



# Community Health Worker Task Force Meeting



December 11, 2018

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Welcome and Introductions



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# Ground Rules



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# Welcoming Remarks

- Secretary John Wiesman  
(Washington State Department of Health)
- Washington State Health Care Authority  
(HCA) Director Sue Birch
- WA State Representative June Robinson  
(38<sup>th</sup> Legislative District)



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# Review of 2015-2016 CHW Task Force and Updates



# Community Health Worker Task Force: Recommendations



# CHW Definition

Include the following **definition** of Community Health Workers in relevant initiative and Innovation Plan work and corresponding documentation:



CHWs are trusted, front line health workers who are members of, or have a close relationship to, the community they serve. This trusting relationship enables the worker to serve as a liaison/link /intermediary between health/social services/education and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

# CHW Qualities and Attributes

Healthier Washington, the Accountable Communities of Health and partner agencies communicate and disseminate CHW qualities or attributes as foundational for Community Health Workers success including:

- Connected to Community
- Culturally sensitive, able to work with diverse communities
- Empathic, Caring, Compassionate and Humble
- Persistent, Creative and Resourceful
- Open-minded/Non-judgmental
- Honest, Respectful, Patient, Realistic
- Friendly, Engaging, Sociable
- Dependable, Responsible, Reliable



# CHW Roles and Skills



# CHW Roles

1. Cultural Mediation among Individuals, Communities, and Health and Social Service Systems
2. Culturally Appropriate Health Education and Information
3. Outreach
4. Care Coordination, Case Management, and System Navigation
5. Coaching and Social Support
6. Direct Service



# CHW Roles



7. Advocate for Individuals and Communities
8. Build Individual and Community Capacity
9. Implement Individual and Community Assessments
10. Participate in Evaluation and Research

# CHW Skills

1. Communication Skills
2. Interpersonal and Relationship Building Skills
3. Service Coordination and Navigation Skills
4. Education and Facilitation Skills
5. Capacity Building Skills
6. Advocacy Skills



# CHW Skills

7. Individual and Community Assessment Skills
8. Outreach skills
9. Professional Skills and Conduct
10. Experience and Knowledge Base
11. Direct Service skills
12. Evaluation and Research Skills



# CHW Training and Education Recommendations

Develop CHW core-training programs that:

- Minimize barriers to participation of members of vulnerable communities
- Teach transferable skills that align with CHW roles and responsibilities.
- Teach skills that cross multiple roles, rather than all the skills needed to perform all roles.
- Connect to other educational opportunities

# What to Teach CHWs

## Curriculum Core

- Technology skills
- Communication skills
- Self-Care/ Boundaries
- Building Capacity
- Cultural Competency
- Equality/Social Justice
- Outreach **and in-reach**
- Leadership and career development
- Data Collection and Community Assessment
- Behavioral Health, Physical Health and Oral Health modules and how they are interrelated (mind, body, spirit health)
- System Navigation (medical, social, **educational** and human service systems)
- Heart of Service (servicio de Corazon)



# How to Teach CHWs

Based on prior assessments, seasoned CHWs are involved as part of instructional team in a settings that is appropriate to the community. Develop mobile instructional teams in order to serve individuals across the state.



# How to Teach CHWs

- Multilingual and competency based; Materials readily available in multiple languages.
- Delivered in a method that meets learning styles & on-the-job contexts to include:
  - Job-shadowing
  - Online modules
  - Mentorship
- Style of teaching should be broad; supporting popular education modalities & philosophy
- Provide fellowship & mentorship opportunities post-training



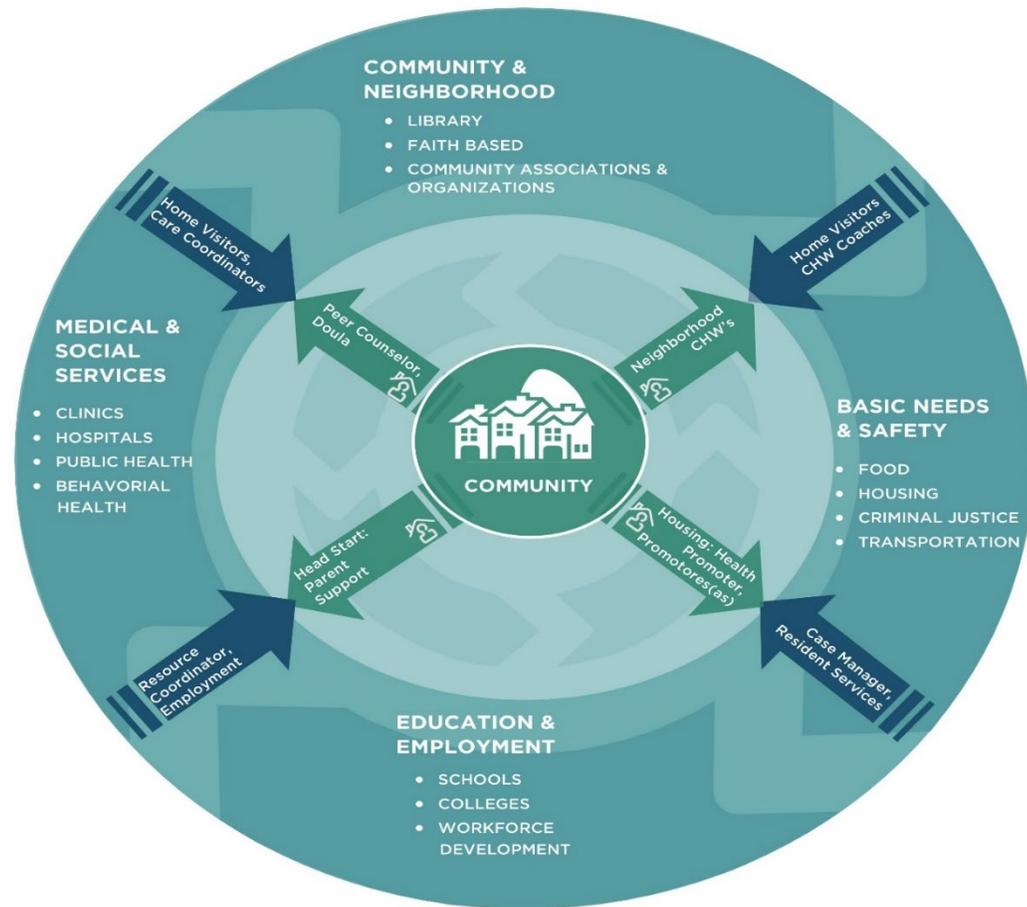
# Educate Organizations and Systems

Partner with community, agencies and employers of CHWs in identifying the health, social service and education system changes needed to optimize the best outcomes.



# Educate Organizations and Systems

Provide training to clinic and agency board members and management teams on the role and value of Community Health Workers, and the infrastructure needed to effectively support their work (e.g. how to integrate CHWs into care teams, supervision, supporting work in the community, etc.)



# Educate Organizations and Systems

## **Create a communication guide for providers:**

- Education “kits” explaining role and value of CHWs for non-CHWs in the workforce; including education on how to incorporate and compensate CHWs on their teams.
- Disseminate CHW Success stories.
- Create large forums for all stakeholders to see the positive outcomes of CHWs efforts.
- Design materials; clear talking points for non-CHWs to understand CHW role.

# Forward Progress

**Since the last time we met:** Existing Regional and statewide CHW Networks, Coalitions and Associations have grown and new networks have been established. Some of the Washington state networks include:

- Community Health Worker Coalition for Migrants and Refugees
- Community Health Worker Collaborative of Pierce County
- Eastern Washington Community Health Worker Network
- King County Promotores Network
- Southwest Community Health Advocates And Peers
- Washington State Community Health Workers/Promotores Network
- Whatcom CHW Network

# Forward Progress

**Since the last time we met:** CHW Networks have led or coordinated many successful trainings throughout the state such as:

Eastern WA CHW Network: Motivational Interviewing, Aging Your Way, and Mini-Conference “Connecting the Connectors”

Community Health Worker Coalition for Migrants and Refugees: Oral Health & Social Determinants of Health Workshops” (12 statewide workshops)

The DOH CHW Trainings have expanded:

Adding 13 new health modules, translating 5 modules into Spanish and hosting an annual CHW Conference

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# Rooting the Process in Health Equity



## What is health?



## RWJF County Health

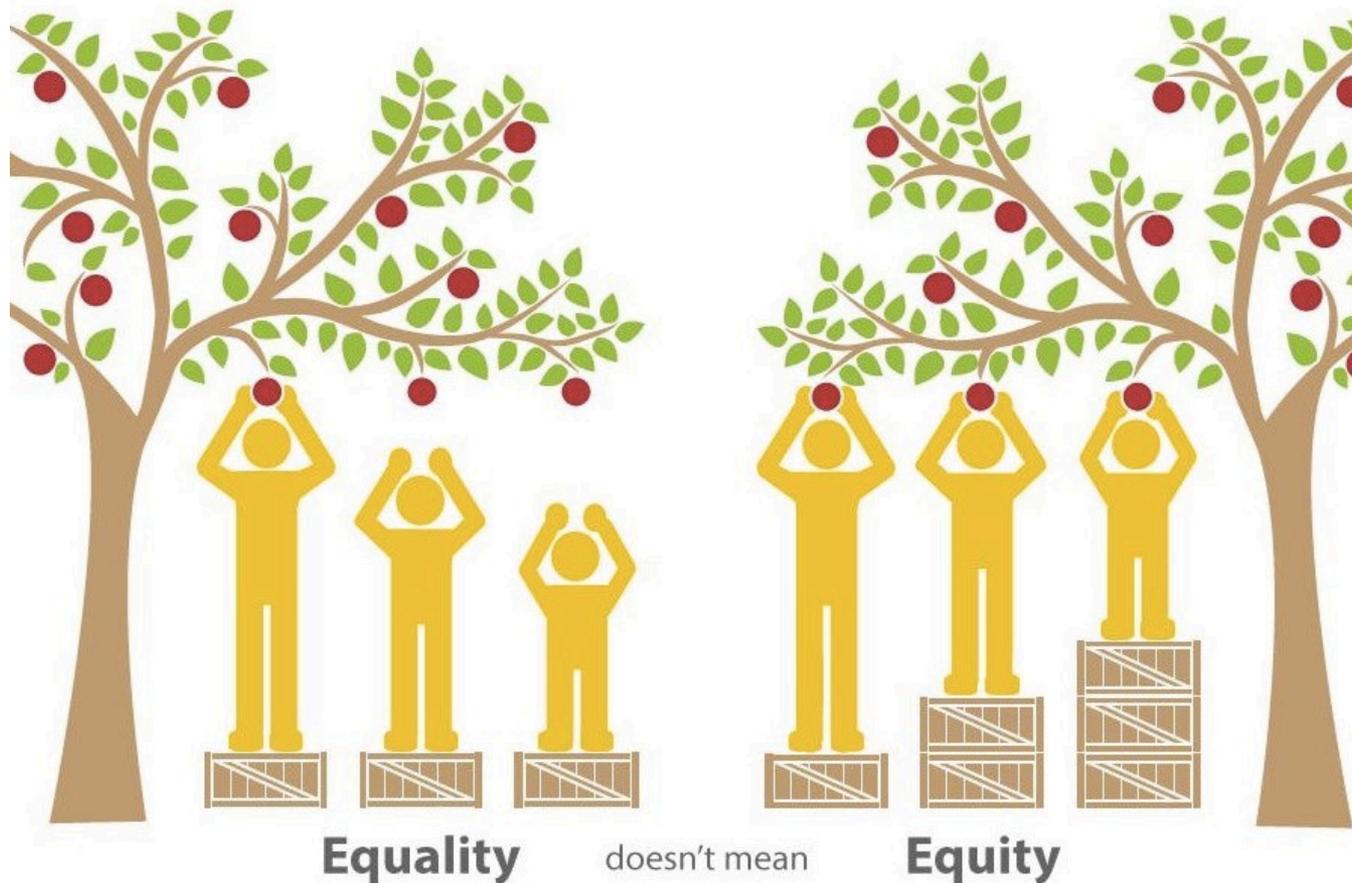
**County Health Rankings & Roadmaps**  
Building a Culture of Health, County by County



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**Why** is addressing equity so important?



## Who is most affected by health inequities in Washington?

**Activity:** Think about the people you work with, who is most impacted by health inequities?

Quickly go around the table and have each person share one group they work with who are deeply impacted by health inequities.

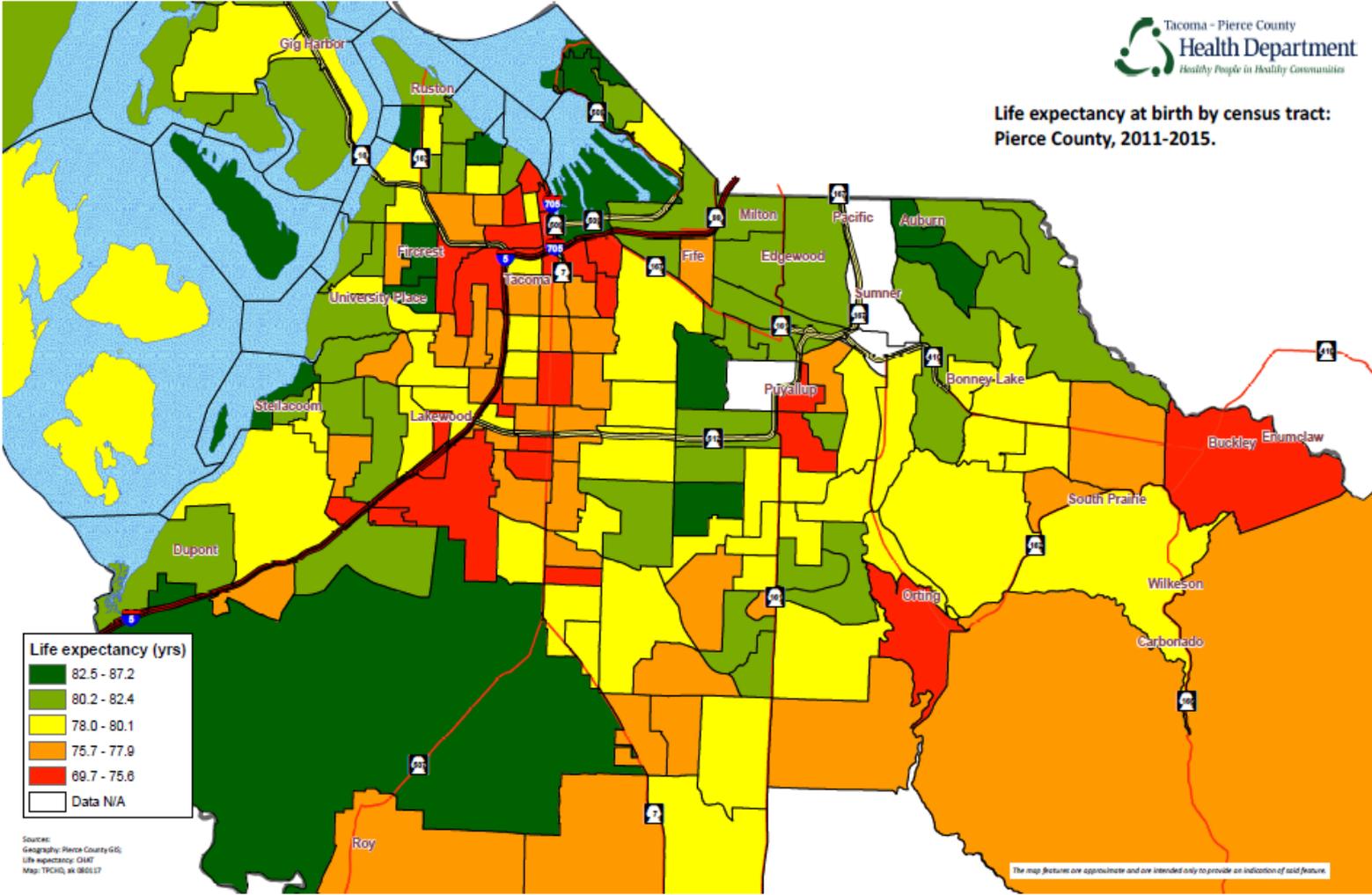


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Life expectancy at birth by census tract:  
Pierce County, 2011-2015.

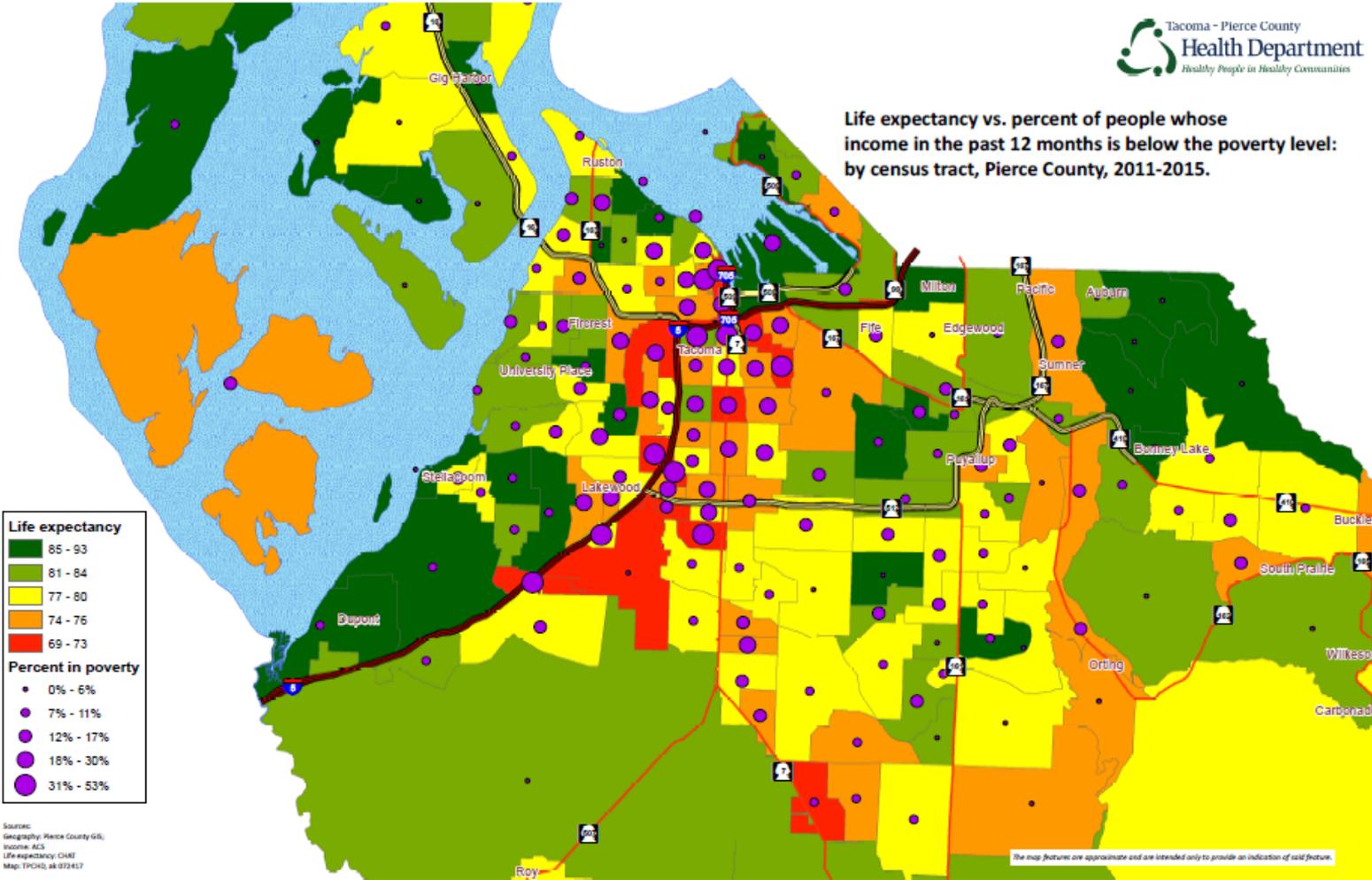


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Life expectancy vs. percent of people whose income in the past 12 months is below the poverty level: by census tract, Pierce County, 2011-2015.



Source: Geography: Pierce County GIS; Income: ACS; Life expectancy: CHSE; Map: TPCHD, 08/02/17

The map features are approximate and are intended only to provide an indication of said feature.

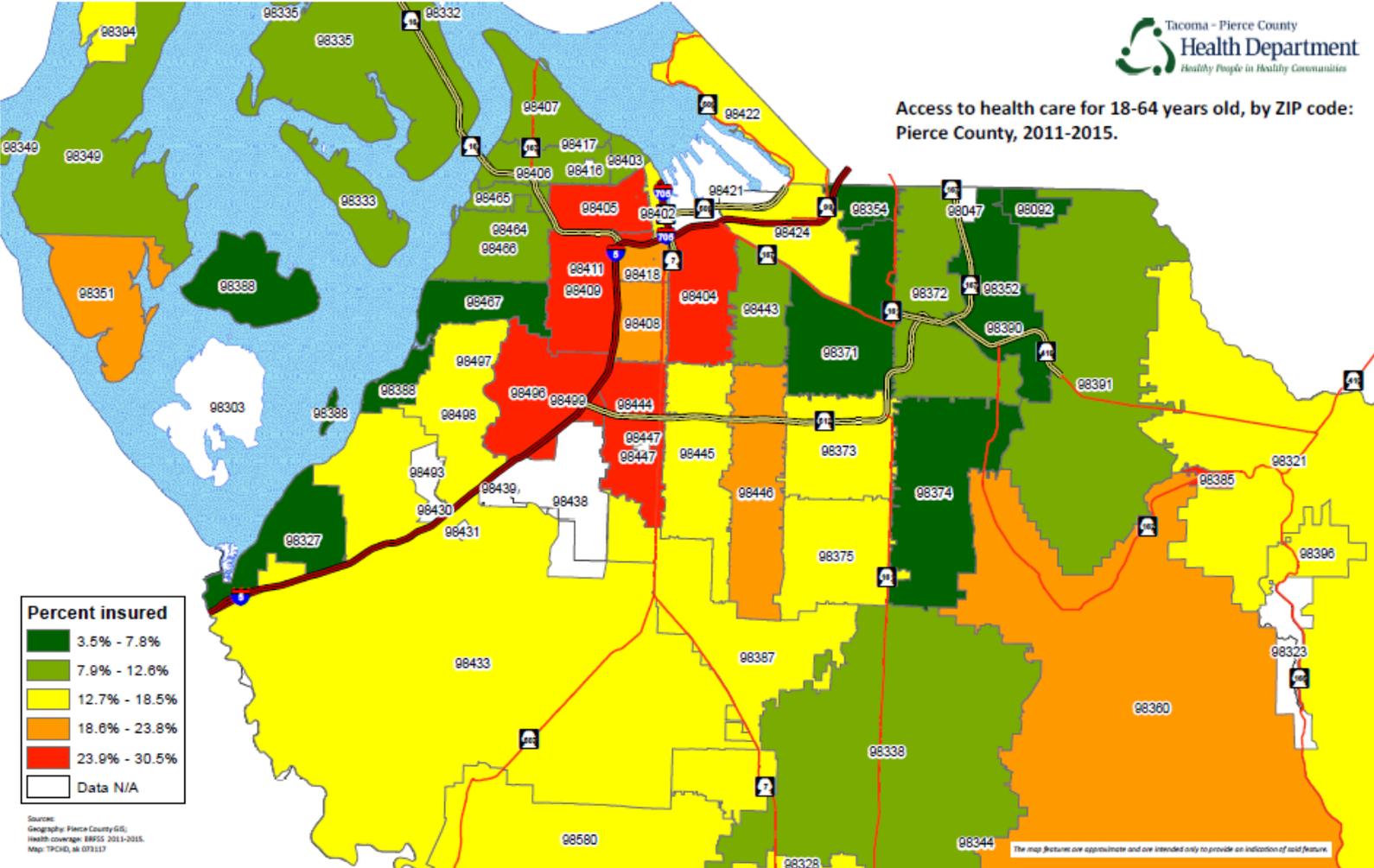


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Access to health care for 18-64 years old, by ZIP code:  
Pierce County, 2011-2015.



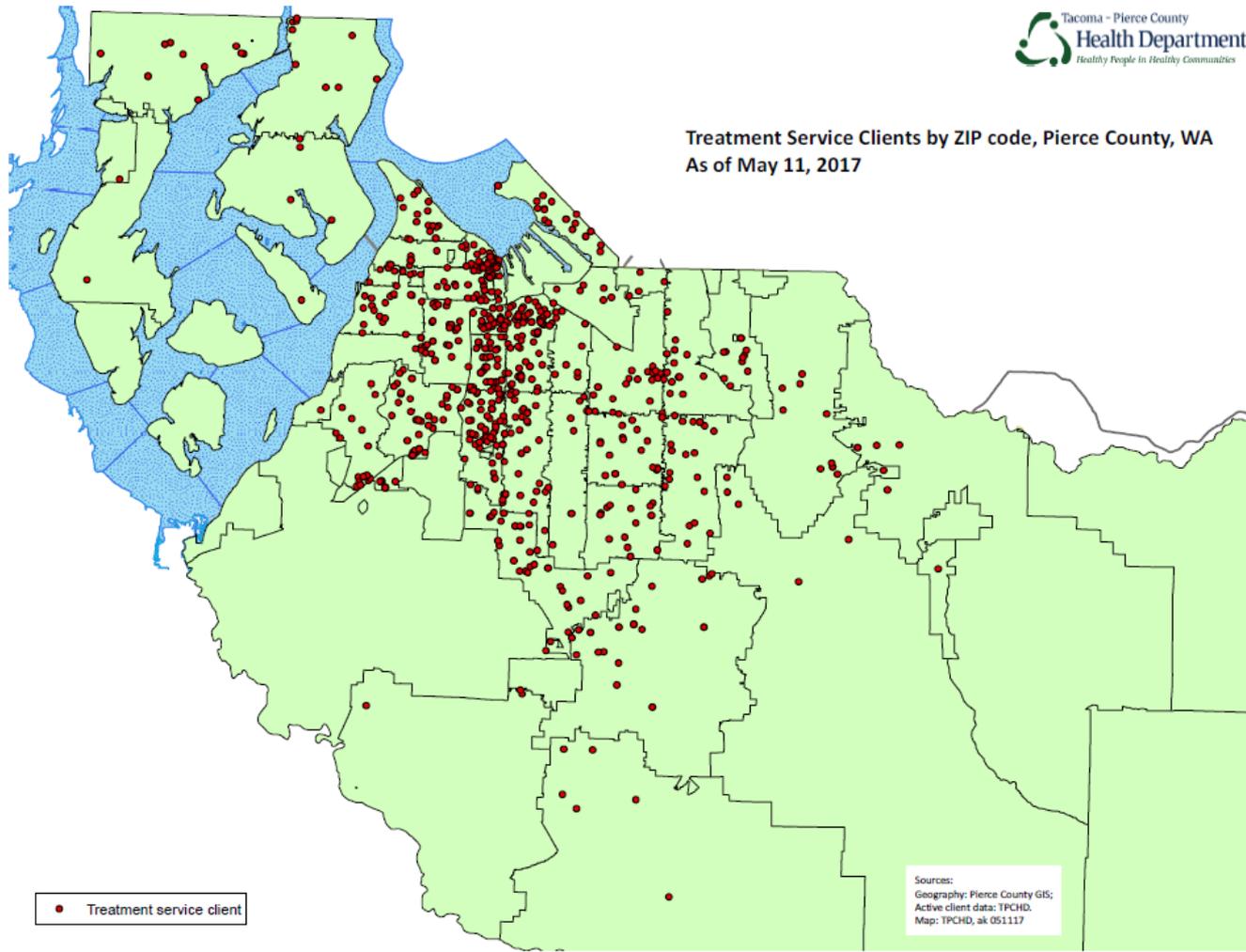


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Treatment Service Clients by ZIP code, Pierce County, WA  
As of May 11, 2017



● Treatment service client

Sources:  
Geography: Pierce County GIS;  
Active client data: TPCHD;  
Map: TPCHD, ak 051117

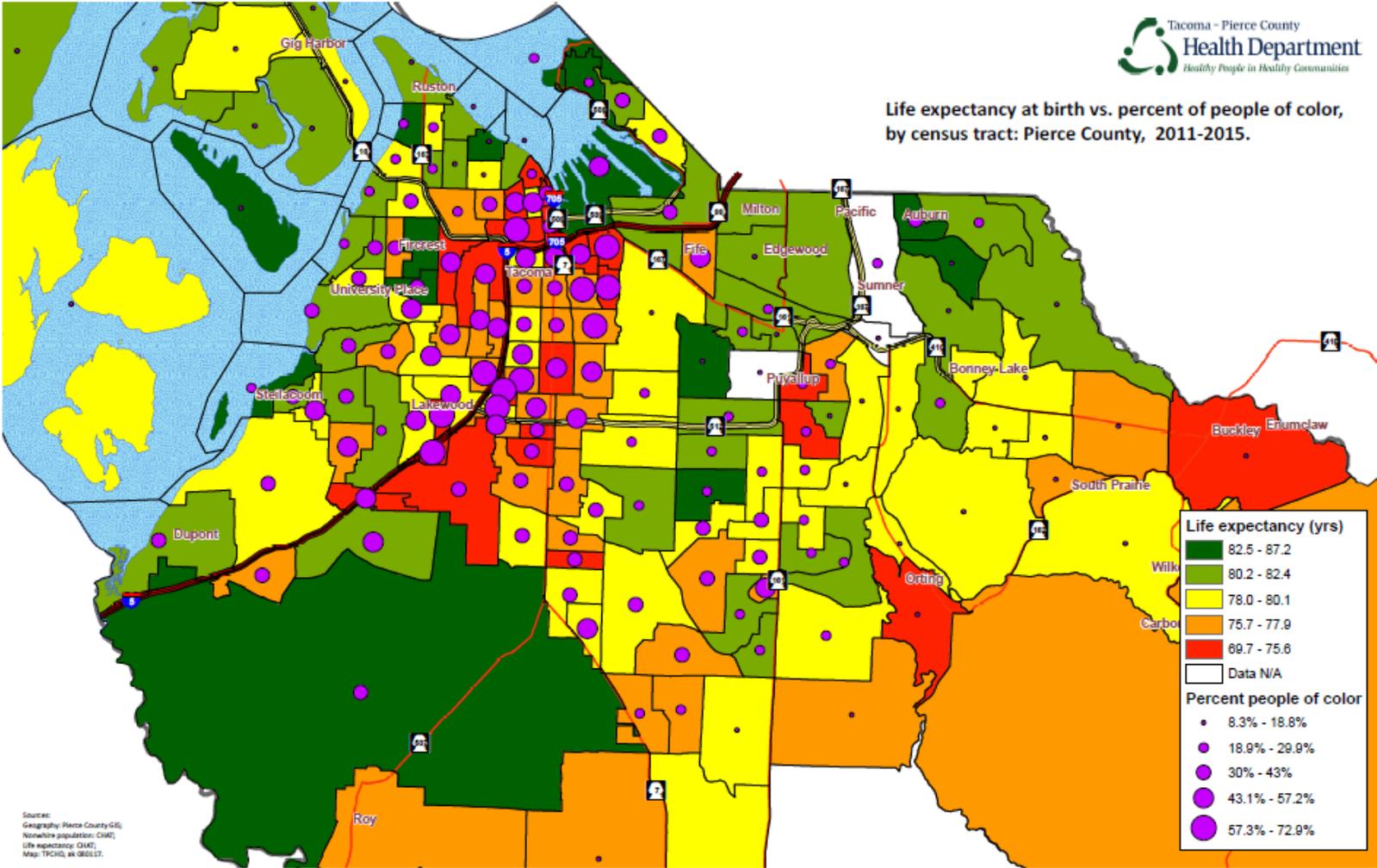


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Life expectancy at birth vs. percent of people of color, by census tract: Pierce County, 2011-2015.

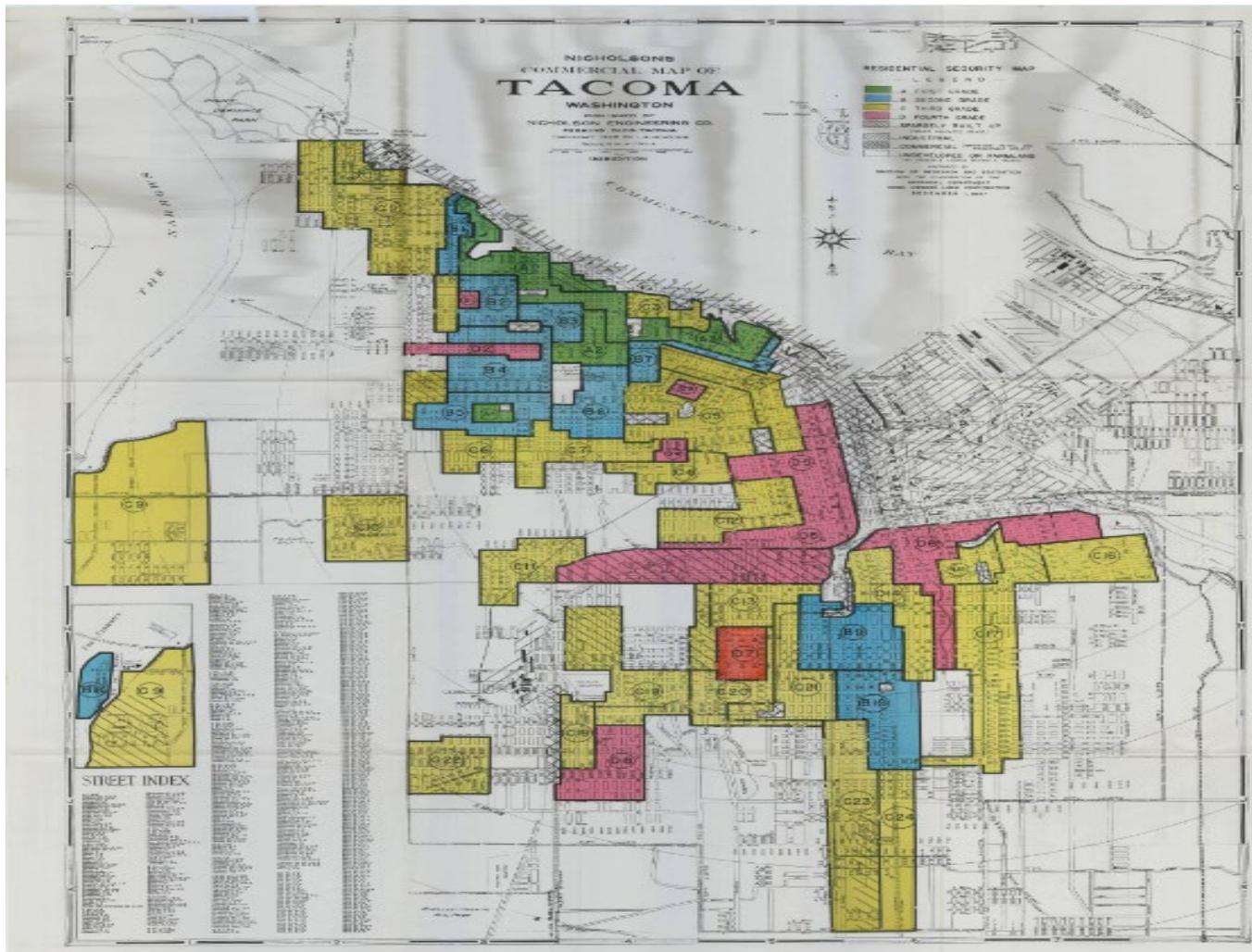


Source:  
Geography: Pierce County GIS  
Nonwhite population: CMAQ  
Life expectancy: CIAK  
Map: TPCGIS, ak GISLIT



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# How We Make Decisions





## Vision, Goal, and Objectives

Vision: TBD

Goal (Short): To develop education and training guidelines (for community health worker in Washington state).

Goal (Long): To develop education and training guidelines, building on the work of the past task force, that provide employers the specificity needed to understand the skills they are hiring for and provides the flexibility and nimbleness core to the CHWs ability to provide community rooted culturally specific support. This is particularly important because CHWs work in multiple sectors, those that focus on individual patient care, to those concerned with population health, to those focused on community development.



## CHW Task Force Objectives

1. Develop guidelines to ensure an inclusive, equitable process for sharing information and making decisions.
2. Build relationship among task force members with an emphasis on cross-stakeholder connections.
3. Develop actionable guidelines for implementing training and education recommendations including:
  - Essential components of a what should be taught in a core training;
  - How training and education should be provided;
  - Key organizational investments to train, integrate and retain CHWs (such as organizational infrastructure, CHW coaching, and administrative support).



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Next Steps



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Thank You!

