

# Workforce Enablement for Community Health Programs

Building, certifying, and retaining CHWs, navigators, and care coordinators requires training infrastructure, credential tracking, and workforce reporting that funders can see.

## RHT PROGRAMS SUCCEED WHEN

- ✓ Services completed and documented
- ✓ Workforce capacity is measurable
- ✓ Training outputs tracked to completion
- ✓ Reporting is audit-ready from day one
- ✓ Referral workflows pair with workforce infrastructure

[wellcheck.us/workforce-development](https://wellcheck.us/workforce-development)

## THE CHALLENGE

### Why workforce infrastructure matters for funded programs



#### 'We'll hire people' isn't a plan

Funders want structured training, credentialing, career progression, and pipeline reporting — not just hiring intent.



#### CMS treats workforce as a deliverable

RHT programs, SBHC initiatives, and grants increasingly require structured workforce development as a core requirement.



#### Credentialing without tracking fails audits

Certificate issuance without renewal tracking and exportable records creates compliance gaps at audit time.



#### Training silos break multi-partner programs

Programs spanning counties or orgs need centralized tracking, standardized documentation, and shared dashboards.

## WHAT WELLCHECK PROVIDES

### Infrastructure for every stage of workforce development



#### Training Delivery

Multi-format delivery: video, SCORM, live sessions. Role-specific onboarding tracks and cohort management.



#### Credential Management

Digital certificate issuance, automated renewal tracking, skills passports, and completion exports for grant compliance.



#### Workforce Reporting

Completion rates by cohort and role. Funder- and audit-ready exports. Multi-partner centralized dashboards.



#### Multi-Partner Coordination

Centralized tracking across counties or orgs. Standardized documentation and shared dashboards with role-based access.