The Role of Peers and Community Health Workers in Engaging Members: What’s Working and What’s Needed

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Integrating Care: From Evidence to Operations
Ma Behavioral Health Partnership
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Overview

• CHW workforce
• Contributions to health homes
• Benefits of peer support
• Funding
• Discussion
Center for Health Impact™

• Previously known as Central MA Area Health Education Center, Inc.
• Commitment to promotion of health equity and social justice
• Collaborations with federal, state and local agencies
• Partnerships with communities
• Medical Interpreter Training (MIT)
• Community Health Worker policy, education, and training
• Research efforts engaging communities
“We are meeting people where they are, just like a taxi, you know. (We) pick you up where you are and take you where you want to go.”

CHW from Boston

Community health Workers in Massachusetts: Improving Health Care and Public Health. Massachusetts Department of Public Health Community Health Worker Advisory Council 2009 report to the legislature
Community Health Worker

*....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/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.

*Definition submitted to DOL by APHA CHW Section for standard occupation classification code (SOC)
Assist individuals and communities to adopt healthy behaviors. **Conduct outreach** for medical personnel or health organizations to implement programs in the community that promote, maintain, and improve individual and community health. May provide information on available resources, provide social support and informal counseling, advocate for individuals and community health needs, and provide services such as first aid and blood pressure screening. May collect data to help **identify community health needs**. Excludes "Health Educators."

Bureau of Labor Statistics
MDPH CHW Definition

Public health workers who apply their unique understanding of the experience, language, and/or culture of the populations they serve in order to carry out one or more of the following roles:

• Provide culturally appropriate health education, information, and outreach in community-based settings
• Provide direct services, such as informal counseling, social support, care coordination, and health screenings
• Advocate for individual and community needs
• Provide cultural mediation between individuals, communities, and health and human service providers (system navigation)
• Build individual and community capacity
• Assure people have access to needed service

Community health Workers in Massachusetts: Improving Health Care and Public Health. Massachusetts Department of Public Health Community Health Worker Advisory Council 2009 report to the legislature
CHWs are distinguished from other health professionals because they:

• Are hired primarily for their understanding of the populations and communities they serve;

• Conduct outreach a significant portion of the time in one or more of the categories above;

• Have experience providing services in community settings.
Community Health Worker

- promotor(a) de salud
- peer leader
- community health advisor
- home visitor
- community health worker
- community health representative
- outreach educator
- street outreach worker
- patient navigator
- youth worker
- community coordinator
- peer advocate
- family service coordinator
- parent aide

Integrating Care: From Evidence to Operations

Second Annual Statewide Forum on Integration
# Community Health Workers

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CHWs in MA

- First established program Columbia Point CHC
- Estimated 3000 CHWs working in MA
- Most CHWs work in low-income communities
- Over 50% identify as people of color
- Over 58% speak 2 or more languages
- 41% - Boston
- 21.6% - Metro Region
- 31% work in rural communities
CHWs in MA

• Employed by health centers, hospitals, community-based organizations, faith-based organizations....
• Recognized for the valued added to team based care
• MA Association of Community Health Workers
• Local CHW networks
• Office of Community Health Workers, MDPH
• Prevention and Wellness Trust Fund
Education and Training

- 10 Core Competencies
  - Outreach Methods and Strategies
  - Individual and Community Assessment
  - Effective Communication
  - Cultural Responsiveness and Mediation
  - Education to Promote Healthy Behavior Change
  - Care Coordination and System Navigation
  - Use of Public Health Concepts and Approaches
  - Advocacy and Community Capacity Building
  - Documentation
  - Professional Skills and Conduct
  - Special health topics

- Agency-based training
- Community-based training entities
- 2 and 4 year colleges
CHW Certification

• CHW leadership
• Board of Certification Created in 2010
• 11 seats including Commissioner of Public Health or designee, 4 seats are CHWs recommended by MACHW
• Core competencies for MA Community Health Workers
• Draft regulations
• Public comment period
Nationally

- Over 120,000 CHWs*
- CHW/CHR/Promotor(a) organizations
- American Public Health Association
- Inclusion in PPACA
- Ongoing and increasing federal support
- Ongoing education and training opportunities
- CHW recognition
- National, regional and cross state collaborations
- Webinars supporting CHW organization development

Employment of CHWs by State

*45,800 CHWs employed in US May, 2013

*BLS, May 2013 Employment Report
Contributions to health homes

• Coordinate with service providers and health plans, as appropriate, to secure necessary care; share crisis intervention and emergency information.

• Link/refer client to needed services to support care plan/treatment goals, including medical, behavioral health care, patient education, self-help/recovery, and self-management.

• Advocate for services and assist with scheduling of needed services.

• Link client with community supports to ensure that needed services are provided.

In primary care, peer support services have traditionally been limited to an informal or volunteer role of connecting people living with chronic conditions, such as diabetes, in sharing knowledge and experiences with each other. More recently, peer support roles have evolved to include community health workers, peer coaches, and more.

SAMHSA-HRSA Center for Integrated Health Solutions

http://www.integration.samhsa.gov/workforce/peer-providers
Chronic Disease Management

• Ongoing investment

• Improved outcomes, reduced cost (reduced ER visits)

• Enhanced patient self management of illness

• Improved provider/patient communication

• Diabetes, asthma, hypertension
• Addressing Chronic Disease through Community Health Workers A Policy and Systems-Level Approach, CDC
  
  http://www.cdc.gov/dhdsp/docs/chw_brief.pdf

• Community Health Workers Part of the Solution, Rosenthal, et al
  
  http://content.healthaffairs.org/content/29/7/1338.full

• Building Peer Support Programs to Manage Chronic Disease: Seven models for success, California HealthCare Foundation
  
  http://www.chcf.org/~/media/MEDIA%20LIBRARY%20Files/PDF/B/PDF%20BuildingPeerSupportPrograms.pdf
Seven models for Peer Support

1. Professional led group visits with peer exchange
2. Peer led face-to-face self-management programs
3. Peer coaches
4. Community Health Workers
5. Support Groups
6. Telephone-based peer support
7. Web and e-mail based programs

California HealthCare Foundation
http://www.chcf.org/~/media/MEDIA%20LIBRARY%20Files/PDF/B/PDF%20BuildingPeerSupportPrograms.pdf
Benefits of Peer Provider Integration

• Personal experience with whole health recovery that includes addressing wellness of both mind and body
• Insight into the experience of internalized stigma and how to combat it
• Compassion and commitment to helping others.....
• Can take away the “you do not know what it’s like”
• Experience of moving from hopelessness to hope
• In a unique position to develop a relationship of trust, which is especially helpful in working with people in trauma recovery
• A developed skill in monitoring their illness and self-managing their lives holistically

http://www.integration.samhsa.gov/workforce/peer-providers
Benefits of CHW Integration

- Build and maintain trusting relationships with clients/patients
- Know the community
- Facilitate communication between provider/patient
- Provide culturally appropriate care
- Reinforce health education
- Make referrals
- Enhance follow through
Funding Potential
CMS Ruling Effective January 1, 2014

- State Medicaid Reimbursement for Preventive Services
- Allows state Medicaid agencies to reimburse for preventive services provided by professionals that may fall outside of a state’s clinical licensure system, as long as the services have been initially recommended by a physician or other licensed practitioner
- Offers state Medicaid agencies the option to reimburse for more community-based preventive services, including those of community health workers
MN Department of Health and Human Services

CHW services:

• are a diagnosis-related, medical intervention, not a social service

• providing patient education for health promotion and disease management are covered if provided under the supervision of a physician, dentist, advanced practice registered nurse (APRN), certified public health nurse (PHN) or mental health professional
MA Chapter 224 of the Acts of 2012

- An Act Improving the Quality of Health Care and Reducing Costs Through Increased Transparency, Efficiency and Innovation
- Wellness and prevention
- Primary care workforce
- Implementation of alternative payment strategies
Invest in CHWs
Thoughts?
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