

Community Health Workers “101” for Providers and Other Stakeholders

The following is a synopsis of “Community Health Workers ‘101’ for Providers and Other Stakeholders,” published in the July/September issue of *Journal of Ambulatory Care Management*.



What is already known on this topic?

Today's ambulatory care providers face numerous challenges as they strive to practice efficient, patient-centered medicine. Community health workers (CHWs) are nationally recognized as important members of the health care workforce and are vital to achieving health care goals in the United States.

What is added by this document?

This article offers guidance to health care providers, administrators, insurance companies and other payers, and additional interested partners for integrating CHWs into multidisciplinary health care teams to prevent and manage chronic diseases. The article explains how CHWs can be engaged to address many current patient- and system-related barriers in ambulatory care practice. CHWs are frontline public health workers who serve as a trusted bridge between community members and health care providers. Among their varied roles,

CHWs can educate and support patients in managing their risk factors and current conditions as well as link these patients to needed resources. As described in the article, including CHWs as members of multidisciplinary care teams has the potential to strengthen both current and emerging models of health care delivery.

In addition, this article serves as tool for those who partner with provider groups, health care administrators, and payers by:

- ▶ Acknowledging challenges faced by providers and explaining how CHWs can help meet those challenges.
- ▶ Showcasing CHWs as an emerging occupation and providing examples of their contributions in ambulatory care settings.
- ▶ Explaining how providers and other stakeholders can understand CHWs' distinctive role in multidisciplinary health care teams and integrate them into health care delivery.
- ▶ Providing tips for a good working environment for CHWs.

What are the implications for public health practice?

CHWs have the potential to contribute to the “triple aim” (Berwick et al., 2008) of improving the experience of care, improving the health of populations, and reducing per capita costs of health care in the United States. Engaging CHWs as members of multidisciplinary care teams with physicians, nurses, health educators, pharmacists, case managers, and social workers can help reduce providers’ frustrations as they face the challenges of improving patient outcomes. CHWs perform a valuable service by helping patients overcome personal and system barriers to better control chronic diseases and their costly consequences.

What are the applications of this document?

- ▶ Educate stakeholders. Before providers and health care delivery systems (both public and private) will consider reimbursing for CHW services or hiring CHWs as part of their staff, they must clearly understand who CHWs are, how they can contribute to patient-centered care, and how they can improve patient and provider satisfaction. Additionally, these partners must be aware of the basics related to recruiting, training, and supervising CHWs.
- ▶ Educate advocates at the state and local levels on the public health benefits of integrating CHWs into the health care system.
- ▶ Share this paper with partners to encourage an ongoing dialogue about and advocacy for uniform CHW training, workforce development, evaluation, occupational regulation, financing mechanisms for sustainable employment, and other appropriate systems and policy changes.

Resources

Health Resources and Services Administration
CHW Registered Apprenticeship Program

301-443-6950

Area Health Education Centers Directory

<http://bhpr.hrsa.gov/grants/area.htm>

Citations

Berwick DM, Nolan TW, Whittington J. The triple aim: care, health, and cost. *Health Aff.* 2008;27(3):759-69.

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The findings and conclusions in these reports are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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