Bureau of Equity and Inclusion

Transforming State Agencies to Improve Diversity, Equity, and Inclusion Workforce Outcomes

The Bureau of Equity and Inclusion (BEI) will use <u>Equity</u> and <u>Inclusion <u>Results</u> and <u>Accountability</u> (**EIRA**) guidelines in its monitoring practice and as a resource to best support state agencies in improving equity and inclusion advancement in the state's workforce, human resource operations, policy and program development, and service delivery. The following core principles guide the BEI's **EIRA** monitoring process:</u>

- 1. The EIRA process is developed in partnership with our EI partners and stakeholders.
- 2. The EIRA process is transparent and used with state agencies to monitor and advance their EI strategic plans.
- 3. The EIRA process drives improved outcomes for all state agencies, state employees, and the general public receiving services from state agencies.
- 4. The EIRA process ensures the protection of equitable consideration of state employees and potential employees regardless of sex, gender identity, age, ability, race, ethnicity, language, socioeconomic status, or veteran status.
- 5. The EIRA process provides divergence motivations, improvement supports and recommendations, and interventions based on each agency's unique strengths, progress, challenges, and needs.
- 6. The EIRA process encourages agencies to direct their resources to have the most significant positive impact on outcomes and the advancement of equity and inclusion.
- 7. The EIRA process is responsive to the EI needs and expectations of the agencies of Wisconsin.

The Wisconsin Administrative Code, Chapter Employment Relations 43; Wisconsin Statute 230; and Wisconsin Human Resources Chapter 800 require the Department of Personnel Management (DPM) BEI to make "determinations" about the performance of each State Agency in compliance with Affirmative Action and Equal Employment Opportunity Federal and State laws and regulations, and Executive Order #1, and Executive Order #59 requirements based on information obtained through monitoring visits, and agency self-assessment participation. In making determinations, BEI will assess the degree to which the agency meets compliance indicators and expectations for implementing standards in quality for equity and inclusion practices. BEI will assign the following measures of compliance and implementation fidelity in making determinations:

- A. Compliance (0 100%) An individual or multi-faceted requirement can range from 0% compliance to 100% compliance. The determination is based on the completion of the components of the requirement.
- B. Fidelity (5. High-Performance 4. Exceeds Requirements 3. Meets Requirements 2. Needs Assistance 1. Needs Intervention).
 Implementation (Requirement, Initiative, project, etc.,), is based on the totality of the agency's metric for measuring outcome/results and information provided regarding capacity building during the monitoring visit.

CABINET AGENCY MONITORING

The on-site monitoring process is designed to assess the compliance and implementation of Cabinet agencies with Executive Order #59. The visit offers an opportunity to engage agency staff in an insightful process of the agency's equity and inclusion advancement efforts. The monitoring process also provides an opportunity to verify compliance of the directive and to establish a pathway to improve practices and outcomes.

- Components of the on-site or monitoring process includes:
 - Review and assessment of El Goal Progress.
 - Evaluation of El compliance activities.
 - Review and assessment of El Practices.
 - EEO and AA compliance determination.
 - o Review of assessment of Respectful Workplace implementation.
 - Recruitment file reviews 2% of state fiscal year total, a minimum of 4 (Appendix B).
 - o Complaint process file reviews 2% of state fiscal year total, a minimum of 4 (Appendix C).
- The meeting is an interactive, contextual, and reflective process to engage all participants.
- Utilizes the reporting documents completed by the agencies to review and discuss progress and trends.
- Includes a review of the information necessary to document compliance with Executive Order #59, ER 49, Chapter 230, DPM EI Standards, and EEO Certification.
- Contributes to completing required BEI equity and inclusion documentation and reporting to affirm the agency is meeting standards and compliance requirements.

A. Monitoring Compliance Indicators

Ensuring Established Minimum Requirement

The goal of BEI monitoring compliance indicators is to ensure that state agencies are meeting the requirements of both federal and local regulations. BEI's compliance monitoring approach is outcome based, have you achieved the minimum standard. BEI measures compliance against a state target of 100%. Suppose noncompliance is identified through any of BEI's monitoring activities for a compliance item. BEI will require the agency to correct the noncompliance as soon as possible (ideally within 90 days), but in no case later than six months after the noncompliance notification.

B. Monitoring Fidelity of Implementation

Building and Measuring Equity and Inclusion Capacity

Capacity refers to the ability of an agency and the individuals working within the organization to produce improved outcomes for the stakeholders (employees and customers) of the agency. The capacity of the agency includes the degree to which the organizations' structure and processes support sustained change that ultimately leads to improved outcomes and results. Individuals' capacity consists of the staff's existing knowledge, skill, and disposition towards change.

Many variables are involved when working to measure the capacity of change an organization has built and effectively uses. According to the National Center for Systemic Improvement there are four essential components necessary for change to happen:

- 1. Stakeholder engagement: The active involvement of a broad range of people in order to problem-solve complex issues and problems.
- 2. **Data-based decision making:** A set of explicit procedures for readily using data to make decisions.
- 3. Alignment: The presence of fully linked systems, initiatives, programs, and divisions to achieve a common vision or goal.
- 4. **Leadership:** The support and engaged guidance from those in a formal or informal authority position to achieve a shared vision.

These essential components when factored into an organizations change, and improvement efforts can be used to establish a framework of changes but also mapping a pathway to quality improvement as represented in Figure 1. In Figure 1, the components are described in a graduating scale that summarizes lowest level of fidelity to implementation to the highest. The highest level represents the pinnacle of best practice.

The capacity building components are the first column labeled measure, and the level of fidelity to best practice is measured based on the organization's adherence to the activities identified under each scale. State agencies that operate on a scale of three for each measured component meet the state target for minimal practice that can impact change. Agencies with the resources and capacity to operate capacity building components at a scale of four or five will experience more rapid and sustainable change. Each monitoring team will use Figure 1 to review agency EI Plan implementation and to recommend activities to improve performance in creating change and desired outcomes.

Figure 1.

Measure	1	2	3	4	5
Stakeholder	□ No stakeholders are	☐ Limited stakeholders	☐ Stakeholders are	□ Stakeholders are	□ Stakeholders are
Engagement	involved; the agency is	are engaged when	engaged to obtain	continuously engaged in	regularly, continuously
	not participating in the	needed to problem-solve	diverse perspectives.	facilitated involvement by	engaged in facilitated
	activity, or the service is	issues and problems.	□ Agency has a clear	design.	involvement by design.
	unavailable.	□ Information is only	communication plan	□ Agency obtains diverse	□ Agency continuously
		available for staff on the	that ensures regular	perspectives across the	obtains diverse

		intranet and bulletin boards. Roles and responsibilities are unclear or undefined. No process exists to address or discuss issues or concerns. Stakeholders do not receive feedback regarding ideas, questions, or concerning issues.	dissemination of outcomes and regularly collects feedback. Roles and responsibilities are defined. Allows time for stakeholders to participate during work hours. El professionals have clear communication responsibilities for providing El information to stakeholders. Stakeholder ideas and recommendations are used in decision-making.	agency, every level of the system, and various cultural and linguistic groups. Agency has a clear communication plan that ensures regular dissemination of outcomes and regularly collects and shares feedback. Established multidirectional communication structures (e.g., top to down, side to side, and entry to executive). There are explicitly defined and communicated roles and responsibilities in stakeholder relationships. Groups are formed to engage in difficult conversations. Acknowledge and act on the advice and ideas of stakeholders.	perspectives across agencies, every level of the system, and various cultural and linguistic groups. □ Establish multidirectional communication and structures and widely promotes the use of these structures (e.g., top to bottom, bottom to top, and outside to inside the organization). □ Facilitate involvement by planning times and places when stakeholders can participate. □ Explicitly define and communicate roles and responsibilities. □ Ensure skilled facilitators manage groups and difficult conversations. □ Acknowledge and act upon the advice, ideas, and concerns of stakeholders through a shared leadership process.
Data-Based Decision Making (DBDM)	□ Data is not used; the agency is not participating in the activity, or the service is unavailable.	☐ Information is gathered to make decisions. ☐ Current initiatives are known, but past initiatives and outcomes are not considered in decision-making.	☐ Create and support a culture of Data-Based Decision Making (DBDM). ☐ Consistently review data from other agency initiatives and successful research programs to	☐ Create and support a culture of DBDM that ensures participants gain technical knowledge to interpret and use data for decision-making. ☐ Ensure data related to existing and new initiatives are readily	□ Create and support a culture of DBD, ensuring that all stakeholders gain technical knowledge to interpret data and use data for decision-making. □ Ensure data related to existing and new initiatives are readily

		□ Decisions made use of subjective data and/or unsubstantiated or data. □ Data and information are gathered and used in aggregate form.	improve decision- making and outcomes. Decisions use objective and critical analysis of data. Data and information are used in aggregated and disaggregated forms.	available and examined by leadership and management. Consult DBDM interpretation and decision-making activities with subject matter experts. Ensure different data are used based on the purpose of the DBDM activity.	available and examined by a broad group of stakeholders. Regularly consult DBDM interpretation and decision-making activities with subject matter experts. Ensure different data are used with various stakeholders based on the purpose of the DBDM activity.
Alignment	☐ The agency does not adopt a commitment to EI; the agency is not participating in the activity, or the EI connection to the agency's vision and mission is not identifiable.	□ Other initiatives in progress are discussed to reduce overlap. □ Initiatives and strategies are concluded from the organizational analysis. □ Communication across divisions and bureaus is minimal. □ Participation and development teams consist of staff from several divisions.	□ Conduct an analysis of the process, including an inventory of all existing initiatives to align resources. □ Communicate activities and initiatives across agency divisions to maximize resources and reduce exhaustions or resources.	□ Conduct an analysis of the organization, including an inventory of all existing initiatives to align resources. □ Use analysis to communicate alignment of efforts towards the organization's common goals. □ Build a strong communication network across divisions and gain support for common goals. □ Create a plan that explains how alignment helps the organization move toward a common goal. □ Regularly communicate progress and information to align support for common goals.	□ Conduct an analysis of the organization, including an inventory of existing initiatives, resources, identify personnel, and the skillset/competencies of personnel. □ Align initiatives, resources, and personnel according to organization analysis, reducing the potential for the duplication of efforts or competing initiatives. □ Implement a plan that aligns the organization's El common goals. □ Build strong communication networks across departments and divisions and gain support for a common goal. □ Ensure cross-division teams address complex issues related to alignment

Leadership	□ Leadership is not involved; the agency leadership does not participate in the activity or provide guidance to achieve El goals and advancements.	□ Leadership is briefed on the initiatives and activities taking place. □ Leadership at every level is aware of initiatives and provides staff when asked for specific projects. □ Written letters of commitment to support	□ Create and use an intentional plan for building process-wide support. □ Work with leadership support to identify critical levers (i.e., entry points) to begin processwide improvements. □ Provide training and	□ Periodically reach out across the organization to align ideas and collaborate on issues □ A consistent effort exists to continuously build a process-wide plan for building support and engaging leadership. □ Cultivate and Measure leadership growth and commitment for continuous improvements.	and that these teams propose viable options to solve issues. Organizational support and engaged leadership is a standard set by leadership. Leadership and stakeholders identify critical levers (i.e., entry points) to begin organizational improvements efforts.
		efforts of the organization.	support to supervisors and managers and offer leadership opportunities. Consistent use and application of leadership vision, mission, and guiding principles in decision making and communication of El objectives. Leadership is actively involved in professional development to increase capacity and competence to lead El advancement.	□ Leadership identifies critical levers (i.e., entry points) to begin process- wide improvements. □ Leadership voice commitment to improvement efforts and encourage personnel across divisions to participate. □ Encourage the emergence of new leaders for new and experienced leaders to work together. □ Stakeholders have a voice in improvement efforts. □ Share through oral and written communication how decisions are made. □ Integrate decision- making into some organizational routines.	□ Actively voice commitment to improvement efforts and ensure personnel across divisions are able to adjust existing work patterns. □ Encourage the emergence of new leaders and create opportunities for new and experienced leaders to work together. □ Ensure stakeholders have a voice in improvement efforts. □ Establish and share through oral and written communication the explicit processes for decision making. □ Integrate decision- making into all organizational routines. □ Measure leadership's growth over time and

		☐ Leadership participates	refine roles and
		in the growth to	responsibilities to improve
		continuously improve	continuously.
		practices and leadership	□ Communicate the
		roles.	"political will" for aligning
		□ Communicate the	existing initiatives across
		"political will" for aligning	departments and
		existing initiatives across	divisions, including at the
		departments and	higher levels within the
		divisions.	organization.

SMALL CABINET AGENCY MONITORING

A. Monitoring Agency Fidelity of Implementation and Compliance

Self-assessment of Equity and Inclusion Capacity

The small cabinet agency self-assessment monitoring process is designed to provide state agencies required to comply with Executive Order #59 but because of size, not required to submit an Equity and Inclusion Strategic Plan to engage in a reflective process of their overall equity and inclusion advancement efforts.

The self-assessment will require the agency to self-report the following information and provide any requested or needed supporting documentation.

Components of the agency self-assessment process (Appendix A)

- Includes written narratives responding to the following:
 - $\circ\quad$ EI Goals related to recruitment, retention, and creating an inclusive agency culture.
 - EI Officer roles and responsibilities.
 - o Respectful and Inclusive Workplace activities.
 - o Additional information to support the agency's commitment to advancing El.
 - O What did you learn about your agency's El progress?
- A review of responses, with recommendations and feedback.

EEO Certification or renewal.

Building capacity also is influenced by at least one additional factor: Readiness

Readiness can be defined as the presence of clear indicators that demonstrate that individuals and the organization are primed to undertake the changes required to implement new programs and practices. Readiness is important because its presence seems to minimize future resistance to change and helps foster a supportive climate for change (Damschroder et al., 2009; Fixsen, Naoom, Blase, Friedman, & Wallace, 2005; Greenhalgh et al., 2004). These researchers suggest that indicators of readiness include the observable presence of the following:

- 1. The commitment and involvement of leaders (e.g., leaders explicitly communicate they are primed to guide others within the system toward accomplishing a specific goal).
- 2. The availability of resources such as funding, training, time, and so on (e.g., financial resources are filtered toward activities that help achieve the common goal).
- 3. The accessibility of clear information about the innovation, program, or practice to be implemented (e.g., summaries of the strategies, successes, and challenges are presented and openly discussed by leadership).

With regard to capacity, individuals and the organization will need to demonstrate they are primed for change. However, capacity-builders should avoid waiting for such overt demonstrations of Readiness and the assumption that indicators of Readiness will automatically appear. Instead, capacity-builders may need to help individuals and the organizations move toward Readiness, with the understanding that Readiness can be developed over time (Barrett et al., 2013; Fixsen et al., 2013; Glover & DiPerna, 2007).

References

- Barrett, S., Eber, L., & Weist, M. (2013). Advancing education effectiveness: Interconnecting school mental health and school-wide positive behavior support. Center for School Mental Health.
- Damschroder, L. J., Aron, D. C., Keith, R. E., Kirsh, S. R., Alexander, J. A., & Lowery, J. C. (2009). Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. Implementation Science, 4(1), 50.
- Fixsen, D. L., Blase, K. A., Horner, R., Sims, B., & Sugai, G. (2013). State implementation and scaling up of evidence-based practices (Scaling-Up Brief No. 3). Chapel Hill: University of North Carolina at Chapel Hill, Frank Porter Graham Child Development Institute, Implementation and Scaling-up of Evidence-based Practices Center.
- Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M., & Wallace, F. (2005). Implementation research: A synthesis of the literature (FMHI Publication No. 231). Tampa: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network. Retrieved from http://ctndisseminationlibrary.org/PDF/nirnmonograph.pdf
- Fullan, M. (2005). Turnaround leadership. The Educational Forum, 69(2), 174–181.
- Glover, T. A., & DiPerna, J. C. (2007). Service delivery for response to Intervention: Core components and directions for future research. School Psychology Review, 36(4), 526.
- Greenhalgh, T., Robert, G., Macfarlane, F., Bate, P., & Kyriakidou, O. (2004). Diffusion of innovations in service organizations: systematic review and recommendations. Milbank Quarterly, 82(4), 581–629.
- Massell, D. (1998). State strategies for building capacity in education: Progress and continuing challenges (CPRE Research Report Series RR-41).

 Philadelphia: University of Pennsylvania, Graduate School of Education, Consortium for Policy Research in Education. Retrieved from http://www.cpre.org/images/stories/cpre pdfs/rr41.pdf
- O'Day, J., Goertz, M. E., & Floden, R. E. (1995). Building capacity for education reform. Philadelphia: University of Pennsylvania, Graduate School of Education, Consortium for Policy Research in Education. Retrieved from http://www2.ed.gov/pubs/CPRE/rb18/index.html

Equity and Inclusion State Agency Self-Assessment Appendix A

AGENCY NAME

Equity and Inclusion Officer:	
Human Resources Director or Manager:	Date submitted to BEI:
1 FL Cools related to recruitment retention and execting an inc	lucivo aganav aultura
1. El Goals related to recruitment, retention, and creating an inc	iusive agency culture.
Describe the agency's 2020 goals and plans and recent actions to increase diversity, improve staff environment. Discuss communication efforts and the success and challenges experienced. Explain	n the measures in the context of the capacity-
building components: Stakeholder engagement, Data-Drive Decision Making, Alignment, and Lea	idership.
2 FLOff: 22 %	
2. El Officer	
Describe the recent actions of the EI Officer to carry out the responsibilities of the position (p.9 E	I Procedural Manual). Explain the efforts in
the context of the capacity-building components: Stakeholder engagement, Data-Drive Decision	Making, Alignment, and Leadership.
	l
3. Respectful and Inclusive Workplace	
Describe the agency-specific Wellness efforts to support employee wellbeing across the agency.	How has the agency addressed complaints of
discrimination or harassment? What measures have been enacted to mitigate issues? Explain the	
building components: Stakeholder engagement, Data-Drive Decision Making, Alignment, and Lea	dership.

			•	1	r	
/I	ΛΛ	ナルトト	inna	ıl ınt	forma	ation
┯.	\neg	uul	IVIIO			auvi

Use this space to include any additional information regarding organizational changes, improvements in Equity and Inclusion competency,
and leadership support that are remarkable in the EI advancement effort of the agency.

5. EEO Certification

EEO Dragram Cartification	Comments		liant?
EEO Program Certification	Comments	Yes	No
EEO Policies operational and posted.			
El Officer appointed.			
Recruitment and selection process requirements implemented.			
Personal demographic information survey conducted annually.			
EEO and AA policies and procedures are disseminated, posted, and available.			
The responses above are accurate and have been verified	i.		

6. What did you learn about your agency's El progress?

Use this space to reflect what was learned through the self-assessment process. List your priorities moving forward to initiate continuous quality improvement (CQI) efforts to EI advancement of the agency.

Equity and Inclusion State Agency Self-Assessment Appendix B

AGENCY NAME

Human Resources Director or Manage	r:	Date	submitted to BEI:
Position Classification/ Job Title:			
· .	repare to provide ew is completed,	in a file or electronic recruitment documentation to support complianc the reviewer will conduct a short interview to discuss the results. The EI	•
Process and Documentation	RESULTS	DISCUSSION	
Is the SAS form included in the Recruitment file?			
What recruitment methods were used to source underrepresented candidates?			
What assessment methods were used to identify top candidates during precertification?			
Was the pre-certification screening panel diverse?			

certification?

file.

panel(s) diverse?

What assessment methods were used to identify top candidates during post-

Were all post-certification screening

A diverse interview panel is indicated on SAS Form. If a diverse panel is not used, an El Officer approval waiver is in the

Equity and Inclusion Officer:

If a waiver of a diverse inter	view panel			
is necessary, describe effort				
a diverse panel. Evidence of	f search			
outside of the division, ager	ncy, and			
state service?				
Evidence that EI Officer revi	ewed			
interview questions and bei	nchmarks			
and they met EEO/AA guide	elines.			
The reason for the hiring de	cision is			
indicated in Wisc.Jobs. /TAN	√l. Is			
evidence or justification to	support			
hiring reason documented i	n the file?			
What is the demographic m	akeup of the			
Register?			 	
What is the demographic m	akeup of the			
certification list?				
What are the demographics	of the hired			
candidate(s)?				
What accommodation were	made if			
requested to support the applicant?			 	
Agency				
DPM Staff				
Follow-up date(s)				

Equity and Inclusion State Agency Self-Assessment Appendix C

AGENCY NAME

Equity and Inclusion Off	ficer:		
Human Resources Direc	ctor or Manager:		Date submitted to BEI:
Complaint Number:	Date Received:	Date Concluded:	

Directions: The agency EI Officer should prepare to provide a file or electronic documentation to support compliance with the process and documentation section. After the file review is completed, the reviewer will conduct a short interview to discuss the results. The EI Officer during this time may offer information to provide clarification as needed.

Process and Documentation	RESULTS	DISCUSSION
The initial complaint is included in the		
file.		
Form DOA-15812 was utilized for the		
complaint.		
The complaint is reviewed, and the		
complainant responded contacted within		
five business days.		
There is a record of witnesses and		
respondents that were interviewed.		
Notes from all interviews are included in		
the file.		
Notes follow a question and response		
format.		
Interviews and evidence provided are		
considered in the fact-finding conclusion.		
Documents including letters, emails, and		
documents provided by the complainant		
or respondent are included in the file.		

The complaint summary is included in the file and states the findings and recommendations.	
The summary is completed within 60 days of the initial complaint.	
The complaint investigation was reviewed by the designated EI Officer and HR Manager (designee) before sharing the conclusion.	
Closing letter(s) was sent to the complainant and appropriate staff. Copies of documents are included in the file.	
Agency maintains a record of all complaints and documents.	

Discussion questions

- Was the complainant provided with the Respectful Workplace Complaint Information page?
- What were alternate resolutions considered?
- What determines the consultation of legal before conclusions are finalized?
- What were the efforts made to follow up on the complaint after the case was closed?