COMMUNITY HEALTH WORKERS
Multi-disciplinary Effort to Promote CHW Sustainability in a Bi-state, Regional Community

www.marc.org/communityhealthworkers
KC REGIONAL CHW COLLABORATIVE

- Bi-state Collaboration
- Multi-disciplinary members:
  - Community Health Workers
  - Federally qualified health centers
  - Hospitals
  - Social service organizations
  - Faith-based organizations
  - Educational partners
  - Other community-based organizations
- Supported by Mid-America Regional Council with a grant from the Health Care Foundation of Greater Kansas City
MISSION AND VISION

- **Vision**: Optimal health outcomes for the Greater Kansas City bi-state community.

- **Mission**: To integrate CHWs into the health and human services systems through capacity building, advocacy, and sustainability.

- Community Health Workers link between the health and human service system.
LEADERSHIP AND STRUCTURE

EXECUTIVE COMMITTEE

REGIONAL KC COMMUNITY HEALTH WORKER COLLABORATIVE

CHW FORUM

ADVOCACY SUBCOMMITTEE

CAPACITY BUILDING SUBCOMMITTEE

SUSTAINABILITY SUBCOMMITTEE
HISTORY

- Stated in 2011
- 2011-2016 Accomplishments
  - CHW Training Program
  - Membership and CHW Growth
  - CHW Forum
  - White Paper
  - Bylaws and Org Structure
  - Strategic Plan
  - State Involvement
  - KS CHW Coalition
LONG-TERM STRATEGIC PLAN

- Long-term Goal Development with Executive Committee
  - Guided Discussion - KEY
  - Long-term goals related to **capacity building**, **sustainability**, and **advocacy** to further vision and mission
  - Measureable Benchmarks

- Subcommittee Work Plans
  - Guided Discussion in subcommittees to develop work plans with action steps to achieve benchmarks and long-term goals set by Executive Committee
  - Subcommittee work includes engaging CHWs and other Collaborative members through focus groups and survey methods

- Logic Model
  - Visual representation of subcommittee work plans, short and long-term goals and measurements of success
LONG-TERM GOALS

- 5-year goal: CHWs are integrated into the health and human services systems:
  - 25% increase in volunteer or employed CHWs in the region
  - 10% increase in the number of organizations that offer CHW programs
  - 100% regional safety net providers coordinate with CHWs
  - 80% of hospitals coordinate with CHWs

- Measurement tools:
  - MARC CHW regional occupational analysis
  - Regional CHW program inventory
Advocacy Goal: Payers, educators and relevant stakeholders recognize CHW value.

- Measurement of short-term success (1-3 years):
  - Presentation feedback indicates audience understands CHW value
  - Increase in Collaborative membership

- Accomplishments
  - Held 8 presentations with positive feedback and in-depth follow up questions
  - Developed and implemented an advocacy campaign using print and online media (rack cards, regular newsletter, use of Facebook)
  - Dedicated website (www.marc.org/communityhealthworkers)
Capacity Building Goal: A comprehensive curriculum and professional development opportunities exist that meet the needs of the community, CHWs, employers, and payers.

- **Measurement of short-term success (1-3 years):**
  - Increase in CHW and employer satisfaction with training opportunities
  - Increase in diversity of CHWs trained and type of post-training work
  - Statewide advisory committees adopt our recommended approach to CHW core competencies, scope of practice and certification

- **Accomplishments:**
  - Surveyed CHWs on professional development needs and regional CHW training
  - Developed a 12-month action plan to create a supervisory training
  - Hired consultant to improve regional training opportunities
  - Recommendation to MO and KS on CHW scope of practice, core competencies, certification
  - Facilitated 6 professional development speakers for the CHW forum
Sustainability Goal: Regional CHW workforce is supported by a CHW association and multiple funding mechanisms

- Measurement of short-term success (1-3 years):
  - Local public health associations created CHW chapters
  - MO and KS Medicaid reimburse for CHW services
- Accomplishments
  - Held a regional conference targeted to payers
  - Initiated a collaborative partnership across Missouri to develop a collective recommended approach to payment
  - Research and recommend to KS and MO governmental agencies Medicaid state plan language or Medicaid managed care contractual language for CHW reimbursement
COMMUNITY - STATE COLLABORATION
COMMUNITY-STATE COLLABORATION: CERTIFICATION POLICY

- Background research on certification policies nationally
- Educational presentations for Collaborative and CHW Forum members
- Distribution of a regional survey on CHW certification
- Focus groups to refine survey results
- Draft a certification policy proposal
- Review and refine draft proposal with Collaborative and CHW Forum members
- Presented to Missouri Statewide CHW Advisory Committee (administered by the Department of Health and Senior Services)
- Participate and contribute experience and research in discussions with Missouri Statewide CHW Advisory Committee to develop a recommendation for state officials
- Plan to present policy recommendation to the Kansas CHW Coalition
COMMUNITY-STATE COLLABORATION: KEYS TO SUCCESS

- **Formalized process.** Organized regional efforts to research policy, engage stakeholders, and communicate stakeholder experience with CHW efforts can contribute to learning at the state level.

- **Stakeholder collaboration.** Expanding a regional collaboration statewide can improve advocacy for sustainability payment, while leveraging the work and voice of regional stakeholders.

- **Impetus for state-level involvement.** MO DHSS has a CDC grant that requires for community-state partnership to further community-clinical linkages.

- **State-level Champion.** DHSS staff believe community voice is critical to effective public policy.
FINAL THOUGHTS
CONSIDERATIONS

- Diverse partnership is critical.
- Identify key leaders at state level that are open to working together.
- At the community level, include funders and state government as an equal partner.
- Don’t wait to be asked! Take the initiative to do the research, form the partnerships and make the recommendations to both funders and state governments.
- State must include the “right” people at the advisory level, representing all aspects of the CHW profession.
Broderick Crawford  
Executive Director, NBC CDC  
745 Walker Avenue  
Kansas City, KS 66101  
broderick.crawford@nbccdc.org  
www.nbccdc.org

Erika Saleski  
Consultant, ES Advisors, LLC  
esaleski@comcast.net
KC Regional CHW Collaborative
Marlene Nagel
Mid-America Regional Council
600 Broadway, Suite 200
Kansas City, Missouri 64105
mnagel@marc.org
www.marc.org/communityhealthworkers
RESOURCE LINKS

- **White Paper**

- **Videos**
  - [https://www.youtube.com/watch?v=rfPTvXEVw90](https://www.youtube.com/watch?v=rfPTvXEVw90)
  - [https://vimeo.com/dontblinkmpls/review/222731842/420b91e274](https://vimeo.com/dontblinkmpls/review/222731842/420b91e274)
  - [https://www.youtube.com/watch?v=Ro6H76I3fik](https://www.youtube.com/watch?v=Ro6H76I3fik)