What are Core Competencies that describe the Community Health Worker practice and how do we help develop them!

E. Lee Rosenthal

&

Anne Willaert

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Diverse by definition…

The many CHW names reflect this **DIVERSITY**:

- Community Health Worker
- Peer Educator
- Outreach Worker
- Community Health Representative
- Promotor(a) de Salud

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Change is constant
APHA Support for CHW Field Has Been Key

- APHA support of CHWs has provided a needed opportunity to grow and strengthen the CHW field
- Community Health Planning And Policy Development Section has long been a friend to CHWs and to the CHW SPIG
The National Community Health Advisor Study, 1994-1998

- Brought together CHW leaders from the throughout the US in a 36 member majority-CHW Advisory Council.
- Based on the Study’s findings, they made recommendations for the field.
The NCHAS identified core common CHWs roles and qualities:

- 1) Cultural Mediation
- 2) Health Education
- 3) Assuring Access to Care
- 4) Informal Counseling and Social Support
- 5) Individual and Community Advocacy
- 6) Provision of Direct Service
- 7) Individual and Community Capacity Building

*And Community Connection*
The CHW field is growing and changing*
(*numbers presented here are estimates)
Early examples of centralized CHW training:

In-service 3 week training for Community Health Representatives (CHRs); coordinated by Indian Health Service; established 1968

Colleges begin to explore their role: Community Health Works-San Francisco, 1990s

Centers: Community Health Education Center of Boston, established 1993
College-supported CHW education takes many forms

CHW National Education Collaborative 2004-2008
CHW-NEC Key Considerations

- Majority-CHW Advisory Council
  Chaired by: D. Fox & Y. Lacey

- The Council identified “key considerations”
  - CHW Leadership
  - Safeguarding access to the field for new and existing CHWs

PROMISING PRACTICE AREAS

- A. WORKFORCE ASSESSMENT & MARKET DEVELOPMENT
- B. EDUCATIONAL PROGRAM DEVELOPMENT & INSTITUTIONAL CLIMATE
- C. CURRICULUM DESIGN
- D. INSTRUCTIONAL APPROACHES
- E. RECRUITING & RETAINING STUDENTS
- F. PROGRAM EVALUATION
- G. PROGRAM SUSTAINABILITY

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CHW credentialing is gaining momentum

Since 2000 several states have explored and some have established CHW credentials:

- **Texas:** established the first US CHW certification and training program; early work on credential lacked significant CHW involvement; a state-wide Advisory Group including CHWs has now been established
- **Ohio:** the state Board of Nursing regulates the CHW certification process…

- **What is next?:** More states?
- **Certifying CHW programs? Supervisors?**
- **Where/Who is next?**

**CHW leadership key!**
APHA Committee on CHW Education & Capacity Building

- Time to transition CHW education leadership from the CHW-NEC
- CHW SPIG will now take the lead through a new CHW SPIG committee
- Next?
  American Association of CHWs? Other?
CHWs come from the communities they serve and bridge the gap between cultures and the health care system.

What is a Community Health Worker?

CHWs come from the communities they serve and bridge the gap between cultures and the health care system.
Competencies

• Observable skills, behaviors, or knowledge that can be demonstrated by the learner and are derived from explicit conceptualization of the desired outcomes of learning (Hall & Jones, 1976).
“How are we supposed to teach them professional skills when they come to us not even knowing basic curses and elementary hexes?”
Levels of Learning

CROWN ZONE: Learning seems painful, difficult, and uncontrollable.

FLOW ZONE: Learning seems challenging, but manageable.

DRONE ZONE: Learning seems boring, slow, and dull.

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Engage not Engorge

- Mr. Osborne, may I be excused? My brain is full.”
Assessment

• Assessment requires attention to outcome but also and equally to the experiences that lead to those outcomes.

• Types of Assessment Methods
  – Portfolios
  – Capstones
  – Performance Assessment/Authentic Assessment
  – Classroom Assessment
  – Student Self-Assessment
Performance-Based Learning (PBL)

• Instruction that is delivered and assessed against specific competencies (those demonstrating knowledge and/or skills)

• Post Secondary Training vs. Skills based Training
Community Health Worker Program Partners

- Minnesota State Colleges and Universities
- Community Health Workers
- Blue Cross Blue Shield of Minnesota Foundation
- Local Initiative Funding Partners – Robert Wood Johnson Foundation
- Otto Bremer Foundation
- Minneapolis Foundation
- Delta Dental Foundation of Minnesota
- Minnesota Department of Health
- UCare Minnesota
- HealthPartners
- Fairview Health Services
- Region Nine Development Commission
- Minnesota Hospital Association
- City of Minneapolis, Twin Cities Health Start Program
- Open Door Health Center
- Medica

- Minnesota Department of Human Services
- Minnesota International Health Volunteers
- Multicultural Healthcare Alliance
- Neighborhood Health Care Network
- Summit Academy OIC – Opportunities Industrialization Center
- Minnesota Board of Nursing
- Minnesota Nurses Association
- Southern Minnesota Area Health Education Center (AHEC)
- Portico Healthnet
- NorthPoint Health & Wellness Center, Inc.
- Intercultural Mutual Assistance Association
- Centro Campesino
- Ramsey County
- Hennepin County
- Blue Earth County

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Standardized Curriculum

- Based on Core Competencies
- 11 Credits (approximately a semester)
- Developed by employers, CHWs, etc.
- Creative delivery style of curriculum
- Fieldwork/Internship
- Career Pathways into higher education
- Specialty Training Tracks for CHWs.
- Schools implementing the curriculum
Minnesota Community Health Worker Curriculum

• 11 Credit Core Competency Curriculum

• Six Course Components
  – Role, Advocacy and Outreach
  – Organization and Resources: Community and Personal Strategies
  – Teaching and Capacity Building
  – Legal and Ethical Responsibilities
  – Coordination, Documentation and Reporting
  – Communication and Cultural Competence

• Field Opportunities/Internship
  – Student Field Exploration
  – Student Field Applications
  – Student Field Internship

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Community health worker. (a) Medical assistance covers
the care coordination and patient education services
provided by a
community health worker if the community health worker has:
(1) received a certificate from the Minnesota State Colleges
and
Universities System approved community health worker
curriculum; or
(2) at least five years of supervised experience with an
enrolled
physician, registered nurse, or advanced practice registered
nurse.
Community health workers eligible for payment under
clause (2)
must complete the certification program by January 1, 2010,
to continue to be
eligible for payment (b) Community health workers must
work under the supervision of a
medical assistance enrolled physician, registered nurse, or
advanced
practice registered nurse.