



COMMUNITY HEALTH WORKER (CHW) WORKGROUP

CHAIR: JUDY HASSELKUS, INDIANA DEPARTMENT OF WORKFORCE DEVELOPMENT

CO-CHAIR: LAURA HEINRICH, INDIANA STATE DEPARTMENT OF HEALTH



OBJECTIVES

- **Provide background on the Governor's Health Workforce Council**
- **Review the workgroup charge and workgroup charter**
- **Introduction of workgroup members**
- **Discuss current and previous CHW data and initiatives**
- **Small group discussions and report out on group perspectives**
- **Identify priorities and determine next steps for future workgroup meetings**



GOVERNOR'S HEALTH WORKFORCE COUNCIL



GOVERNOR'S HEALTH WORKFORCE COUNCIL: BACKGROUND

- The health workforce is a priority for Indiana
- National Governor's Association Health Workforce Policy Academy (2014)
- Priorities and Recommendations:
 - Policy Coordination → *Governor's Health Workforce Council*
 - Data Coordination → *Partnership with Bowen Center for Health Workforce Research and Policy*

ORGANIZATIONAL MISSIONS

Department of Workforce Development

“Developing a premier workforce that will allow Indiana employers to flourish and entice businesses from outside our state to relocate to Indiana.”

Indiana State Department of Health

“To promote and provide essential public health services.”

Family and Social Services Administration

“To develop, finance and compassionately administer programs to provide healthcare and other social services to Hoosiers in need in order to enable them to achieve healthy, self-sufficient and productive lives.”

COUNCIL MEETING RESULTS

- **Workgroup formation:**

1. State Loan Repayment Program
2. Health Workforce Modernization and Innovation
3. Community Health Worker



REVIEW CHARGE & CHARTER



REVIEW OF WORKGROUP CHARGE AND CHARTER

Workgroup Charge & Task Force Protocol

Governor's Health Workforce Council Task Force Protocol	
General Information	
The Council shall establish task forces to address identified priorities, as deemed necessary by the Council. Any task forces created by the Council shall study, deliberate and develop thorough recommendations to the Governor's Health Workforce Council (Council) regarding topics assigned by the Council. These recommendations will be used to help inform the work of the Council.	
Task force meetings are open to the public. Task force information will be made available on http://www.in.gov/dwd/ghwc.htm and is subject to the Indiana Access to Public Records Act. Such information will include names of task force members, meeting dates, times and locations, meeting agendas, minutes, reports, and any other information the task force chair(s) would like posted. Information should be forwarded to the Bowen Center for Health Workforce Research and Policy (BCHW) Staff bowenctr@iu.edu as soon as this information becomes available. Documents should be sent in their original file format or as an electronically converted PDF file. Scanned PDF documents are unable to be posted to the website.	
Responsibility of the Council	
<ol style="list-style-type: none"> The Council shall create task forces as deemed necessary to examine specific topics or issues related to health workforce planning and policies. The Council Chair shall appoint a chair(s) for each task force. The Council shall charge a task force with a specific set of tasks at the time the task force is established. The Council shall periodically review the charge and progress of all established task forces. The Council shall consider recommendations brought forth by each task force. 	
Duties of Task Force Chair(s)	
<ol style="list-style-type: none"> Identify task force members, with the recommendation and input of Council members. The maximum recommended number of task force members is 15. Finalize the date, time, location, and agenda at least five days in advance of task force meetings. These details shall be sent electronically to Bowen Center Staff at least four days in advance of task force meetings for public posting. Task force meetings should be held at a location that is available to members of the public. 	

Workgroup Charter

PROJECT CHARTER: Community Health Worker Workgroup				
1. General Project Information				
Project Name:	Community Health Worker (CHW) Workgroup			
Created by:	Indiana Governor's Health Workforce Council			
Administrative Support Provided by:	Bowen Center for Health Workforce Research and Policy			
Impact of project:	This project will identify and recommend a formal definition for community health workers to the Council, for recommendation to Governor/GA			
2. Project Team				
	Name	Department	Organization	E-mail
Project Manager:	Judy Hasselkus	Program Director, Employer Engagement & Sector Specialist for Health Care, Ag., & Life Sciences	Department of Workforce Development	JHasselkus@dwd.in.gov
Co-Chair	Laura Heinrich	Director of Cardiovascular Health and Diabetes	Indiana State Department of Health	Ltheinri@isdh.in.gov
Team Members:	Margarita Hart	Executive Director	Indiana Community Health Workers Association (INCHWA)	INCommunityHealth@gmail.com
	Debbie Hermann	Deputy Director, Medicaid Initiatives	Division of Mental Health and Addiction	Debra.Herrmann@fssa.in.gov
	Lisa Staten	Department Chair of Social and Behavioral Sciences	Richard M. Fairbanks School of Public Health	lkstaten@iu.edu
	Rick Diaz	CEO	HealthNet	
	Cody Metzger	Program Director	Medicaid Policy	cody.metzger@fssa.in.gov
	Carol Weiss-Kennedy	Director of Community Health	IU Health Bloomington	cweisskenmed@iuhealth.org
	Rebecca Adkins	Systems Director- Population Health	Ascension	rebecca.adkins@ascension.org
	Mary Anne Sloan	Vice President Health Care	Ivy Tech	msloan26@ivytech.edu
	Kathy Cook	Executive Director	Affiliated Services Provider of Indiana	kcook@aspin.org
	Andrew VanZee	Chair of Council on Workforce Development	Indiana Hospital Association	avanzee@ihacconnect.org
	Don Kelso	Executive Director	Indiana Rural Health Association	dkelso@indianarha.org
	Jennifer Long		Marion County Public Health Department	jlonge@marionhealth.org
	Mandy Rush	Director of Community Services with Mental Health America of Northeast Indiana		mrush@mhaac.com

CHW WORKGROUP MEMBERSHIP

Judy Hasselkus, Chair

Program Director, Employer Engagement & Sector Specialist for Health Care, Ag., & Life Sciences
Department of Workforce Development

Laura Heinrich, Co-Chair

Director of Cardiovascular Health and Diabetes
Indiana State Department of Health

Rebecca Adkins

Systems Director-Population Health
Ascension

Kathy Cook

Executive Director
Affiliated Services Provider of Indiana

Rick Diaz

Chief Executive Officer
HealthNet

Margarita Hart

Executive Director
Indiana Community Health Workers Association (INCHWA)

Debbie Hermann

Deputy Director, Medicaid Initiatives
Division of Mental Health and Addiction

Jennifer Long

Marion County Public Health Department

Don Kelso

Executive Director
Indiana Rural Health Association

Cody Metzger

Program Director
Medicaid Policy

Mandy Rush

Director of Community Services
Mental Health America of Northeast Indiana

Mary Anne Sloan

Vice President Health Care
Ivy Tech

Lisa Staten

Department Chair of Social and Behavioral Sciences
Richard M. Fairbanks School of Public Health

Andrew VanZee

Chair of Council on Workforce Development
Indiana Hospital Association

Carol Weiss-Kennedy

Director of Community Health
IU Health Bloomington



PRESENTATIONS FROM WORKGROUP CHAIRS



COMMUNITY HEALTH WORKER – WORKFORCE PERSPECTIVE

- **Occupation defined:** A set of activities or tasks that employees are paid to perform and that, together, go by a certain name.
- Employees who are in the same occupation perform essentially the same tasks, whether or not they work in the same industry.
- Classified based on:
 - Work or tasks performed
 - Competencies/skills
 - Education or training needed to perform the work at a competent level
- Community health worker is classified as a detailed occupation: SOC code 21-1094

COMMUNITY HEALTH WORKER – WORKFORCE PERSPECTIVE

Workforce 101: Standard Occupational Classification (SOC Codes)

- The 2010 Standard Occupational Classification (SOC) system is used by Federal statistical agencies to:
 - classify workers into occupational categories for the purpose of collecting, calculating, or disseminating data
 - classify all workers into 840 detailed occupations according to their **occupational definition**
 - group together detailed occupations in the SOC with similar job duties, and in some cases skills, education, and/or training

Source: US Department of Labor, Bureau of Labor Statistics (BLS)

COMMUNITY HEALTH WORKER – WORKFORCE PERSPECTIVE

Community Health Workers: SOC Code 21-1094 (2010)

- 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" (21-1091).
- Illustrative examples: *Peer Health Promoter, Lay Health Advocate*

COMMUNITY HEALTH WORKER – WORKFORCE PERSPECTIVE

Community Health Workers: Occupational Outlook (Nationally)

- health educators and community health workers projected to grow 13 percent from 2014 to 2024, *faster than the average* for all occupations
- growth driven by efforts to improve health outcomes and reduce healthcare costs by teaching people healthy habits and behaviors and explaining how to use available healthcare services

Note: All Occupations includes all occupations in the U.S. Economy

Source: U.S. Bureau of Labor Statistics, Employment Projections program

COMMUNITY HEALTH WORKER – OCCUPATIONAL DATA

21-1094.00 - Community Health Workers

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. (Source: Bureau of Labor Statistics)

Economic Growth Region	Current 2017 Employment (EMSI)	Projected 2027 Employment (EMSI)	Occupational Rating	Median Hourly Rate - BLS	Composite Education Score
State of Indiana	1,349	1,540	4	\$ 19.03	2.6 - Associate Degree*
1 (Lake, Porter, Newton, Jasper, LaPoint, Starke, Pulaski)	143	154	4	\$ 18.20	N/A
2 (St. Joseph, Elkhart, Marshall, Kosciusko, Fulton)	210	233	4	\$ 18.87	N/A
3 (LaGrange, Steuben, Noble, DeKalb, Whitley, Allen, Wabash, Huntington, Wells, Adams, Grant)	126	146	3	\$ 17.02	N/A
4 (Tippecanoe, Benton, White, Carroll, Cass, Miami, Howard, Tipton, Clinton, Montgomery, Fountain Warren)	54	65	3	\$ 15.86	N/A
5 (Boone, Hamilton, Madison, Hancock, Marion, Hendricks, Morgan, Johnson, Shelby)	479	547	4	\$ 21.31	N/A
6 (Blackford, Jay, Delaware, Randolph, Henry, Wayne, Rush, Fayette, Union)	42	48	3	\$ 15.34	N/A
7 (Parke, Putnam, Vigo, Clay, Vermillion, Sullivan)	39	43	3	\$ 19.26	N/A
8 (Owen, Monroe, Brown, Greene, Martin, Lawrence, Daviess, Orange)	42	47	2	\$ 15.76	N/A
9 (Bartholomew, Decatur, Franklin, Dearborn, Ohio, Ripley, Switzerland, Jefferson, Jackson, Jennings)	65	74	3	\$ 17.24	N/A
10 (Crawford, Harrison, Floyd, Clark, Scott, Washington)	43	50	3	\$ 17.64	N/A
11 (Knox, Pike, Dubois, Perry, Spencer, Warrick, Gibson, Vanderburgh, Posey)	71	80	3	\$ 16.73	N/A
Indiana, County Not Reported	34	50	N/A	N/A	N/A

*composite education score is a weighted average of available source-specific education scores(sources include BLS, ONET, Burning Glass, ACS, CPS)

CHWS DEFINED

American Public Health Association

The CHW is 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/intermediary** between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

WHAT IS A COMMUNITY HEALTH WORKER?

- Lay Health Worker
- Lay Health Advisor
- Community Health Advisor
- Promotor(a) de Salud
- Community Health Representative
- Primary and Preventative Care Liaison
- Outreach Educators
- Peer Health Promoters
- Patient Navigator
- Community Mental Health Workers

COMMON TITLES

Abuse Counselor **ACCESS WORKER** Adult Case Manager Case Coordinator **Certified Recovery Specialist** Community Coordinator *Community Counselor* Community Health Educator Community Health Representative **Community liaison** COMMUNITY ORGANIZER *Community Outreach Manager* *Community Outreach Worker* *Community Social Worker* **Discharge Planner** Educator **Family Advocate** Family Education Coordinator Family Support Worker *Financial Counselor* Health Advisor *Health Advocate* HEALTH AGENT Health Assistant *Health Communicator* HEALTH EDUCATOR Health Insurance Counselor **HIV Peer Advocate** *HIV Prevention Coordinator* *Home Care Worker* Home Visitor Home-Based Clinician *Intake Specialist* Interpreter **Lay Health Worker/Advisor** Maternal and Child Health Case Manager *Medical Representative* **Mental Health Worker** Outreach Advocate Outreach Case Manager **Outreach Coordinator** *Outreach Educator* OUTREACH WORKER *Parent Aide* *Parent Liaison* **Patient Navigator** *Peer Advocate Promotor(a)* *Promotor(a) de Salud* Roving Listener *Street Outreach Worker* Youth Development Specialist **Youth Worker**

HEALTH SYSTEMS – QUALITY IMPROVEMENT

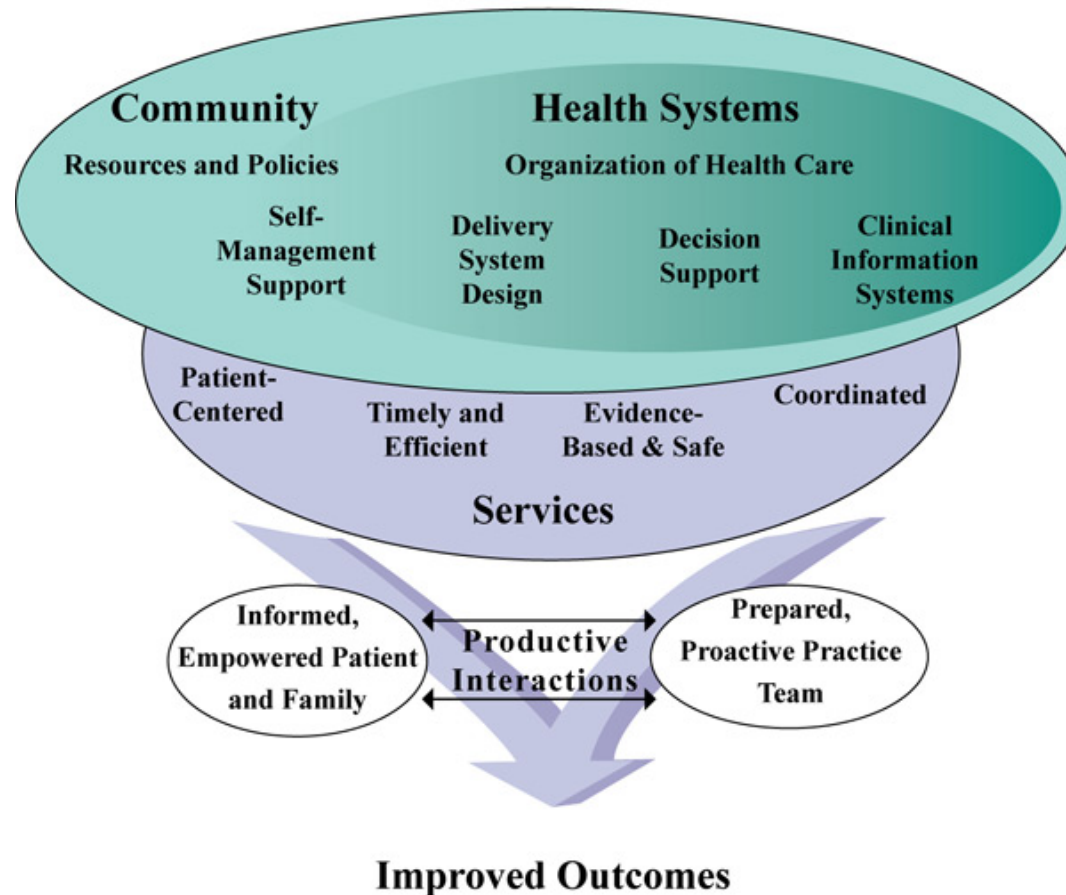
Community health workers are integral to an effective health care delivery system

Improve access to and increase quality of care:

- Reduce costs
- Increase patient satisfaction
- Advance care coordination
- Expand provider care to include community resources

ELABORATED CHRONIC CARE MODEL

The Care Model



COMMUNITY HEALTH WORKER TASKS

- Adopt national standards
- Provide education and training
- Certification
 - tied to reimbursement
- State network
- Engage providers and insurers

INDIANA'S CHW LANDSCAPE

- HRSA's Community Health Worker National Workforce Study (2007) estimates
 - 960 paid
 - 375 volunteer
 - 64% paid
 - \$13/hr. with benefits
 - Employers:
 - Universities, schools, clinics, social service agencies, hospitals





SMALL GROUP DISCUSSIONS



PROMPTING QUESTIONS

- **Question I:** How would you define CHW as an occupation, using the framework described previously?
 - Training
 - Competencies/skills
 - Roles
 - Reimbursement

PROMPTING QUESTIONS

- **Question 2:** What is the value of CHWs, from the perspective of
 - a) your organization
 - b) the health system, and
 - c) Indiana?



SMALL GROUP REPORT OUT AND IDENTIFICATION OF THEMES





IDENTIFYING NEXT STEPS: WHAT DATA ARE
MISSING?



FUTURE MEETINGS

- A Doodle Poll will be sent out immediately following today's meeting. Please input your availability for the remainder of 2017 and all of 2018. Meetings will be scheduled monthly.
- <https://beta.doodle.com/poll/b253n2vv7nbbipfp>

CONTACT INFORMATION

For questions, feedback, or public comment, please contact the Bowen Center for Health Workforce Research & Policy.

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- 317.278.4818