# Community Health Worker Competency-based Training - On the Way to Transforming Health Care



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#### INTRODUCTION

Background: Community Health Workers are an emerging workforce in Nebraska. Development of the role has recently been accelerated through federal investments in two, University-level training projects with the capacity to more than double the size of the workforce in three years in Nebraska. Community Health Workers are valued for their lived and cultural experiences, trust relationships with difficult to serve communities, and the knowledge and ability to address social drivers of health and equity through linking individuals and providers with community services and resources. To be effective, Community Health Workers are respected and valued members of interdisciplinary health care teams, and/or multidisciplinary teams located in community resource or public health agencies.

#### KEY POINTS

In this presentation, I primarily focus on three unique aspects of the training project called CHWConnect@UNMC, which is delivered by the College of Public Health under the direction of Dr. Dejun Su. I will describe the <u>updated competency framework for Community Health Workers; strategies and rationale for involving experienced Community Health Workers in CHW training; and innovative approaches to <u>increase the uptake of CHWS</u> as members of interdisciplinary teams. All involve boundary-spanning collaborations.</u>

### **OVERVIEW OF THE TRAINING PROJECT**

The University of Nebraska Medical Center, College of Public Health, convened a new, broad, network of partners to discuss a competency framework that would be translated into instructional modules. Partners included academic centers, health system partners, and community advocates. Some had experience with Community Health Workers in various settings, while others were interested in innovative changes to improve outcomes in their respective systems, particularly related to serving diverse and disadvantaged communities more effectively and equitably.

The core didactic training period encompasses ten consecutive weeks, with trainees working online to complete modules, including review of lecture and study materials, participation in discussion boards, and quizzes. Initial training is followed by on-the-job field experience, with some trainees entering Department of Labor-approved formal apprenticeships. At the conclusion of the field experience, trainees present a completed Capstone project, and receive a certificate from the University of Nebraska Medical Center affirming successful completion of the training program.

Diverse interdisciplinary instructors were recruited to develop the instructional content. Experienced Community Health Workers interested in workforce development are involved as consultant-advisors, as well as instructors, for the training project. The CHW Advisors developed and hosted a series of CHWConnect Cafes to complement didactic instruction. In the virtual Cafés, CHW trainess integrate and apply training topics with their respective lived experiences and backgrounds. The training project is designed with a capacity of 80 students per cohort, with three cohorts planned for the initial period of funding.

### KEY PRELIMINARY RESULTS

Cohort 1 Summary Description: Eighty individuals enrolled in Cohort 1, from an applicant pool of over 200. Eighteen percent of trainees are male, 39% from rural areas, and 70% self-identify as reacial/ethnic minorities. Thirty percent speak a language other than English at home. Sixty-nine individuals completed the 10-week didactic program. Thirty-seven organizations are participating in field experiences.

## Key Result 1: Updating the Community Health Workers Competency Framework

Core Competencies for Community Health Workers have been promulgated through several state and national sources over the past 10+ years. In the field, respecting these core competencies has been essential to growing understanding and acceptance of the role by other more established health professions. However, it is also vital that the competencies of Community Health Workers are viewed as both unique and relevant to meeting health care needs and disparities. Curriculum developers for CHWConnect@UNMC worked to integrate the existing recognized competencies of CHWs, address the competency framework proposed by the funder, and update the competencies for the current market of hiring and transformation in health care.



## Key Result 3: Boundary-spanning Collaborations to Increase Uptake of Community Health Workers on Interdisciplinary Teams

From Cohort 1, sixty-four trainees are continuing in field experiences, in a total of thirty-seven organizations across the state. In many organizations, Community Health Workers will be new members of interdisciplinary teams, working with colleagues who may be unfamiliar with the role. With rural pharmacy collaborations, CHWs are in locations not previously considered for the role. With the expansion of the workforce driven by new training programs, numerous efforts must take place to lay the groundwork for matching Community Health Workers to organizations seeking to transform the quality and outcomes of care by transforming the ways community resources, social needs, and health care intersect.



## Key Result 2: Involving Experienced Community Health Workers in CHW Training

Community Health Workers are highly valued for cultural competency, lived experience, and being trusted members of communities that may disproportionately experience health disparities. These qualities are not delivered through didactic instruction, but rather the didactic instruction is intended to integrate those qualities with useful skills and knowledge. Instructors must convey respect and appreciation for the unique backgrounds of diverse and non-traditional students. CHWConnect@UNMC enhances planning, delivery, and enhancements of the curriculum by engaging experienced Community Health Workers as advisors and instructors. The CHWConnect Cafés, hosted by CHW Advisors, provide opportunities for peer engagement and discussion. In addition to experienced CHWs as role models, the Cafés are an opportunity to develop communication skills and integrate new knowledge with lived experiences.



#### Conclusions

Community Health Workers are unique in that the key qualities they bring to health care transformation cannot be developed or delivered in a purely didactic curriculum, but are drawn from lived experience and relationship with community. The curriculum must be complemented with opportunities for CHW trainers to practice communication skills, while integrating their own cultural and lived experience with the course content.

The involvement of experienced Community Health Workers as advisors and instructors in the training project validates the professionalism and contributions of the role to the health care workforce and greater impacts on transgenerational health disparities.

In order for Community Health Workers to be effective in health systems transformation, the existing health professions and interdisciplinary teams must 'make way' for CHWs. This is being accomplished within organizations willing to host CHWs for on-the-job field experiences as well as apprentisciships. In addition, new health professionals in training must be taught the values of culturally competert and equitable care that CHWs can help achieve.

### REFERENCES

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https://dhhs.ne.gov/MCAH/CHW-Workforce-Training-Study-Report.pdf

Learn more about Nebraska Community Health Workers:
Nebraska Department of Health and Human Services:
https://dhhs.ne.gov/Pages/MCASH-CHW.aspx
University of Nebraska Medical Center, College of Public Health:
https://www.unmc.edu/publichealth/chwp/index.html

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