL and CCHC staff to develop surveys and other measurement tools and methods.

The evaluation plan includes the detailed procedures established for data collection and analysis. Both qualitative and quantitative methods were used in the evaluation. The CURL evaluation team worked with CCHC staff throughout the process to determine the best way to collect the data needed for the evaluation, and to feed back preliminary information to guide the organization in better meeting its targets.

#### **Evaluation Questions:**

A. Assessing Project Outcomes

- 1. Were 85 new positions created?
- 2. Were 70 new hires people from target groups?

- 3. How many new employees are able to maintain employment?
- 4. What benefits does CCHC provide to its employees?
- 5. Was transportation effective in recruiting and retaining employees?
- 6. Did full time employment with benefits improve the income stability of the employees from the targeted distressed areas?

#### **B.** Assessing Project Objectives

- 1. Did the home health agency reach its goal of 240 patients in care from the targeted communities in the first three years of operation?
- 2. How successful was CCHC in working with the local employment offices of the City of Chicago and the State of Illinois Employment and Training Center?
- 3. How successful was CCHC in following the timeline agreed with OCS for the project?
- 4. Have the new employees been provided sufficient job training?
- 5. Was transportation to/from work provided to employees from the targeted distressed areas?
- 6. Were patient revenues from HHA at or above projected levels?
- 7. Has the project received any additional financial support outside of OCS?

Based on these questions, the CURL evaluation team developed four major themes to approach the overall evaluation:

- 1) Was CCHC able to provide various services, including job training, employment with benefits and improved economic conditions, to sustain employment for those employees classified under the OCS definition of "low-income beneficiaries"?<sup>4</sup>
- 2) How successful was CCHC in recruiting target employees and how successful were they in working with various city and state employment offices?
- 3) How many patients did the Home Health Agency serve during this grant period, what were patient revenues, and what factors affected both of these elements?
- 4) What were some of the benefits and challenges of this project implementation?

#### **Data Sources**

The primary data sources for this evaluation were 1) 2000 U.S. Census data, 2) The Human Resources/Benefits (HRB) database, 3) Three rounds of surveys completed with new CCHC employees, 4) A focus group conducted with CCHC HHA Executive staff, and 5) Informal data reports collected from CCHC staff.

 2000 U.S. Census data was used to provide descriptive information on those areas where many of the new employees who were interviewed for this evaluation reside.

<sup>4</sup> The Office of Community Services defines low-income beneficiaries as those who, "may be unemployed; public assistance recipients, including recipients of Temporary Assistance for Needy Families (TANF); atrisk youth; custodial and non-custodial parents; residents of public housing; persons with disabilities; persons who are homeless; or individuals transitioning from incarceration into the community."

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- The Human Resources/Benefits (HRB) database is a comprehensive online system utilized by CCHC's Human Resources department. Information from the HRB database documents such outcomes as the total number of jobs CCHC has created, employees' current employment status, length of employment, and location of residence.
- In order to delve further into the experiences and status of new CCHC employees, CURL staff conducted three rounds of telephone surveys to assess various factors related to their job experience, current and former pay and benefits, former government assistance and former instances of incarceration, as well as perceptions of the CCHC work environment and opportunities for professional development available through the agency (see Appendices for surveys).
- In October 2008, CURL evaluation team members conducted a focus group with CCHC-HHA Executive staff to assess various aspects of the project implementation and suggestions for improvement. This outcome information was also supplemented by discussions and information shared in regular meetings between CURL and CCHC evaluation staff (see Appendix V: OCS-HHA Staff Focus Group Questions).
- Patient and financial information on the Home Health Agency was provided and confirmed by CCHC's Compliance Manager, information about new hires referred from the various employment agencies was provided by the Human Resources Manager, and information regarding the project timetable was provided by the Chief Development Officer.

#### **Protection of Human Subjects**

The research protocol and the informed consent forms were approved by Loyola University Chicago's Institutional Review Board for the Protection of Human Subjects. New employees were given the option to complete consent-to-contact forms during New Hire Orientation sessions. Those individuals who completed consent forms were contacted and asked to participate in the evaluation. Before each phone survey, participants were read an informed consent statement describing the evaluation, explaining their rights as research participants, and providing contact information for further questions. Aggregated data from the HRB database, phone surveys and OCS-HHA staff focus group are anonymously reported here.

#### **Limits to the Evaluation**

Survey Recruitment

Throughout the time period for this evaluation, and particularly during this reporting period, CURL staff have had some difficulty in scheduling phone surveys with employees among both new employees and among those employees who qualified for follow-up participation. To address this issue, CCHC staff sent out a company-wide email to remind those employees who had completed consent forms about the evaluation and to expect a phone call from CURL. Additionally, a consent-to-contact form was attached to the email for those employees who had not filled out a consent form and were interested in participating in the evaluation. In order to help with increasing our number of completed surveys, CCHC staff also allowed their employees to complete the

survey(s) during their work time. These actions did improve survey response rates overall.

#### Home Health Agency Accreditation

The most challenging aspect of implementing the project has been the Home Health Agency's inability to get credentialed through the State of Illinois. This is due to changes in State processes and funding. Originally, the State would send out a surveyor to examine the agency and determine if they qualified for the credentials that would allow them to bill Medicare and Medicaid for health care services. Soon after CCHC obtained a license for their Home Health Agency, the State eliminated the Medicare/Medicaid surveyor position. As a result, CCHC had to hire a private surveyor to facilitate the accreditation process. This process requires significant financial investment and involves many steps over time. As a result CCHC has been providing services without receiving reimbursements from Medicare and Medicaid

#### **EVALUATION FINDINGS**

Overall, the evaluation found that CCHC has moved forward to meet the goals identified out in the original grant proposal. With regard to employment, CCHC has hired more than the 85 employees they had set out to hire, and CURL has identified 72 targeted employees, more than the 70 target employees they intended to hire at the start of the project. CCHC did recruit substantially from the South Suburbs and South Chicago area, as well as through the various employment agencies and programs. CCHC should continue their work with these organizations to continue to provide employment for low-income beneficiaries in the Chicago metropolitan area.

As a result of the challenges associated with the accreditation of the Home Health Agency, CCHC has had many challenges with project implementation and reaching their target number of patients served through the HHA. However, despite these challenges, CCHC has been able to identify a number of areas in which program implementation went smoothly, and have continued to serve Medicare patients through the Home Health Agency regardless of this accreditation. In general, CCHC has done a satisfactory job of executing the employment element of this project and are well on their way to reach their patient and revenue goals with their Home Health Agency.

# **About the Employees Locations of Residence**

#### ABOUT THE EMPLOYEES LOCATIONS OF RESIDENCE

Through this grant, CCHC intended to employ the majority of their new employees from the surrounding areas (including the South side of Chicago and the surrounding south suburbs). CURL has identified some community areas and suburbs from which many of the targeted employees reside. Below is a summary of 2000 U.S. Census demographic data from these areas.

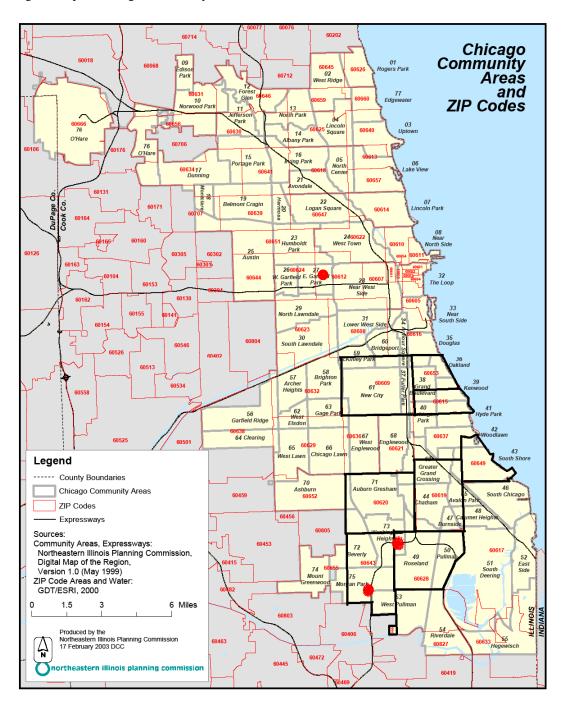
#### **Chicago Community Areas**

The map below shows the Chicago metropolitan area – the areas blocked off by dark lines represent the areas from which a majority of the surveyed employees live. The red dots represent the locations that CCHC operates within the city borders. Below is more detailed information about these community areas:

- 60628 (Roseland, Pullman, West Pullman, Riverdale)
- 60619 (Chatham, Greater Grand Crossing, South Shore, Avalon Park, Calumet Heights, Burnside, Roseland)
- 60620 (Auburn Gresham, Washington Heights, Chatham, Roseland, Ashburn, Beverly)
- 60609 (New City, Fuller City, Armour Square, Bridgeport, McKinely Park, Gage
   Park, Grand Boulevard, Washington Park)
- 60643 (Beverly, Morgan Park, Washington Heights, West Pullman)
- 60653 (Douglas, Oakland, Grand Boulevard, Kenwood)

- 60615 (Kenwood, Grand Boulevard, Washington Park, Hyde Park)
- 60649 (Woodlawn, South Shore)

Image 1. Map of Chicago Community Areas



Source: Northeastern Illinois Planning Commission

Below is a breakdown of the general demographic data from these community areas<sup>5</sup>:

Table 1. Race/Ethnicity among Residents of the Chicago Community Areas of Interest

	White	Black	Other Race	Two or	% Hispanic
	(non-Hispanic)	(non-Hispanic)		More Races	
60628	2.6%	94.8%	1.6%	1.0%	3.1%
60619	0.6%	98.%	0.4%	1.0%	0.7%
60620	3.3%	95.5%	0.4%	0.7%	0.7%
60609	34.8%	38.9%	25%	2.5%	43.4%
60643	20.5%	77.1%	0.6%	1.4%	1.8%
60653	0.8%	97.9%	0.3%	0.7%	0.8%
60615	23.1%	67.5%	1.1%	2.4%	2.9%
60649	1.4%	96.8%	0.4%	1.1%	1.1%

Table 2. Gender Breakdown among Residents of the Chicago Community Areas of Interest

	Male	Female
60628	49.1%	50.9%
60619	43.9%	56.1%
60620	44.9%	55.1%
60609	49.4%	50.6%
60643	46.0%	54.0%
60653	43.3%	56.7%
60615	45.9%	54.1%
60649	43.7%	56.3%

Table 3. Median Age among Residents of the Chicago Community Areas of Interest (18+)

	Male	Female
60628	30.6	39.3
60619	31.0	43.4
60620	30.6	41.1
60609	30.2	32.3
60643	32.4	40.7
60653	25.8	39.5
60615	35.9	43.7
60649	30.1	42.9

Table 4. Educational Breakdown among Residents of the Chicago Community Areas of Interest (25+)

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	Less than	High	Some	Associate's	Bachelor's	Grad/Prof
	H.S.	School/GED	college	Degree	Degree	Degree
60628	26.6%	26.9%	27.4%	6.6%	8.7%	3.8%
60619	4.8%	41.6%	29.0%	6.7%	11.7%	6.4%
60620	6.2%	47.4%	26.4%	6.2%	8.9%	5.0%
60609	23.2%	51.8%	14.4%	3.2%	4.9%	2.6%
60643	4.0%	20.4%	28.5%	6.4%	17.0%	11.2%
60653	10.6%	25.4%	21.6%	4.1%	7.2%	5.0%
60615	3.5%	15.0%	20.2%	3.9%	18.1%	26.7%
60649	4.9%	24.1%	28.7%	7.2%	12.3%	6.8%

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<sup>&</sup>lt;sup>5</sup> All data are from the 2000 U.S. Census (<u>www.census.gov</u>).

Table 5. Marital Status among Residents of the Chicago Community Areas of Interest (15+)

	Single	Married	Separated	Divorced	Divorced	Widowed	Widowed
					(female)		(female)
60628	40.8%	32.6%	5.5%	12.2%	7.6%	8.9%	7.5%
60619	38.4%	30.2%	5.4%	14.8%	9.4%	11.3%	9.0%
60620	39.6%	33.3%	5.7%	11.6%	7.4%	9.9%	8.1%
60609	44.4%	38.1%	4.5%	7.1%	4.2%	5.8%	4.6%
60643	33.5%	43.4%	3.9%	10.5%	7.0%	8.6%	7.1%
60653	49.1%	19.8%	7.7%	11.0%	7.7%	12.4%	10.1%
60615	46.0%	30.3%	4.2%	12.6%	7.6%	6.9%	5.8%
60649	45.3%	25.6%	6.4%	14.1%	8.6%	8.6%	7.0%

Table 6. Employment Status among Residents of the Chicago Community Areas of Interest (16+)

	Percentage in	Employed	Unemployed
	Labor Force		
60628	56.9%	47.5%	9.4%
60619	57.4%	49.6%	7.8%
60620	55.7%	47.1%	8.6%
60609	54.2%	45.8%	8.4%
60643	62.2%	56.1%	6.1%
60653	49.2%	36.6%	12.6%
60615	62.4%	55.9%	6.4%
60649	59.3%	50.5%	8.7%

Table 7. Household Income Levels among Households in the Chicago Community Areas of Interest

	Less than \$10,000	\$10,000-\$35,000	\$35,000+	Median Household
				Income
60628	14.3%	31.9%	53.8%	\$38,210
60619	14.6%	37.1%	48.3%	\$33,631
60620	14.3%	34%	51.7%	\$36,334
60609	24.0%	38.3%	37.7%	\$25,705
60643	7.8%	25.5%	66.6%	\$51,305
60653	38.7%	35.4%	26%	\$14,205
60615	19.8%	34.1%	46%	\$31,571
60649	21.8%	38.7%	39.6%	\$27,699

Table 8. Public Assistance Levels among Residents of the Chicago Community Areas of Interest

	Public Assistance	Social Security	Supplemental	Retirement
	Income	Income	Security Income	Income
60628	12.3%	29.5%	10.2%	22.3%
60619	8.4%	30.5%	8.5%	21.8%
60620	11.3%	31.2%	10.4%	23.0%
60609	14.2%	19.0%	10.4%	9.8%
60643	6.2%	29.3%	5.9%	24.5%
60653	20.1%	27.7%	15.6%	11.3%
60615	6.6%	18.0%	6.7%	12.3%
60649	11.7%	20.7%	11.1%	13.4%

Table 9. Poverty Levels among Residents of the Chicago Community Areas of Interest

	Families	Female-Headed	Individuals
		Families	
60628	17.1%	26.3%	20.5%
60619	14.8%	22.5%	17.6%
60620	16.3%	25.6%	18.8%
60609	31.7%	50.7%	35.7%
60643	8.8%	17.8%	11.5%
60653	41.3%	49.2%	46.3%
60615	17.6%	30.9%	23.2%
60649	23.3%	32.7%	26.3%

Table 10. Percentage Disabled among Residents of the Chicago Community Areas of Interest (21+)

	Disabled	Disabled in
		Work Force
60628	28.2%	46.0%
60619	25.4%	50.7%
60620	30.4%	40.6%
60609	33.0%	46.3%
60643	22.6%	57.4%
60653	34.1%	35.1%
60615	19.7%	48.8%
60649	25.1%	42.9%

In general, the majority of these community areas are majority African-American, except for 60609, where the majority was Hispanic/Latino (another important minority population). Additionally, the majority of those in these community areas have only a high school diploma/G.E.D. equivalency or some college, except for 60615, where the majority has a graduate/professional degree (which may be explained to some extent by that area's proximity to the University of Chicago). Unemployment percentages range from approximately 6% to 12%, although these numbers today are most likely higher due to the recent economic recession. Significant percentages of individual residents in these areas also live in poverty, ranging from approximately 11% to 46%., but these numbers may have also been negatively affected by the recession.

The majority of residents are also single, except for 60643 where the majority of residents are married. Household income averages range from approximately \$14,000 to

\$36,000, the exception being 60643 (which may also be explained by the higher percentage of married households and thus, dual incomes).

It is recommended that CCHC continue to recruit from their surrounding Chicago community areas, and also extend their efforts to recruit new employees from areas that are less represented and just as much in need of employment opportunities.

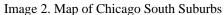
#### **Chicago Suburbs:**

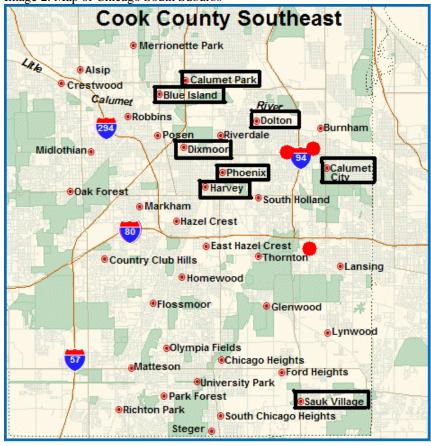
The map below shows the Chicago south suburban areas from which a majority of the surveyed employees live. The suburbs represented most frequently are blocked off by dark lines, and the red dots represent the locations that CCHC operates in the south suburbs. Below is more detailed information about these areas<sup>6</sup>:

- Dolton, IL
- Dixmoor, IL
- Phoenix, IL
- Calumet City, IL
- Calumet Park, IL
- Blue Island, IL
- Harvey, IL
- Sauk Village, IL

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<sup>&</sup>lt;sup>6</sup> Ibid.





Source: Wildonions.org (www.wildonions.org).

Below is a breakdown of the general demographic data from these areas:

Table 11. Race/Ethnicity among Residents of the Chicago Suburbs of Interest

	Tuble 11: Ruce/Edimenty among Residents of the Chicago Subaros of Interest				
	White	Black	Other Race	Two or	Hispanic
	(non-Hispanic)	(non-Hispanic)		More Races	
Dolton	14.3%	82.4%	2.6%	1.1%	3.1%
Dixmoor	30.8%	57.1%	10.1%	2.2%	18.2%
Phoenix	2.9%	93.8%	1.9%	1.3%	4.0%
<b>Calumet City</b>	38.7%	52.9%	6.8%	2.1%	10.9%
Calumet Park	12.1%	82.9%	3.1%	1.5%	7.7%
Blue Island	53.7%	24.1%	17.7%	3.6%	37.9%
Harvey	10.0%	79.6%	7.9%	1.8%	12.8%
Sauk Village	59.8%	32.5%	3.3%	3.5%	11.8%

Table 12. Gender among Residents of the Chicago Suburbs of Interest

	Male	Female
Dolton	46.4%	53.6%
Dixmoor	48.0%	52.0%
Phoenix	46.5%	53.5%
<b>Calumet City</b>	46.5%	53.5%
Calumet Park	46.9%	53.1%
Blue Island	48.9%	51.1%
Harvey	48.0%	52.0%
Sauk Village	49.5%	50.5%

Table 13. Median Age among Residents of the Chicago Suburbs of Interest (18+)

	Male	Female
Dolton	30.0	38.0
Dixmoor	32.8	36.9
Phoenix	31.5	40.3
Calumet City	31.8	39.5
Calumet Park	32.1	38.6
Blue Island	33.7	36.1
Harvey	30.0	34.9
Sauk Village	31.9	34.8

Table 14. Education Levels among Residents of the Chicago Suburbs of Interest (25+)

	Less than	High	Some	Associate's	Bachelor's	Grad/Prof
	H.S.	School/	college	Degree	Degree	Degree
		GED				
Dolton	5.2%	38.6%	32.8%	8.0%	12.2%	3.2%
Dixmoor	13.7%	53.1%	22.2%	3.5%	5.4%	2.0%
Phoenix	11.2%	45.3%	29.8%	6.7%	5.5%	1.5%
Calumet City	6.2%	44.7%	27.9%	7.4%	10.1%	3.8%
Calumet Park	3.6%	29.4%	28.9%	7.8%	9.3%	4.2%
Blue Island	15.9%	28.2%	21.6%	4.4%	8.3%	3.5%
Harvey	10.5%	28.4%	25.9%	7.1%	5.7%	2.4%
Sauk Village	6.0%	40.4%	23.9%	6.8%	6.6%	2.0%

Table 15. Marital Status among Residents of the Chicago Suburbs of Interest (15+)

	Single	Married	Separated	Divorced	Divorced	Widowed	Widowed
			1		(female)		(female)
Dolton	33.4%	44.8%	4.3%	11.2%	7.2%	6.4%	5.7%
Dixmoor	34.5%	39.0%	4.6%	12.0%	7.8%	10.0%	6.6%
Phoenix	37.6%	32.9%	3.8%	12.8%	6.6%	12.8%	10.4%
Calumet City	31.7%	44.0%	3.6%	11.7%	7.1%	9.0%	7.5%
Calumet Park	36.9%	42.7%	2.3%	11.9%	6.6%	6.3%	4.9%
Blue Island	35.5%	45.9%	2.6%	9.9%	5.5%	6.2%	4.7%
Harvey	38.8%	39.7%	4.7%	9.1%	5.5%	7.6%	6.0%
Sauk Village	28.9%	53.8%	2.3%	9.0%	5.6%	6.0%	4.9%

Table 16. Employment Status among Residents of the Chicago Suburbs of Interest (16+)

	Percentage in Labor Force	Employed	Unemployed
D. I		(2.70)	4.00/
Dolton Dixmoor	67.7% 51.0%	62.7% 42.7%	4.9% 8.4%
Phoenix	52.9%	47.5%	5.2%
<b>Calumet City</b>	64.1%	58.9%	5.1%
Calumet Park	65.7%	59.9%	5.7%
Blue Island	64.0%	58.9%	5.1%
Harvey	58.5%	49.8%	8.7%
Sauk Village	69.1%	63.8%	5.3%

Table 17. Household Income Levels among Residents of the Chicago Suburbs of Interest

	Less than \$10,000	\$10,000-\$35,000	\$35,000+	Median Household
				Income
Dolton	5.7%	27.1%	67.2%	\$48,020
Dixmoor	17.0%	45.7%	37.3%	\$26,677
Phoenix	17.4%	40.9%	41.7%	\$29,643
<b>Calumet City</b>	9.7%	34.7%	55.6%	\$39,902
Calumet Park	8.5%	28.7%	62.8%	\$45,357
Blue Island	9.4%	38.3%	51.6%	\$36,520
Harvey	15.8%	38.9%	45.3%	\$31,958
Sauk Village	5.7%	26%	68.1%	\$46,718

Table 18. Public Assistance Levels among Residents of the Chicago Suburbs of Interest

	Public Assistance	Social Security	Supplemental Security	Retirement
	Income	Income	Income	Income
Dolton	3.7%	23.0%	5.0%	16.4%
Dixmoor	7.7%	23.3%	8.1%	13.6%
Phoenix	6.9%	40.4%	8.3%	19.9%
Calumet City	3.1%	27.5%	4.1%	17.8%
Calumet Park	2.6%	22.5%	5.3%	17.3%
Blue Island	4.4%	24.0%	4.4%	12.5%
Harvey	12.3%	24.7%	10.8%	16.0%
Sauk Village	3.7%	19.1%	2.6%	11.7%

Table 19. Poverty Levels among Residents of the Chicago Suburbs of Interest

	Families	Female-Headed	Individuals
		Families	
Dolton	6.7%	13.3%	8.4%
Dixmoor	21.1%	26.9%	30.3%
Phoenix	18.4%	29.4%	22.9%
<b>Calumet City</b>	9.8%	18.7%	12.2%
Calumet Park	10.2%	15.3%	11.5%
Blue Island	12.3%	22.1%	13.3%
Harvey	20.3%	33.0%	21.7%
Sauk Village	8.3%	26.4%	9.6%

Table 20. Percentage Disabled among Residents of the Chicago Suburbs of Interest (21+)

Tuble 20: I electriage Disabled uniong Ix					
	Disabled	Disabled in			
		Work Force			
Dolton	19.1%	62.4%			
Dixmoor	28.7%	35.8%			
Phoenix	33.2%	51.7%			
Calumet City	19.6%	60.0%			
Calumet Park	24.8%	62.4%			
Blue Island	22.7%	55.9%			
Harvey	27.8%	49.1%			
Sauk Village	19.9%	58.6%			

About half of these suburban areas reported a majority African-American population, with the exception of Sauk Village, with a majority white population, and Blue Island, with a majority white population but also a significant Hispanic/Latino population. The majority of those in these suburbs have only a high school diploma/G.E.D. equivalency or some college. Unemployment percentages for these areas range from approximately 5% to 9%, but these numbers have likely increased today due to the recent recession. Significant percentages of these residents also live in poverty, with the exception of Dolton and Sauk Village, although these numbers may have also been affected by the recent economic recession. The majority of these residents overall are single, with a significant percentage who are also married. Household income averages range from approximately \$26,000 to \$48,000

It is recommended that CCHC continue to recruit from the surrounding south Chicago suburbs, and extend their efforts to recruit new employees from areas where targeted employees live – specifically, minority groups, low-income, lower education levels, those living in poverty and those on public assistance.

# **CCHC Employment:**

**Benefits and Areas for Improvement** 

**Objective:** Was CCHC able to provide various services, including job training, employment with benefits and improved economic conditions, to sustain employment for those employees classified under the OCS definition of "low-income beneficiaries"?

This part of the evaluation examined the questions of whether the target numbers of employees were recruited by CCHC, and the various benefits of employment perceived by new employees. The data is broken down by type (all CCHC hires, baseline survey, six-month follow-up survey, and twelve-month follow-up survey). The survey data reports are divided into the following sections: Demographics, Income and Employee Benefits, Transportation, Job Trainings and Job Satisfaction.

#### **Targets for Recruitment**

The target number for job creation outlined in the OCS grant application was 80 jobs, with 70 new hires representing individuals from targeted groups (e.g. low-income beneficiaries, defined as those who, "may be unemployed; public assistance recipients, including recipients of Temporary Assistance for Needy Families (TANF); at-risk youth; custodial and non-custodial parents; residents of public housing; persons with disabilities; persons who are homeless; or individuals transitioning from incarceration into the community"). More details on CCHC's recruitment practices are in the next section of this report.

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#### **All Employees Hired**

Below is a breakdown of length of employment and employees location of residents for all new hires between September 30, 2006 and September 30, 2009. This data reflects both current CCHC employees and former CCHC employees who were hired during this period.

40 35 30 25 ■ No Longer Employed 20 ■ Current Employees 15 10 5 Not of Alband Not some 123 Has THOT-9800T AtloT.62010T M1108 673008 Milos esalos 11107-38-1107 11/102-32-109

Graph 1. Three-Month Breakdown of All CCHC Employees Hired Between 9/30/06 and 9/30/09 (n=269)

Table 21. Length of Employment Time for All New Hires between 9/30/06 and 9/30/09

0 – 6 months	81	30.1%
6 months – 1 year	55	20.4%
1 year +	133	49.4%
TOTAL	269	100%

The data indicates that nearly 70% (n=188) of new employees hired during this period have maintained employment with CCHC. Additionally, as of October 1, 2009, the majority of all new employees maintained employment with the agency for at least six months, and nearly half maintained employment for one year or more.

Table 22. Location of Residence among All New CCHC Hires

Chicago – North	5	1.8%
Chicago – West	14	5.2%
Chicago - South	113	42.0%
South Suburbs	115	42.7%
West Suburbs	9	3.3%
Northwest Suburbs	2	0.7%
North Suburbs	2	0.7%
Northwest Indiana	8	2.9%
TOTAL	269	100%

These findings also suggest that the majority of employees hired during this time period were also from the targeted areas – specifically, the South side of Chicago and the surrounding South Suburbs.

#### **CCHC Employee Survey Data**

On September 30, 2009, CURL completed the data collection for the Outcome portion of the CCHC Home Health Agency evaluation. In total, CURL completed 93 baseline interviews with new employees. Of these 93, 72 qualified as those employees targeted by this program (i.e. "low-income beneficiaries"), which is more than the minimum of 70 employees set as an objective at the start of this program. Below is a breakdown of the way(s) in which these employees qualify as such:

Table 23. "Low-Income Beneficiaries" Characteristics among CCHC Surveyed Respondents (n=72)

Table 23. Low-income Beneficialies Characteristics among CCTC Surveyed Respondents	(11 /2)	
Low-income	21	29.1%
Low-income AND former TANF recipient	1	1.3%
Low-income AND formerly incarcerated	2	2.7%
Low-income AND formerly incarcerated AND in subsidized/transitional housing	3	4.1%
Low-income AND formerly incarcerated AND in subsidized/transitional housing AND	2	2.7%
received public assistance AND unemployed 3+ months		
Low-income AND formerly incarcerated AND in subsidized/transitional housing AND	1	1.3%
receive(d) public assistance		
Low-income AND formerly incarcerated AND receive(d) assistance AND unemployed	1	1.3%
3+ months		
Low-income AND in subsidized/transitional housing	4	5.6%
Low-income AND in subsidized/transitional housing AND receive(d) public assistance	1	1.3%
Low-income AND in subsidized/transitional housing AND unemployed 3+ months	2	2.7%
Low-income AND receive(d) public assistance	7	9.7%
Low-income AND receive(d) public assistance AND unemployed 3+ months	5	7%
Low-income AND unemployed 3+ months	22	30.5%
TOTAL	72	100%

**Note:** "Low income" indicates respondents whose income levels fall at or below the 200% Poverty Level using the minimum wage of \$7.50 (\$31,200).

Note: All groupings indicate the former and/or current status of employees.

# Demographic Breakdown of Surveyed Employees

Table 24. Race and Ethnicity of CCHC Surveyed Employees

	Baseline Survey		Six Month Survey		12 Month Survey	
Black/African-American	63	87.5%	37	88.1%	21	84%
Latino/a	5	6.9%	2	4.8%	2	8%
White	2	2.8%	2	4.8%	2	8%
More Than One Race	2	2.8%	1	2.4%	0	0
TOTAL	72	100%	42	100%	25	100%

Table 25. Gender of Surveyed Employees

		Baseline Survey		Month urvey	12 Month Survey		
Men	13	18%	9	21%	6	24%	
Women	59	82%	33	79%	19	76%	
TOTAL	72	100%	42	100%	25	100%	

Table 26. Age Ranges of Surveyed Respondents

	Baseline Survey	Six Month Survey	12 Month Survey
Minimum	21	22	24
Maximum	58	58	57
Average Age	36	38.6	37.8
Missing-Refused	3	1	0
TOTAL	72	42	25

Table 27. Location of Residence of Surveyed Employees

	_	aseline urvey Six Month Survey Survey Survey				
Chicago – North	2	3%	2	5%	1	4%
Chicago – West	7	10%	4	10%	4	16%
Chicago – South	26	36%	12	29%	7	28%
South Suburbs	32	44%	21	49%	13	52%
West Suburbs	4	6%	3	7%	0	0
Indiana Suburbs	1	1%	0	0	0	0
TOTAL	72	100%	42	100%	25	100%

Table 28. Self-Reported Highest Level of Education Completed among Surveyed Respondents\*

	Six Month Survey			12 Month Survey	
Less than High School	1	2.4%	1	4%	
High School/G.E.D.	10	23.8%	3	12%	
Some College or Trade School	14	33.3%	12	48%	
Bachelor's Degree	14	33.3%	5	20%	
Master's Degree	3	7.1%	4	16%	
TOTAL	42	100%	25	100%	

<sup>\*</sup>This question was not asked in the Baseline Survey

Table 29. Length of Employment among CCHC Surveyed Respondents\*

2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	Baseline Survey		6 Month Survey		12 Month Survey	
Less than 1 year	18	25%	6	14.2%	3	25%
1 year – 1.5 years	6	8.3%	3	7.1%	1	4%
1.5 years – 2 years	22	30.5%	16	38.1%	11	44%
2 years – 2.5 years	16	22.2%	10	23.8%	9	36%
2.5 years – 3 years	10	13.8%	7	16.7%	1	4%
TOTAL	72	100%	42	100%	25	100%

<sup>\*</sup>Estimates employment length as of October 1, 2009 and assumes that employees have maintained employment to that date, unless reported otherwise.

In general, the telephone survey respondents represent an adequate cross-sample of all new CCHC hires with regard to location of residence and length of employment.

Survey respondents also heavily represent the groups targeted by this grant – specifically, non-white residents of the surrounding areas with little to no post-secondary education.

This suggests that, while the survey data may not be an exhaustive representation of all new hires, it is an appropriate representation of the employment status and perceptions associated with new employees from the targeted groups.

## Income and Benefits

Table 30. Former and Current Income Levels of CCHC Surveyed Respondents at Baseline

	Pro	e-CCHC	_	aseline urvey	
\$5,000 or less	8	11.1%	0	0	
\$5,000-\$8,000	1	1.3%	0	0	
\$8,000-\$12,000	3	4.2%	0	0	
\$12,000-\$16,000	3	4.2%	5	7.0%	
\$16,000-\$25,000	18	25%	27	37.5%	
\$24,000-\$32,000	23	32%	30	41.7%	
\$30,000-\$40,000	12	16.7%	5	7.0%	
\$38,000-\$50,000	2	2.8%	2	2.8%	
\$44,000+	2	2.8%	0	0	
Missing-Refused	0	0	3	4.2%	
TOTAL	72	100%	72	100%	

**Note:** After changes were made to income brackets in the phone surveys, many of the income brackets were combined. However, there is no way to differentiate responses gave to the different surveys. Therefore, certain income brackets overlap to ensure that the data is accurately represented.

Table 31. Former and Current Income Levels of CCHC Surveyed Respondents

	Pre-C	ССНС	Six Month Survey		12 Month Survey	
T 41 65 000	-	11.00/	0	Ι ο	0	I 0
Less than \$5,000	5	11.9%	0	0	0	0
\$5,000-\$8,000	3	7.1%	0	0	0	0
\$8,000-\$12,000	4	4.8%	0	0	0	0
\$12,000-\$16,000	1	2.4%	1	2.4%	1	4.5%
\$16,000-\$24,000	6	14.2%	10	23.8%	6	27.3%
\$24,000-\$32,000	12	28.6%	24	57.1%	13	59.1%
\$32,000-\$40,000	5	11.9%	3	7.1%	1	4.5%
\$40,000-\$50,000	4	9.5%	2	4.8%	1	4.5%
\$50,000+	2	4.8%	0	0	0	0
Missing-Refused	0	0	2	4.8%	0	0
TOTAL	42	100%	42	100%	22	100%

Table 32. Self-Reported Changes in Current Financial Situation among Surveyed Employees

	Six-Month		12-N	Ionth
	n	%	n	%
Major Increase	12	28.6%	9	40.9%
Minor Increase	11	26.2%		
No Change	5	11.9%	13	59%
Minor Decrease	5	11.9%	0	0
Major Decrease	9	21.4%		
TOTAL	42	100%	25	100%

Table 33. Types of Employee Benefits Received Among Surveyed Respondents

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Pre-C	ССНС	Baseline Survey		Six Month Survey		12 Month Survey	
Medical Insurance	21	91.3%	30	50.8%	25	62.5%	16	22.7%
<b>Dental Insurance</b>	16	69.6%	35	59.3%	27	67.5%	18	81.8%
Life Insurance*	19	82.6%	11	18.6%	31	77.5%	16	22.7%
AFLAC	1	4.3%	9	15.2%	20	50%	10	45.5%
403(B)/Retirement	12	52.2%	9	15.2%	8	20%	5	22.7%
Paid Vacation Days	22	95.6%	54	91.5%	40	100%	21	95.4%
Paid Holidays	22	95.6%	50	84.7%	40	100%	21	95.4%
Paid Sick Days	20	87%	53	89.8%	39	97.5%	21	95.4%
Vision	2	8.7%	0	0	0	0	0	0
Short-Term Disability	1	4.3%	0	0	0	0	0	0
TOTAL	23	100%	59	100%	40	100%	22	100%

This data suggest that the majority of employees have been able to maintain similar income levels compared to the income they received before beginning with CCHC. Additionally, a significant percentage of those who received low levels (or no) income have been lifted to a more sustainable level.

Table 34. Self-Reported Economic Setbacks Experienced by CCHC Employees

Home Foreclosure	1	4%
Increased mortgage/rent payments	9	36%
Increased cost of living	22	88%
Negative change in your employment status	2	8%
Negative changes to a household member's employment status	7	28%
New residents in household	6	24%
Children newly enrolled in school	9	36%
TOTAL	25	100%

Due to the recession, a series of questions were asked in the 12-month survey to all current and former CCHC employees to better understand the extent to which the economic crisis has affected them and their families. All respondents reported at least one of the listed financial setbacks, with the most common reported as increases in cost-of-living, increased mortgage/rent payments, and negative changes in a household member's employment status. In general, this suggests that the current economic situation has affected all CCHC employees in a variety of ways, which also may have likely affected their income security.

## Employee Assistance Programs

During this grant period, CCHC has implemented a number of professional development opportunities for their new employees, including the EGO (Employee Giving Operation) program<sup>7</sup> and the Eleanor Program<sup>8</sup>. Of all survey respondents 9.5%

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<sup>&</sup>lt;sup>7</sup>CCHC's EGO (Employee Giving Operation) Professional Development Funds is a competitive application for funds targeted to employees to use toward education, trainings and professional development programs outside of the agency. These funds are provided by CCHC employee donations and are awarded quarterly to those who apply and qualify.

<sup>&</sup>lt;sup>8</sup>The Eleanor Program is a professional development program for low-income women to provide educational, child care and housing assistance. This program is funded through assistance from the Eleanor Foundation (<a href="http://www.eleanorfoundation.org/">http://www.eleanorfoundation.org/</a>).

(n=4) of six-month respondents and 4% (n=1) of 12-month respondents reported to have received and used EGO Professional Development funds.

Among survey respondents, 9.5% (n=4) of six-month respondents and 21% of the 12-month respondents (n=4) participated in CCHC's Eleanor Program. Additionally, 10.5% (n=2) participated in the Eleanor Scholars program, a supplement of the Eleanor Program that pairs the Eleanor women with mentors for a stronger one-on-one relationship. Overall, perceptions of the Eleanor program were strong. Among six-month survey respondents, 50% (n=2) was "very satisfied" and 50% (n=2) were "neutral" about the program. Those who were very satisfied cited the inspiration they received from the program staff and the positive impact it has had on their professional lives. Neutral comments included the inability to qualify for housing assistance (n=1) and the benefit from the housing assistance but lack of benefit from other aspects of the program (n=1).

Of 12-month survey respondents, 25% (n=1) were "very satisfied," 25% (n=1) were "neutral," 25% (n=1) were "somewhat unsatisfied" and 25% (n=1) were "very unsatisfied." Comments included the inability to qualify for housing assistance (n=1) and the benefit from the housing assistance but lack of benefit from other aspects of the program (n=1), as well as inability to respond to this question because the candidate was a new Eleanor woman (n=1).

It is recommended that CCHC seek out ways to strengthen the assistance provided through the Eleanor Program, including housing assistance.

However, a number of women also point to the strong benefits that the Eleanor Program has had on their lives. Below is a selection of quotes gathered from autobiographies written by Eleanor Program recipients:

- This program has shown me that there is hope for single mothers that are searching for advancements in this world. This program has really motivated me in becoming a better mother, young lady, and business woman.
- I was accepted into computer classes which were extremely beneficial to me in preparing me to be considered for promotions at my place of employment... [and] have also helped my children in their course work at school. I've also been taught tips on how to purchase a house and car, maintaining a good diet and nutrition, resume and interview tactics and the program motivated me to go back to college.
- I currently attend [college] where I received a full scholarship.... I will obtain my Associates Degree in August 2009...and my Bachelor's Degree in August 2011. I have been able to maintain a 4.0 GPA while working full time [at CCHC].

Overall, the women who have participated in the Eleanor Program have pointed to the number of ways in which the program has helped them, as well as provided suggestions on where the program needs to be strengthened.

## **Transportation**

In the original grant application, CCHC had intended to provide employee transportation in the hopes of increasing recruitment and retention of new employees.

However, due to issues related to the start-up of the Home Health Agency and overall availability of funds, this program was not put into place. Survey respondents were asked, "If CCHC provided free or affordable transportation to and from work, would you use it?" Of all targeted survey respondents, 79.2% (n=57) reported that they would use it. Among these respondents, 49.1% (n=28) would "always" use it, 29.8% (n=17) would "sometimes" use it, and 21.1% (n=12) reported that they would use it "once in a while." This suggests that transportation for CCHC employees would be beneficial to implement in the future, but that use may not be daily among the majority of employees.

Job Training and Professional Development

Table 35. Sufficiency of Job Training

	Ba	seline	Six Month		
Very Sufficient	27	51.9%	13	46.4%	
Sufficient	15	28.8%	9	32.1%	
Neutral*	0	0	4	14.2%	
Insufficient	3	5.7%	1	3.6%	
Very Insufficient	7	13.4%	1	3.6%	
TOTAL	52	100%	28	100%	

<sup>\*</sup>This response was not an option in the baseline survey.

In the baseline and six-month surveys, those respondents who received job training at the beginning of their employment with CCHC were asked to rate the sufficiency of the training in executing their job duties. Overall, the majority initially reported that it was sufficient, and a comparable majority reported that it was sufficient approximately six months later.

Table 36. Usefulness of Job Training

	Ba	seline		Month: ness Overall	0.000	12 Month: l for Professional Development
Strongly Agree	30	57.7%	12	70.5%	11	64.7%
Agree	15	28.8%	3	17.6%	4	23.5%
Neutral*	0	0	1	5.8%	2	11.7%
Disagree	5	9.6%	1	5.8%	0	0
<b>Strongly Disagree</b>	2	3.8%	0	0	0	0
TOTAL	52	100%	17	100%	17	100%

<sup>\*</sup>This response was not an option in the baseline survey.

In the baseline and 12-month surveys, respondents were asked about the overall usefulness of the initial job trainings they received. Among those who received these trainings, the majority reported that it was useful at both baseline and approximately 12 months later. Twelve-month survey respondents reported that the training showed them how to do their jobs and to do them well, especially with regard to computer training and how to handle and help their patients.

Additionally, the majority of 12-month respondents reported that the training was useful for their overall professional development. Many responded positively to the training and reported that they were useful and provided good information. In general trainings were extensive and ongoing, and respondents were overall grateful for it

Table 37. Usefulness of Department Trainings among 12-Month Surveyed Respondents

	Departr	nent Trainings
Very Useful	12	63.1%
Somewhat Useful	4	21%
Neutral	2	10.5%
Somewhat Not Useful	0	0
Not At All Useful	1	5.3%
TOTAL	19	100%

Department training programs are department-specific, usually organized by a supervisor or manager, and address some common issues associated with that

department. Among those 12-month survey respondents who participated in this type of training, the majority found that these programs were useful, informative and thorough.

Respondents were also asked to provide any suggestions for future departmental training programs. Themes of these suggestions include

- Workplace ethics
- Diversity training
- CPR training
- Sessions on health issues, such as diabetes and hypertension
- Management training
- Working with patients and pharmacists
- Insurance handling
- Longer trainings, more time for questions and answers, incorporating a pretraining and post-training survey to assess where employees are at and measure strengths and areas of improvement of training sessions.

It is recommended that CCHC incorporate these suggestions for their future department training programs.

Table 38. Perceptions of CCHC's Ability to Provide Opportunities for Employment Advancement

	12-	Month
Strongly Agree	9	36%
Agree	5	20%
Neutral	6	24%
Disagree	2	8%
<b>Strongly Disagree</b>	3	12%
TOTAL	25	100%

Over half of the surveyed employees felt that CCHC was able to provide opportunities for employment advancement. Comments include the opportunities for professional development training both in-house and outside of the agency. Others have also reported being promoted themselves and/or witnessing co-workers getting promotions. Those who did not feel that CCHC provided opportunities for advancement felt that these opportunities were not publicized widely and that promotions were given to those who had personal relationships with CCHC supervisors.

## Job Satisfaction/Work Environment

In all three telephone surveys, respondents were asked a variety of questions about self-perceptions of their work environment at CCHC.

#### **Baseline**

In the baseline survey, respondents were asked to rate their job overall, their experiences with co-workers, and their experiences with management on a scale of 1 to 4, with 1 as "strongly disagree" and 4 as "strongly agree." Additionally, respondents had the option to elaborate on their ratings.

Table 39. Perceptions of CCHC Work Environment among Baseline Survey Respondents

	Work	pportive Environment Overall		pportive Workers	Sup	oportive ervisors/ anagers
Strongly Agree	37	51.4%	45	62.5%	41	56.9%
Agree	31	43.1%	21	29.2%	22	30.6%
Disagree	3	4.2%	5	6.9%	6	8.3%
<b>Strongly Disagree</b>	1	1.4%	1	1.4%	2	2.8%
Missing-Refused	0	0	0	0	1	1.4%
TOTAL	72	100%	72	100%	72	100%

# Overall Job Satisfaction

First, with regard to job satisfaction overall, the majority of respondents reported that their environment was personal, friendly, family-like, encouraging, and extremely supportive and helpful. Many participants also felt that their co-workers, especially those who had been at CCHC longer, were regularly available to help with questions and concerns. Strengths of CCHC included the financial aid offered for scholarships and professional development, the support they received when they had to deal with health or family emergencies, the spiritual aspect of the Christian organization, and their support of ex-offenders.

Some of the less supportive aspects of the CCHC work environment that a few respondents reported included personality clashes with co-workers and staff, inability to ask co-workers or management for help, lack of office space and equipment, and discrepancies with paychecks, lunch breaks and overtime.

#### Satisfaction with Co-Workers

In general, the majority of participants felt that their CCHC co-workers were extremely supportive and helpful, and that everyone worked well together as a team. Additionally, those senior staff members who have more work experience were very helpful, supportive and available. However, as with the overall job satisfaction responses, a small percentage of employees felt that some of their co-workers were more supportive than others. Some respondents also identified less supportive aspects, such as a lack of teamwork, a need for more training, and the adjustment period that came with new management.

Satisfaction with Supervisors and Managers

The majority of employees perceived that CCHC supervisors and managers are always available for any kind of help or training, and have excellent relationships with their own supervisors. Many respondents identified the "open-door policy" that exists in the CCHC work environment with their managers. A few respondents suggested that there could be a more formal management structure within the departments. Some respondents indicated that they had more challenging relationships with their supervisors, reporting that some supervisors have negative attitudes and are hard to approach.

## **Six-Month Surveys**

In the six-month survey, respondents were asked to compare various aspects of their job at CCHC with their former job on a scale of 1 to 5, where 1 was "very unsatisfied" and 5 was "very satisfied."

Table 40. Level of Satisfaction with CCHC Employment as it Related to Pre-CCHC Employment among Six-Month Survey Respondents

	Lo	cation	H	lours	Co- Wo	rkers		agement/ ervisors		Outies and onsibilities		CHC's lission	_	CHC verall
Very Satisfied	24	57.1%	28	66.7%	21	50%	18	42.9%	16	38.1%	29	69%	17	40.5%
Somewhat Satisfied	9	21.4%	5	11.9%	12	28.6%	15	35.7%	12	28.6%	10	23.8%	17	40.5%
Neutral	8	19%	5	11.9%	2	4.8%	5	11.9%	13	31%	1	2.4%	5	11.9%
Somewhat Unsatisfied	0	0	1	2.4%	6	14.3%	1	2.4%	0	0	1	2.4%	2	4.8%
Very Unsatisfied	1	2.4%	3	7.1%	1	1.4%	3	7.1%	1	2.4%	1	2.4%	1	2.4%
TOTAL	42	100%	42	100%	42	100%	42	100%	42	100%	42	100%	42	100%

#### Location

In general, the majority of employees were satisfied with the location of their job with CCHC. Many employees reported that their current job was much closer to home than their former job. Some negative comments included longer travel time than their old job, the inconvenience for those employees who worked at multiple locations and the lack of access to public transportation near some CCHC locations.

#### Hours

The majority of respondents were happy with the Monday through Friday, 8am-4pm or 9am-5pm hours for their job, as many employees reported that their last job had evening, weekend and/or overnight hours.

#### Co-Workers

Overall, respondents reported an enjoyable work atmosphere with their coworkers at CCHC. These respondents appreciated the teamwork, cohesive work environment, and the support and help they received from co-workers. On the other end, some respondents felt that their work environment was full of gossip which isolated some of them.

## Management/Supervisors

Respondents were satisfied overall with the professionalism, help, courtesy and support they received from supervisors and managers. A few respondents reported that their managers and supervisors lacked professionalism by having too personal of a

relationship with their work staff. Some respondents suggested that CCHC managers and supervisors need additional leadership training.

## Job Duties and Responsibilities

The majority of respondents enjoyed their position at CCHC, the skills they were able to share, and the help they were providing to the community. Many respondents felt that they had more responsibilities at this job compared to their last job, and enjoyed the interactions they had with patients at CCHC compared to their former job's clients/patients. Some respondents were not happy with the amount of work that their job position required, felt that there were no set duties for their position, and reported that a lack of funding deterred the pursuance of new ideas or programs.

#### CCHC's Mission and Role as an Organization

Nearly all respondents appreciated and supported CCHC's mission and role as an organization in the communities. Many respondents reported that the agency maintains the dignity and respect of the agency and clients, and reported that they help everyone on an individual level and never turn anyone away. This greater mission was also reflected in the presence of Christian faith and ethos in the work environment and their efforts to give back to the community.

## Overall Job Satisfaction

In a final assessment of overall job satisfaction, many survey respondents reported that they enjoyed the work environment of CCHC and the execution of the organization's

mission statement. Some respondents were more critical of their wages and lack of gas mileage reimbursement, as well as short-staffing, work gossip and lack of opportunities for advancement.

## **Twelve-Month Surveys**

Table 41. Perceptions of Work Environment among Feel They Have Been Integrated into the Agency among 12-month Survey Respondents

	_	rated into Agency		of their Job CHC Agency
Completely	18	72%	7	28%
Mostly	3	12%	14	56%
Somewhat	3	12%	2	8%
A Little	1	4%	1	4%
Not at All	0	0	1	4%
TOTAL	25	100%	25	100%

Nearly all respondents feel they have been integrated into the agency. In general, comments included the social networking, help and strong relationships they feel with coworkers and management. However, a few respondents felt that the work environment was too "clique-y." Additionally, the majority of respondents felt that the job was valuable for the CCHC agency, specifically that their positions within the organization were valued and necessary for fellow employees, clients and individuals.

#### **Conclusions:**

Overall, the majority of surveyed respondents in all three surveys reported positively to their work environment at CCHC both in terms of income and job satisfaction. Additionally, a select few respondents had critiques and comments for some of the questions, which are included within this section.

**CCHC Employment:** 

**Targeted Recruitment** 

#### EMPLOYEE RECRUITMENT

**Objective:** How successful was CCHC in recruiting target employees and how successful were they in working with various city and state employment offices?

#### **Recruitment Practices**

CCHC recruited staff using a number of different channels, including informing current staff of vacancies to make use of word-of-mouth networks. More formal channels included advertising positions on <a href="https://www.npo.net">www.npo.net</a>, a site for non-profit job openings in the Chicago-area.

CCHC also partnered with a number of employment agencies in the Chicago-area to recruit employees, including the Community Assistance Project (CAPS), a private non-profit organization that provides employment services to low-income and/or formerly incarcerated individuals in the Chicago-area. CAPs recruits are first employed on a trial volunteer basis, and then formally employed full-time. CCHC offers employee orientation for the CAPs volunteers to get them acclimated to the organization, and also provides an orientation on employee benefits to all new employees (who may not have experienced with employee benefits). CCHC also partnered with the Illinois Department of Employment Security (IDES), a state agency that provides job listing to unemployed residents of Illinois. Additionally, CCHC partnered with other social service organizations in the Chicago area, including the Aids Foundation of Chicago, and with local colleges and universities, to recruit new employees.

While CCHC currently has no formal method of determining the agency or organization through which new employments were referred to the job, informal tallies were taken from resumes and cover letters. Below are the reports from CCHC's Human Resources office on the number of employees referred and recruited:

Table 42. Counts of Employees Recruited from Employment Agencies and Percentage Hired

	Applied	Hire	ed
CAPs	22	15	68.2%
IDES	?	2	n/a
Aids Foundation of Chicago	1	1	100%
City colleges/universities	?	2	n/a
Npo.net	?	15	n/a

Among those employees who completed telephone surveys, some also indicated that they were referred to CCHC through these entities. Below is a breakdown:

Table 43. Surveyed Employees Refereed to CCHC through Employment Agencies

Npo.net	9	21.4%
<b>CAPs Employment Program</b>	4	9.5%
College Recruitment	2	4.8%

Of those phone survey respondents who were referred through the CAPs program (n=4), 50% (n=2) rated their experiences with CAPs as "excellent" and 50% (n=2) rated their experience with CAPs as "good." Open-ended responses on experiences with CAPs indicated that the organization is interested in helping them find employment and do an excellent job at helping their recruits with various aspects of employment, from learning basic computer skills to creating a resume and learning how to dress and act in a job interview.

In April 2009, CURL Urban Studies students completed profile stories of two employees who were among those targeted for entry level employment. These stories were included in the April 2009 OCS Status Report. Both had come through CAPs to receive various forms of professional training. As one employee stated, "They taught us how to sell ourselves." Additionally, the other employee was introduced to CAPs by his parole officer. The program educated him on a variety of job skills such as how to get a job and how to dress for an interview. After six weeks in the program, he received a job interview with CCHC.

It is recommended that CCHC continue to work with these employment agencies to recruit new employees who may belong to targeted groups, and begin to systematically record the number of employees referred from the various agencies.

**Home Health Agency:** 

**Patients and Revenues** 

#### HOME HEALTH AGENCY: PATIENTS AND REVENUES

**Objective:** How many patients did the Home Health Agency serve during this grant period, what were patient revenues, and what factors affected both of these elements?

To date, CCHC has had 80 Medicare/Medicaid referred for services and has served 50 patients through the Home Health Agency. However, due to the challenges in securing Medicare accreditation, CCHC was unable to accommodate the additional 30 patients. Additionally, CCHC is unable to retroactively bill Medicare for services provided to the 50 patients. CCHC is on schedule to receive Medicare accreditation for their Home Health Agency by early 2010.

It is recommended that CCHC continue to pursue the securing of Medicare accreditation for the Home Health Agency.

The following section discusses some of the details with regard to the delays in accreditation.

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**Project Implementation:** 

**Benefits and Challenges** 

#### PROJECT IMPLEMENTATION

**Objective:** *Identify some of the easier and more challenging aspects of project implementation.* 

This section of the evaluation deals with both easy and challenging aspects involved in the implementation of this project. The information below is informed by an October 2008 focus group conducted with OCS-HHA staff, as well as informal conversations that took place during the timeframe of project implementation.

#### **Benefits:**

Partnerships with Local Employment Agencies and Services

OCS-HHA staff have identified a number of new employees who belong to the targeted population through the Temporary Assistance for Needy Families (TANF) program through CAPs to provide a continuous rotation of qualified new employees from the targeted populations. CAPs as an intermediary agency has also been helpful for CCHC in pre-screening applicants and obtaining life history and criminal background checks. This way, CCHC can place these new employees in jobs that correspond with their work skills, and place employees with criminal backgrounds in applicable positions. CCHC credits CAPs for referring these new employees, many of whom are from the targeted populations and have been able to maintain employment for one year or longer.

Additionally, through a grant from the Eleanor Foundation, CCHC has been able to institute their Eleanor Program. The Program sponsors bi-monthly training sessions

with outside partners and organizes a mentoring program for its members. Focus group participants indicated that this program has been helpful in providing education and professional opportunities for these women. As one staff member said,

The great thing is that our partnering agencies offer courses for ladies, whether it is interviewing skills, building your resume up, skills that are essential to a job that you might dream of performing. A lot of our women are medical assistants, [and] they want to go on to nursing. So we're looking for programs to send them to, to develop their skills and their talents so they can be competitive in the field. So that means, going back to school.

Finally, CCHC has also found their relationships with the education and career development offices in various colleges and universities very helpful in assisting those women who participate in the Eleanor Program to enroll in classes for their educational and professional advancement.

## **Challenges:**

State Medicare Accreditation:

The most challenging aspect of project implementation has been the Home Health Agency's inability to get credentialed through the State of Illinois. This is due to changes in State processes and funding. Originally, the State would send out a surveyor to examine the agency and determine if they qualify for the credentials that would allow them to bill Medicare and Medicaid for health care services. Soon after CCHC obtained a license for their Home Health Agency in 2006, the State eliminated the Medicare/Medicaid surveyor position. As a result, CCHC had to hire a private surveyor to facilitate the accreditation process. This process requires significant financial

investment and involves many steps over time. In the interim, CCHC has been providing services to Medicare and Medicaid recipients but cannot bill the programs for these costs.

This setback has greatly inhibited the financial and program growth of CCHC's HHA. As one staff member said,

By not having knowledge of what was going to happen, we went into it fully anticipating that it would be a few months and we would be up and going. These delays have impacted our growth because we have to keep providing services, but we have to do those services free. So we have employees that have been on the payroll and we've been providing free services. Because we are providing free services, that limits the amount of services that we can provide. So where we though by now we would have [a] full staff, [a] full complement of services, we have been limited tremendously by these hang-ups and setbacks as far as our progress is concerned. But I think we're standing on the threshold of walking into what we had anticipated in the beginning.

Due to the lack of accreditation, CCHC has not received any payments for the Medicare/Medicaid patients they have served. Since Medicare and Medicaid cannot be billed retroactively, CCHC has now provided these services at no cost and are unable to serve additional Medicare/Medicaid patients. While CCHC's Account Executive has been successful in working with other hospitals and agencies to refer new patients, the HHA's lack of funds has also limited the number of patients they are able to see. Including the costs of putting \$90,000 aside in order to obtain a Medicare provider number, hiring a private Medicare/Medicaid surveyor, and still having to pay all staff on the payroll, CCHC has been unable to accumulate funds to allow their agency to grow. This also presents staffing challenges, as CCHC is limited in their ability to hire individuals for those positions that carry high salaries, such as Registered Nurses and Physical Therapists.

Challenges with New Staff

Staff who took part in the focus group suggested that many new hires are "unemployable" when first hired at CCHC, as many have limited work history and also have experienced barriers to employment. Overall, CCHC has experienced challenges with providing their new employees with adequate skills so that they can be seen as "employable" and reach higher levels of employment, either currently or in future jobs outside of the organization. This is where the Eleanor Program has been helpful in providing educational and professional assistance. Additionally, CCHC's Employee Giving program, which supplements a Professional Development Funds program, is available to any employee who wants to enroll in a workshops or class to improve their job skills. These funds are distributed quarterly to employees who apply for it.

While CAPs has been useful in recruiting employees, it has also proven to have its challenging aspects. Specifically, the focus group participants indicate that there are some employees recruited through CAPs who have special needs or who bring their social problems to the agency. Additionally, some CAPs recruits are not adequately qualified to do the work. It was also indicated that some CAPs recruits also tend to clash or disagree with the agency. This requires CCHC staff to keep up with these employees to see how they are doing and to help them with their work as needed. Overall, there tends to be an overrepresentation of new CAPs employees at CCHC. This can be seen as an unfair "advantage" in gaining CCHC employment from both personal and legal perspectives. But, CCHC sees this challenge as simply reaching out to the target populations encompassed in their mission, and combats it by offering professional development funds to all employees. Finally, there has been some reluctance on the part

of those non-CAPs employees in welcoming and accepting the CAPs employees because of their social stigma. These relations have improved over time, especially in the context of the weekly "devotions," a form of prayer group offered by CCHC that allow all employees to get to know each other on a more personal and spiritual level.

The intentions of the Eleanor Program are to impart to employees the value that if they work hard enough, they can achieve what they want. This has been challenging because many of the women employees come to work with the mindset that society owes them. CCHC hopes to combat this by promoting a strong work ethic among Eleanor Program participants.

## **Lessons Learned: Suggestions for Replication:**

Due to their difficulties in getting their Medicare/Medicaid credentials, CCHC's first recommendation to other community-based organizations interested in implementing a similar project is to avoid projects with legal challenges. They suggest pursuing projects that are less regulated, unlike health care which is highly regulated.

For all projects, it is important for the agency to be financially secure. This will help if complications like those experienced by CCHC happen. The focus group participants acknowledge that the funding received from OCS has proven to be critical for them during this time. Without these funds, CCHC would have been extremely limited in their effort to pursue the HHA project and to sustain their costs.

CCHC has also benefited from their partnerships and collaborations with government and private agencies in pursuing the HHA project. Specifically, focus group participants suggest partnering with those agencies that work with the populations being

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targeted by the project. In addition, it is important to make sure that these partner agencies have a clear understanding of the nature and needs of the target populations so that they can be reached easier and more effectively and also understand the nature of your project when trying to help you in its implementation.

Finally, with regard to recruiting employees, focus group participants recommend treating all new employees on a case-by-case basis. It is important to remember that everyone is different, and that the approach to them should be tailored to meet them where they are and help them in the most effective way.

#### **EVALUATION CONCLUSIONS AND RECOMMENDATIONS**

During this grant period, CCHC met and surpassed the number of new hires defined as "low-income beneficiaries" included in this evaluation. Specifically, CCHC was able to hire the majority of all new employees from the targeted areas (the South side of Chicago and the surrounding South suburbs), along with individuals from racial minority groups (including African-American and Latino/a). For those new employees targeted by this evaluation for follow-up, all of them receive a regular salary with such employee benefits as life insurance, medical and dental insurance, and paid holidays.

Additionally, a number of employees have participated in the various forms of job training and professional development opportunities that CCHC has provided; with a majority of the targeted employees reporting that these trainings were useful, beneficial, and relevant to their overall professional development. These and other "benefits" provided by the agency, including a welcoming work environment with cooperative coworkers and management, has contribute to financial and employment security for those in need.

During this grant period, CCHC has also worked closely with the various employment agencies in the Chicagoland area to recruit employees. As indicated above, CCHC has employed approximately 35 individuals through these organizations. A number of these employees who had been interviewed as a part of the CURL evaluation also reported positive feelings about their employment and toward the CCHC organization overall.

Additionally, despite some significant challenges, the Home Health Agency component of CCHC is currently running and scheduled to receive Medicare accreditation by early 2010.

#### **Recommendations:**

Below is a summary of recommendations outlined throughout this report:

- It is recommended that CCHC continue to recruit from the surrounding Chicago community areas, and also extend their efforts to recruit new employees from areas that are less represented and just as much in need of employment opportunities.
- It is recommended that CCHC continue to recruit from the surrounding south Chicago suburbs, and extend their efforts to recruit new employees from areas where targeted employees live – specifically, minority groups, low-income, lower education levels, those living in poverty and those on public assistance.
- It is recommended that CCHC seek out ways to strengthen their housing assistance provided through the Eleanor Program.
- It is recommended that CCHC incorporate employee suggestions for their future department training programs, including trainings on workplace ethics, diversity training, relevant health topics, and management trainings.

- It is recommended that CCHC continue to work with these employment agencies to recruit new employees who may belong to targeted groups, and begin to systematically record the number of employees referred from the various agencies.
- It is recommended that CCHC continue to pursue the securing of Medicare accreditation for the Home Health Agency.

## **APPENDICES**

Appendix I: CCHC Home Health Agency Evaluation Plan

**Appendix II**: CCHC Baseline Employee Phone Survey

**Appendix III**: CCHC Six-Month Employee Phone Survey

**Appendix IV**: CCHC Twelve-Month Employee Phone Survey

Appendix V: OCS-HHA Staff Focus Group Question

# **Appendix I: CCHC HHA Evaluation Plan**

#	What does CCHC want to	Indicators	Source	Method	Schedule
	know? Outcomes Object	voc•			
1	Were 85 new positions created?	85 new hires since baseline, September 30, 2006	HRB database	Each position has a unique numerical code and an alpha code.	Bi- monthly
2	Were 70 new hires people from target groups?	New employees are: TANF recipients; or low income/displaced workers; or public housing residents; or	Primary source: CURL to conduct surveys with employees.	CURL to conduct surveys, which will ask about status as low income, former TANF recipient, displaced worker, at risk teen or public housing resident, work history, job satisfaction and demographic information.	As scheduled
		residents of South Chicago suburbs.	Secondary source: Payroll database; Zip codes of new employees from application forms - HR department.	Job codes and employee numbers, not names, will indicate entry-level positions. Zip codes will establish locality.	Quarterly
3	How many new employees are able to maintain employment?	Employees maintain employment for 6 and 12 months or Employees change jobs within organization or Employees change	Primary source: CURL to conduct follow-up surveys.	CURL to conduct follow-up interviews at 6 and 12 months.	As scheduled
		jobs outside organization or Employees leave job. Employees pass their 90 day introductory period review?	Secondary source: Payroll database and employee tracking database from HR department.	HR will supply information from payroll database on employees who are successfully complete their 90 day introductory period (without names).	Quarterly

4	What benefits does CCHC provide to its employees?	Employees have benefits such as healthcare, profit sharing, paid sick leave, and retirement benefits.	Primary source: CURL to conduct surveys with employees.  Secondary source: Payroll database - HR department.	CURL to conduct surveys with new hires and after 6 and 12 months.  HR will supply information from payroll database on employee benefits.	As scheduled  Quarterly
5	Was transportation effective in recruiting and retaining employees?	Rate of transportation usage among employees, or barriers to employment due to lack of transportation.	CURL to conduct new hire and follow-up surveys with employees.	CURL to conduct interviews will new hires and after 6 and 12 months.	As scheduled
6	Did full time employment with benefits improve the income stability of the employees from the targeted distressed areas?	*Positive Indicators: Income stability- ability to pay bills, meet living expenses, maintain residence, change level of TANF/public aid (?). *Negative indicators: use of food banks, inability to meet expense, rent payments more than 1/3 income, use of public aid (?).	Primary source: CURL to conduct follow-up surveys.	CURL to conduct interviews at hire and after 6 and 12 months of employment to provide a time series. Likely sample size: 10-15 individuals.	As scheduled

	<b>Process Objective</b>	es:			
7	Did the home health agency reach its goal of 240 patients in care from the targeted communities in the first three years of operation?	240 patients being served at the end of 3 years.	Patient database and billing information from HR department.	CCHC and CURL to discuss method and schedule to collect this data	Yr3
8	How successful was CCHC in working with the local employment offices of the City of Chicago and the State of Illinois Employment and Training Center?	Relationship established with employment offices and ETC; protocols for referrals agreed and followed; reaching the target number of referrals from employment agencies.	HR and Marketing Director. New hire reports to include referral information?	Activity report from HR and Marketing Director on contacts with the agencies.	Quarterly.
9	How successful was CCHC in following the timeline agreed with OCS for the project?	Schedule adhered to within reasonable limits. Delays are reasonable, explainable and documented. Variations may be due to changing priorities for services.	Project Director	The project director will give CURL a record of events during the project period and the original timeline.	Yr3

11	Have the new employees been provided sufficient job training?  Was transportation to/from work provided to employees from the targeted	CCHC has made orientation programs and employees have good job satisfaction.  Transportation was provided; transportation was accessible to targeted employees.	CURL to conduct new hire and follow-up surveys with employees.  CURL to conduct new hire and follow-up surveys with employees.	CURL to conduct interviews with new hires and after 6 and 12 months.  CURL to conduct interviews with new hires and after 6 and 12 months.	As scheduled  As scheduled
12	distressed areas?  Were patient revenues from HHA at or above projected levels?	Patient revenues (including Medicare and Medicaid) are at projected levels.	Interviews with finance administrators.  Billing information and income	Interviews with CCHC financial administrators for information about revenues from HHA.  Finance director to supply information on cash flow, billing and income.	Annually
13	Has the project received any additional financial support outside of OCS?	Use of private sector, loans, or government funds; impact of not having OCS support.	Focus groups with financial directors at end of project.	CURL to conduct focus groups with the financial department.	Yr 3
14	Can the project be replicated with or without OCS support in	The project would be viable without the grant; or the project would be viable using	Primary source: Focus groups with senior management at end of project.	CURL to conduct focus groups with management to determine the necessity of OCS funding.	Yr 3

	the future?	commercial borrowing to replace grant money; or other moneys are leveraged using OCS funding.	Secondary source: Information from finance department on cashflow. Process recording on billing, and on use of OCS money to leverage funding for other programs and services that help sustainability.	Financial director to supply information on cash flow, billing, income and expenditure and other funding leveraged. Financial information is already coded by project.	
15	Under what circumstances would a similar project be likely to succeed or fail?	N/A	CURL to conduct interviews and focus groups with key employees and managers.	Interviews and focus groups with senior management at end of project will help to evaluate risk and success factors.	Yr 3
16	What lessons from CCHC's experience in implementing this project can be instructive for other community based organizations?	N/A	Focus groups of senior management.	CURL to conduct focus groups with senior management at end of project.	Yr 3

## **Appendix II. CCHC Baseline Employee Phone Survey**

#### Introduction

We are trying to understand an employees' experience at CCHC by looking at different aspects of job satisfaction. This includes pay, benefits, and work environment. The following is a series of questions about your experience working at CCHC and past work experience.

(For some of these questions, I will have to write out your responses. So, if I am silent for a few seconds, please bear with me. Thank you.)

<ol> <li>First of all, are you currently employed with the Christian Community Health Center?</li> <li>Yes No</li> </ol>
IF YES  1a. What is your current position at CCHC (specify)
1b. When did you start at CCHC (probe for month/year)?
1c. Is your position full-time or part-time hours? Full Part
If part time, how many hours a week are you scheduled to work?
1d. Have you worked in any other positions at CCHC? Yes No
If yes, how long did you work in that position?
What factors contributed to switching positions?
IF NO
1e. How long did you work at CCHC?
1f. In your opinion, what were the major factors that contributed to you leaving?
The next few questions are about your CURRENT pay and employee benefits.
2. Are you paid hourly or annually by CCHC? Hourly Salary If Hourly wage—go to 2a If Salary—skip to 3

• • •	current pay rate? I will read some categories so
please stop me when I read yours.	<b>442.51 445.</b> 00
\$7.50 or less	\$12.51-\$15.00
\$7.51-\$9.00	\$15.01-\$20.00
\$9.01-\$12.50	\$20.01 and above
2b. For hourly employees, what is your	annual salary? I will read some categories so
please stop me when I read yours.	,
\$8,000 or less (p	robe)\$24,000-\$32,000
\$8,000-\$12,000	\$32,000-\$40,000
\$12,000-\$16,000	\$40,000-\$50,000
\$16,000-\$24,000	\$50,000 or more
less than \$5,000 (do not r	
2. For ampleyage maid by colony what	is view amount calcury? I will mad some actoropies
so please stop me when I read yours.	is your annual salary? I will read some categories
\$8,000 or less (p	robe)\$24,000-\$32,000
\$8,000 of less (p	\$24,000-\$32,000 \$32,000-\$40,000
\$8,000-\$12,000	\$32,000-\$40,000
	\$50,000 or more
\$16,000-\$24,000	
less than \$5,000 (do not r	read) Yes No
4. In addition to your paycheck, do you	receive any additional sources of income?
(Interviewer: Provide a few examples fi	
Yes No	,
If we what are they? $In$	terviewer check all that apply.
•	Sect 8 vouchersSSI
Social Security	MedicaidUnemployment Benefits SSDIOther (specify)
General Fublic Assistance	veterans benefits
	1 C. C. COWO
	we any employment benefits from CCHC?
Yes No (Probe: Medical insurance Paid vacati	ion, Dental insurance, Paid holidays, Retirement,
Paid sick days, Over-time pay.)	on, Demai insurance, I ala nomaays, Remement,
If no, skip to 7	
· •	which. Interviewer check all that apply.
Medical insurance	Paid vacation
Medical insurance	Paid vacation Paid holidays
Dental insurance Retirement	Paid hondays Paid sick days
	<del></del>
Over-time pay	Other (please specify)

	benefits? On a scale	of 1 to 4, where 1 e	the quality of your emp quals Not at all Satisfic f your employee benefi 4	ed and 4
	Not at All Satisfied	_	Very Satisfied	
often are you expenses) On	able to make ends mee a scale of 1 to 5, wher	et each month? (i.e. et 1 is Never, 2 is O	pay bills, meet necessal ccasionally, 3 is Some able to make ends mee	ary times, 4 is
1	2	3	4	5
Never	Occasionally	Sometimes	Most of the time	Always
	ccasionally, 3 is Somet		ave each month? 1 to 5 the Time, and 5 is Alw	
1	2	3	4	5
Never	Occasionally	Sometimes	Most of the time	Always
8. Did ( <i>Depe</i> interv Y	nding on whether the i iew, insert "in the last es No	raining for your cur interview is the emp	our current position.  rent position at CCHC ployee's first, second, on the last 12 months" as a	or third
IF	for working in your c On a scale of 1 to 4, s Strongly Agree, pleas	current position? where 1 equals Strose respond to the forby CCHC was use	vided by CCHC in prepongly Disagree and 4 edulowing statement, "I following me for follow:	quals Feel that the
	1 Strongly Disagree	2 3	3 4 Strongly Agree	
	you for your current peeded more" and 4 of	position? On a scale equals "Training wa	provided by CCHC in perovided by CCHC in peroperation of 1 to 4, where 1 equals as enough please indicates and you for you for you for you	uals "I ate how

	Interviewer ci	rcle answer bei	low:	
	1	2	3	4 E1
	I needed i	nore		Enough
IF NO	)			
	8c. Was job tr	aining offered	to you? Yes	No
	If yes, what w	ere the reasons	for not participati	ng in the training?
	•	·	ded training? Yes	
	If yes, training	g on what?		
9. How probe	do you travel if necessary. Bus Train Drive self Drive with an	to and from wo	Walk Bike CCHC pas Other (plea	Check all that apply and
	9b. If yes, plea			
it? Yes	orovided free or No ves, how often?		-	from work, would you use
	Always	Sometimes	Once in a while	

## Next I have a few questions about your work environment.

10a. Do you feel that CCHC is a supportive work environment? (*probe: including, coworkers, supervisor, management*). On a scale of 1 to 4, where 1 equals Strongly Disagree and 4 equals Strongly Agree, please respond to the following statement, "CCHC is, overall, a supportive work environment."

ee
to 4, when
ee
scale of 1 espond to
."
ee
ee
ee
е. То
ee
е. То
е. То
2

	oyment or inco	ment at CCHC, did yo ome, such as transporta	
If yes, what were	e they?		
11g. Are you cur employment or i	• •	ncing these or any oth No	ner barriers related to
If yes, what were	e they		
Health Center (C\$8,000 or ;\$8,000-\$1:\$12,000-\$\$16,000-\$;\$less than \$5,000 (c)  11i. Did you reco	CCHC), what welless (probe) 2,000 16,000 24,000 do not read) eive any other interviewer: Pa	\$40,000- \$50,000	ne? \$32,000 \$40,000 \$50,000 or more
•	-	ver check all that appl	•
TANF		et 8 vouchersSS	
Food stamps	Nie	dicaidUr	nemployment Benefits her (specify)
Social SecurityGeneral Public Assistance		terans Benefits	ner (specify)
12a. Now I have a couple of geryear before working here, how opay bills, meet necessary expensionally 3 is Sometimes, 4 able to make ends meet?	neral questions often were you ses) On a scale	s about your prior fina a able to make ends me e of 1 to 5, where 1 is	eet each month? (ie Never, 2 is
1 2	3	4	5
Never Occasionally	Sometimes	Most of the time	Always

Sometimes, 4 is Most of the time, and 5 is Always, how often were you able to save? 5 1 Occasionally Sometimes Most of the time Never Always Now I have some questions about some past experiences. Again, we're trying to understand the experiences of employees who work at CCHC and this information will be kept confidential. 13. Have you ever been incarcerated? \_\_\_\_\_Yes \_\_\_\_\_ No If no, go to 14. 13a. How long ago was your most recent release from incarceration? \_\_\_\_\_ 13b. After your most recent release, did the corrections system refer you to any postrelease services including job training or other employment assistance? \_\_\_ Yes \_\_\_\_No Please explain.\_\_\_\_ Lastly, I will ask you some demographic information 14. What is your current living situation? (**Do not read answer list**). *Probe if necessary*. \_\_\_\_ apartment (not subsidized) \_\_\_\_ public housing (CHA) \_\_\_\_ housing shelter \_\_\_\_ house (not subsidized) \_\_\_\_ subsidized apartment \_\_\_\_ family/friend (probe: temp? If name on lease/pay rent, list as \*house or apt\*). \_\_\_\_ subsidized house SRO other 15. What neighborhood do you currently reside in/stay? Zip code\_\_\_\_\_ 16. How do you identify your race? \_\_\_\_\_ \_\_ Black or African American \_\_ White/Caucasian \_\_ Asian \_\_ Other (specify) \_\_ More than one race (specify) 16a Are you Hispanic or Latino? \_\_\_\_ Yes \_\_\_\_ No 17. What is your age? \_\_\_\_\_ 18. Gender (don't ask) 1Male\_\_\_\_ 2Female\_\_\_\_

12b. In the year before working here, how often were you able to put any money aside to

save each month? On a scale of 1 to 5, where 1 is Never, 2 is Occasionally 3 is

19a. How many people live in your household?	TOTAL # of adults # of children under age 18
19b How many of those are employed? TOTAL (# part-time) (# full-time)	
19c. Are you the main income earner in the house	sehold? Yes No
That's all the questions I have.	
If you have any questions about the purpose of to or any issue related to this survey, feel free to cat Thank you for your time!	· •

# Appendix II: CCHC Six-Month Employee Phone Survey

## **Introduction:**

Just to let you know, we will be asking you some questions about both your current job and your former job. Please feel free to take your time while responding.

, <b>.</b>	rently employed with CCHC? o USE FORMER EMPLOY		7
1b. When did you sta	art with CCHC? (Probe for mo	onth/year)	
1c.What is your job	title?		
1d. Is your position f	full-time or part-time? F	ull ( <b>Skip to 11</b>	E.) Part
1e. If part tin	ne, how many hours a week ar	e you schedul	ed to work?
1f. Have you held an	y other positions at CCHC? _	Yes	_No Skip to 2a.
1g. What was your la	ast job title?		
1h. When did you sw	vitch jobs? (month-year)		
1i. If yes, why did yo	ou switch positions?		
Community Health	you tell me how you found ou Center? ( <b>Interviewer: Ask re</b> ith their answer in the lists b	spondent for	answer, then check the line
Mayor's Office CAPS employm	ployment office ployment Services (IDES) of Workforce Development ent program (incarcerated) ment program (low-income)	Internet	aper/Emp. Pages ad t ad family member
	in, go to 2b.)	(If yes to th	nis column, skip to 3a.)
	nality of your experience with fair, 3 is good, and 4 is excell		
1 Poor	<mark>2</mark> Fair	3 Good	4 Excellent

2c. Please explain:			
3a. Did you receive job training from CCHC	?Yes	No <b>If</b> r	no, skip to 4a.
3b. Thinking back to when you completed the sufficient enough to perform your job over the very insufficient, 2 is somewhat insufficient, somewhat sufficient, and 5 is very sufficient,	ne last few mor 3 is neither ins	nths? On a so sufficient no	cale of 1 to 5, where 1 is or sufficient, 4 is
	Somewhat Very suffi		
3c. Have you participated in CCHC's "Elean professional development program to help we opportunities, things like that).  Yes No (skip to 4a)	_		
3d. Did you receive any professional develop	oment funds? _	Yes	No
3e. Please rate your level of satisfaction with very unsatisfied and 5 is very satisfied.	the Eleanor pr	ogram on a	scale of 1 to 5, where 1 is
<ul><li>Very unsatisfied</li><li>Somewhat unsatisfied</li><li>Neither unsatisfied nor satisfied</li></ul>	Somewhat		
Can you elaborate or provide examples?			
Now I have a couple of questions about your	last job before	e starting at	ССНС.
4a. When did you leave that last job? (Probe f	for month/year)	)	
4b.Why did you leave your last job?			

For this next series of questions, I will ask you to rate your level of satisfaction with various parts of your current job, specifically as it compares to your <u>last job</u> before CCHC. Please rate these on a scale from 1 to 5, where 1 is very unsatisfied, 2 is somewhat unsatisfied, 3 is neither unsatisfied nor satisfied, 4 is somewhat satisfied, and 5 is very satisfied. You will also have the option to elaborate on your responses to each of these questions.

<ul><li>Very unsatisfied</li><li>Somewhat unsatisfied</li><li>Neither unsatisfied nor satisfied</li></ul>	Somewhat satisfied Very satisfied
Can you elaborate or provide examples?	
5b. How satisfied are you with the HOUR 1 to 5, where 1 equals very unsatisfied an	RS for this job compared to your last job on a scale frod 5 equals very satisfied?
<ul><li>Very unsatisfied</li><li>Somewhat unsatisfied</li><li>Neither unsatisfied nor satisfied</li></ul>	Somewhat satisfied Very satisfied
Can you elaborate or provide examples?	
5c. How satisfied are you with your exper	i a constant con WORKERS at a constant in l
compared to your last job, on a scale from	•
• • • • • • • • • • • • • • • • • • • •	•
compared to your last job, on a scale from  Very unsatisfied Somewhat unsatisfied	1 to 5?  Somewhat satisfied Very satisfied
compared to your last job, on a scale from  Very unsatisfied Somewhat unsatisfied Neither unsatisfied nor satisfied  Can you elaborate or provide examples?  5d. How satisfied are you with your expense.	1 to 5?  Somewhat satisfied Very satisfied

5e. How satisfied are you with the JOB DUTIES and RESPONSIBILITIES of your current job as compared to your last job on a scale from 1 to 5?

Very unsatisfied	Somewhat satisfied
Somewhat unsatisfied	Very satisfied
Neither unsatisfied nor satisfied	
Can you elaborate or provide examples?	
<del>-</del>	SION and their role as an ORGANIZATION zation on a scale from 1 to 5, where 1 is very
Very unsatisfied	Somewhat satisfied
Somewhat unsatisfied	Very satisfied
Neither unsatisfied nor satisfied	
Can you elaborate or provide examples?	
These next few questions are about income a CCHC.  6a. At CCHC, are you paid hourly or annual.	and benefits both currently and before starting at ly? Hourly Annually <b>Skip to 6d.</b>
6b. For hourly employees, what is your currestop me when I read yours.	ent pay rate? I will read some categories so please
	\$12.51-\$15.00
Less than \$8.00 \$8.01-\$9.00	\$15.01-\$20.00
\$9.01-\$12.50	\$20.01 and above
6c. For hourly employees, what is your annume when I read yours.	al salary? I will read some categories so please stop
less than \$5,000 (do no	· · · · · · · · · · · · · · · · · · ·
\$8,000 or less (probe)	
\$8,000-\$12,000	\$32,000-\$40,000
\$12,000-\$16,000	\$40,000-\$50,000
\$16,000-\$24,000	\$50,000 or more <b>Skip to 7a.</b>
6d. For employees paid by salary, what is yo	our annual salary? I will read some categories so
please stop me when I read yours.	_
less than \$5,000 ( <b>do no</b>	,
\$8,000 or less (probe)	
\$8,000-\$12,000	\$32,000-\$40,000
\$12,000-\$16,000	\$40,000-\$50,000
\$16,000-\$24,000	\$50,000 or more

6e. Did you receive	over-time pay? Y	es _	No		
7a. <u>In the year prior</u>	to your employment	with CCHC.	what was your	annual income?	
• •	_less than \$5,000 (do		•		
	\$8,000 or less (pro		\$32,000-\$4		
	_\$8,000-\$12,000	_	\$40,000-\$5		
	_\$12,000-\$16,000	_	\$50,000 or	more	
	_\$16,000-\$24,000		\$0/not em		
7b. Did you receive	over-time pay at you	r previous jo	b? Yes	_ No	
7c. How does your c with your last job? (I On a scale of 1 to 5, increase, 4 is minor in	<b>If probed:</b> For exam where 1 is a major de	<i>ple</i> , <i>your ab</i> ecrease, 2 is	ility to make end a minor decreas	ds meet each mon e, 3 is no decreas	eth, etc.) se or
Major decrease		Min	or increase		
Minor decrease			or increase		
No decrease or i	ncrease	1,143	or mercuse		
Can you please elabo	orate or explain your	response:			
	y experiencing any of portation issues, child No If no, skip to 8a	dcare issues,	•		
If yes, what are they	?				
These next questions	are about your emp	loyee benefit	s with CCHC.		
8a. Are you currently insurance, Paid vacaYes		Retirement, P			l
receive these. <b>Read</b> Medica  Dental  Life ins  AFLAC	l insurance insurance curance C (supp. ins)	apply Paid vaca Paid holic Paid sick 403B / Re	tion lays days etirement	me know if you o	currently
Other (	please specify)		_		

where 1 is very unsatisfied, somewhat satisfied, and 5 is	2 is somewhat unsatisfied, 3 very satisfied, please rate your satisfied, please rate your satisfied. Put another way, how satisfied.	bloyee benefits? On a scale from 1 to 5, is neither unsatisfied nor satisfied, 4 is our level of satisfaction with your atisfied are you with the helpfulness or
Very unsatisfied	Somew	hat satisfied
Somewhat unsatisfied	Very sa	
Neither unsatisfied nor	satisfied	
Can you elaborate or provid	e examples?	
Now I have some questions	about your employee benefit	s from your previous job.
8d. In your last job before wYesNo If	=	enrolled in their employee benefits?
previously received these. R  Medical insura  Dental insurance  Life insurance  AFLAC (supp		n s ys
Now, I have some questions	about additional income sou	urces.
9a. Besides your paycheck, example, TANF?)YesNo Skip to 9c		additional sources of income? (For
9b. I am going to read off a these. <b>Read all &amp; check all</b>		e let me know if you receive any of
TANF	Medicare	Social Security
LINK	Medicaid	SSI
WIC	Sect 8 vouchers	SSDI
Unemployment	Veterans benefits	General Pub AssisOther (specify)
9c. During the year before y income? (For example, TANYesNo Sk	NF, WIC, LINK, Medicaid, e	u receive any additional sources of etc.)

0 0		ease let me know if you received any of
these. Read all & check all t		~
TANF LINK WIC Unemployment	Medicare	Social Security
LINK	Medicaid	SSI
WIC	Sect 8 vouchers	
Unemployment	Veterans benefits	General Public Assistance
		Other (specify)
		level or amount of these income sources
that you receive?Yes	No	
If yes, can you attribute these	changes to anything in p	particular?
		CCHC: How would you rate your
		ors. On a scale from 1 to 5, where 1 is very
		satisfied nor satisfied, 4 is somewhat
satisfied, and 5 is very satisfied	ed, please rate your job s	atisfaction.
Very unsatisfied	Som	ewhat satisfied
Somewhat unsatisfied		v satisfied
Neither unsatisfied nor sa	•	satisfied
Neither unsatisfied not sa	uistica	
10b. Can you please explain?		
Jan Panna Pan		
Lastly, I just have a few demo	graphic questions for yo	u.
11. What type of housing do	you currently live in?	
Apartment (not subsidize		ic Housing/CHA
Subsidized apartment		sing Shelter
House (not subsidized)	SRO	_
Subsidized home	Othe	
Family/friend ( <i>Probe: Te</i>		
If not temporary, do you pay		
If no, mark this answer. If yes		
12. What is your race/ethnicit	v? (Do not read)	
White (not Latino	·	(White) Latino/a ( <b>probe</b> )
Black/African-Ar		(Black) Latino/a ( <b>probe</b> )
Asian/Pacific Isla		Mixed race (specify):
1 Island 1 actific Isla		Other (specify)
13. What is your age?	- 	

14. Gender ( <b>Don't ask.</b> ) Male Female
15. What is your highest level of education completed? ( <b>Don't read</b> ) Less than high schoolBachelor's degree High school graduate/GEDMaster's degree/MBA Trade school degreePh.D./M.D./J.D. Associate's degree
16a. As I said at the beginning of this survey, you will receive a \$10 gift card for your participation in this survey. Do you prefer a gift card from Jewel or Wal-Mart?  Jewel Wal-Mart
16b. Can I please have a mailing address where I can send the card?
Those are all the questions I have. Thanks very much for your time. Just to let you know, I will send out your gift card in the next few days. If you do not receive it within two weeks, please let us know. Call Bhoomi Thakore at 312-915-8605
Finally, just to remind you, we will be contacting you again in about six months for our next round of surveys. If you are able to participate in that survey, you will receive another \$10 gift.
Before I let you go, would you like the contact information if have any questions about the survey or our evaluation?
If Yes: 1) David Van Zytveld, Lead Researcher: (312) 915-8629 2) Compliance Manager, Loyola's Office of Research Services: (773) 508-2689

### **Appendix III: CCHC Twelve-Month Employee Phone Survey**

1a. Are you currently employed with CCHC? 1\_\_\_Yes **SKIP TO 2A** 0 No IF NO: How long did you work at CCHC? (month-year to month-year) Can you tell me why you left CCHC? Are you currently employed? 1\_\_\_Yes 0\_\_\_No (SKIP TO 3H) If yes, when did you start your new job? (month-year) \_\_\_\_\_ Is your position full-time or part-time? 1\_\_\_ Full 2\_\_\_ Part SKIP TO 3H 2a. What is your current job title? 2b. Is your position full-time or part-time? 1\_\_\_ Full (**SKIP TO 2D**) 2\_\_\_ Part 2c. If part time, how many hours a week are you scheduled to work? \_\_\_\_\_ 2d. Have you held any other positions at CCHC? 1\_\_\_Yes 0\_\_\_No (SKIP TO 3A) 2e. What was your last job title? 2f. When did you switch jobs? (month-year)\_\_\_\_\_ 2g. If yes, why did you switch positions? These next few questions I have are about your pay, employee benefits and current finances. 3a. At CCHC, are you paid hourly or annually? 1\_\_\_ Hourly 2\_\_\_ Annual (**SKIP TO 3D**) 3b. For hourly employees, what is your current pay rate? I will read some categories so please stop me when I read yours. 1 Less than \$8.00 4 \$12.01-\$15.00 **2**\_\_\_\_\_ \$8.01-\$10.00 **5**\_\_\_\_\$15.01-\$20.00 3 \$10.01-\$12.00 6 \$20.01 and above

3c. For hourly employees, what is your annual sala me when I read yours.	ry? I will read some categories so please stop
1less than \$5,000 (do not read	$J_1$
2\$8,000 or less (probe) 3\$8,000-\$12,000	5\$24,000-\$32,000 7\$32,000-\$40,000
	8\$40,000-\$50,000
4\$12,000-\$16,000 5\$16,000-\$24,000	9 \$50,000 or more <b>SKIP TO 3E</b>
3\$10,000-\$24,000	50,000 of more <b>SKIP TO SE</b>
3d. For employees paid by salary, what is your ann please stop me when I read yours.	,
1less than \$5,000 ( <b>do not rea</b>	
2\$8,000 or less (probe)	
3\$8,000-\$12,000	7\$32,000-\$40,000
<b>4</b> \$12,000-\$16,000	8\$40,000-\$50,000
<b>5</b> \$16,000-\$24,000	9\$50,000 or more
3e. Do you currently receive:  Over-time pay:  1 Yes  0 1	No.
Paid vacations: 1 Yes 01	
Paid holidays: 1 Yes 01	No.
<u> </u>	No
1 and stek days. 1 1 es	10
	C (supplemental insurance)
Dental insurance 403B/F	
Life insurance Other (	please specify)
3g. Since you have been working at CCHC, have y salary? Please indicate if your pay has decreased, s	
1 Decreased 2 No Change (SKIP TO	3H) 3 Increased
If there has been a change to your pay, can you tell	me why?
and construction of the proof of the pro	
3h. For this next question, we would like to unders any setbacks from the current economic situation. I financial setbacks that many families are currently these apply to you or your household:	am going to read a list of some potential
Home foreclosure	
Increased mortgage/rent payments	
Increased cost of living (daily expenses)	

<ul> <li>Negative change in your employment status (decreased hours, layoff, etc.)</li> <li>Negative change in a household member's emp. status (decreased hours, layoff, etc.)</li> <li>Any changes in the number of people in your household (family/friend moved in, etc.)</li> <li>Children in household newly enrolled in school (K-12 and college)</li> <li>Other (Please explain)</li> </ul>
If "yes" to any of the situations above, can you please elaborate on what specifically happened?
For this next series of questions, we will be asking you about your experiences with job training and professional development through CCHC.
4a. Did you receive job training from CCHC? 1Yes ( <b>SKIP TO 4B</b> ) 0No
If no, was job training offered to you? 1Yes 0No (SKIP TO 5A)
If yes, why did you not participate?
SKIP TO 5A
4b. If you received job training: Thinking back to when you completed the job training, how useful has the training been in performing your job at CCHC? On a scale of 1 to 5, where 1 is not at all useful, 2 is somewhat not useful, 3 is neutral, 4 is somewhat useful, and 5 is very useful, how useful was your job training?
1 Not at all useful4 Somewhat useful2 Somewhat not useful5 Very useful3 Neutral
Can you elaborate or provide examples?
4c. Thinking again about the job training that you have received through CCHC, how useful do you think the training was in general for you and your professional development? (If probed: How useful was the job training if you decided to get a job elsewhere?) On the same scale from 1 to 5, where 1 is not at all useful and 5 is very useful, how useful was your job training?  1 Not at all useful  4 Somewhat useful  2 Somewhat not useful  5 Very useful  3 Neutral

Can you elaborate or provide examples?
5a. Have you participated in any of CCHC's departmental training programs? (If probed: Training programs are arranged by department managers to address topics in your field of practice. Some examples include the CPR certifications, Risk Management trainings.)  1 Yes (SKIP TO 5B)  0 No
If no, are you aware of CCHC's departmental training programs?  1 Yes 0 No (SKIP TO 5C)
If yes, how did you find out about it?
If yes, why have you not participated?
SKIP TO 5C
5b. If you participated in training programs: Please rate the usefulness of the departmental training program. On a scale of 1 to 5, where 1 is not at all useful, 2 is somewhat not useful, 3 is neutral, 4 is somewhat useful, and 5 is very useful, how useful were the training program(s) for you?
1 Not at all useful4 Somewhat useful2 Somewhat not useful5 Very useful3 Neutral
Can you elaborate or provide examples?
5c. Do you have any suggestions for CCHC on their departmental training programs, such as topics that should be included in their programs or the way that programs are conducted?
6a. Have you received any EGO (Employee Giving Operation) professional development funds through CCHC? (If probed: These are funds that you can apply for through CCHC for education, training, professional development, etc.)  1 Yes (SKIP TO 6B) 0 No
If no, are you aware of CCHC's professional development funds?  1 Yes 0 No (SKIP TO 7A)
If yes, how did you find out about it?

If yes, why have you not particip	ated?
	SKIP TO 7A
•	ment funds: Please rate the usefulness of the professional on the same scale of 1 to 5, where 1 is not at all useful e funds for you?
<ul><li>1 Not at all useful</li><li>2 Somewhat not useful</li><li>3 Neutral</li></ul>	<ul><li>4 Somewhat useful</li><li>5 Very useful</li></ul>
Can you elaborate or provide examples?	
FOR WOMEN O	ONLY – FOR MEN, SKIP TO 9A
	Eleanor" Program? (If probed: The Eleanor program is a lp women employees with housing, child care,
If no, are you aware of CCHC's	Eleanor Program? 1 Yes 0 No
If yes, how did you find out abou	nt it?
If yes, why have you not particip	ated?
	SKIP TO 8A
	ogram: Please rate your level of satisfaction with the are 1 is very unsatisfied and 5 is very satisfied.
1 Very unsatisfied	4 Somewhat satisfied
<ul><li>2 Somewhat unsatisfied</li><li>3 Neither unsatisfied nor satisfied</li></ul>	5 Very satisfied
Can you elaborate or provide examples?	
consists of regular meetings with mentor establishing savings plans, scholarships, 1 Yes (SKIP TO 8B) 0 No	Eleanor Scholars" program? (If probed: Eleanor Scholars rs, and participation in trainings on finances, budgeting, etc.).  Scholars Program.? 1 Yes 0 No (SKIP TO 9A)

If yes, how did you find out about it?
If yes, why have you not participated?
SKIP TO 9A
8b. If you participated in the Eleanor Scholars program: Please rate your level of satisfaction with the Eleanor Scholars program on a scale of 1 to 5, where 1 is very unsatisfied and 5 is very satisfied.
1 Very unsatisfied4 Somewhat satisfied2 Somewhat unsatisfied5 Very satisfied3 Neither unsatisfied nor satisfied
Can you elaborate or provide examples?
9a. Overall, do you feel that CCHC provides opportunities for advancement (this includes promotions, professional development, job trainings that you could use elsewhere, etc.). On a scale of 1 to 5, where 1 is strongly disagree, 2 is disagree, 3 is neutral, 4 is agree and 5 is strongly agree, please indicate how you feel about CCHC providing prospects for advancement.
1 Strongly Disagree4 Agree2 Disagree5 Strongly Agree3 Neutral
Can you elaborate or provide examples?
9b. Since your employment with CCHC, to what extent do/did you feel that you have integrated into CCHC? This includes yourself on a personal level and the level that you feel from your coworkers and from the agency. On a scale from 1 to 5, where 1 is not at all, 2 is a little, 3 is somewhat, 4 is mostly, and 5 is completely, how much do you feel you have been integrated? (If probed: How close do you feel to your co-workers and to your employers? Do you feel like you belong to a "family" with the agency? Or do you feel like there is no bond or relationship with the people at CCHC?)  1 Not at all

CCHC organization. O mostly, and 5 is compley ou and your job are in	a a scale from 1 to 5, where 1 is not at all, 2 is a little, 3 is somewhat, 4 is tely, how valuable do you feel your job is? (If probed: Do you feel like aportant and necessary to CCHC? Do you feel like you and your job are rs? Or do you feel like your job is nothing important or special for
<ul><li>1 Not at all</li><li>2 A little</li><li>3 Somewhat</li></ul>	4 Mostly 5 Completely
Can you elabor	te or provide examples?
9d. Finally, can you tel	me where you see yourself professionally in the next five years?
9e. How you see CCHO	in your professional future?
Lastly, I have some de	nographic questions:
in subsidized housing?  1OWN or MORT  2RENT on Apartn  3SUBSIDIZED or  4Family/friend (Pr  If not temporar  If no, mark this	t housing status? (If probed: Do you rent or own? Mortgage? Do you live Are you currently staying with family members or friends?)  AGE an Apartment/House/Condo  ent/House/Condo  SECTION 8 Apartment/House/Condo  obe: Temporary housing? If yes, mark this answer.  If you pay rent/have name on lease?  answer. If yes, list as house or apt.)
11a. Including yourself	how many people live in your household: # of Adults # of children under 18
11b. Of these, how man	y are employed? Full-time Part-time Temporary
11c. Are you the main	ncome earner in the household? 1Yes 0No

12. What is your highest level of education completed? ( <b>Don't read</b> )
1 Less than high school
2 High school graduate/GED
3 Trade school/certification (e.g. secretary school, medical tech school)
4 Some college/Associate's degree
5 Bachelor's degree
6 Master's degree/MBA
7 M.D./J.D./Ph.D.
8 Other (specify)
13. What is your age?
14a. As I said at the beginning of this survey, you will receive a \$10 gift card for your participation in this survey. Do you prefer a gift card from Jewel or Wal-Mart?  Jewel Wal-Mart
14b. Can I please have a mailing address where I can send the card?
Jewel Wal-Mart

Those are all the questions I have. Thanks very much for your time. We will be sending you your \$10 gift card in the next couple of days. Before I let you go, would you like the contact information if have any questions about the survey or our evaluation?

If Yes: 1) David Van Zytveld, Lead Researcher: (312) 915-8629

2) Compliance Manager, Loyola's Office of Research Services: (773) 508-2689

### **Appendix V: OCS-HHA Staff Focus Group Questions**

- o What have been some of the easier aspects of implementing this project?
- o What have been some of the more challenging aspects?
  - o Discuss the delays regarding HHA credentialing by the State of Illinois?
- o In retrospect, what could have been done differently and why?
- o What, if anything, could be done differently for the last grant year of this project?
- O Can you point to any particular activity/relationship/etc. that proved to be exceptionally useful/detrimental? If so, what and why?
- At this stage, what advice could be given to other community-based organizations interested in implementing a similar project?