



CONNECTICUT  
*Office of Health Strategy*

# Community Health Worker Advisory Committee

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July 17, 2018

# Meeting Agenda

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| 1. Introductions/Call to Order  | 5 min  |
| 2. Public Comment   | 10 min |
| 3. Approval of the Minutes  | 5 min  |
| 4. Purpose of Today's meeting   | 5 min  |
| 5. Review & Discussion of Report to the Legislature<br>on CHW Certification | 55 min |
| 6. Review and Next Steps  | 10 min |
| 7. Adjourn  |        |

# Introductions/Call to Order

# Public Comment

2 minutes per comment

# Approval of the Minutes

# Purpose of Today's Meeting

# Objectives of Today's Discussion

1. Review the **goals** of CT SIM CHW Advisory Committee DRAFT Legislative Report
2. Discuss the **components** of the Report
3. Respond to and discuss **questions** about the Report
4. Plan **additional meeting to** respond to and address additional questions

# Review & Discussion of CT SIM CHW Advisory Committee DRAFT Legislative Report



# High-Level Contents

- *Executive Summary*
- *Purpose & Background*
- *Recommendations for a CHW Certification Program in CT*
- *Fiscal Implications of a CHW Certification Program*
- *Next Steps*

# Report Components

**Purpose:** Sec. 63. Section 20-195sss of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

The executive director of the [state innovation model initiative program management office] Office of Health Strategy, established under section 19a-754a, as amended by this act, shall, within available resources and in consultation with the Community Health Worker Advisory Committee established by [such] said office and the Commissioner of Public Health, study the feasibility of creating a certification program for community health workers. **Such study shall examine the fiscal impact of implementing such a certification program and include recommendations for**

(1) *requirements for certification and renewal of certification* of community health workers, including any training, experience or continuing education requirements,

(2) *methods for administering a certification program*, including a certification application, a standardized assessment of experience, knowledge and skills, and an electronic registry, and

(3) *requirements for recognizing training program curricula* that are sufficient to satisfy the requirements of certification.

# Report Components

## *Background*

- Making a case for CHWs
- Background on the State Innovation Model CHW Initiative
- The Role of the SIM CHW Advisory Committee

# Report Components

## *Recommendations for a CHW Certification Program in Connecticut*

*The following recommendations were developed through the CHW Advisory Committee Design Group Process described above. Each Design Group was assigned **Key Decision Points** on which to issue recommendations and selected **Guiding Principles** to help guide the decision-making process. Each **Recommendation** is supported by accompanying **Key Considerations**. The CHW Advisory Committee ultimately approved the recommendations of the individual Design Groups for inclusion in this Report.*

- *Certification for a CHW (Design Group 1)*
- *Methods & Administration of a Certification Program (Design Group 2)*
- *Training Curricula (Design Group 3)*

# Report Components

## *Financial Implications of a CHW Certification Program*

**Table 8. Cost Implications of CHW Certification in Connecticut**

	Department of Public Health	CHW Association of CT	Third Party
<b>Projected Cost to the State</b>	~\$25,000 annually for half time staff member within DPH	Substantial upfront investment to develop entire infrastructure- likely higher than other options	~10,000 first year, \$7,500 annually
<b>Applicant Fees</b>	~\$100	As determined by the Association to cover setup costs	~\$100-\$200
<b>Committee Perspective on Cost</b>	Most reliable source of funding once established in statute	Costs are largely unknown due to lack of existing infrastructure	Relies on unreliable sources of funding (fundraising, etc.)

**Table 9. State CHW Certification Program Application Fees**

	Massachusetts	Texas	Florida	Rhode Island
<b>Initial Applicant Fees</b>	\$35	No Fee	\$50	\$125
<b>Certifying Entity</b>	State Health Dept.	State Health Dept.	Third Party	Third Party

# Report Components

## *Next Steps*

This Report is intended to **support legislative or policy changes** within the State that will allow for the development of a CHW Certification Program in Connecticut. It is the hope of the CHW Advisory Committee and its partners that upon release of this Report, **action will be taken** to implement CHW Certification.

The CHW Advisory Committee urges the Connecticut State Legislature to pass legislation establishing CHW Certification in Connecticut. Such legislation will lead to **more sustainable funding options for CHWs, increase their visibility and recognition, and expand the utilization of CHWs across the state**. Increasing utilization and funding for CHWs will improve health outcomes, reduce health inequities, and ultimately reduce healthcare costs in Connecticut.

# CHW Advisory Committee Recommendations

*Certification for a CHW (Design Group 1): Requirements for certification and renewal of certification of community health workers, including any training, experience or continuing education requirements:*

**Recommendation 1:** Connecticut should establish two ongoing paths to certification: one path with training and one without training. The two paths will serve individuals currently working in a CHW capacity and those that are interested in starting their careers as CHWs.

**Recommendation 1a:** To be considered for one of the two CHW Certification paths, applicants should meet the following requirements:

Requirements	New CHW	Experienced CHW
Training	90 hour training & 50 hour internship	None
Experience	1,000 hours in past 3 years	2,000 hours as paid/unpaid CHW in past 5 years
Portfolio	Optional: 3 of the 8 items on Rhode Island's list	Required: A resume documenting years of experience, and A portfolio including 3 of the 7 other items on Rhode Island's list

# CHW Advisory Committee Recommendations

## *Certification for a CHW (Design Group 2)*

**Recommendation 2:** To be eligible to apply for CHW Certification, applicants should be at least 16 years of age. There should be no additional eligibility requirements.



# CHW Advisory Committee Recommendations

## *Certification for a CHW (Design Group 1):*

**Recommendation 3:** A Supervisory reference and a Community reference should be required for all prospective CHWs seeking certification.

- **Supervisory reference:** At least one supervisor, who has experience supervising Community Health Workers (or other staff titles who perform CHW Roles), must attest that the applicant has the required paid or volunteer hours performing at least five CHW Roles and demonstrated proficiency in at least four CHW skills (not including #11 knowledge base). See **Appendix B** for full list of CHW Roles and Skills.
- **Community reference:** At least one member of the community, who has known the applicant for at least one year, must attest that the applicant has “an in-depth understanding of the experience, language, culture and socioeconomic needs of the community.” Community references are often provided by staff of partner organizations, fellow volunteers for a charity, community leaders, clients, friends or neighbors.
- ⓘ A Supervisory or Community reference may not be provided by an immediate family member, any person sharing the same household, or any person who is now or ever has been in a romantic or domestic relationship with the applicant.
- ⓘ See **Appendix C** for Draft Supervisor and Community Reference Forms.

# CHW Advisory Committee Recommendations

## *Key Considerations: Recommendation 3*

- The Committee determined that two types of references were needed for individuals seeking certification. The Design Group felt that two distinct categories of references were necessary to verify that an individual has the breadth of experience and proficiency of skills required to be a Certified CHW.
- The **Supervisory reference** provides evidence that the individual has the requisite number of hours performing CHW roles with proficiency in CHW skills.
- The **Community reference** verifies the individual's understanding of and connection to the community served.

# CHW Advisory Committee Recommendations

## *Certification for a CHW (Design Group 1)*

**Recommendation 4:** Reciprocity should not be allowed with other states.

**Recommendation 5:** Certification should be issued for two years and for renewal, applicants should be required to attest to the completion of 20 hours of continuing education requirements (CERs). The Certifying Entity should not routinely require applicants to produce evidence of completion but could request such documentation from time to time.

# CHW Advisory Committee Recommendations

## *Certification for a CHW (Design Group 3 & Design Group 1)*

**Recommendation 6:** Conferences, webinars, workshops, seminars, trainings, presentations and self-studies should count toward continuing education hours and be tracked on a designated tracking sheet. Applicants should complete these hours outside of employment or volunteer positions.

**Recommendation 7:** Applicants for CHW certification should commit to abide by a CHW Code of Ethics. The following infrastructure must be established to implement this recommendation:

- Either DPH as the Certifying Entity or its Advisory Body should establish a Code of Ethics
- DPH, with assistance from its Advisory Body, should consider how it would respond to an allegation of an ethics violation

# CHW Advisory Committee Recommendations

## *Key Considerations: Recommendation 7*

- The Committee discussed the Code of Ethics that was established by a national group 10 years ago and adopted by the CHW Association of CT. Several states (MA, RI, OR) adopted a similar Code of Ethics with applicants for certification having to agree to abide by this Code.
- Other states require applicants to agree to abide by a set of laws or a general code of ethics for all professions certified by the certifying entity.
- A number of state and private certification boards have established a process for investigating potential ethics violations and taking disciplinary action.

# CHW Advisory Committee Recommendations

*Methods & Administration of a Certification Program (Design Group 2): including a certification application, a standardized assessment of experience, knowledge and skills, and an electronic registry*

**Recommendation 8:** The Department of Public Health (DPH) should serve as the CHW Certifying Entity. The Department of Public Health should be responsible for the administrative tasks related to certification including reviewing applications, verifying that requirements have been met, issuing certificates, and maintaining a CHW registry like those maintained for other professionals that are searchable by name and region.

# CHW Advisory Committee Recommendations

## *Methods & Administration of a Certification Program (Design Group 2):*

**Recommendation 9:** A separate Advisory Body should be established to inform the full development of Certification Standards. The Advisory Body should have a more prominent role in the initial development of the Certification Program, and should meet less often thereafter to assess the need to adjust the Certification Standards and to weigh in on critical questions as identified by the Certifying Entity.

The **three key objectives** of the Advisory Body should be to:

- Review certification criteria, processes and policies developed by the Certifying Entity
- Respond to questions from the Certifying Entity on individual certification requests, as needed via a standard process for assessing and responding to such questions
- Issue annual recommendations for needed adjustments to the certification criteria based on national trends

# CHW Advisory Committee Recommendations

## *Methods & Administration of a Certification Program (Design Group 2):*

**Recommendation 10:** The Advisory Body should include: 6 CHWS; 1 CHW Association of CT representative; 1 Community-Based CHW training organization representative; 1 Community College representative; 1 CHW employer; 1 Health Care Provider with direct CHW experience; and 1 Health Educator.

**Recommendation 10a.:** The Advisory Body representatives should be selected through a neutral appointment process, such as the process used to select SIM advisory committee members

The CHW Association of CT should serve as the administrative lead for the Advisory Body, including such activities as scheduling meetings and coordinating recommendations.\*

*\*The Office of Health Strategy may consider providing support to the CHW Association of CT to serve in this capacity.*



# CHW Advisory Committee Recommendations

## *Key Considerations: Recommendation 10*

The following conclusions were made by the Committee in determining the composition of the Advisory Body:

- Half of the Advisory Body should be represented by CHWs, including a representative of the Association
- CHW training entities- both community college and community-based- should be represented
- State agencies **should not** be represented as there is no precedent on similar advisory groups for other health care professions.
- Commercial and public payers **should not** be represented since there are no objectives related to payment.

# CHW Advisory Committee Recommendations

## *Key Considerations continued: Recommendation 10*

- The Committee determined that the CHW Association of Connecticut has an important role to play in the promotion of CHWs in the State, and therefore should have a **leadership role in Certification**. As Administrative Lead, the Association will have a prominent role on the Advisory Body, and may be able to build on the momentum of certification to expand its CHW promotion efforts.
- The Committee raised concerns about the CHW Association of Connecticut's available resources to serve as Administrative Lead to the Advisory Body. For this reason, the Committee **recommends that the Office of Health Strategy or other State Agencies/Private Funders with special interest in CHWs consider supporting the Association for this purpose**.
- The Committee recommended a **neutral selection process** for selecting Advisory Body members in order to help ensure CHWs are selected from different geographies around the state.

# CHW Advisory Committee Recommendations

## *Methods & Administration of a Certification Program (Design Group 2):*

**Recommendation 11:** The application process for Certification should not create unnecessary barriers. Unless otherwise required by Agency policy, DPH should accept copies of application materials and should not require notarization. To the extent possible, applications should be accepted via email, online, or regular mail.

# CHW Advisory Committee Recommendations

*Training Curricula (Design Group 3): Requirements for recognizing training program curricula that are sufficient to satisfy the requirements of certification:*

**Recommendation 12:** The method for training CHWs in core skills and services should utilize the C3 Core Competencies.

**Proposed Language Change to Recommendation 12:** The content of training CHWs should consist of the core skills and services utilizing the Community Health Worker Consensus Project (C3) Core Competencies.

**Recommendation 13:** Training programs should include 90 hours of training and an internship with a minimum of 50 hours.

# CHW Advisory Committee Recommendations

## *Key Considerations: Recommendation 13*

### **Proposed Language Change**

- Internships from both non-credit and credit bearing training programs were reviewed. The Committee discussed an internship description from City College of San Francisco and felt this was the most appropriate description for Connecticut with some modifications. The Internship Description decided upon is as follows: *An internship should be an opportunity for the CHW to observe and practice core CHW skills and services in the field, and to receive additional training, supervision and feedback from professionals working in the public health, health care, non-profit and community settings.*

# CHW Advisory Committee Recommendations

## *Training Curricula (Design Group 3):*

**Recommendation 14:** Training modality and methodology should follow Adult Learning Principles, include role-playing, and be interactive.

## *Key Considerations: Recommendation 14*

### **Proposed Language Change**

- The Committee discussed different types of training modalities and methodologies. They took into consideration guidance from national CHW expert Carl Rush that CHW education be based on adult learning principles.
- The Committee felt it was critical that training programs be participatory in nature, focus on empowerment, popular education, and IBEST (integrated basic education skills training). They further recommended against lecture and quiz formats.
- ~~• Committee members recommended popular education as a teaching methodology, but further discussed that adaptation will likely be required as not all trainers are adept at this method~~

# CHW Advisory Committee Recommendations

## *Training Curricula (Design Group 3):*

**Recommendation 15:** Training should be delivered in-person or utilize a hybrid approach that includes in person sessions and distance learning in “real-time.” Online training alone should not meet the requirements of certification. At least 40% of the hours of instruction should be taught or co-taught by faculty who are Community Health Workers.

# CHW Advisory Committee Recommendations

## *Training Curricula (Design Group 3):*

**Recommendation 16:** CHW training instructors, both Non-CHW and CHW, should have at least 1,000 hours of experience training individuals who provide community health work services including promotores, CHWs, and other health care paraprofessionals and professionals in the previous six years. They should have the knowledge, skills and competence to effectively teach a curriculum. In addition, CHW Instructors should have:

- 3-5 years of experience working fulltime as a CHW
- Proof of completion of a CHW Core Competency Training
- Knowledge of the community and community resources, and preferably reside in the community.



# CHW Advisory Committee Recommendations

## *Key Considerations: Recommendation 16*

### **Proposed addition to Key Considerations**

- Instructor qualifications varied from state to state:
- The Committee looked at instructor qualifications in-depth for Massachusetts, Michigan, and Texas. Michigan's CHW Training and Instructor training is done by MiCHWA, which is a stakeholder coalition that serves as the hub for CHW information for the state. Since this is not the model for CT, the committee decided to focus on Texas and Massachusetts
- Texas requires that instructors are certified by the Department of State Health Services by one of two ways. Must be a Texas resident who is at least 18 years old and (1) completion of an approved 160-hour competency-based Community Health Worker Instructor training program certified by DSHS. Or (2) Experience – At least 1000 cumulative hours of experience training individuals who provide community health work services including promotores, community health workers, and other health care paraprofessionals and professionals in the previous six (6) years.
- Connecticut currently does not have the infrastructure built for Community Health Worker Instructor training program and liked Texas's experience requirement.
- Massachusetts just asks what the trainers experience is teaching the CHW core competencies.

# CHW Advisory Committee Recommendations

*Training Curricula (Design Group 3): Requirements for recognizing training program curricula that are sufficient to satisfy the requirements of certification:*

**Recommendation 17:** Assessments of successful training completion should utilize (1) pre- and post-tests, (2) skills assessment, and (3) include a capstone project or portfolio, or a combination of the two.

# CHW Advisory Committee Recommendations

## *Key Considerations: Recommendation 17*

### **Proposed addition to Key Considerations**

- In their [2017 Report](#), the Advisory Committee recommended that an assessment of skills should be required as part of the overall assessment for CHW Certification. For experienced CHWs, an assessment of skills will be completed through the submission of portfolio requirements (**Appendix X**). For new CHWs, the Committee determined that an assessment should be conducted following completion of a training program.
- The Committee agreed that there should not be just a test to assess CHWs.
- The Committee reviewed different types of assessments and reviewed how CHW training programs in Connecticut are currently assessing CHWs in their training programs. The Committee agreed pre- and post-tests were effective and that there should be some assessment of skills, but did not define a specific type of assessment method, **feeling that each training program provides ongoing assessments throughout the training.**

# CHW Advisory Committee Recommendations

## *Training Curricula (Design Group 3):*

**Recommendation 18:** The CHW Certification Advisory Body should review and approve CHW training vendors.

# CHW Advisory Committee Recommendations

## *Key Considerations: Recommendation 18*

### **Proposed addition to Key Considerations**

- The Committee determined that CHW training programs should be “approved” training vendors to provide CHW training that is recognized for CHW certification.
- The Committee assessed who reviews and approves training vendors in other states and found that the Advisory Body often serves that role.
- Training vendors should not be limited to the type of organization they are but should identify themselves, have a plan to screen and recruit participants, state the cost of training and specify training frequency.
- The Committee recognizes that current training providers in CT are Community Colleges and community based agencies.

# CHW Advisory Committee Recommendations

## Key Considerations Continued: Recommendation 18

**Table 10. Training Vendor Details by State**

State	Organizations Providing Training	Entity Approving Training Programs/Curriculum	Advisory Body
Florida		FL Certification Board	FL CHW Coalition
Texas	AHECs, Health Centers, Community Colleges, DSHS, Training Centers	DSHS	State Advisory Body
Michigan	MiCHWA, other community agencies	Using MiCHWA approved training curriculum, MiCHWA trains CHWs and the trainers	NA
Rhode Island	DOH, Community Colleges, other community agencies	Rhode Island Certification Board follows CHW Subject Matter Experts recommendations	CHW Subject Matter Experts
Arizona	Community Colleges	AZCHWA and CHW Workforce Coalition	NA
Indiana	HealthVisions Midwest, other training vendors to be approved	INCHWA	NA
Massachusetts	Community Health Education Center (CHEC), Center Health Impact, Community Colleges, UMass School of Public Health, DPH	Board of Certification of CHWs (under MA Dept of Public Health)	NA

# Next Steps & Timeline

**July 10:** Draft Legislative Report sent to CHW Advisory Committee



**July 17:** CHW Advisory Committee Meeting provides feedback on Draft Report



**July 23-August 22:** Report is open for Public Comment



**August 8th:** Webinar to get additional feedback from CHWs on Report & Recommendations



**August 21:** CHW Advisory Committee reviews public comment and recommends Report edits



**September 13:** Steering Committee reviews Report and approves for delivery to the legislature

# Adjourn