

# Integrating Community Health Workers into Complex Care Teams: Key Considerations

By Jim Lloyd and Caitlin Thomas-Henkel, Center for Health Care Strategies

## IN BRIEF

Complex care programs across the country are increasingly using community health workers (CHWs) to cultivate strong relationships with patients and deliver culturally competent education, care coordination, and system navigation assistance among other supports. CHWs complement traditional medical care delivery by addressing patients' basic needs while allowing other providers to operate at the top of their licenses. This technical assistance brief examines effective strategies for including CHWs in complex care teams drawing from the experiences of organizations participating in the Center for Health Care Strategies' (CHCS) *Transforming Complex Care* initiative and national experts in CHCS' *Complex Care Innovation Lab*. In order to maximize the impact of CHWs, organizations should: (1) thoughtfully approach the hiring process; (2) provide training and clear tracks for career progression; (3) promote full integration within the care team; and (4) build in meaningful supports to prevent burnout, fatigue, and turnover.

Increasingly, health care organizations are recognizing the need to connect patients with complex needs with community resources to improve quality, enhance patient experience, and reduce unnecessary hospitalizations and emergency department (ED) visits. Community health workers (CHWs) — also referred to as *promotores de salud*, health navigators, or liaisons<sup>1</sup> — can play a key role in facilitating these connections and addressing social determinants of health for patients with complex needs. CHW's familiarity with the communities they serve allows them to intimately understand the socio-economic and cultural environments in which their patients live, and as a result, build strong, trusting relationships. Effective CHWs have one foot firmly in each world: the clinical setting — where they work with physicians, nurses, and care managers to coordinate care for patients — and the community — where they live, work, and socialize.

CHWs are a unique workforce that requires special considerations to support effective integration into complex care programs. These considerations include identifying and hiring appropriate candidates for CHW positions; providing CHWs with training and career progression opportunities; successfully integrating CHWs into collaborative team-based models of care; and supporting and retaining existing CHWs. This technical assistance brief highlights strategies for integrating CHWs into complex care teams drawing from the experiences of organizations participating in the Center for Health Care Strategies' *Transforming Complex Care* initiative and national experts in CHCS' *Complex Care Innovation Lab*.

## Recruiting and Hiring

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Programs with experience in recruiting for CHWs indicated that it is critical for programs to seek candidates who demonstrate a unique set of personality traits essential for the position. Unlike many other members of the care team – nurses, social workers, medical assistants, pharmacists – who are hired largely based on educational attainment or certification, the role of CHWs requires soft skills such as empathy, active listening, and open communication. Experts have suggested that it can be difficult for organizations to find qualified CHWs, particularly in rural areas where there may be fewer candidates. Many CHW job qualifications, moreover, are not tasks that are easily captured on a resume. The most successful CHWs demonstrate creativity and flexibility; maintain a strong connection to the community, including familiarity with available resources; and are committed to serving the population.

- **Extending Recruitment into the Community:** To identify appropriate CHW candidates, organizations can extend their search in non-traditional ways, such as engaging the community in recruiting efforts. Providers can post job descriptions in key community-based organizations, including YMCA/YWCAs, social services agencies, gathering spots such as hair salons, or places of worship. For example, staff from the Los Angeles County Department of Health Service’s Care Connections Program (CCP) attend community town hall events to identify people with the appropriate characteristics and personalities.
- **Employing Non-Traditional Interviewing Techniques:** Organizations hiring CHWs often use non-traditional interview methods such as role-playing, problem-solving scenarios, and small group interviews to identify qualified applicants. These techniques help assess the candidates’ ability to think on their feet and adapt to difficult circumstances. For example, interview questions for Virginia Commonwealth University Health’s TakeCCare program focus on experiences that outreach workers may face, asking them to give examples of going “above and beyond” for others, and their ability to identify multiple, complex problems that their patients may encounter.
- **Meeting Specific Population Needs:** Hiring CHWs who have shared experiences with the patients they serve is important to help address the needs of targeted sub-populations. Mountain-Pacific Quality Health, for example, recognized that one in 10 Montanans — and many of its patients — have served in the armed forces. In response, Mountain-Pacific hired two veteran CHWs to focus on the veteran community and their particular needs. The veteran CHWs understand the challenges that returning veterans face, and appreciate the opportunity to “give back” to other veterans through their work as CHWs.

## Training and Career Progression

CHWs, particularly those who are new to the health care industry, can benefit from customized training to help them perform their role to the greatest capacity and expand their skill sets. Some states have established CHW training programs or certifications that providers may use;<sup>2</sup> other providers may use curricula developed elsewhere and adapted to the local environment.<sup>3</sup> Organizations can also offer ways to help CHWs progress in the field, either continuing as CHWs or assuming more advanced positions.

- **Providing Training in Key Disciplines:** Providing opportunities for more advanced training can help CHWs appropriately channel their natural ability for patient advocacy. Training in motivational interviewing, for example, can help CHWs engage more effectively with patients through clear communication, active listening, and goal setting. Harm reduction training can help CHWs better manage patients dealing with substance use disorders, eating disorders, depression, and/or anxiety. In addition, patients with complex needs are often exposed to trauma early in their lives.<sup>4</sup> Organizations should consider training and supervision to ensure that CHWs can cope with patients' trauma, as well as their own potential trauma histories. The work of a CHW involves many difficult situations, potentially including coping with the death of patients. It is important for health systems and supervisors to provide staff with skills to mentally prepare and allow adequate time to process their feelings.
- **Supporting Professional Progression:** There is typically no clear career ladder for CHWs. As a result, CHWs who want to progress in the health care field often must seek their own advancement opportunities. Anansi Health, a nonprofit technical assistance institute focused on CHW best practices, recommends that programs offer assistance to help interested CHWs transition to careers in nursing, social work, medical assistance, and chemical dependency counseling. The Los Angeles County Care Connections Program (CCP) provides flexible scheduling allowing CHWs to accommodate coursework to advance toward other professions. When the county identifies that CHWs are interested in professional progression, it works with them to develop plans for achieving their professional goals. In the Prevention and Access to Care and Treatment Project at Brigham and Women's Hospital in Boston, CHWs have advanced to become nurses, social workers, nurse practitioners, and, in one case, an immigration lawyer.

### Select Training Resources for Community Health Workers



- **Rural Health Information Hub** index of state certification programs:  
[www.ruralhealthinfo.org/community-health/community-health-workers/3/certification](http://www.ruralhealthinfo.org/community-health/community-health-workers/3/certification)
- **Asthma Community Network** index of CHW training programs:  
[www.asthmacommunitynetwork.org/chw\\_programs](http://www.asthmacommunitynetwork.org/chw_programs)
- **Centers for Disease Control and Prevention** CHW training resources:  
[www.cdc.gov/dhdsdp/programs/spha/chw\\_training](http://www.cdc.gov/dhdsdp/programs/spha/chw_training)

## Team Integration

After hiring and training CHWs, programs must effectively integrate the employees into care teams. With clearly defined roles and responsibilities, CHWs can support other staff and become highly valued team members. The CHW's work in connecting with patients and acting as a liaison to the community not only provides invaluable supports for patients, but it also allows nurses and physicians to operate at the top their licenses. Thus, clinicians can dedicate more time to other critical responsibilities like providing patient care. Recognizing the clear and essential role that each care team member plays promotes higher morale and camaraderie across the team.

- **Ensuring Fit:** How CHWs are initially integrated into a care team is essential to ensuring that they are a good “fit” for the team. The Los Angeles County CCP introduces CHWs by setting a probationary period with clear performance expectations. New CHWs begin with smaller caseloads and frequent check-ins with supervisors to discuss their progress. A number of factors, including the quality of conduct with patients and the strength of communication with care team members, is used to assess CHW performance and ensure that CHWs understand roles and responsibilities across the team.
- **Educate Staff about CHW Contributions:** It is important for an organization using CHWs to ensure that all staff are familiar with how CHWs function. Nurses and physicians may not be familiar with the CHW role and how best to utilize the CHW's strengths. Training can help traditional medical staff understand how the role of the CHW differs from other workers and how their work should be evaluated differently, e.g., looser expectations for “time in the office” and flexible hours. Education of other staff also helps assure them that their jobs are not at risk.
- **Communicating through Case Conferences:** Case conferences, where care team members come together to discuss individual cases, offer an opportunity to facilitate the integration of CHWs into the team. The conferences provide a clinical benefit by sharing patient-specific information across team members, and also create an opportunity to publicly acknowledge the contributions of team members including the unique value of CHWs. These regular discussions also provide an opportunity for care team members to talk about their experiences with patients and serve as a support network for each other.

### Resources to Help Manage Community Health Worker Caseloads<sup>5</sup>



- **Iora Health** in Massachusetts has developed an online collaborative care platform that focuses on high-touch care management. [www.iorahealth.com](http://www.iorahealth.com)
- **Dimagi's CommCare** is an open IT management system that allows health care organizations to build their own care management apps and dashboards that are easy to use and integrated with mobile technology. [www.dimagi.com/products](http://www.dimagi.com/products)
- **REDCap**, from Harvard's Clinical and Translational Science Center, is an online platform for capturing and managing data that can be used to manage CHWs' workflows as well as to securely transmit data for research purposes. <https://catalyst.harvard.edu/services/redcap>

- Managing Workloads:** If a CHW has a high caseload, he or she may not be able to provide the necessary support for patients, and may be subject to fatigue and burnout. The appropriate caseload for CHWs varies greatly depending on the type of practice and patient characteristics, and organizations have integrated CHWs successfully with a variety of caseloads:

Organization	Caseload	Considerations
<b>VCU Health</b>	Up to 25	<ul style="list-style-type: none"> <li>The model is “high-touch,” involving very intensive care management.</li> <li>VCU Health’s outreach workers are required to have bachelor’s degrees.</li> </ul>
<b>AccessHealth Spartanburg</b>	50-60 clients	<ul style="list-style-type: none"> <li>AccessHealth assigns the most complex patients to nurse care managers, while allowing clients with relatively simpler needs to be managed by a CHW.</li> </ul>
<b>Johns Hopkins Community Health Partnership</b>	50-60 clients	<ul style="list-style-type: none"> <li>CHWs locate potential patients in their communities and link them to care teams and navigation-support specialists, who connect the patients to needed social services.</li> </ul>
<b>Anansi Health</b>	Varies by need <i>(see Considerations)</i>	Anansi Health recommends: <ul style="list-style-type: none"> <li>15-18 clients for CHWs serving high-risk populations with multiple chronic conditions and social complexity;</li> <li>25-35 clients for CHWs serving patients with moderate risk;</li> <li>50-60 clients for CHWs serving patients “graduating out” of complex care management; and</li> <li>Up to 100 clients for CHWs doing population-based care, such as screening or public health surveillance.</li> </ul>

## Support and Retention

Retaining qualified and effective employees is a challenge within all health care sectors, especially those involved in team-based care for patients with complex medical and social needs. CHWs can pose specific retention challenges due to the nature of their work. The position involves high-touch — and often high-stress — interaction with patients that can contribute to employee turnover, making establishment of a well-functioning care team challenging. Organizations can support CHWs by helping them to address the stresses involved in their role and help them to function more effectively.

- Avoiding Compassion Fatigue:** Practitioners of the caring professions are often at risk for “compassion fatigue,” a form of burnout that can affect individuals who devote their professional lives to working with patients who experience emotional and physical pain.<sup>6</sup> CHWs are at particular risk for compassion fatigue since they frequently interact with people who have complex physical and social needs, and they work with patients in their home and community as opposed to the more protective environment of a health care clinic. Health care organizations can mitigate compassion fatigue of staff members through a number of

methods, including ongoing clinical supervision, ongoing communication (e.g., through interactive case conferencing), and sharing of reflections about what is happening out “in the field.” For example, VCU Health’s TakeCCare outreach workers develop weekly reflection logs — audio recordings that capture worker experiences to inform care delivery, process difficult situations, and, serve as an opportunity for continuous quality improvement.

- **Investing in Employees’ Health:** The Camden Coalition of Healthcare Providers in New Jersey offers its employees a \$2,000 wellness benefit that can be used to improve the employee’s wellbeing (e.g., individual and group counseling, yoga classes). AccessHealth Spartanburg in South Carolina offers “time off” from scheduled patient care for their CHWs and nurse care managers on Fridays to allow time for trainings, internal meetings, and to catch up on administrative work. This approach shows that the organization values the CHWs’ efforts in the community and ensures that there is downtime, free of outside stressors associated with delivering direct care. Both the Camden Coalition and Hennepin Health in Minnesota dedicate staff counselors for CHWs (and other employees) to offer informal clinical support to process stressful situations and cope with the emotional costs of working in high-touch professions.
- **Empowering CHWs:** Employees can be driven to burnout through feelings of helplessness or hopelessness, so creating flexibility in CHWs’ work allows them to address their patients’ needs. Small things can help a great deal: VCU Health distributes \$50 debit cards that team members may spend on small purchases of 5 or 10 dollars in order to solve their patients’ immediate problems. For example, if a patient experiencing homelessness and has not eaten for some time, an outreach worker can simply buy them a sandwich with the gift card. It is a simple, low-cost solution to addressing immediate patient needs, creates a stronger relationship between the patient and the CHW, and empowers CHWs to use their own judgment in how best to help patients.

## Maximizing the Value of Community Health Workers

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CHWs offer important and unique contributions to a complex care team, supporting trusting relationships with patients outside the walls of the clinic, and giving an organization a deeper understanding of the community that they serve. Organizations seeking to take advantage of the opportunities presented by CHWs must first identify and select the appropriate candidates for the job, focusing on candidates’ flexibility and their connection to the communities they will be called upon to serve. Training CHWs correctly can help them best provide care for an organization’s patients, and supporting their professional development allows them to improve their skills, move up the health care employment ladder, and increases morale. CHWs can be successfully integrated into care teams by maintaining communication and managing their workloads, both at the beginning and throughout their employment. And lastly, organizations can retain CHWs through addressing their needs as employees and investing in their mental and physical health.

Effective integration of CHWs improves the functioning of the care team as a whole, since it allows individuals within the team to operate within their clear role and area of expertise, and for medical professionals to focus on delivering medical care. The successful integration of valued and supported CHWs, then, connects an organization's work to its patients and their communities, resulting in provision of care that is better and more responsive to patients' complex medical and social needs.

#### ABOUT THE CENTER FOR HEALTH CARE STRATEGIES

The Center for Health Care Strategies (CHCS) is a nonprofit policy center dedicated to improving the health of low-income Americans. It works with state and federal agencies, health plans, providers, and consumer groups to develop innovative programs that better serve people with complex and high-cost health care needs. For more information, visit [www.chcs.org](http://www.chcs.org).

#### ENDNOTES

<sup>1</sup> CHW Job Titles, Community Health Worker Initiative of Sonoma County; available at: [http://chwisc.org/CHW\\_Job\\_Titles.html](http://chwisc.org/CHW_Job_Titles.html).

<sup>2</sup> For more information see, e.g., Minnesota Department of Health, Community Health Worker Education and Training: <http://www.health.state.mn.us/divs/orhpc/workforce/emerging/chw/#training>.

<sup>3</sup> For more information see Rural Health Information Hub, Community Health Workers Toolkit: State Certification Programs: <https://www.ruralhealthinfo.org/community-health/community-health-workers/3/certification>.

<sup>4</sup> R. Davis and A. Maul. *Trauma-Informed Care: Opportunities for High-Need, High-Cost Medicaid Populations*. Center for Health Care Strategies, March 2015. Available at: <http://www.chcs.org/resource/trauma-informed-care-opportunities-high-need-high-cost-medicaid-populations/>.

<sup>5</sup> For more information about these CHW caseload management tools, visit [www.iorahealth.com](http://www.iorahealth.com), [www.dimagi.com](http://www.dimagi.com), and <https://catalyst.harvard.edu/services/redcap/>.

<sup>6</sup> B. Lombardo and C. Eyre. "Compassion Fatigue: A Nurse's Primer" *OJIN: The Online Journal of Issues in Nursing* Vol. 16, No. 1. Manuscript 3. January 2011. Available at: <http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-16-2011/No1-Jan-2011/Compassion-Fatigue-A-Nurses-Primer.html>.