



Collaborating for Change:

A Toolkit to Build Regional Behavioral
Health Workforce Coalitions



Contents

Introduction

1

Introduction 3

Coalition Building

2

Coalition Building 4
 Partnership-Building Strategies. 4
 Governance Guidance 6
 Marketing & Communications 8
 Finding Compelling Regional Data 12
 Fundraising Tips & Resources 15



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3

Workbook for Building a RBHWC

Workbook for Building A Regional Behavioral Health Workforce Coalition 16
 Step 1: Select Coalition Co-Chairs. 16
 Step 2: Recruit Advisory Council 17
 Step 3: Mission and Shared Vision 20
 Step 4: Guiding Principles 21
 Step 5: Shared Framework 23
 Step 6: Shared Roadmap. 26
 Step 7: Roadmap Becomes Committees 27
 Step 8: Recruit Chairs for Committees. 29
 Step 9: Recruit Members for Committees 30
 Step 10: Launch Your Committees 31
 Sample Timeline 32
 Marketing & Communications 33
 Financial Management 36
 Metrics and Impact Evaluation Tools 37

4

Resources

Resources. 39

Introduction

Welcome to the toolkit for building Regional Behavioral Health Workforce Coalitions (RBHWCs). This toolkit is a resource based on learnings from two existing RBHWCs. It is modular, designed to be used in pieces or as a whole. The goal of the toolkit is to provide information to help stakeholders create RBHWCs across Ohio to address workforce shortages in the state.

The first section of the toolkit, titled “Coalition Building,” provides structure and suggestions for creating a coalition in general. It is broadly applicable to several types of coalitions. The second section, titled “Workbook for Building a Regional Behavioral Health Workforce Coalition,” draws on the specific learnings of the two existing RBHWCs. The Southwest Ohio / Northern Kentucky (SW) RBHWC was founded in March 2022, providing this toolkit with over three years of experience in building the behavioral health workforce that Ohio needs. The Northeast Ohio (NE) RBHWC was founded in July 2024, fast-tracked because of learnings from the SW RBHWC.

Community Autonomy

Each coalition is founded as a community-driven initiative, developed for the community it serves. This work requires local autonomy to ensure that strategies are responsive to unique regional strengths and needs. While this toolkit offers resources, shared learnings, and proven practices from established RBHWCs, it is not a one-size-fits-all model. Instead, it is intended to support local efforts, providing guidance that can be adapted to fit each coalition’s context and vision.

Acknowledging Capacity

Not every community or organization will have the capacity, whether in time, staff, or resources, to implement every recommendation at once. Building an effective coalition is a dynamic and evolving process. Coalitions may start small, prioritize local needs, and grow over time. Focus on what is achievable now, and build from there.

Some communities, such as those in rural areas, face more limited capacity in terms of staffing, funding, and infrastructure. However, they also often benefit from simpler systems and more direct lines of communication with key stakeholders, including public officials and community leaders. This accessibility creates opportunities for deeper collaboration and faster alignment around shared goals. By leveraging their strengths, rural coalitions can make meaningful progress and often serve as powerful models of grassroots, community-driven change.

Funding

The SW RBHWC, NE RBHWC, and the Mental Health & Addiction Advocacy Coalition would like to express their gratitude to the Ohio Department of Mental Health & Addiction Services for funding the development of this toolkit.

2

Coalition Building

This section of the toolkit provides information applicable to a variety of coalitions. Please use it as context and grounding for building a RBHWC or any other coalition.

Partnership-Building Strategies

Effective community coalitions rely on strong, strategic partnerships. These relationships bring diverse perspectives, amplify collective influence, leverage shared resources, and foster joint ownership in addressing identified problems and developing solutions.

Ground the Work in Key Values

Before initiating new partnerships, ground the coalition in the following values:

Diversity in Representation

Identify the diverse skills, knowledge, and perspectives needed to build a well-rounded and effective coalition to address the complexities of behavioral health workforce development.

Mutual Benefit

Frame partnerships as two-way streets grounded in mutual respect and shared value. Effective collaboration happens when all partners see clear benefits and shared purpose in their involvement.

Respect for Autonomy

Recognize and honor each partner's identity and contributions. Building strong partnerships requires taking the time to align efforts in ways that support each participant's core mission.

Long-term Commitment

Successful partnerships require ongoing investment in relationships, shared learning, and mutual accountability. Partners navigate challenges together and recognize that sustainable change requires persistence.

Engagement Strategies

A thoughtful engagement strategy ensures that invitations to join the coalition are intentional, inclusive, and aligned with the coalition's goals and values.

STRATEGIES INCLUDE:

- **Use warm introductions** when possible by leveraging existing relationships. For example, consider attending the potential partner's events or meetings to show support and build rapport.
- **Be clear and intentional** in your outreach. Emphasize shared goals and express why this partner's involvement would be a valuable asset to the coalition.
- **Provide visually compelling handouts** to promote the coalition and build community engagement. Useful examples include a one-page overview of the coalition's mission, vision, and participants, as well as a coalition member position description that outlines expectations such as roles and estimated time commitments.
- **Offer flexibility in engagement** by meeting stakeholders where they are and setting realistic expectations. Creating space for varying levels of involvement helps build goodwill and broadens the coalition's reach.



In the early stages of coalition development, there may be limited information to share, as key details are often shaped collaboratively with coalition leadership. At this point, initial reference materials focus on a clear problem statement and the overarching purpose of forming the coalition.

Sustaining Relationships

Building a coalition is just the beginning—sustaining strong, collaborative relationships over time is what ensures long-term impact. Relationships require ongoing communication and intentional practices that reinforce trust and shared ownership. Below are key strategies to maintain momentum and deepen engagement among coalition partners.

REGULAR COMMUNICATION

Schedule consistent meetings with clear agendas.

Establish a predictable meeting cadence (e.g., monthly, bi-monthly, or quarterly) that respects participants' time and capacity. Share agendas in advance, focus on actionable topics, and include time for open discussion or updates. Consider rotating facilitation roles to build shared leadership.

Share regular updates, wins, and impact stories.

Keep partners informed between meetings through meeting minutes or shared file repositories. Celebrate small accomplishments or new partnerships to maintain energy and demonstrate the coalition's value.

Use newsletters or group platforms for ongoing connection.

Consider a monthly or quarterly coalition newsletter to share updates, partner spotlights, upcoming events, and resources. Use digital tools such as Slack, Basecamp, Google Drive, or Microsoft Teams to create ongoing channels for communication and collaboration.

RECOGNITION & RECIPROCITY

Acknowledge partner contributions publicly and privately.

Take time to recognize members' efforts during meetings, in written materials, or on social media.

Offer professional development or co-branding opportunities.

Look for ways to support partners' growth and visibility. This might include offering training opportunities, co-presenting at conferences, sharing speaking engagements, or co-authoring op-eds or publications that highlight their work alongside the coalition's efforts.

Celebrate milestones and shared achievements.

Build in time to reflect and celebrate successes, both big and small, such as completing a workforce needs assessment, launching a new training initiative, or securing funding.

Building strong, inclusive partnerships is an ongoing practice rooted in relationship-building and shared accountability. By following the strategies above, your coalition can cultivate the trust, alignment, and momentum needed to drive real, lasting community change.



Additional Resources

[*Collaboration Multiplier*](#) – Prevention Institute

[*The Tension of Turf: Making it Work for the Coalition*](#) – Prevention Institute

[*Community Tool Box*](#) – Center for Community Health and Development/ University of Kansas

[*Partnership Assessment Tool for Health*](#) – Center for Healthcare Strategies

Governance Guidance

The purpose of governance guidance for a coalition is to provide a clear and shared structure for how the coalition operates. Ultimately, strong governance helps the coalition stay aligned with its mission and goals while fostering trust and shared ownership.

Establish a Leadership Structure

Establish clear roles, such as a chair or facilitator, workgroup leads, and decision-making bodies, and define responsibilities to support transparency and accountability. Prioritizing shared leadership and collaborative decision-making helps sustain momentum over time. These leadership roles are essential in shaping the coalition's identity by developing a clear mission, shared vision, and guiding principles, while also providing the structure and framework needed to effectively carry out the coalition's goals.

Define The Coalition's Identity

Defining the coalition's identity is a foundational step in building a coalition that resonates with the community and inspires collective action. This is an expression of who the coalition is, what it stands for, and why people should engage.

START WITH PURPOSE: CLARIFY THE “WHY” THROUGH A MISSION STATEMENT

A mission statement is a single sentence that specifies why the coalition exists, its values and goals.

An effective mission statement:

- Defines the core purpose—why the coalition exists
- Is clear, concise, and focused on action

Example

“To strengthen and diversify Ohio’s behavioral health workforce through cross-sector collaboration, policy advocacy, and community-driven solutions.”

CREATE A COMPELLING PICTURE: PROVIDE A VISION STATEMENT

Creating a vision statement for a behavioral health workforce coalition is essential because it provides a clear, compelling picture of the future the coalition aims to build together.

A vision statement should describe the long-term change the coalition hopes to achieve. It should be aspirational and inspiring. What will the world be like if the coalition is successful?

Example

“Ohio has a diverse, thriving behavioral health workforce that meets the needs of every Ohioan, regardless of who they are or where they live.”

ESTABLISH GUIDING PRINCIPLES

Guiding Principles for operating the coalition influence how members work and collaborate. These should reflect what's most important to the group and what will help drive the work. Examples include:

- **Equity & Inclusion** – Addressing systemic barriers to behavioral health careers while including diverse voices in decision-making
- **Collaboration** – Centering collective problem-solving
- **Transparency** – Communicating openly with partners and stakeholders
- **Innovation** – Embracing creative, community-informed approaches

To assist with planning, the [Guiding Principles](#) section provides examples specific to the efforts of the existing RBHWCs.



Engaging coalition members in developing mission, vision, and guiding principles fosters a sense of ownership, shared purpose, and accountability. By co-creating the foundation of the coalition, members are more likely to stay engaged, aligned, and committed to the work.

Marketing & Communications

Strong communications and strategic marketing are essential to building recognition, trust, and momentum around the coalition's identity and mission. These efforts help develop and implement a clear, cohesive communication strategy that reflects the coalition's values and amplifies its impact.

Know Your Audiences

Effective engagement starts with understanding who the coalition's audiences are, what they care about, and how they can contribute. Tailor messaging and engagement strategies to each audience.

Examples of Audiences:

- Coalition members
- Behavioral health professionals and providers
- Educators and training institutions
- Students and adult learners
- Policymakers
- Funders and philanthropic organizations
- Grassroots and community-based organizations
- General public
- Media

Develop Visual Identity Components and a Brand Style Guide

A strong visual identity reinforces the coalition's brand. Key elements include:

- **Logo:** Create a simple, meaningful symbol of your coalition.
- **Color palette:** Choose high-contrast colors that command attention.
- **Typography:** Stick to 1–2 fonts for consistency across documents.
- **Design Style:** Use clean, accessible layouts and inclusive imagery that reflects your coalition's diversity.

Compile all brand decisions into a simple guide that coalition members can follow. This should include:

- **Mission, vision, and values**
- **Voice and tone guidelines** (avoid jargon-heavy, overly technical language that can alienate non-expert audiences)
- **Messaging** "Do's and Don'ts"
- **Logo use** rules and visual elements
- **Templates** for agendas and meeting minutes, slides, one-pagers, etc.

The style guide ensures consistency as the coalition grows and more people begin communicating on its behalf.

Develop a Marketing & Communications Strategy

A clear, intentional marketing and communications strategy is essential for building credibility, amplifying a coalition's voice, and driving engagement across sectors.

COMMUNICATION GOALS

Start by identifying communication goals. These should align with the coalition's overall objectives. Make sure to establish specific, measurable goals (e.g., increase coalition visibility, recruit members, influence policy).

KEY MESSAGES

Craft 3–5 core messages that align with the coalition's mission and resonate across audiences.

“Behavioral health professionals are the backbone of community wellbeing.”

“We need cross-sector solutions to solve Ohio’s workforce crisis.”

“Join us in shaping a stronger, more diverse behavioral health workforce.”

Build A Marketing Toolbox

A marketing toolbox is a collection of approaches and materials that communicate the coalition's mission, activities, and impact. A well-prepared toolbox ensures consistent, high-quality outreach, whether members are meeting with policymakers, engaging a new partner, or promoting a new initiative.



PRINT MATERIALS

Begin with just one or two printed materials, ensuring that the branding remains consistent. Consider a one-pager (either single-sided or double-sided) and perhaps a brochure or introductory letter.



DIGITAL ENGAGEMENT

In today's connected world, a robust digital presence is essential for any coalition seeking to raise awareness, engage diverse stakeholders, and advocate effectively. Consider creating:

- **Website or landing page** with clear “join” or contact options
- **Email newsletter** with updates, success stories, and upcoming events
- **Social media presence** (LinkedIn or X for professional outreach; Instagram or Facebook for community engagement)



Implement the Strategy & Maintain Engagement



CREATE A CONTENT CALENDAR

A content calendar is a strategic tool that helps coalitions plan, organize, and schedule communications across various platforms. By including social media posts, newsletters, press releases, and more, a content calendar can help keep the coalition proactive rather than reactive. Plan monthly or quarterly content around communications like:

- Workforce news and data
- Member highlights
- Events and calls to action
- Policy updates
- Engagement Campaigns



ENGAGEMENT CAMPAIGNS

Engagement campaigns are strategic, time-bound communication efforts designed to raise awareness, mobilize support, strengthen partnerships, or drive action around specific goals. For a behavioral health workforce coalition, these campaigns can spotlight workforce challenges, promote coalition initiatives, encourage policy change, or build community buy-in around an issue.

Examples include:

- Workforce Appreciation Month
- “Why I Work in Behavioral Health” series
- Policy Action Weeks



STORYTELLING

Storytelling is a powerful tool for a coalition because it transforms abstract challenges and data into real, relatable human experiences.

Share real voices by highlighting:

- **A student** entering the field
- **A rural provider’s** challenge
- **A coalition** success story

Use video, quotes, and testimonials for increased impact.



MEDIA RELATIONS

Traditional and digital media outlets have the power to reach large, diverse audiences well beyond a coalition’s immediate network, creating opportunities for fundraising and partnerships. Coalitions should prioritize building relationships with journalists by identifying and connecting with reporters who cover behavioral health, workforce, healthcare, or community issues.

Ways to engage with the media:

- Develop and share **press releases**
- Pitch **story ideas** that highlight coalition work, data trends, local impact, etc.
- Offer **expert interviews** and opinion editorials
- Use **social media** to amplify media coverage

Monitor & Evaluate

An effective marketing and communications plan ensures that messages reach the right audiences, generate engagement, and drive action. Monitoring and evaluation are vital final steps in any communications strategy.







Track progress using:

- Email open and click-through rates
- Social media engagement
- Website visit data
- Survey feedback from partners
- Number of new members or inquiries

Key Tips for Success

- Keep messaging **consistent and clear** across platforms.
- **Build relationships**, not just awareness—engage, don't just broadcast.
- Make sure materials are **inclusive, accessible, and community-informed**.
- **Refresh your strategy** annually based on audience needs and outcomes.

Free or Low-Cost Resources & Tools

 <p>Design templates</p>	 <p>Email newsletters</p>	 <p>Surveys and feedback</p>
 <p>Social media scheduling</p>	 <p>Simple way to manage multiple links in social media profiles</p>	 <p>Customer Relationship Management (CRM) software and project management software. Free nonprofit plan available.</p>

Finding Compelling Regional Data

Understanding a region's behavioral health workforce data helps inform the focus of the work and support effective communication to stakeholders. Data can reveal workforce needs and shortages by job title, in addition to finding holes in educational pipelines and career pathways. This section outlines the types of data to seek, where to find data sources, and how to use these data.

Context & Caution

Behavioral Health is usually not a distinct category in workforce data. Job titles in behavioral health are often grouped under broader categories such as **Health and Human Services, Healthcare, Human Services**, or other employment categories. The most effective strategy may be to search by specific job title, rather than by categories. For a comprehensive list of job titles in behavioral health, refer to the Behavioral Health Education and Career Opportunities Navigator (BHEACON), an interactive career pathway tool located at buildbehavioralhealth.org.

What to Look For: Types of Data

These are categories of data that can help tell a region's story:

1 Workforce Supply

- Number of trained professionals currently in the behavioral health workforce
- Demographics of workforce (e.g., age, race/ethnicity, geography, retirement risk)
- Licensure and certification trends
- Number of graduates from local behavioral health education programs

2 Workforce Demand

- Job openings and vacancies
- Employer-reported turnover rates and shortages by job title
- Projected growth for behavioral health occupations

3 Educational Pipeline

- Regional training programs and enrollment
- Availability of internships overall and of paid internships
- Credentialing/licensure bottlenecks
- Job placement rates from higher education programs

4 Systems or Policy Context

- Medicaid reimbursement rates and eligible services
- Local or state workforce initiatives
- Other funding models for behavioral health services
- State-level systems that support behavioral health (e.g., licensing, education, workforce development, health-care, insurance, etc.)

Where to Find It: Data Sources

Free Sources

LABOR MARKET & EMPLOYMENT DATA

1. Ohio Department of Job and Family Services (ODJFS) – Labor Market Information: <https://ohiolmi.com/>
2. U.S. Bureau of Labor Statistics (BLS) – Occupational Outlook & Local Area Data: <https://www.bls.gov/data/>

WORKFORCE & EDUCATION DATA

1. Ohio Department of Higher Education – Program completion data: <https://highered.ohio.gov/data-reports/>
2. IPEDS (Integrated Postsecondary Education Data System) – Education program pipelines: <https://nces.ed.gov/ipeds/>

HEALTH WORKFORCE DATA

1. Health Workforce Data Center – National Center for Health Workforce Analysis: <https://bhw.hrsa.gov/data-research>
2. Professional/Licensing Boards - Licensure Statistics
 - Counselor, Social Worker, and Marriage and Family Therapist Board: <https://cswmft.ohio.gov/>
 - Ohio Board of Nursing: <https://nursing.ohio.gov/>
 - Ohio Board of Pharmacy: <https://www.pharmacy.ohio.gov/>
 - Ohio Board of Psychology: <https://psychology.ohio.gov/>
 - Ohio Chemical Dependency Professionals Board: <https://ocdp.ohio.gov/>
 - State Medical Board of Ohio: <https://med.ohio.gov/>
 - Ohio Department of Mental Health & Addiction Services: <https://mha.ohio.gov/>
3. HRSA Shortage Area Maps – Designations of Mental Health Professional Shortage Areas <https://data.hrsa.gov/tools/shortage-area>

POPULATION HEALTH DATA

1. Ohio Department of Mental Health & Addiction Services: <https://mha.ohio.gov/>
2. Ohio Department of Health: <https://odh.ohio.gov/>
3. County Health Rankings: <https://www.countyhealthrankings.org/>
4. CDC Behavioral Risk Factor Surveillance System: <https://www.cdc.gov/brfss/>
5. Youth Risk Behavior Surveillance System: <https://www.cdc.gov/yrbs/index.html>

LOCAL SOURCES

1. Alcohol, Drug Addiction and Mental Health/Mental Health and Recovery Services Boards
2. County health departments
3. County workforce development boards (many use JobsEQ or EMSI)
4. Community Needs Assessments
5. Regional planning commissions
6. Private foundations

Paid Source

JOBS EQ

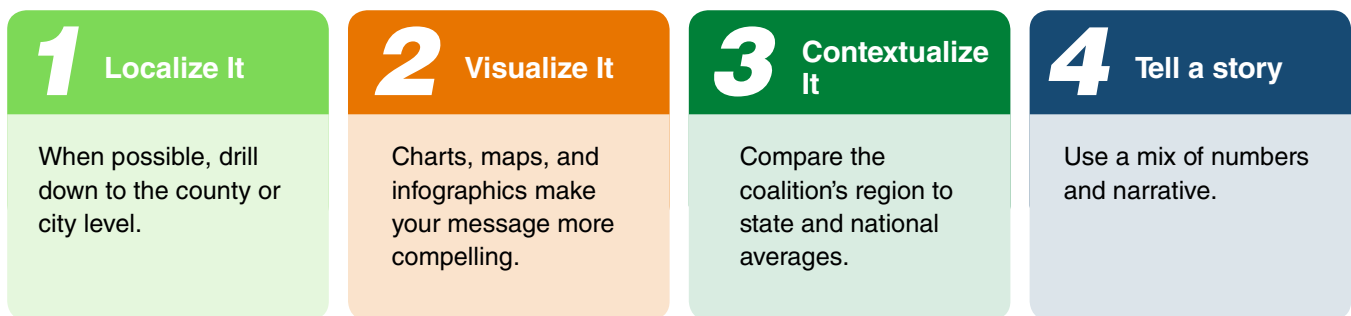
Jobs EQ is a labor market software platform. Its AI pulls data from many of the free sources listed to the left and organizes the data into graphs, charts, and tables for ease of use. Jobs EQ divides its regions by Metropolitan Statistical Area, a geographic region defined by the US Office of Management and Budget. The SW RBHWC has used Jobs EQ to assess workforce needs locally, compared to state-level data points.

Examples of information provided are: enrollment and graduation data from local colleges and universities with behavioral health training programs, job openings, specializations within a field (such as social work), and income trends.

How to Use Data

Using data effectively in community coalition work helps guide decision-making and demonstrate impact. Here are some ways that coalitions can incorporate data into their efforts:

- **Identify Local Needs** from local data.
- **Inform Strategy Development** by grounding initiatives in data.
- **Engage Partners and Stakeholders** with infographics or short briefs.
- **Support Funding and Policy Advocacy** using data in grant applications and policy briefs.
- **Measure Progress and Adapt** by tracking coalition activities and outcomes.
- **Foster Transparency and Trust** by sharing data openly.



Fundraising Tips & Resources

Securing funding requires strategic planning, strong partnerships, and creative approaches. Below are key fundraising tips for supporting a coalition's initiatives.

Establish and Diversify Funding Relationships

- **Leverage Diverse Funding Sources:** To ensure long term sustainability, it is crucial to diversify sources of support. Public foundations, private philanthropies, and corporate sponsorships can all play a significant role but so can sources such as United Way, event sponsorships, or state or federal government.
- **Leverage Existing Relationships with Funders:** Encourage partners to use existing relationships with funders to advocate for the coalition's work. Funders who are already familiar with the credibility of a coalition member's work may be more inclined to extend their support to the broader coalition. Once a funder has supported the coalition for the first time, keep them informed of progress, involve them in milestone achievements, and showcase the impact of their support.

Target Funding for Specific Projects

- **Identify Specific Project Needs:** Some funders may be more inclined to support specific projects, such as workforce training or community outreach efforts. Focusing on targeted initiatives can make the request more compelling.
- **Highlight Local Impact:** When targeting local or regional funders, emphasize how the coalition's efforts align with local or regional workforce needs and will improve access to care within specific communities.

Coordinate Funding among Coalition Members

- **Transparent Communication:** It is important to foster transparency about the coalition's budget and fundraising efforts. Clearly define the distinction between coalition-specific funding and funding for individual members' operations.
- **Coordinate Grant Applications:** For funding opportunities where coalition members are also eligible, coordinate applications to avoid overlap and to present a unified approach to funders.

Build a Compelling Case for Funders

- **Showcase Coalition Impact:** Demonstrating the effectiveness of the coalition in addressing workforce development needs and improving behavioral health outcomes in Ohio will be crucial. Use data and success stories to illustrate the coalition's ability to execute impactful initiatives.
- **Develop a Comprehensive Funding Strategy:** Develop a long-term funding strategy that includes a mix of grants, sponsorships, individual donations, and institutional support. Include a clear case for why supporting the coalition is an investment in a healthier, more sustainable workforce.

By following these tips, the coalition can not only secure funding for its initiatives but also build a sustainable and impactful foundation for addressing Ohio's behavioral health workforce shortage.

3

Workbook for Building A Regional Behavioral Health Workforce Coalition

The following sections are formatted as a workbook, to provide a roadmap for creating a Regional Behavioral Health Workforce Coalition (RBHWC). The steps draw on the experience and learnings of the SW RBHWC and the NE RBHWC. As with all parts of this Toolkit, users should feel free to copy or adapt any of the information in forming and supporting a RBHWC.

Coalition Membership

This workbook includes guidance on recruiting members for various roles within the coalition. However, every coalition begins with one or more individuals making a commitment to initiate the effort. In the two existing RBHWCs, local leaders came together to make that commitment on behalf of their regions and took the first steps to establish a coalition by taking on the roles of co-chairs.

As a community-led, cross-sector collaboration, the coalition should draw its membership from as many relevant sectors as possible.

STEP 1: Select Coalition Co-Chairs

Each established RBHWC is founded and led by co-chairs – respected community leaders who bring the relationships, time commitment, and facilitation skills essential to launching and guiding the coalition’s work. These individuals represent two distinct but critical sectors necessary to advance the coalition’s goals. The partnership of the co-chairs is designed to bring complementary, not identical, skills and perspectives to the table.

The co-chairs are responsible for leading the Advisory Council and facilitating its meetings. Shared responsibilities include attending coalition meetings, recruiting members, identifying funding opportunities, and implementing communication strategies. Weekly or biweekly check-ins between co-chairs have proven valuable for tracking progress on shared tasks. Additionally, co-chairs have found it beneficial to participate in the coalition’s committees and workgroups, helping to connect overlapping strategies and ensure alignment across different parts of the coalition’s work.

RBHWC (region):

Co-chair 1:

Sector:

Co-chair 2:

Sector:

Step 2: Recruit Advisory Council

An Advisory Council is the governing body of the RBHWC. This group will bring together a working group of local leaders who reflect the region's diverse communities and represent key sectors.

Note

The SW RBHWC named their groups the Advisory Committee and the subcommittees, whereas the NE RBHWC named their groups the Advisory Council and the committees. Despite different names, the groups serve the same function. For consistency, this document uses Advisory Council and committees throughout.

Conduct a Stakeholder Analysis: Identify stakeholders across sectors that can bring their expertise, experience, perspective, and influence to the different conversations and strategies developed in the coalition. Be sure to include a variety of geographic settings (urban, suburban, rural), counties or regions, populations served (such as children, older adults), and any other forms of diversity relevant to the coalition's goals.

Evaluate each stakeholder's:

- **Skills and Knowledge** – Their specific expertise or experience
- **Influence** – Their level of decision-making power or visibility in the community
- **Interest** – Their interest in the issue of behavioral health workforce development
- **Alignment** – How well do their mission, values, and goals align with the coalition's



Look Beyond the Usual Suspects. Consider non-traditional partners like faith communities, employers, or youth councils. Addressing the behavioral health workforce shortage impacts everyone in the community and requires maximizing limited resources through creative collaboration.

Including the two co-chairs, the Advisory Councils to date have had 15 members.

Possible Advisory Groups Member Sectors (not exhaustive)

Behavioral Health Centers/Practitioners

- Community behavioral health centers
- Peer recovery providers
- Prevention services providers
- Practitioners specializing in any special populations (LGBTQ+, people of color, Spanish speakers, foster youth, etc.)
- Integrated medical-behavioral health centers
- Network or consortium of local providers

Health and Hospital Systems

- Health Clinics
- Hospitals
- Public health departments/clinics
- Regional health and/or hospital associations

Workforce Development Organizations

- County workforce development boards
- Career consortiums
- Providers of training programs, such as for credentialed behavioral health careers (peer support, substance use counseling, mental health first aid, etc.)

Higher Education - Programs that lead to the behavioral health field

- Faculty and students from community colleges, 4-year colleges or universities, and graduate schools
- Research institutes or centers of excellence

K-12 education

- Educational Service Centers
- High schools, especially with a workforce or pipeline program in any industry
- Career tech schools
- College/career coaching programs

Other Sectors

- County Alcohol, Drug Addiction and Mental Health/Mental Health and Recovery Services Boards
- Behavioral health and/or physical healthcare advocacy organizations
- Grassroots organizations
- People with lived experience
- Philanthropy

RBHWC (region): Number of members:

Co-chair 1 (from above): Sector:

Co-chair 2 (from above): Sector:

Members	Sectors	Members	Sectors
1: <input type="text"/>	<input type="text"/>	8: <input type="text"/>	<input type="text"/>
2: <input type="text"/>	<input type="text"/>	9: <input type="text"/>	<input type="text"/>
3: <input type="text"/>	<input type="text"/>	10: <input type="text"/>	<input type="text"/>
4: <input type="text"/>	<input type="text"/>	11: <input type="text"/>	<input type="text"/>
5: <input type="text"/>	<input type="text"/>	12: <input type="text"/>	<input type="text"/>
6: <input type="text"/>	<input type="text"/>	13: <input type="text"/>	<input type="text"/>
7: <input type="text"/>	<input type="text"/>	14: <input type="text"/>	<input type="text"/>

In addition to their members, the RBHWCs regularly engage with key partner organizations to share updates and resources as part of their outreach and collaboration efforts. These include:

- State Agencies, like the Ohio Department of Mental Health & Addiction Services, the Ohio Department of Education and Workforce, and the Ohio Department of Higher Education
- Managed care organizations
- State-wide advocacy associations



Identify individuals or organizations already engaged in this work who may be operating in silos. One of the key strengths of cross-sector collaborations is their ability to connect parallel or duplicative efforts, maximizing the efficient use of limited resources.

Any sectors not represented in the Advisory Council can be invited to join in other roles of the coalition to ensure diversity in perspectives and knowledge. Other volunteer opportunities as members of the coalition will be discussed in further steps of this workbook.

When inviting members to the RBHWC, an effective approach is to:

- Explain who leads the coalition and its purpose.
- Briefly state the urgency and magnitude of the behavioral health workforce crisis.
- Specify why you think the invitee would make a valuable addition to the coalition and the specific types of insight or knowledge they will bring.
- State the sector that the invitee would represent.

Step 3: Mission and Shared Vision

The Advisory Council is initially tasked with establishing the structure of their coalition. The existing RBHWC's Advisory Councils met biweekly for the first few months, ensuring fast progress and an efficient launch of the committees.

As a foundational first step, each Advisory Council developed its Mission and Shared Vision statements. These statements provide a unifying purpose that guides decision-making over time. For general information on Mission and Vision, please refer to the "[Governance Guidance](#)" section of this toolkit on page 6.

Here are examples of a Mission and Shared Community Vision:

MISSION

The Regional Behavioral Health Workforce Coalition is a community-driven cross-sector collaboration to address short-term and long-term behavioral health workforce development barriers. The coalition's goals are to increase support, build evidence, and lead the scale-up of best practices that build the behavioral health workforce that our region needs.

SHARED COMMUNITY VISION

Behavioral health is healthcare. Everyone in our region can access the quality behavioral health care they need because its workforce reflects the communities it serves, is culturally and linguistically competent, and has the capacity to meet everyone's behavioral health needs.

RBHWCs are welcome to borrow or adapt the example Mission and Vision statements or create new ones that better reflect the region.

RBHWC (region):

NEW MISSION

NEW VISION

Step 4: Guiding Principles

Within the established RBHWCs, Advisory Councils defined these foundational values early in the process, laying the groundwork for building a cohesive framework and setting strategic priorities that reflect both regional needs and collective purpose. Here is an example of the SW RBHWC’s Guiding Principles:

Guiding Principles



Moving from Siloed Efforts to Cross-Sector Collaboration	The emphasis is on unifying parallel efforts - such as those focused on specific populations or service types - into a comprehensive, collaborative approach that maximizes resources, reduces redundancy, and advances collective progress.
Moving from Problem-Focused to Solution-Focused	While understanding the problem is essential, it is no longer sufficient. This guiding principle calls for a shift in focus from diagnosing the issues to developing and implementing well-designed, collaborative, and sustainable solutions.
Moving from Grant-Driven to Community-Driven	While external funding is critical, grants often come with narrow scopes and short timelines, leading to fragmented strategies that are difficult to sustain beyond the grant period. This principle recognizes the importance of shifting from short-term, funder-driven deliverables to long-term, community-informed solutions, shaped by local stakeholders who deeply understand the region’s needs, priorities, and opportunities for lasting impact.
Commitment to Data-Driven and Measurable Strategies	The SW RBHWC is committed to implementing strategies that are grounded in data, guided by evidence, and evaluated for measurable impact. Data-informed decision-making and ongoing assessment are essential to achieving meaningful, sustainable progress in strengthening the behavioral health workforce.

<p>Inform Public Funding Strategies</p>	<p>By systematically evaluating what works and understanding the impact of various initiatives, the coalition can provide evidence-based recommendations to ensure that public investments are targeted toward the most effective and sustainable solutions to address the behavioral health workforce shortage.</p>
<p>Establish Short-Term and Long-Term Strategies</p>	<p>The behavioral health workforce shortage is a longstanding challenge. The SW RBHWC must identify and implement a mix of short-term strategies that deliver early, visible wins and long-term solutions that build a sustainable, resilient workforce.</p>
<p>Strategies Include Building a Workforce for All</p>	<p>A truly effective behavioral health workforce must be equipped to serve the full spectrum of individuals and communities, regardless of race, ethnicity, age, language, gender identity, sexual orientation, disability status, socioeconomic background, or geographic location. Building a workforce for all means ensuring that behavioral health professionals reflect the communities they serve and are trained to understand and respond to each individual's unique cultural context and lived experience.</p>
<p>Local Focus, but Include State-Level Engagement</p>	<p>While the core of workforce development occurs at the local level, where behavioral health services are delivered and community needs are most visible, lasting impact requires strong alignment with state-level systems, policies, and funding mechanisms.</p>
<p>Include Both Policy and Systems Change</p>	<p>Addressing the behavioral health workforce shortage requires more than local innovation, it demands alignment with state-level policy and systems reform. State agencies, legislators, and funders play a pivotal role in shaping workforce regulations, licensure pathways, reimbursement structures, training pipelines, and long-term investment strategies.</p>

New coalitions are welcome to borrow, adapt, or rewrite the Guiding Principles to suit a region. Coalitions may choose as many guiding principles as is appropriate for their region. A larger number of guiding principles allows for inclusivity, but some regions may decide having fewer will better focus their work.

NEW GUIDING PRINCIPLES

RBHWC (region):






1.
2.
3.
4.

Step 5: Shared Framework

Once the Advisory Council of the RBHWC has defined its Mission, Vision, and Guiding Principles, it can identify key priority areas necessary to achieve its mission and vision. These priority areas, referred to as strategic pillars, form the foundation of the Shared Framework, guiding the coalition’s actions, investments, and long-term goals.

Below is an example of the SW RBHWC’s Shared Framework, including its associated committees and strategic roadmap.

Shared Framework

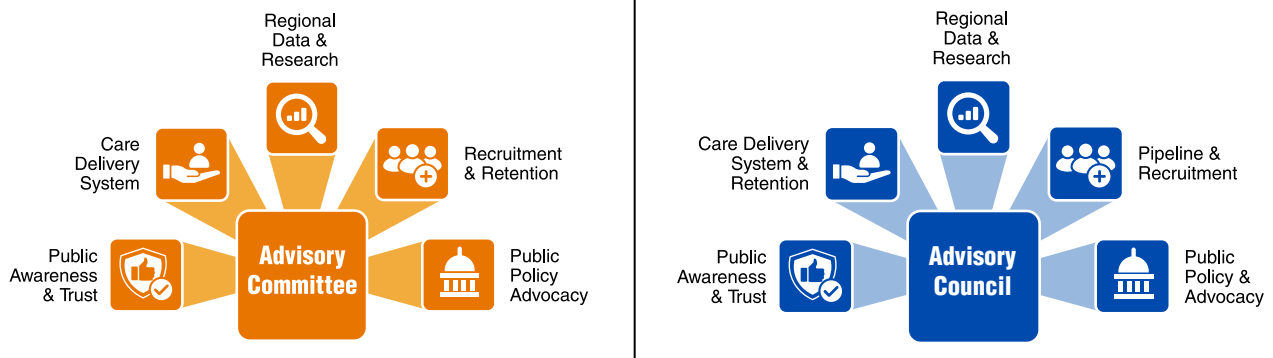
 <p>Public Awareness & Trust</p>	 <p>Care Delivery System</p>	 <p>Regional Data & Research</p>	 <p>Recruitment & Retention</p>	 <p>Public Policy & Advocacy</p>
<p>Educate the community and other stakeholders on career paths in behavioral health and stigma’s impact on the workforce.</p> <p>Stigma shows up as limited educational investments, lower reimbursement rates, barriers to licensure, and other ways that undervalue the behavioral health system and prevent more professionals from entering the field.</p>	<p>Clearly identify ways to use the workforce more effectively to increase access to care and better meet the needs of those with behavioral health challenges.</p> <p>Evaluate the regional care delivery system and role of each organization type to determine impact and address workforce opportunities. This includes implementing strategies that improve service delivery to underserved populations.</p>	<p>Workforce development strategies should be data-driven and measurable.</p> <p>Collect regional data and research that informs strategies and provides information about our region that can be used to implement policy changes needed to grow a robust and diverse behavioral health workforce.</p>	<p>Create career pathways and advancement opportunities in the behavioral health field with short, mid- and long term strategies.</p> <p>Included in this work is expanding the talent pool through attracting the next generation of professionals, implementing data-informed retention strategies, and targeting system gaps and underserved populations.</p>	<p>Determine the policy priorities in Ohio to address policy barriers to growing the behavioral health workforce.</p> <p>These priorities include but are not limited to reimbursement rates, insurance parity, education and training investments, barriers to licensure, and student financial aid programs.</p>

A dedicated committee was formed for each strategic pillar, bringing the SW RBHWC Framework to life through focused action and collaboration. Each committee operates with guidance and oversight from the Advisory Council, ensuring alignment with the coalition’s vision and shared mission, guiding principles, and overall strategic direction.



Continual Learning and Sharing

One of the key advantages of the RBHWC network is the ability to share experiences, successes, and lessons learned across regions. The example below illustrates learning and evolution in action. The diagram on the left shows the framework developed by the first coalition, the SW RBHWC. When the second coalition, the NE RBHWC, began designing its own structure and framework (shown on the right), it drew heavily from the original model, adapting the pillars/committees based on insights gained from the first coalition’s experience and its own community’s approach to the work. This shared learning supports stronger, more informed strategies across the network.



The number of pillars can be different for each RBHWC. The SW RBHWC and NE RBHWC have each formed five pillars, and therefore five committees. Future RBHWCs may choose differently.

Shared Framework

RBHWC (region)

** Remember that these pillars become the committees.*

Pillar 1

Pillar 2

Pillar 3

Pillar 4

Pillar 5

Pillar 6

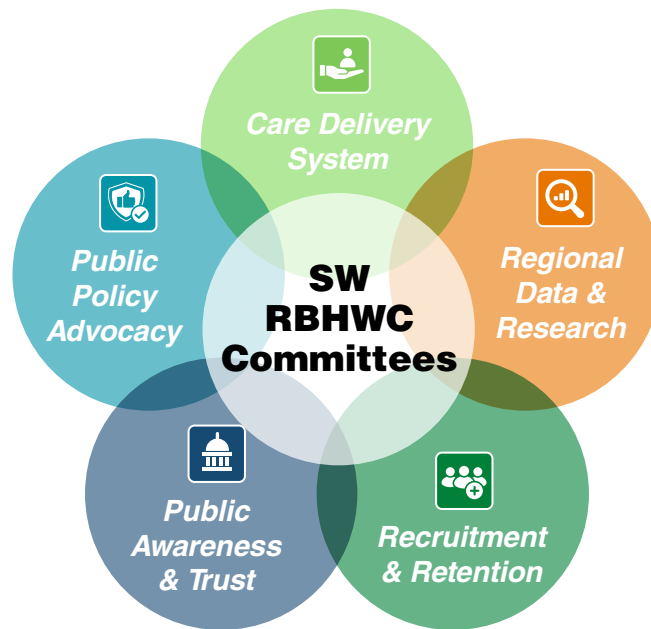
Step 6: Shared Roadmap



The Shared Roadmap assists the coalition in converting its pillars into committees. The SW RBHWC Advisory Council provided each committee with initial goals and strategic considerations, grounded in earlier discussions that helped define the coalition’s strategic pillars and priority areas. The roadmap shared below was given to each committee at the time of its launch, with the top two strategies identified as the highest priorities by the Advisory Council. These recommendations served as a starting point to guide each committee’s planning process and ensure alignment with the coalition’s overarching vision and objectives.




Public Awareness & Trust	Care Delivery System	Regional Data & Research	Recruitment & Retention	Public Policy Advocacy
<p>Develop public awareness campaigns to elevate the career opportunities and growth available in behavioral health professions.</p>	<p>Determine the workforce component and implement strategies that improve service delivery to underserved populations.</p>	<p>Develop a workforce needs assessment for the region.</p>	<p>Create outreach strategies to reach those who guide students in career selection such as high school guidance counselors, college recruiters and advisors in order to make them aware of the opportunities in community based work and the critical need for licensed professionals.</p>	<p>Advocate for higher reimbursement rates for identified services and in the community behavioral health provider segment.</p>
<p>Educate the public, employers, school systems, government, and health plans about stigma around behavioral health disorders that create barriers to workforce development, especially in underserved populations.</p>	<p>Evaluate the system and role of each fragment organization and determine impact/opportunities on the workforce. Build collaborative relationships to address identified opportunities.</p>	<p>Research salary comparisons across professions to confirm disparities and make the case for funding for appropriate compensation of community mental health staff, including licensed staff and peer support.</p>	<p>Address barriers to licensure that impedes growing a diverse and qualified workforce.</p>	<p>Address barriers to licensure, including licensure for out-of-state providers.</p>
<p>Build awareness of professionals in other systems and sectors through trainings such as Behavioral Health 101/Mental Health First Aid.</p>	<p>Evaluate financial models and incentives through integrated care models.</p>	<p>Create a list of colleges and universities in the region that provide behavioral health certifications and/or degrees and the number of seats and current demographics in each program.</p>	<p>Advocate for an increase in the number of social work and counseling students able to be enrolled in University programs. Increased numbers of students will also require an increase in internship sites.</p>	<p>Engage with health plans and enforcement authorities about behavioral health parity.</p>
<p>Build awareness campaigns that target individuals in minoritized populations.</p>	<p>Evaluate differences in legal responsibility and authority in service delivery.</p>	<p>Survey providers on the number of internship spots available for undergraduate and graduate level students, including information about provider type, and pay details.</p>	<p>Expand the workforce through supports for the education and training of paraprofessionals.</p>	<p>Develop and fund incumbent worker training programs, scholarships, internships, field placements, and residency positions in behavioral health organizations.</p>
<p>Upon further reflection by the SW RBHWC committees, the roadmap evolved, resulting in the committee descriptions in the toolkit’s next section.</p>	<p>Survey providers about their experiences with insurance, specifically private/employer plans.</p>	<p>Survey providers about their experiences with insurance, specifically private/employer plans.</p>	<p>Establish a career path to the behavioral health field.</p>	<p>Integrated licensure for behavioral health inclusive of co-occurring disorders; address disparities between MH and SUD.</p>
	<p>Explore the role of financial incentives and payers on workforce capacity.</p>	<p>Explore the role of financial incentives and payers on workforce capacity.</p>	<p>Building provider resiliency, mentoring relationships.</p>	<p>Improve policies around supervision.</p>
	<p>Identify psychiatry residencies, behavioral health internships and telehealth training in rural and underserved communities, as well as geographic and demographic trends.</p>	<p>Identify psychiatry residencies, behavioral health internships and telehealth training in rural and underserved communities, as well as geographic and demographic trends.</p>		

Step 7: Roadmap Becomes Committees

In established RBHWCs, the work is carried out through dedicated committees, each focused on a pillar of the Shared Framework and Shared Roadmap the coalition developed. These committees are charged with assessing behavioral health workforce needs and opportunities, setting measurable goals, and evaluating potential strategies. The diagram here and descriptions below are that of the SW RBHWC's committees and Roadmap.



Committee	Overview	Roadmap Strategies
 <p>Care Delivery System</p>	<p>This committee is tasked to identify ways to use the workforce more effectively to increase access to care and better meet the needs of those with behavioral health needs. This group will evaluate the regional care delivery system and role of each organization type to determine impact and address workforce opportunities. This includes implementing strategies that improve service delivery to underserved populations.</p>	<ul style="list-style-type: none"> • Implement workforce strategies that improve service delivery to underserved populations. • Evaluate the system and role of each organization type and determine impact / opportunities on the workforce. • Build collaborative relationships to address identified opportunities.
 <p>Regional Data & Research</p>	<p>Workforce development strategies should be data-driven and measurable. This committee will be responsible for informing strategies and providing information about our region that can be used to implement policy changes needed to grow a robust and diverse behavioral health workforce.</p>	<ul style="list-style-type: none"> • Develop a workforce needs assessment for the region. • Research salary comparisons across professions. • Create a list of colleges and universities in the region and the number of seats and demographics in each program. • Survey providers about their experiences with insurance. • Explore the role of financial incentives on workforce capacity. • Identify psychiatry residencies, internships and trainings in rural & underserved communities.

Committee	Overview	Roadmap Strategies
 <p>Recruitment & Retention</p>	<p>Creating career pathways and advancement opportunities in the behavioral health field with short, mid- and long term strategies is the overarching task of this committee. Included in this work is expanding the talent pool through attracting the next generation of professionals, implementing data-informed retention strategies, and targeting system gaps and underserved populations.</p>	<ul style="list-style-type: none"> • Create outreach strategies to reach those who guide students in career selection, such as college recruiters and advisors in order to make them aware of the opportunities. • Advocate for an increase in the number of social work and counseling students able to be enrolled in university programs. Increase the number of internship sites. • Establish a career path. • Expand the workforce through paraprofessionals. • Build provider resiliency, mentoring relationships.
 <p>Public Awareness & Trust</p>	<p>This committee's role is to educate stakeholders on stigma's impact on the workforce. Stigma shows up as limited educational investments, lower reimbursement rates, barriers to licensure, and other ways that undervalue the behavioral health system and prevent more professionals from entering the field.</p>	<ul style="list-style-type: none"> • Public awareness about career opportunities and growth, especially in underserved populations. • Educate the public, employers, school systems, and health plans about the impact of stigma on the behavioral health workforce. • Build awareness of professionals in other systems and sectors through training (e.g. Mental Health First Aid).
 <p>Public Policy Advocacy</p>	<p>This committee is tasked with developing a policy agenda in Ohio to address policy barriers to growing the behavioral health workforce. These priorities include but are not limited to reimbursement rates, insurance parity, education and training investments, barriers to licensure, and student financial aid programs.</p>	<ul style="list-style-type: none"> • Advocate for higher reimbursement rates. • Address barriers to licensure. • Engage with legislators and enforcement authorities about behavioral health parity. • Support policies that expand incumbent worker training programs, scholarships, internships, field placements, and residency positions.

While the Advisory Council provides guidance and oversight, each committee maintains the autonomy to shape its work within the scope of its assigned priority. Through research, discussion, and stakeholder input, committees recommend actionable strategies for the coalition to implement. Depending on the strategy, a workgroup may be formed to move the project forward. Workgroups may incorporate existing committee members, members from multiple committees, and/or new members, depending on the expertise, resources, and relationships needed to implement successful strategies.

Step 8: Recruit Chairs for Committees

Each committee is led by a chair or pair of co-chairs, depending on the scope of work and level of need. These chairs can be existing members of the Advisory Council or new, external partners. The process for recruiting committee chairs is much the same as the process for recruiting coalition co-chairs or Advisory Council members. Revisit the Stakeholder Analysis, and for each committee, select one or two representatives from relevant sectors.

RBHWC'S COMMITTEES AND CHAIRS:

RBHWC (Region)	<input type="text"/>	
	Chair(s)	Sector(s)
Committee 1:	<input type="text"/>	<input type="text"/>
Committee 2:	<input type="text"/>	<input type="text"/>
Committee 3:	<input type="text"/>	<input type="text"/>
Committee 4:	<input type="text"/>	<input type="text"/>
Committee 5:	<input type="text"/>	<input type="text"/>
Committee 6:	<input type="text"/>	<input type="text"/>

Step 9: Recruit Members for Committees

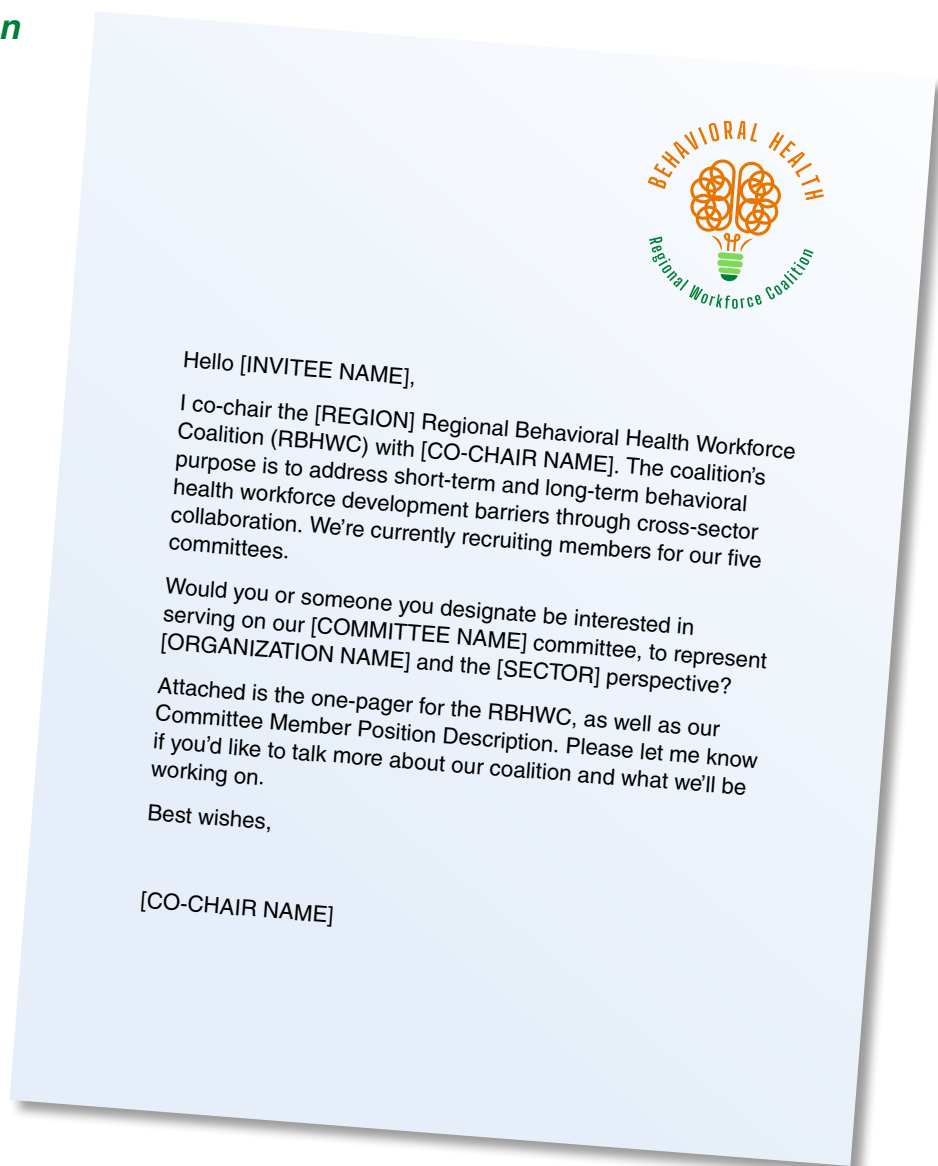
Review the list of Advisory Council members and the Stakeholder Analysis. What sectors are missing? What sectors does each committee chair need in the committee membership, to support the committee's goals?

Group size is intentionally kept small to foster productive discussions and efficient decision-making, while remaining large enough to ensure diverse perspectives and consistent participation.

Documents to use for recruitment:

- One-pager about the coalition
- Brief overview of the committees and/or workgroups
- Committee Member Position Description
- Slide show overview of the coalition

Sample Invitation



Step 10: Launch the Committees

As soon as any one committee has a chair (or co-chairs) and “enough” members (usually four or five), the committee can launch. A committee chair, coalition chair, or administrative support person can set up a Doodle poll or something similar to set the first meeting date.

RECOMMENDED AGENDA FOR FIRST COMMITTEE MEETING:

- Welcome and introductions
- Ask each participant to state what brought them to this workforce development work
- Overview of the RBHWC, provided by one of the coalition’s co-chairs
- Explanation of the committee’s scope, provided by the coalition’s co-chairs
- Expectations for committee membership
- Guided discussion on the committee’s vision of what success would look like
- In-meeting poll to set recurring meeting date



It’s important to recognize the administrative work that goes into managing multiple committees. One option is to ask if a coalition or committee co-chair’s organization can provide an administrative support person to manage meeting invitations and RSVPs, send agendas, and take meeting minutes.

When all of the coalition’s committees have launched, the coalition is fully operational.

Sample Timeline

The following is a sample timeline for launching the work of a RBHWC.

PHASE 1	Month 1	<p>Launch Advisory Council Convene biweekly in order to complete the following objectives.</p>
	Months 1-2	<p>Establish Mission and Shared Vision Establish Guiding Principles</p>
	Months 2-3	<p>Develop Framework & Shared Roadmap (Priorities/Pillars of work)</p>
	Months 3-4	<p>Recruit for Committees (based on Framework) Recruit chairs plus at least 4 members for each.</p>
	Months 4-6	<p>Develop Policy Agenda (Advisory Council or Public Policy Advocacy committee)</p>
PHASE 2	Months 5-11	<p>Advisory Council</p> <ul style="list-style-type: none"> • Revisit meeting cadence. • Support and monitor committee needs / address challenges. • Support communication and collaboration where needed between committees. <p>Committees (Guided by Advisory Council)</p> <ul style="list-style-type: none"> • Launch each committee when it has enough participants to begin the work. • Develop Objectives/Strategies through data collection and research. • Continue to recruit members to committees. • Implement identified strategies where opportunities present themselves or are created.
PHASE 3	Months 11 - onward	<p>Advisory Council</p> <ul style="list-style-type: none"> • Support and monitor committee needs / address challenges. • Support communication and collaboration where needed between committees. <p>Committees</p> <ul style="list-style-type: none"> • Reorganize into workgroups to implement specific strategies.
	Months 11-12	<p>Advisory Council Evaluate Framework and Shared Roadmap.</p>

Marketing & Communications

For general information on Marketing & Communications, please refer to the "[Marketing & Communications](#)" section of this toolkit on page 8. This section is a workbook to help new RBHWCs create their communications plan.

IDENTIFY KEY AUDIENCES FOR ENGAGEMENT.

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2. <input type="text"/>	6. <input type="text"/>
3. <input type="text"/>	7. <input type="text"/>
4. <input type="text"/>	8. <input type="text"/>

FOR EACH AUDIENCE, WHAT ARE SPECIFIC AND MEASURABLE COMMUNICATION GOALS?

Audience	Goals
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2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>
5. <input type="text"/>	<input type="text"/>
6. <input type="text"/>	<input type="text"/>
7. <input type="text"/>	<input type="text"/>
8. <input type="text"/>	<input type="text"/>

COALITION IDENTITY TOOLBOX CHECKLIST:

- | | |
|---|--|
| <input type="checkbox"/> Coalition logo | <input type="checkbox"/> Mission, vision, guiding principles |
| <input type="checkbox"/> Coalition brand colors | <input type="checkbox"/> Voice/tone, messaging "do's" and "don'ts" |
| <input type="checkbox"/> Coalition's design style - graphics, 1-2 fonts, document layouts/templates | <input type="checkbox"/> Key messages |

COALITION MARKETING TOOLBOX CHECKLIST:

- Print materials (one-pager, brochure, etc.)
- Digital materials (website, newsletter, social media accounts, etc.)

CONTENT CALENDAR:

Publish Deadline	Audience	Content Type	Resources needed	Project Leader	Goal
<i>EXAMPLE</i> 6/5	<i>Coalition Members</i>	<i>Newsletter</i>	<i>News, member highlight, updated scorecard, pics from event</i>	<i>Sam P.</i>	<i>Increase engagement, maintain momentum</i>

Once the SW RBHWC recruited an Advisory Council, it created a unique, unified identity for the coalition, separate from the organizations of the co-chairs or anyone in leadership. The coalition established its brand through its color scheme, logo, mission, vision, and the shared framework and roadmap. From there, the Advisory Council established key messages, such as "To build the behavioral health workforce our region needs." These messages were shared in marketing materials designed to establish awareness and buy-in of the coalition, and to recruit members.

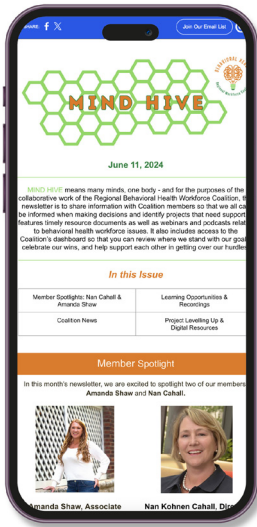
This process took time, as earlier efforts in the community to build coalition around addressing the behavioral health workforce shortage had fallen short of expectations. Messaging around the guiding principles was valuable in making progress.

LOGO

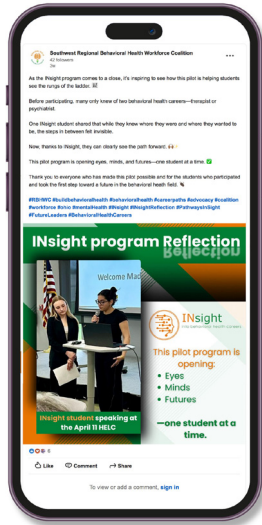
The two existing RBHWCs share the same logo in two different color schemes. The color scheme shown here is used for publishing statewide resources. New RBHWCs are welcome to borrow or adapt the example logo or create new ones that better reflect the region.



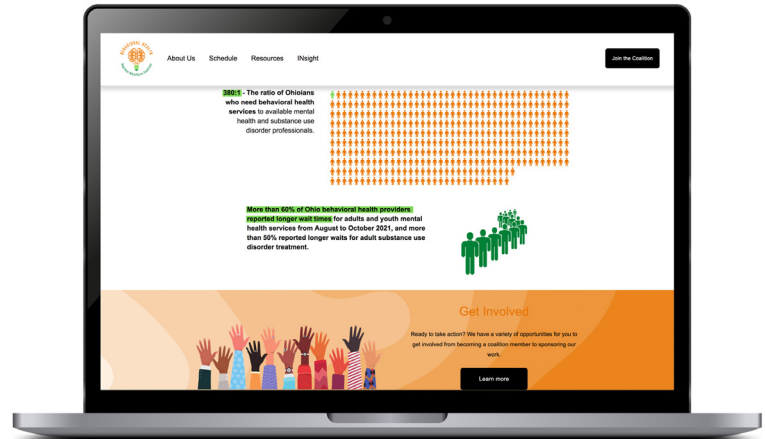
For more samples, refer to the [Resources](#) section on page 39.



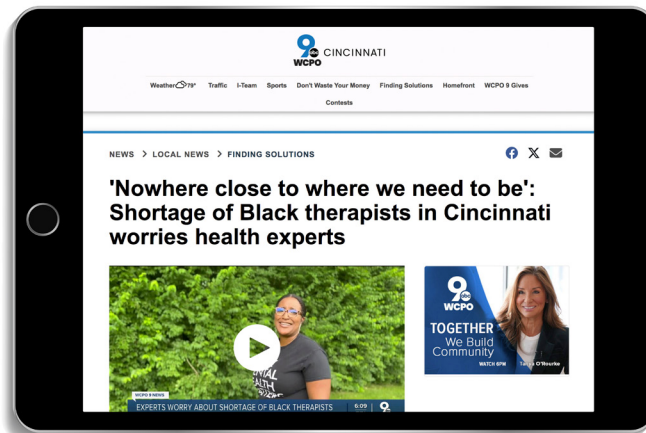
NEWSLETTER:
Above is an example of a SW RBHWC newsletter header using branded colors. Using the newsletter as a means of cross-committee communications was valuable in ensuring that all members were included in conversations and strategy development.



SOCIAL MEDIA
The RBHWC has profiles on Facebook and LinkedIn. Here is an example of a recent post about a pilot project in Southwest Ohio.



WEBSITE
Buildbehavioralhealth.org has pages for statewide information and a page for RBHWCs to share regional contact and key information.



RBHWC IN THE NEWS:
Building relationships with the media can make the coalition a valued resource to the community and be the outlet to build awareness around workforce challenges and needs.

Financial Management

Sustainable funding is essential for the long-term success and impact of a community coalition. For more information about securing funding, refer to this toolkit's section "[Fundraising Tips and Resources](#)" on page 15.

FISCAL AGENT

Strong financial management practices build trust and credibility. Coalitions should designate a fiscal agent, typically a nonprofit or public entity with experience managing grant funds, to receive and administer funds on behalf of the coalition. Transparent budgeting, regular financial reporting, and clear policies for decision-making about spending are key components of sound financial stewardship. Additionally, a fiscal agent can enhance the coalition's credibility and eligibility for future funding opportunities. As coalitions grow, developing a sustainability plan that includes diversified funding strategies will help ensure the coalition's continued ability to serve the community and achieve its mission.

The SW RBHWC, the oldest and most established RBHWC, began with no financial resources. Consistent with its guiding principles, the coalition committed to being community-driven rather than grant-driven. This intentional approach allowed the coalition to focus on building authentic partnerships, shared ownership, and a unified vision. Once local funders became aware of the coalition's clearly articulated mission, vision, guiding principles, and framework, offers of support and resources began to emerge. These early contributions were used to help build the coalition's infrastructure and support its initial activities. One of the co-chair's organizations served as the fiscal agent for the coalition's operating funds. Over time, the relationships and collaborative strategies developed through the coalition laid a strong foundation for securing project-based funding to implement priority initiatives. Project-specific grants were awarded to coalition members, not to the coalition.

Metrics and Impact Evaluation Tools

To build a sustainable, effective coalition and increase competitiveness for funding, tracking progress and demonstrating impact are essential. Clear, practical metrics help coalitions stay accountable, adjust strategy, and make a compelling case to funders, stakeholders, and the community.

Measuring the impact of coalition work on system change can be especially challenging because the outcomes are often complex and influenced by a range of external factors beyond the coalition's control. Despite these challenges, meaningful indicators that capture incremental progress can help illustrate the coalition's contributions to broader systemic improvements.

This section outlines recommended metrics and evaluation strategies for both process (the work) and impact (what's changing as a result).

Process Measures: Tracking Coalition Development & Function

These indicators measure whether the coalition is forming effectively and progressing toward structural sustainability. This section can be used as a checklist.

ORGANIZATIONAL DEVELOPMENT

- Secure funding to support first year
- Recruit Advisory Council Co-Chairs
- Identify sectors for involvement with the Advisory Council (e.g., providers, higher education, workforce boards, etc.)
- Recruit Advisory Council members representing key sectors
- Officially convene Advisory Council

COALITION GOVERNANCE & OPERATIONS

- Create and agree upon mission, vision, and goals
- Define committees
- Recruit committee chairs
- Recruit committee members
- Convene committees, determine meeting cadence/frequency, set priorities, and develop work product

DATA & STRATEGIC PLANNING

- Identify regional workforce and labor market data needs
- Establish data collection and review processes

STRATEGY OR INITIATIVE IMPLEMENTATION

- Establish strategy/initiative goals and measures
- Review periodically for improvements or changes

Qualitative data, such as interviews, case studies, and storytelling, can capture the nuanced, relational, and cultural changes that numbers alone may miss. Additionally, setting clear short- and medium-term goals allows coalitions to celebrate milestones and maintain momentum while continuing to pursue long-term systemic outcomes.

Impact Evaluation: Tracking Broader System Change

These outcomes reflect the longer-term influence of coalition work in the region. This section asks for specific numbers, rather than operating as a checklist.

AWARENESS & ENGAGEMENT

- _____ Number of new entities (e.g., employers, universities, policymakers) aware of behavioral health workforce challenges and engaged in addressing those challenges
- _____ Number of new or expanded cross-sector partnerships formed
- _____ Number of printed materials distributed
- _____ Number of views of digital materials

EDUCATIONAL PIPELINE SHIFTS

- _____ Changes in higher education programming, curriculum, and/or practice related to behavioral health due to RBHWC's work
- _____ Change in number of behavioral health providers offering internship and/or field placement opportunities for students

FUNDING & INVESTMENT

- _____ Amount of funding secured to support local behavioral health workforce projects and programs

WORKFORCE OUTCOMES

- _____ Growth in the number of individuals entering the behavioral health workforce, especially in high-need roles or underserved areas
- _____ Improvement in retention rates of the behavioral health workforce, in both community behavioral health and hospital settings

How To: Collecting & Using This Information

EVALUATION TOOLS

- Meeting agendas, minutes, and attendance records
- Pre- and post-event surveys (e.g., for Higher Education Learning Circles)
- Stakeholder interviews or focus groups
- Partner organization self-reporting (e.g., on internships or funding received)
- Public data (e.g., job postings, program enrollment, licensure data)

SUGGESTED CADENCE

- Quarterly check-ins on process metrics (coalition-building milestones)
- Annual evaluation of impact metrics

4 Resources

This repository contains templates and sample documents developed to support the work of the current RBHWCs. These resources can be customized or adapted to fit the needs of each new RBHWC, offering practical tools to streamline the work.

Coalition Recruitment Tools

1. RBHWC one-pager examples: [Example 1](#) [Example 2](#)
2. Informational Slides examples: [Example 1](#) [Example 2](#)
3. [Advisory Council Member Description](#)
4. [Committee Member Position Description](#)
5. [Committee Member Invitation Script](#)

Meeting Tools

6. [Meeting Agenda](#)
7. [Meeting Minutes](#)

Strategy Development and Measuring Tools

8. [Action Plan](#)
9. [Scorecard](#)
10. [Level Up 1-pager](#)

Communication Tools

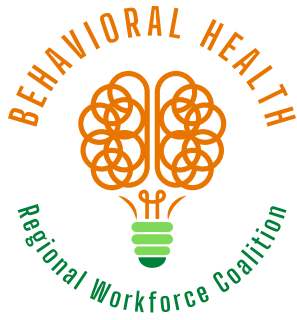
11. [Newsletter](#)
12. [Banner](#)
13. [Powerpoint Template](#)

Website

The RBHWCs have created a website with statewide resources and an informational page for use by the regional coalitions. New RBHWCs are encouraged to share information with accounts@mhaadvocacy.org for inclusion on the website. The website can be viewed at buildbehavioralhealth.org.

Interactive Tool

The Ohio Department of Mental Health & Addiction Services generously provided a grant, through which the Mental Health & Addiction Advocacy Coalition, the NE RBHWC, and the SW RBHWC collaboratively created an interactive career pathways tool called the Behavioral Health Education and Career Opportunities Navigator (BHEACON), designed to help individuals explore careers in behavioral health and navigate educational and training requirements. This resource provides career-specific details, pathways to advancement, and connections to available post-secondary education programs across the entire state of Ohio. BHEACON can be accessed at buildbehavioralhealth.org.



Northeast Office

4500 Euclid Avenue
Cleveland, OH, 44103

Southwest Office

8230 Montgomery Road, Suite 300
Cincinnati, OH 45236

buildbehavioralhealth.org

