

Community Health Workers Creating a Bridge to Care Using Nontraditional Models

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INTRODUCTION

In the face of our changing healthcare sector, persistent change factors have been seen as barriers. In the United States, Community Health Workers (CHW) are becoming paid, full-time members of community health systems. CHWs are a growing part of the United States health care delivery sector.

There is growing evidence that reveals the effectiveness of interventions of CHWs in multiple health arenas. CHWs can be used as advocates, health promoters and patient navigators.

- In California, CHWs effectively address diabetes prevention, diet and cardiovascular health.
- In Arkansas, CHWs have been effective in addressing health spending in chronic disease management.

The Affordable Care Act (ACA) continues to use CHWs to address re-admission penalties for hospitals and are increasingly responsible for patient care. CHWs may help address root causes of preventable chronic disease.

Multiple states have created formal education programs for CHWs. Yet, there appears to be delayed actions using CHWs in the main stream of health care. There is little to no standardization in using CHW's in the long-term process of preventing chronic disease.

CHWs who can integrate knowledge of the local social service milieu with knowledge of special patient circumstances can and will create vital links from healthcare to vulnerable populations. CHWs can offer support and help create capacity in communities that have been marginalized.

WHAT ARE THE ROLES OF THE CHW?

Community Health Worker roles, in the community, vary and depend on the sector in which they work (i.e. social services and healthcare). CHWs provide:

- Outreach education
- Culturally competent health education
- Advocacy
- Health literate communication
- Capacity building in communities
- Health advice
- Patient navigation

CHWs also function as lay health advocates to patients, provide base case-management, informal counseling, and guidance while directing patients to appropriate care systems.

SCOPE OF PRACTICE

- Creating more effective linkages between vulnerable populations and the healthcare system
- Helping people develop and understand strategies to improve their health and well-being
- Managing care and care transitions for vulnerable populations
- Ensuring culturally competent health education presented to patients
- Building community capacity to address health issues
- Advocating for underserved individuals to receive appropriate services
- Encourage better patient health outcomes
- Identify cultural barriers that could be unrealistic for at-risk populations
- Identify pre/post hospital strategies
- Provide cohesive patient care strategies
- Decrease ER visits for complicated chronic diseases
- Create patient centered medical homes for patients
- Provide referrals to human services, social services and health services
- Provide direct services
- Assist patients in navigating the health and human service system
- Provide a bridge between communities and identified stakeholders in the community
- Provide outreach engagement for patients that have been identified with at-risk behavior
- Provide home visits to patients that cannot come to service providers
- Provide motivational informal counseling.

Texas CHWs are trained in the following (8) competency domains:



MODELS FOR UTILIZING COMMUNITY HEALTH WORKERS	
Model	Examples
Extension Of Hospital Or Clinic Systems The healthcare system is a base of operations. CHW's are integrated with disease management of care, terms and are focused on clinical services	The Diabetes Wellness Center of Dallas, TX The center serves as a point of contact for patients, consumers and individuals through providing education, support services and social service referrals.
Community-Based Non-Profit Organizations Organizations are rooted in community mobilization, activism or faith. Organizations often provide a host of other services for the community of both, health and non-health genres.	CHW's educate their neighborhoods on a large variety of health topics. Some discussion topics include: nutrition, access to services and patient centered medical homes. Other topics are: diabetes, asthma, obesity and domestic violence.
Management Organizations dedicated to CHW's that are integrated with clinics and community organizations may be focused on financial sustainability, population and environmental health goals and local work force development.	A close-to-client network of CHW's who perform protocol driven tasks for early detection, self-management support in community settings and primary care coordination for chronic conditions.

Source: New England Journal of Medicine 369.1 – September 5, 2013

FUTURE OF CHWs

Several pilot programs have shown reductions in long-term Medicare and Medicaid spending when employing CHWs in efforts to eliminate health care inequalities. For more effectiveness in the future, many social and behavior determinants will need to be addressed. Multiple approaches will need to be involved in order to elevate CHWs to be the focal links to services in the healthcare and social service arenas. CHW.s can also participate in health care costs.

Findings indicate CHWs can have a positive impact on health outcomes. CHWs can:

- Assist in identifying services
- Identify medical homes for patients
- Improve patient adherence to treatment
- Improve the patient and provider care relationship
- Provide screening and prevention services
- Work closely with the health care team
- Identify at-risk behaviors
- Provide case management aide skills
- Provide informal counseling
- Identify linguistic and cultural gaps in communication
- Provide care coordination
- Reduce health disparities
- Provide outreach methods and strategies
- Provide appropriate cultural communication
- Provide follow-up / advocacy in communities
- Provide community capacity building
- Provide health education #101 – Basic Health Education
- Create positive patients
- Extend patient care beyond the clinical visit by making home visits.

RESOURCES

FUNDING CHW'S – MAIN SOURCES		
MEDICAID	COMMUNITY HEALTH WORKER RESOURCES	SIM Funding
1115 Waiver Projects		Accountable Care Organizations
MCD'S		Health Homes PCMH
Private Grants		Community Health Teams

Visit the Texas CHW Advisory Committee for a description of the competencies, approval process, and forms:
www.dshs.state.tx.us/chpr/chw/default.shtm