CONNECTICUT HEALTHCARE INNOVATION PLAN



Community Health Worker Advisory Committee Design Group 3 - Training

April 11, 2018

Agenda

1.	Introductions & Review decisions from March 20 meeting	5 min
2.	Review of other states - Number of training hours	10 min
3.	Discussion	15 min
4.	Review of other states - Training modality/methodology & Tra delivery	
5.	Discussion	15 min
6.	Internship (begin discussion)	5 min
7.	Timeline & Next Steps	5 min

Decisions from March 20

Design Group 3 made a reviewed and recommendation on the following Key Decision Point:

1. Content – Identify Core Competencies *

*Accepted the C3 Core Competencies previously decided on by the CHW Advisory Committee

Decisions made by Design Group 3 in March 20 Meeting (2 of 2)

Design Group 3 decided the following Key Decision Points still need to be made:

- 1. <u>Number of training hours</u>
- 2. <u>Training modality/methodology</u>
- 3. Standards for instructional methods now will be referred to as "Training Delivery"
- 4. Internship
- 5. Training vendor criteria
- 6. Instructor qualifications
- 7. How does the training program assess proficiency?
- 8. Determine/develop type of assessment

*Key Decisions Points that are bolded and underlined are the ones we will focus on today

Regarding number of training hours, modality/methodology, delivery methods, internship:

- Most of these points can and should be debated on the Committee, with robust discussion of pros and cons
- No obvious answers/no clear consensus or "best practice"
- The required length of an educational program depends very much on defined core competencies and the definition of "certified" as to the implied level of proficiency
- CHW education should at least be based on adult learning principles.
- Lecture and quiz formats are to be avoided.

Regarding number of training hours, modality/methodology, delivery methods, internship:

- Due to the nature of the work, learning should be participatory and interactive. Many people recommend popular ed, but not everyone is comfortable with it or adept at it, so some adaptation is usually necessary.
- In-person is always best, and individual (independent) online learning is not a good idea, but hybrid and interactive TV modes can work, in recognition of the needs of smaller states and rural areas.
- An internship or practicum is highly recommended, the longer the better: my impression is most are 40-80 hours it's a tool for student assessment as well as integration of learning.

30 clock hours of content specific training as follows

Core Competencies (Performance Domains):

- Communication and Education: 4 clock hours
- Resources: 4 clock hours
- Advocacy: 4 clock hours
- Foundations of Health: 4 clock hours
- Professional Responsibility: 4 clock hours
- Electives (may relate to any of the performance domains): 10~14 clock hours yearly, used as CEUs for biennial recertification

80 hours (48 hour training to be phased out)

Core Competencies:

- 1. Outreach Methods and Strategies
- 2. Individual and Community Assessment
- 3. Effective Communication
- 4. Cultural Responsiveness and Meditation
- 5. Education to Promote Healthy Behavior Change
- 6. Care Coordination and System Navigation
- 7. Use of Public Health Concepts and Approaches
- 8. Advocacy and Community Capacity Building
- 9. Documentation
- **10.Professional Skills and Conduct**

70 hours of content specific training as follows

Core Competencies:

- 1. Engagement methods and strategies
- 2. Individual and community assessment
- 3. Culturally and linguistically appropriate responsiveness
- 4. Promote health and wellbeing
- 5. Care coordination and system navigation
- 6. Public health concepts and approaches
- 7. Advocacy and community capacity building
- 8. Safety and self care
- 9. Ethical responsibilities and professional skills

160 hours of content specific training as follows

Core Competencies:

- 1. Communication
- 2. Interpersonal
- 3. Service Coordination
- 4. Capacity-Building
- 5. Advocacy
- 6. Teaching
- 7. Organizational Skills
- 8. Knowledge based on Specific Health Issues.

State	Number of Training Hours	Number of Core Competencies
Florida	30	5 + elective
Massachusetts	80 (48-hr training to be phased out)	10
Rhode Island	70	9
Texas	160	8

- Housatonic Community College CHW Program
 - 120 hours of lecture
 - Optional internship
- Gateway Community College CHW Training Program
 - 6 hours a day, 4 days a weeks for 11 weeks = 264 hours
 - Additional internship
- Capitol Community College
 - 3 hours a day, 3 days a week for 12 weeks = 108 hours
 - Additional 12 hour course in order to receive certificate
- Southwestern AHEC
 - 56 hours of Core Competency
 - 16 hours Motivational Interviewing
 - 8 hours MHFA Training

Connecticut - Number of Training Hours



How many hours of training should be recommended for Connecticut?

Training Modality/Methodology & Training Delivery

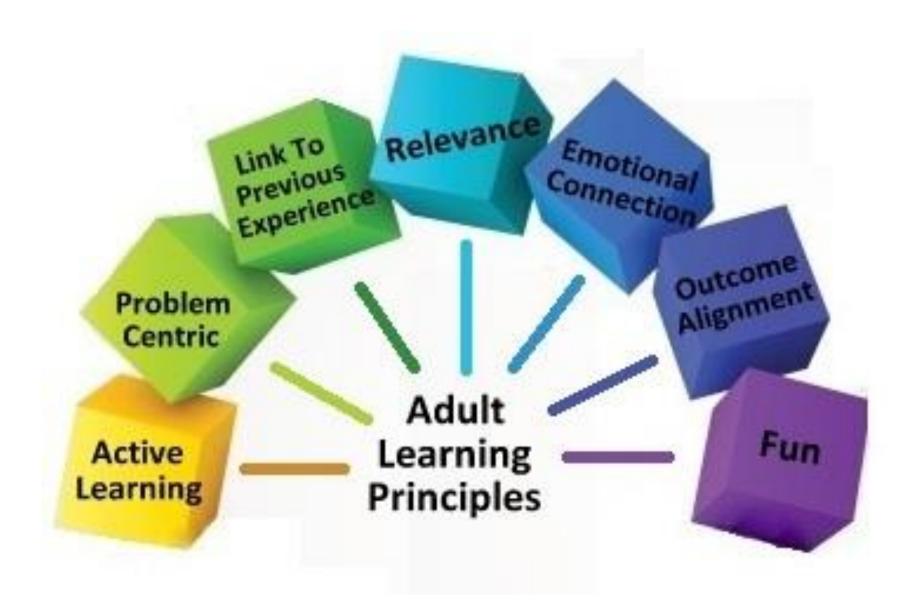
Training Modality/Methodology



Training Modality/Methodology



Training Modality/Methodology



Rhode Island - Training Modality/Methodology

• Primarily use a didactic training model

 Use different speakers for each section based on presenter expertise • CHW trainings are in-person

Have a Patient Navigator training course offered as a hybrid class

Rhode Island – Training Delivery

• All in-person training

• No online modules

• Training available face to face or online depending on the training program offering the course

• Over 30 trainings offered throughout the state

Training Modality/Methodology & Delivery Methods



What type of training modality/methodology should be recommended for Connecticut?

What type of training delivery methods should be recommended for Connecticut?

Internship

Internship



What is an internship?

Should an internship be included as a part of CHW training?

How long should it be?

Timeline

April 17th Design Group 3 Meeting (Inperson) <u>Key Decisions Points</u> Internship Training Vendor Criteria Instructor Qualifications

Date TBD Design Group 3 Phone Call *Between in-person meetings <u>Key Decisions Points</u> How to assess proficiency? Type of Assessment

May 15th Design Group 3 Meeting (In-person) <u>Key Decisions Points</u> Anything still undecided or needing further discussion

Next Steps