

Community Health Worker Task Force CHW Focus Group Special Meeting Thursday June 6, 2024

Quick recap

The Community Health Worker (CHW) focus group discussed training, education, certification, and regulation, with a focus on core competencies and the need for a 40-hour course for certification. They also deliberated on the structure of continuing education for license renewal, the appropriate number of continuing education hours for different roles, and the inclusion of trauma-informed care and motivational interviewing in competency discussions. The conversation ended with plans for a fall meeting and discussions on the regulatory process and the creation of the collaborative.

CHW Focus Group Recommendations:

- Core Competencies
 - The Focus Group reviewed and agreed with the Task Force's Core Competency draft.
 - Regarding the "Practice Competencies-Internship" competency, one member suggested a "forgiveness ability" for those already working in the CHW role for a certain number of months, years, etc.
 - It was mentioned that Lake Area Technical College allows students who work as CHW's to utilize this experience by counting it toward the internship requirement.
 - Two additional competencies were suggested: Motivational Interviewing and Trauma Informed Care.

- Training: 40 Hour Requirement
 - It was mentioned that Nursing Assistants also have a 40 hour training requirement.
 - The Focus Group felt anything over 40 hours is very time consuming.
 - It was suggested that the Task Force "grandfather" CHW's who completed MN and SD programs.
 - The 40 hours aligns with Care Coordinator and Peer Support Specialist training.
 - The maximum training hours should be no more than 2 weeks. MN has 2 semesters which is a lot for those who work because there is 20+ hours of assignments per week.

- Training: Experienced pathway
 - When asked what audience should be considered for the Experienced Pathway, the Focus Group mentioned the following: Care Coordinators, Social Workers, Peer Support Specialists and those in various criminal justice fields.
 - The Focus Group agreed that experience requirements of around 1,000 hours would be ideal. This would be close to 6 months of experience. Also, the group felt 500 hours of experience is too minimal.
 - The idea of “attesting” to core competency proficiency was well received. There were suggestions regarding signed recommendations by an individual who is professionally licensed. There was also the suggestion that Letters of Recommendation be received from 2 different sources.
 - The Focus Group agreed that individuals who show documentation regarding CHR certification be granted CHW certification.

- Certification and Regulation
 - The Focus Group suggested renewals should be every 2 years.
 - The group agreed continuing education (CE) is necessary for renewal of licensure.
 - One member suggested aligning CE’s with Care Coordination and Peer Support Specialists
 - It was recommended that the Task Force not mandate in-person trainings because they may not be supported by the employer.
 - CE’s should reflect at least 3 core competencies: Health promotion, ethics and cultural competencies. Some Focus Group participants felt CE’s should cover at least 6 of the 8 Core Competencies.
 - It was recommended that the Task Force base CE requirements with reimbursement guidelines. For example, MN’s reimbursement guidelines focus solely on patient education and health education.
 - Members of the Focus Group felt 12-20 CE hours every 2 years would be appropriate. However, there should not be a CE requirement in the first year of certification.
 - The group felt a \$25-\$50 renewal fee would be appropriate
 - The group was agreeable to a “random audit” of renewal applications.
 - Regarding the regulatory process, it was suggested that it be similar to what is written for Peer Support Specialists. It was explained that many CHW’s go through the same training as a nurse assistant. Keeping this similar and consistent would be beneficial. This will make it easier for organizational and regulatory oversight, especially for rural agencies.
 - Another Focus Group member suggested that disciplinary action and regulation be consistent with Nurse Assistants
 - Overall, the Focus Group agreed and liked the Training Pathway draft created by the Task Force.

- Scope of Practice
 - Some participants were concerned with the language indicating that “a CHW’s services do not include any services that require licensure or training outside what is required for

CHW certification”. More specifically, the concern centered around not being able to complete blood pressure, weight and blood sugar checks.

- It was mentioned that some states include blood pressure, blood sugar and weight checks in CHW training and certifications.
 - One member of the Focus Group mentioned that a license is not required to check blood pressure and blood sugar. She advised that any lay community member can perform these “checks” and it is up to each organization if they want this service performed. This member agreed that the Task Force’s language regarding CHW’s not performing any services that requires a license does not prohibit a CHW from performing blood pressure checks.
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- Structuring a Collaborative
 - Some members of the Focus Group suggested getting information from the South Dakota Collaborative. Another member suggested a ND and SD combined board.
 - It was suggested that the Collaborative be structured to be a resource where CHW’s could receive feedback from colleagues and professional advice. In addition, it was recommended that it should also be something that offers education and training. Another member suggested that it be a resource where best practices are shared.

Adjourn 2:55pm CST
Date Posted: 6/12/24