

STATE OF CONNETICUT
State Innovation Model
Community Health Worker Advisory Committee
Meeting Summary
Tuesday, May 15th, 2018
2:30 pm – 4:30 pm

Location: Litchfield Room, CT Behavioral Health Partnership, Hartford Room (3rd Flr), 500 Enterprise Drive, Rocky Hill, CT 06067

Members Present: Terry Nowakowski (Chair), Grace Damio, Milagrosa Seguinot, Darcey Cobbs-Lomax, Liza Estevez, Linda Guzzo, Chioma Ogazi, Mayce Torres, Thomas Buckley, Michael Corjulo

Members on the Phone: Ashika Brinkley, Lauren Rosato

Members Absent: Peter Ellis, Migdalia Belliveau, Loretta Ebron, Nicholas Peralta, Tiffany Donelson, Juan Carmona

Other Participants: Jenna Lupi, Katharine London, Ula Uszynski, Meredith Ferraro, Fernando Morales, Maggie Litwin, Fatawu Mahama, Bruce Gould, Cecil Tengtanga, Erika Lynch, Sabrina Trocchi, Lori Pasqualini, Giselle Carlotta-McDonald (phone), Supriyo Chatterjee (phone), Tekisha Everett (phone), Chris Andresen, Randy Domina, Dana Robinson-Rush (phone), Akshatha Rao

1. Call to Order and Introductions

Terry Nowakowski served as Chair and called the meeting to order at 2:38 pm.

2. Public Comments

No public comments were submitted for discussion.

3. Approval of Minutes

Motion: to approve minutes from 3/20/2018 – Terry Nowakowski

First: Miligrosa Sequinot

Second: Michael Corjulo

All in favor

4. Design Group 1 Recommendations & Discussion

Katharine London began the meeting by discussing Design Group 1 recommendations for CHW Certification of not requiring an exam (not best way to assess CHW knowledge and skills), no requirement for background checks (leave to employer discretion), and no degree requirements.

Recommended requirements for certification for new CHWs include: training as recommended by Design Group 3; 1000 experience working as CHW, paid or unpaid, in the last 3 years (equivalent to 6 months full time); an optional portfolio; a professional reference (at least one supervisor); and a personal reference. Recommended requirements for certification for experienced CHWs include: 20 hour refresher course; 5 years' experience working as CHW, paid or unpaid; a portfolio; a

professional reference (at least one supervisor); and a personal reference. The group recommended that certification should be renewed every 2 years and renewal should require 20 hours of continuing education.

The group had also reviewed the experience pathway or grandfathering/grandparenting and alternative paths to become a CHW as well length of time for certification and continuing education. The group then discussed grandfathering and education requirements, and whether an individual should or should not have a high school diploma.

Topics still left to cover are alternative methods, reciprocity and code of ethics.

The Advisory Committee posed questions for discussion and follow-up by the Design Group:

1. Should the required amount of experience for Experienced CHWs be measured in years or hours? If hours, how many?
2. Who can be a personal reference? Who cannot be a personal reference?
3. Should training be required for experienced CHWs?
4. Is 20 hours of continuing education helpful? Necessary? Appropriate?

5. Design Group 2 Recommendations & Discussion

Jenna Lupi reviewed Design Group 2 recommendations including the responsibility of the certifying entity and a separate advisory body. Some of the recommendations were to include one representative from DPH, DSS, and DMHAS, 6CHW'S, 1 CHW Association of CT representative, 1 community-based CHW training organization representative, 1 Community College representative, 1 Commercial Payer, 1 CHW employer (with hiring capabilities), 1 Health Care Provider with direct CHW experience, 1 health educator. The group also made recommendations for certification eligibility requirements: no minimum education level, no residency requirements, and no personality traits requirements. Minimum age requirements still need to be looked into and discussed as well as the certifying entity, registry requirements and assessing fiscal implications.

6. Design Group 3 Recommendations & Discussion

Meredith Ferraro reviewed decisions made by Design Group 3. The group has made the following recommendations: accept the C3 core competencies previously decided by the CHW Advisory Committee, training hours should be 90 hours minimum, and 50 hours of internship should be required as part of a CHW training. The training modality/methodology should be based on adult learning principles, i.e. inclusive of role play, popular education principles and be interactive. For training delivery, it was recommended that it be in-person training or a hybrid training to include in-person sessions with distance learning in "real-time". Full online training will not be allowed, to allow for recommended training methodologies.

The Design Group 3 will meet to discuss the following outstanding key decision points: training vendor criteria, instructor qualifications, how does the training program assess proficiency and to determine/develop type of assessment.

There was a question posed, who determines the specific training for continuing education courses designed for CHWs? Who determines what qualifies a CEU? Also, considerations with cost of CEUs was mentioned as a concern.

Some group members mentioned that CHWs are vulnerable, low-income employees, special relationship with the community and question that we might be requiring too much of these employees. It was proposed to ask the CHWs about the certification recommendations, or creating a survey to send out to

them to see if we are heading the right direction with certification. Group members want to create a profession for CHWs that they can be proud of, we must be cautious to not exclude the true CHWs that are out there in the field, but don't want to get certified. The Design Group will review the CHW input it has received on these topics over the last two years.

7. Review of Outstanding Decision Points and Next Steps

Next, Jenna Lupi reviewed each design group outstanding key points for discussion and recommendations.

- Design Group 1 still needs to decide the paths to certification, there is a need to establish two paths to certification: one with training and one without.
- Design group 2 still needs to clarify the role of the advisory body, whether it should be on annual basis and revisit the proposed size of the advisory body and perhaps make changes/reduce the proposed size.
- Design Group 3 will look at what qualifies as Continuing Education.

Members of the Committee expressed a desire to obtain input from a larger number of CHWs to ensure that they perceive the benefits of certification as outweighing the cost and effort to apply. One idea was to design a survey that would be sent to CHWs, to have them review and comment on the specific requirements that the design groups have decided on. Others suggested that meeting CHWs individually may be more productive. The SIM project also has a public meeting process for garnering input.

The plan to move forward is to have additional design group meeting before the full group meeting on June 19th, 2018 to finalize the current recommendations as well as review all decisions. Final recommendations will be issued in June. There will still be time to review and adjust the recommendations before the report goes out for public comment. The group will work on drafting the survey and getting it out to community health workers to get some feedback before the June meeting.

Next Steps

- May/June - Final Design Group Meeting to address outstanding decision points.
- CHW Advisory Committee Meeting is scheduled for June 19th, 2018 with expectations to review all decision points and issue final recommendations.
- July 17th - discuss draft legislative report containing all recommendations.

8. Breakout Design Group Sessions

Due to discussion, time did not permit for breakout design group session.