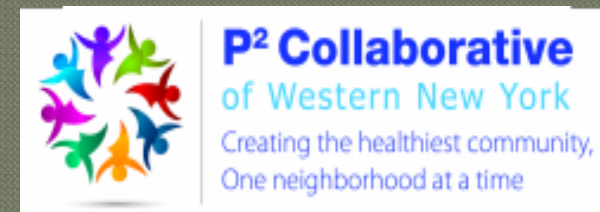


Community Health Worker Employer and Key Stakeholder Meeting

December 6, 2016- Larkin Building



Buffalo and Erie County
Workforce Investment Board, Inc.



We Want to Know...

What are you hoping to learn, share, and/or get out of today's meeting?

OBJECTIVES FOR THIS SESSION

- Understand who and what CHWs are; and also what they are not
- Learn about the current CHW landscape in Western NY (Where are CHWs working? What are they doing?)
- Gain knowledge of CHW training standards, related to CHW scope of practice, knowledge, and skills
- Obtain information and give feedback about the CHW certificate program and other training through CHWNB/Canisius College, and a CHW workforce development initiative with WIB

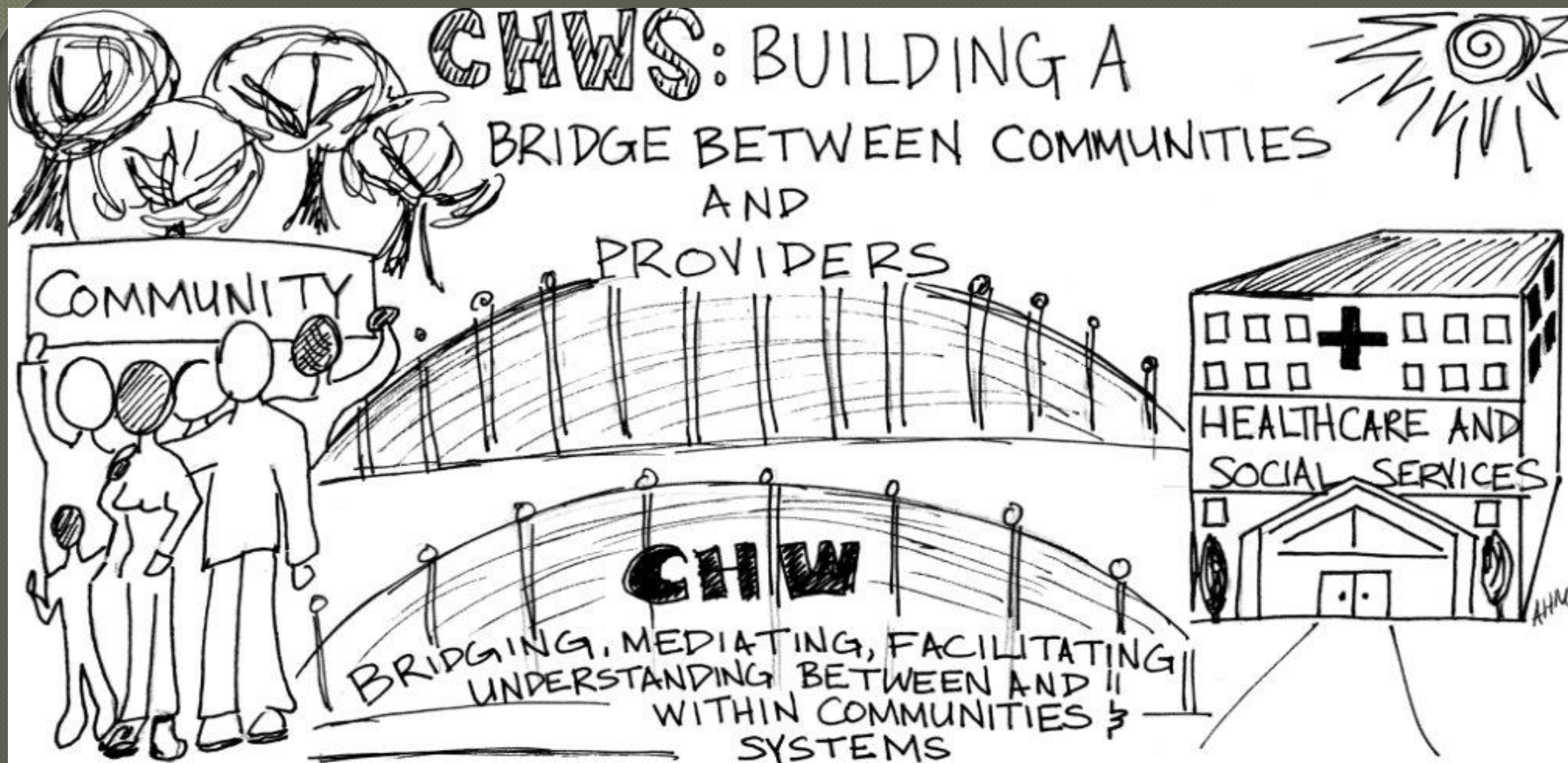
WHO We Are and WHAT We Do



Who are Community Health Workers (CHWs)?

“A frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This **trusting** relationship enables the CHW to serve as a liaison, link, and/or intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. A CHW also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy.” (American Public Health Association)

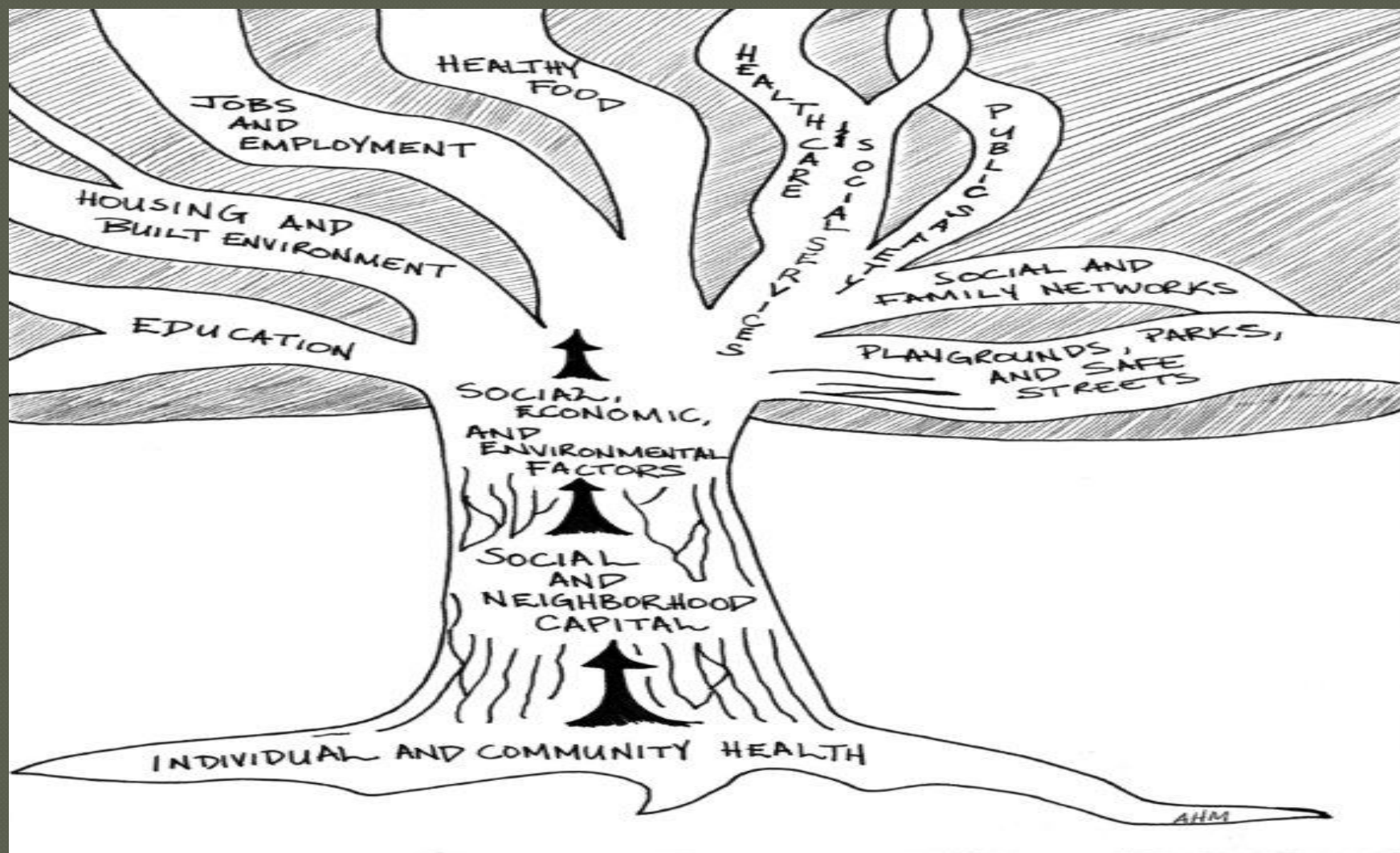
CHWS: BUILDING A BRIDGE BETWEEN COMMUNITIES AND PROVIDERS



- BUILDING INDIVIDUAL AND COMMUNITY CAPACITY
- ADVOCATING FOR INDIVIDUAL AND COMMUNITY NEEDS
- BUILDING SELF SUFFICIENCY

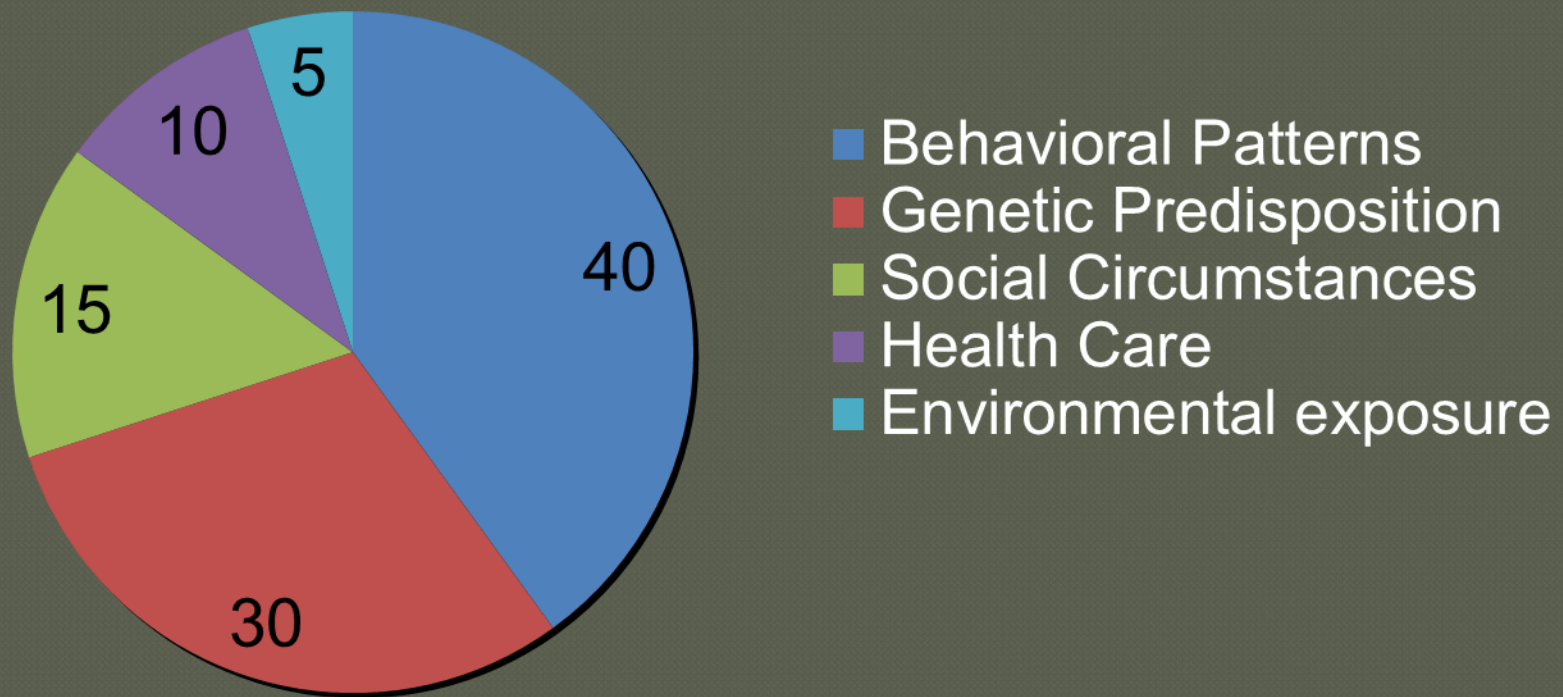
- PROVIDE HEALTH EDUCATION AND DIRECT SERVICE ie HEALTH SCREENING
- HELP PATIENTS TO NAVIGATE SYSTEMS AND MANAGE THEIR CONDITION
- COORDINATING CARE

Social Determinants of Health



Determinants of Health and Impact on Premature Death

Proportional Contribution



Adapted from: McGinnis JM, Williams-Russo P, Knickman JR

"The case for more active policy attention to health promotion" - Health Affairs

(Millwood) 2002;21(2):78-93.

CHW “core competencies”

- Communication skills
- Informing/instructing skills
- Advocacy skills
- Service coordination and referral skills
- Knowledge of community resources
- Knowledge of technical aspects related to navigating healthcare, education and social services systems
- Qualities of being of and from the community, and trusted by the community
- Qualities of kindness, compassion, commitment to equity and justice



National CHW Core Consensus (C3)

Project recommends that CHW's...

- **Come from the communities they serve**
- **Be recognized as members of a unique profession with a unique scope of work**
- **Be meaningfully involved in efforts to create policy for their field**
- **Be trained and supported to play a full range of roles and work across all levels of the socioecological model**
- **Be recognized and rewarded for their experiential knowledge**

CHW scope of practice and core competencies

1998: National Community Health Advisor Study (NCHAS) was released- many in the US have relied on the NCHAS as a guide to help identify CHW roles or scope of practice (SOP) and CHW core competencies (skills & qualities).

2008: Community Health Worker National Education Collaborative (CHW-NEC) developed the guidebook “*Key considerations for opening doors: developing community health worker education programs*”, building on the NCHAS study.

Present Day: Community Health Worker Core Consensus (C3) Project reviewed and updated the CHW SPO (coordinated) University of Texas Institute for Health Policy Project on CHW Policy and Practice with funding from the Amgen Foundation and administered by the National Area Health Education Center Organization in collaboration with CHW Section of the American Public Health Association. ©CHWNB, 2015

***CHW's do NOT provide clinical care,
generally do NOT hold another
professional license, and expertise is
based on shared culture and life
experience with people served.***

CHWNB Training Program History

- **Began in 2011, and has trained over 500 CHWs and other frontline workers in “core competencies” and over 1,000 others in additional topics (see folders for curriculum).**
- **In line with national standards for CHW training best practices, and infused with local context.**
- **Based in a “popular education” pedagogy (accessible to those from diverse backgrounds who may have limited formal education, limited English proficiency, etc.)**
- **In addition to training, offers ongoing professional development and networking for CHW’s and others, conducts research and writes papers on CHW’s and community health topics, and is involved in policy and advocacy issues.**

Basics of CHWNB/Canisius CHW Training

- **28 hours of course work for basic core competencies- additional topics available upon request**
- **2016 fees are at \$500/person (this does not include curriculum development, technical assistance, travel costs, additional costs of supplies and materials, etc).**
- **While there is NO certification or credentailing for CHW's in NYS currently, CEU's/CME's will be made available and our program is aligned with standards in states that DO have certification.**
- **Additional topics/courses are available upon request (i.e. cultural competency, popular education, asset-based community development, community-based participatory research, etc.**

Emphasis on “core competencies” with support for specialty training tracks

```
graph TD; A[Core Competency Training] --- B[Chronic Disease Management]; A --- C[Prenatal and Maternal Health]; A --- D[Violence Prevention]; A --- E[Healthy Homes]; A --- F[Education and Schools];
```

Core Competency Training

Chronic
Disease
Management

Prenatal and
Maternal
Health

Violence
Prevention

Healthy
Homes

Education
and
Schools

CHW Training and Impact in Action...



Tasha Moore, who operates the Matt Urban Hope Center “Urban Diner” and does street outreach with women who are homeless and/or have substance abuse and mental health challenges.

CHW Research, Data, and Best Practices

TRAINING

- The CHW Network of Buffalo has evaluated training since its inception (2011). Training evaluation methodology and results have been presented at several annual American Public Health Association meetings.
- CHWs report that “core competencies” training is highly effective (average ranking across content areas is about 4.5 out of 5). All feedback is reviewed and informs the content and training delivery methods going forward.

CHW Data:

Post session evaluations

Community Health Worker Network of Buffalo Training Modules with Associated Mean Participant Rating (from a sample ranging 2011-2015)

CHW Training Module	Mean Rank (Scale of 1-5; 5 is the highest)
Introductions and Setting Expectations	4.45 (n=67)
Health, Public Health and Health Care	4.53 (n=67)
Privilege and Power	4.57 (n=63)
Bias and Value for All People	4.35 (n=62)
Strengths-Based Approach	4.63 (n=63)
History of CHWs	4.25 (n=67)
Ethics of Care	4.41 (n=59)
Popular Education/ Learning Theories	4.25 (n=60)
Safety and Self-Care	4.48 (n=33)
Stages of Behavior Change	4.28 (n=59)
History of Buffalo	4.23 (n=48)
Asset-Based Community Development	4.48 (n=61)
Closure and Lessons Learned	4.63 (n=59)

CHW Research, Data, and Best Practices

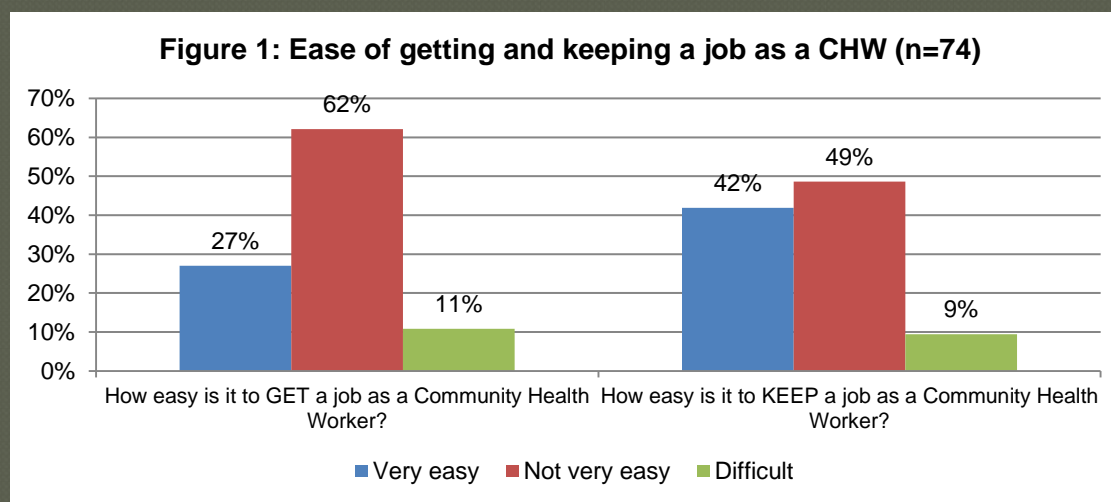
CHW WORKFORCE ISSUES

- In 2008/2009, the CHW Network of Buffalo and Health Foundation for Western and Central New York conducted a CHW workforce survey and found that few organizations were utilizing CHWs, or even had an understanding of what a CHW was. There were many individuals that did indeed fit the definition of a CHW, only about 15% of respondents were identifying as a CHW.
- A similar survey in September, 2016 showed that 25% of respondents actually have the job title of CHW. There is still, however, variation in the general understanding of what CHWs are and what they are not. With the increase in emphasis on frontline and mid-level workers in the health care field, often CHWs are framed ONLY as liaisons or navigators between health care facilities and communities.

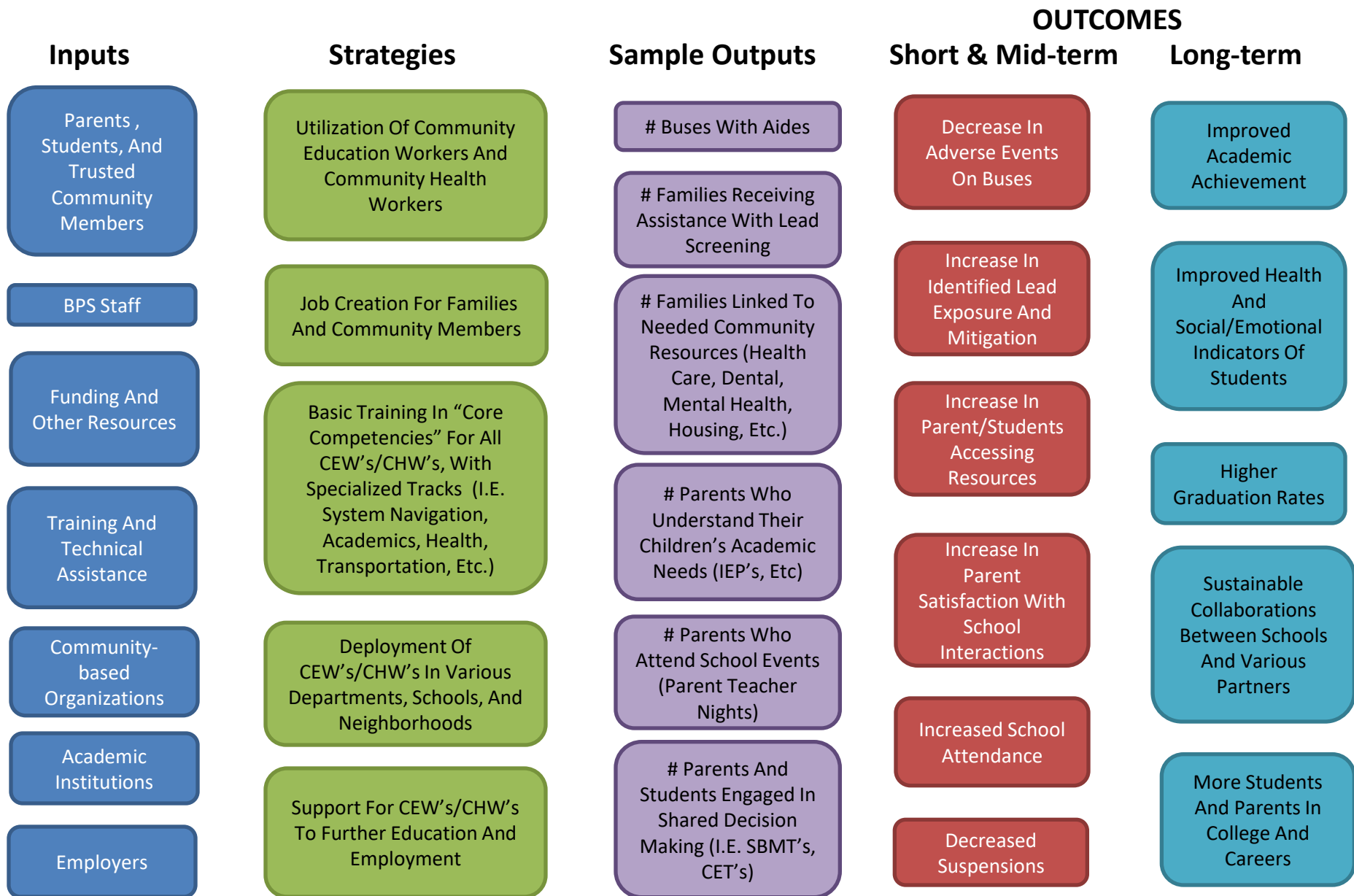
CHW Research, Data, and Best Practices

CHW WORKFORCE ISSUES

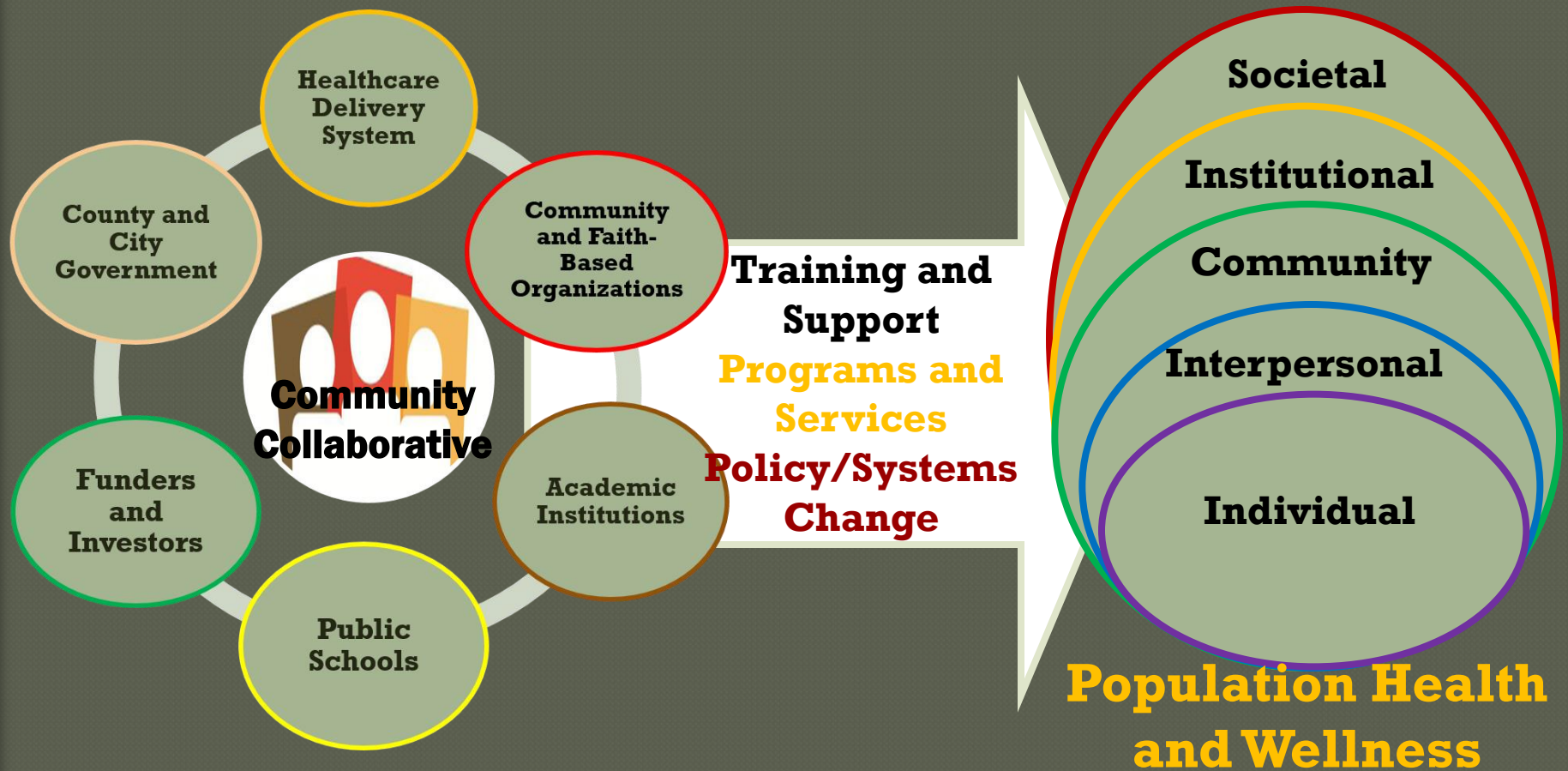
- The 2016 survey also cited relatively low wages and job instability for CHWs, as reported by both CHWs and employers.
- Other commonly cited issues included lack of opportunities for advancement, lack of understanding regarding CHW scope of practice/roles, and poor coordination of the CHW workforce across systems and sectors.



DRAFT Logic Model of Employing a Community Education Worker/Community Health Worker Strategy in the Buffalo Public Schools



Working Together to Create a Healthy Community



CHW Employer Best Practices

Joyelle Tedeschi (Executive Director) and Dan Auflick (Supervisor)

Matt Urban Hope Center

Karen Keyes, Coordinator of Medicaid Service Coordination

Aspire of WNY

*Will Keresztes, Ed.D, Chief of Intergovernmental Affairs, Planning, and
Community Engagement, Buffalo Public Schools*

Tara Monaco, Director of Outreach

Evergreen Health Services

Brett Lawton, Chief Operating Officer

Jericho Road Community Health Center

Rahwa Ghirmatzion, Deputy Director,

PUSH Buffalo

Buffalo and Erie County

Workforce Investment Board (WIB)

Health Professions Opportunities Grant (HPOG)

WIB is a legislated entity under the act and bears the responsibility for carrying out the provisions of WIOA (Workforce Investment Opportunity Act), coordinating regional partners in order to deliver comprehensive services to workers, job seekers and employers.

HPOG is an initiative of the U.S. Department of Health and Human Services that offers training for health care occupations that are in high demand. Target participants are those under 200% of federal poverty threshold, and support is offered throughout the training and as participants transition to work and off of public assistance (i.e. travel allowances, childcare, case management and other types of assistance depending on the individual situation).

WIB/HPOG/CHWNB/Canisius Pilot CHW Workforce Initiatives

Requirements for CHWs :

- **Undergo initial screening and assessment**
- **Meet income eligibility**
- **Commit to full participation in program (28 hour initial training, monthly professional development sessions)**
- **Meet job/employer requirements**

Requirements of CHW Employers:

- **Hire, manage, and supervise CHWs (with job title of “CHW”, adhering to CHW definition and scope of practice, and providing a living wage)**
- **Support CHWs to obtain additional professional development and case management/support for 12 months**
- **Provide basic reporting and attend a biannual CHW employer session**

Pilot CHW Workforce Development Project- Employer Feedback

1. Split into groups of 8

2. On flip chart, create 3 sections:

- a) *What about this sounds good/workable?*
- b) *What seems challenging/what supports you would need as an employer to participate?*
- c) *Additional questions/specific needs*

3. Be prepared to report back a key takeaway or next step as agreed upon by your group

Thank you for attending!

CONTACT:

Jessica Bauer Walker
Executive Director, CHW Network of Buffalo
716-548-6727
jessica@chwbuffalo.org
www.chwbuffalo.org
www.facebook.com/chwbuffalo

Mark Cosgrove
Senior Planner/HPOG Project Director, Buffalo and Erie County WIB
716-504-1480
cosgrove@becwib.org
<http://www.becwib.org/>