# Customer Service Training Needs

GOAL: Ensure individuals with disabilities experience seamless customer service across WIOA programs.

Under the Workforce Innovation and Opportunity Act (WIOA), partner programs and entities that are jointly responsible for workforce and economic development, educational programs, and other human resource programs collaborate to create a seamless, customer-focused delivery system that integrates service delivery across all programs and enhances access to services. Under WIOA, One-Stop Centers and their partners provide access and opportunities to all job seekers, including individuals with barriers to employment, such as individuals with disabilities, to prepare for, obtain, retain, and advance in high-quality jobs and high-demand careers.

## Workforce Innovation Customer Service Self-Assessment

This self-assessment tool will assist states/regions to gain insight around employment for people with disabilities in order to better understand how their existing customer service delivery across all WIOA titles and core partners is working and what areas could benefit from being better aligned. It is designed to help your program maximize seamless service delivery for customers with disabilities.

The assessment has four objectives:

* Objective 1: Assess WIOA program staff to identify training needs
* Objective 2: Compile feedback from customer service surveys
* Objective 3: Compile feedback from focus groups
* Objective 4: Analyze results of objectives 1-3 to determine training plan

The self-assessment will help you to identify a baseline of current strengths, as well as areas where workforce staff would benefit from additional support. It will inform the development of a training plan to help build capacity to more effectively serve individuals with disabilities and others with barriers to employment.

### Who should complete?

Completing the self-assessment will provide insights into different perspectives of knowledge, understanding, and implementation of practices, which enhance the experience of customers, including individuals with disabilities. The assessment should be completed by state/regional WIOA partners. The questions ask for responses regarding knowledge around addressing the needs of individuals with barriers to employment, disability awareness and etiquette, service delivery and coordination, and disability inclusive training needs.

### How to Use

The instructions for completing the assessment should be customized to your state/ region and include a process for submission and deadline for completion. As you identify team members who will complete the assessment, provide everyone with a copy and ask that they complete the assessment individually. Encourage participation from a wide range of cross partner/agency representation at all levels. Consider making it a requirement and/or adding an incentive to encourage participation.

A leadership group of cross agency representation (for example, the core partner group that supports the development of the WIOA Unified or Combined state plan) should be formed, if you do not have one in place already. This core group, which should include leadership from all the WIOA titles and programs as well as staff dedicated to support professional development and training needs, can use the results of the self-assessment to collectively identify training topics and develop a disability inclusive training plan.

The results from the assessment may further provide an opportunity to identify ideas or recommendations to address targeted needs in a local or regional area(s) and/or lead to follow-up activities to gain better clarification of needs (for example, through focus groups).

| **TIP:** |
| --- |
| **One example we received from the Missouri team is that they plan to first conduct a training on WIOA’s Section 188 to ensure all partners are aware of the requirements under WIOA to serve individuals with disabilities. This will be followed by administering the self-assessment. Each state will need to customize the approach that best meets their needs.** |

**Requests for Accommodation and Accessible Materials/Platform:** The instrument / platform should be accessible and include a statement indicating what accommodations are being provided (e.g., accessible Word document, captioning for online/web-based platforms for screen readers, and/or other alternative formats, etc.). Be sure to identify and provide contact information for the individual(s) responsible for handling other requests for reasonable accommodation.

**Example of a Reasonable Accommodation Statement:** The Workforce Innovation Customer Service Self-Assessment tool is accessible to screen readers. If you use other assistive technology and/or would like additional support in completing the tool, please contact **[Enter Name and Contact Information.]**

## WIOA Customer Service Self-Assessment

### Sample Instructions

The purpose of this self-assessment is to gain insight around employment for people with disabilities in order to better understand how our existing customer service delivery across Workforce Innovation and Opportunity Act (WIOA) titles and core partners is working and what areas could benefit from being better aligned. It is intended as a baseline measurement of One-Stop Center staff and partner’s knowledge in providing services to individuals with disabilities. It will inform the development of a training plan to help build capacity to more effectively serve individuals with disabilities and others with barriers to employment.

All responses are anonymous and only aggregate data will be shared. As you complete the assessment, please use your own experience. It should take approximately fifteen (15) minutes to complete.

Thank you for your assistance in advance. Submit your completed needs tool by **[Enter Date]** to **[Enter Submission Instructions]**.

**Request for accommodation:** The self-assessment is accessible to screen readers. If you use other assistive technology and/or would like additional support in completing the tool, please contact **[Enter Name and Contact Information.]**

**Self-Assessment Tool Key**: Please indicate the level at which you would assess your expertise, familiarity, and training needs using the KEY provided below and marking “X” within the appropriate box(es).

1. **Little or No Knowledge**: I have very little, or no familiarity with this concept.
2. **Moderate Level of Knowledge:** I am familiar with this concept but have little to no experience in this area.
3. **Competent Level of Knowledge**: I understand this concept and have limited experience in this area.
4. **Highly Informed/Knowledgeable:** I have a deep understanding of this concept and have been successful at implementing it in the past.

Please check the box that best represents your role in the workforce system

* [ ]  Governor’s Workforce Board
* [ ]  State Workforce Development Board
	+ [ ]  Board Member
	+ [ ]  Board Leadership
* [ ]  Local Workforce Development Board
	+ [ ]  Board Member
	+ [ ]  Board Leadership
* [ ]  Workforce Management/One-Stop Operator
* [ ]  Equal Opportunity Officer
* [ ]  WIOA Policy Administrator
* [ ]  One-Stop Staff
	+ [ ]  Frontline Staff
	+ [ ]  Case Manager
	+ [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* [ ]  WIOA Title Core Programs
	+ [ ]  Title I: Adult, Dislocated Worker, and Youth formula programs
	+ [ ]  Title II: Adult Education and Literacy program
	+ [ ]  Title III: Wagner-Peyser Act employment services
	+ [ ]  Title IV: Rehabilitation Act Title I programs
* [ ]  Disability Partner – Name of Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* [ ]  Community based Partner – Name of Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### WIOA and Individuals with Barriers to Employment

Across all titles, WIOA focuses on serving “individuals with barriers to employment”, which includes individuals with disabilities, and seeks to ensure access to quality services for these populations. A number of provisions in WIOA emphasize and increase the requirements for the general workforce development system and the One-Stop Centers to meet the needs of job seekers with disabilities, increase their access to high-quality workforce services, and prepare them for competitive integrated employment leading to economic self-sufficiency.

The questions in this section ask you to indicate your level of understanding related to WIOA and services to individuals with barriers to employment.

1. Please indicate your familiarity with the following ways in which WIOA includes individuals with disabilities as part of overall strategic plan and vision.
* Co-enrollment refers to enrollment by an eligible individual in two or more of the six core programs administered under WIOA. Additionally, co-enrollment is defined under the specifications of the WIOA statewide and local performance report template, which states that participants who receive services under more than one core program are considered to be co-enrolled. Customers with disabilities and others with barriers to employment who are co-enrolled in multiple programs can obtain additional resources that lead to increases in enrollment, retention and earnings.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have been successful at implementing it in the past.
* **Streamlining service delivery** across multiple programs by requiring colocation, coordination, and integration of activities and information to make the system understandable and accessible for individuals, including people with disabilities and those with other barriers to employment, and businesses.
	+ [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
	+ [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
	 experience in this area.
	+ [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
	 in this area.
	+ [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
	 been successful at implementing it in the past.
1. Please indicate your familiarity in the following ways WIOA improves service delivery to individuals with disabilities.
* Promotes Physical and Programmatic Access - One-Stop Centers must be physically and programmatically accessible to all customers, including individuals with disabilities. In so doing, One-Stop Centers use principles of universal design and human-centered design. Examples include: flexibility in space usage; the use of pictorial, written, verbal and tactile modes to present information for customers with disabilities or limited English proficiency; providing clear lines of sight to information for seated or standing users; providing necessary accommodations; and providing adequate space for the use of assistive devices or personal assistants.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* Clarifies Competitive Integrated Employment, which is defined as jobs held by people with disabilities in typical workplace settings where the majority of persons employed are not persons with disabilities, where they earn at least minimum wage, and where they are paid directly by the employer.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* Increases the capacity of each agency.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.

### Disability Awareness and Etiquette

Understanding how to discuss disability with customers and employers, how to explore and implement reasonable accommodations, and how to work with partners across the spectrum of disabilities is key to ensuring individuals with disabilities experience seamless customer service across all WIOA programs. The provision of quality services and the development of collaborative relationships with job seekers who utilize One-Stop services are dependent upon One-Stop Center staff feeling confident about knowing what to do and say when communicating with job seekers with disabilities.

The questions in this section ask you to indicate your level of understanding related to disability awareness and etiquette strategies and practices.

1. For the following examples, please indicate your knowledge level in knowing about the support an individual with this disability might require to reach their employment goals.
* A program participant with a physical disability, who uses assistive devices or mobility aids such as a wheelchair, support cane or other aids to obtain mobility.
	+ [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
	+ [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
	 experience in this area.
	+ [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
	 in this area.
	+ [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
	 been successful at implementing it in the past.
* A program participant who is deaf or hard of hearing.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* A program participant with arthritis or other limitation that may have problems with lifting and bending.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* A program participant who is blind or has low vision.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* A program participant with a speech impairment who is difficult to understand.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* A program participant with an intellectual/developmental disability that may have limitations in intellectual functioning and in adaptive behavior.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* How many times per week do you interact with customers with disabilities?
* [ ]  0
* [ ]  1–3
* [ ]  More
* How many times per month do you interact with partners (via telephone, email, or in-person) to seek support and/or resources for workforce customers with disabilities (for example, Vocational Rehabilitation, Center for Independent Living, Division for the Blind and/or Deaf, Mental Health agency and/or other community based agencies/programs?
* [ ]  0
* [ ]  1–3
* [ ]  More
* Are you comfortable interacting with customers with disabilities?
* [ ]  Yes
* [ ]  No
* [ ]  Unsure

### Service Delivery and Coordination

WIOA places a strong emphasis on planning across multiple partner programs to ensure alignment in service delivery. One key goal is to develop effective partnerships across programs and community-based providers to provide individuals the employment, education, and training services they need.

The questions in this section ask you to indicate your level of understanding related to service delivery and coordination.

1. Please indicate your familiarity with the following collaborative activities for enhancing service delivery through the One-Stop Center.
* Opportunities for coordination and referrals for the Title 1 Adult and Dislocated Worker programs, as well as Title III Wagner Peyser Employment Services, to partner with and enhance service delivery to individuals with disabilities, including those served by Vocational Rehabilitation (Title IV).
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* Title I Youth program collaborating with the Vocational Rehabilitation (Title IV) program to coordinate the provision of services to youth with disabilities transitioning from school to post-school life, including post-secondary education and employment.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* A process for Title 1 Adult, Dislocated Worker and Youth and Title III Wagner Peyser to partner with Title IV Vocational Rehabilitation to ensure individuals with disabilities seeking employment and training services receive the services they need for employment.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.

WIOA Section 188 prohibits discrimination on the grounds of race, color, religion, sex, national origin, age, disability, or political affiliation or belief, among other bases. Section 188 also requires that reasonable accommodations be provided to qualified individuals with disabilities in certain circumstances.

1. Please indicate your familiarity with the following aspects of WIOA Section 188.
* **Universal Access, which provides the foundation of Section 188**. For example, customers are asked if they need assistance during intake or registration rather than only individuals perceived to have a disability. Information at the One-Stop Center is provided in multiple languages. Staff members are familiar with assistive technology devices available in their One-Stop Center
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* **Promoting an inclusive culture to a diversity of customers.** For example, partners who serve a wide spectrum of disabilities are regularly invited to the One-Stop Center for cross training opportunities. People with disabilities are represented across all workforce programs – training, On-the-Job Training, Youth, Entrepreneurial, etc. Staff regularly connect with Vocational Rehabilitation and/or other disability organizations to collaboratively assist workforce customers secure employment.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* **Requests for reasonable accommodation.** For example, One-Stop Center staff work with each customer to provide the preferred accommodation, and may also reach out to a partner, such as Vocational Rehabilitation, for accommodation ideas and support.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.

### Disability Inclusive Cross Partner Staff Training Needs

To help us develop a training plan to meet your needs around customer service and disability, please indicate your level of familiarly in the following areas.

* Knowledge of the process and protocols related to providing various accommodations to offer/implement customers with disabilities, including assistive technology, sign language interpreters, alternative assessments, or other no-tech/cost accommodations such as more time or support.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* Knowing which partners and/or resources can provide support and solutions to employment challenges for a customer with a disability.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* Ability to work with Vocational Rehabilitation and/or other disability or community-based partners to jointly serve a customer with disability.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* Ability to refer qualified customers with disabilities to employers for job opportunities and discuss any concerns employers may have about hiring/retaining employees with disabilities.
* [ ]  Little or No Knowledge: I have very little, or no familiarity with this concept.
* [ ]  Moderate Level of Knowledge: I am familiar with this concept but have little to no
 experience in this area.
* [ ]  Competent Level of Knowledge: I understand this concept and have limited experience
 in this area.
* [ ]  Highly Informed/Knowledgeable: I have a deep understanding of this concept and have
 been successful at implementing it in the past.
* From the list below, please select all the areas in which you need more information. It would be helpful to have more information / resources in serving customers who are/have:
* [ ]  Deaf or Hard of Hearing
* [ ]  Blind or Low Vision
* [ ]  Physical Disability
* [ ]  Traumatic Brain Injury
* [ ]  Learning Disability
* [ ]  Intellectual and other Developmental Disabilities
* [ ]  Mental/Behavioral Health
* [ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* From the list below, please select all the areas in which you need more information. It would be helpful to have more information / resources on serving customers with disabilities:
* [ ]  Process for providing accommodations
* [ ]  Disability Etiquette
* [ ]  Disability Rights
* [ ]  Disability Disclosure
* [ ]  Co-enrollment across multiple partners
* [ ]  Benefits Planning
* [ ]  Supported Employment/Customized Employment
* [ ]  Cultural Considerations
* From the list below, please select your preferences for delivery of training:
* [ ]  Remote/virtual (for example, webinar platform)
* [ ]  In-person
* [ ]  Online/web-based

What other information would you like to share?

The Employment and Training Administration would like to acknowledge the contributions and dedication provided by members of the Customer Service Team on the release of its cohort product titled, *Workforce Innovation Customer Service Self-Assessment Tool*. The Customer Service Team was comprised of six states who engaged in a cross-agency alliance made up of workforce programs that included WIOA core programs and other disability partners. The states represented were the following: Indiana, Iowa, Minnesota, Missouri, Nebraska, and Oklahoma.

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National Disability Institute (NDI) is exclusively dedicated to the economic empowerment of people with disabilities. Through a results-oriented program of public education, pioneering demonstrations, public policy research and development, and customized training and technical assistance activities, NDI is a nationally recognized leader in promoting the financial capability of youth and adults with disabilities.