MODERATOR:
Welcome to today's Coffee Break presented by the Applied Research and Evaluation Branch in the Division for Heart Disease and Stroke Prevention at the Centers for Disease Control and Prevention.

We are fortunate to have **Amara Ugwu** as today's presenter, she is an ORISE fellow from the CDC's Division for Heart Disease and Stroke Prevention on the Applied Research and Translation Team.

My name is **Ashley Marshall** and I am today's moderator. I am an ORISE fellow on the Evaluation and program effectiveness team within the **Applied Research and Evaluation Branch**.

Before we begin

All phones have been placed in SILENT mode.

Issues or questions:
- ❑ Q & A box on your screen
- ❑ AREBheartinfo@cdc.gov

MODERATOR:
Before we begin we have a few housekeeping items.

All participants have been muted. However, to improve audio quality please mute your phones and microphones.

If you are having issues with audio or seeing the presentation, please message us using the chat box or send us an email at AREBheartinfo@cdc.gov

If you have questions during the presentation, please enter it on the chat box on your screen. We will address your questions at the end of the session.

Since this is a training series on applied research and evaluation, we do hope you will complete the poll and provide us with your feedback.

Disclaimer: The information presented here is for training purposes and reflects the views of the presenters. It does not necessarily represent the official position of the Centers for Disease Control and Prevention.

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So, without further delay. Let's get started. Amara, the floor is yours.

Key Definition

Community health workers (CHWs) are frontline lay health workers who often serve as a liaison between the community and health systems to improve access to care and quality of services.

Amara:

Thank you Ashley.

Today's presentation focuses on community health workers.

Community health workers (or CHWs) are frontline lay health workers who often serve as a liaison between the community and health systems to improve access to care and quality of services.

Background and purpose

❑ **CHWs are integral to cardiovascular prevention initiatives, evidence indicates they help manage and reduce risk factors**

❑ **The Division for Heart Disease and Stroke Prevention (DHDSP) has developed various CHW-related resources including:**
  ▪ published articles, trainings, policy assessments, and translation and implementation products.

CHWs are integral to heart disease and stroke prevention initiatives and have been shown to help manage and reduce risk factors for chronic conditions.

The Division for Heart Disease and Stroke Prevention (DHDSP) has developed various resources related to the work of CHWs in heart disease and stroke prevention. Current DHDSP resources include published articles, trainings, policy assessments, and translation and implementation products.

Mounting # of Resources...leading to mounting challenge

The increased interest in the CHW field within DHDSP resulted in a proliferation of products. The development, promotion and dissemination of CHW resources by DHDSP is continually shaped by the needs of our partners, and grantees. These resources help to build the evidence-base and capacity of health promotors and evaluators.
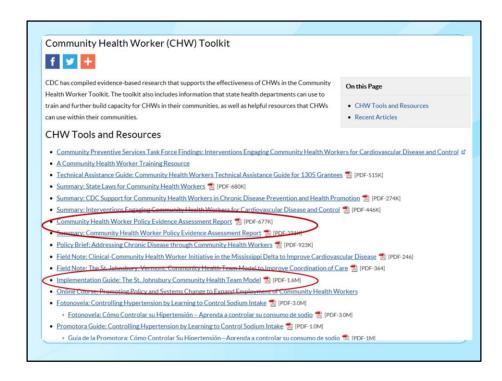
However, the increase in resources also created a challenge- to compile and organize CHW resources.

The solution was the DHDSP CHW toolkit.

Previously, Many of the existing resources were placed in different locations on the DHDSP website, so in an effort to make things easier for users of our website to navigate, we compiled all CHW-related resources onto a web-page that we named the CHW Toolkit.

The toolkit includes information that state health departments can use to train and further build capacity for CHWs in their communities, as well as helpful resources that CHWs can use within their communities.

Community Health Worker (CHW) Toolkit

CDC has compiled evidence-based research that supports the effectiveness of CHWs in the Community Health Worker Toolkit. The toolkit also includes information that state health departments can use to train and further build capacity for CHWs in their communities, as well as helpful resources that CHWs can use within their communities.

On this Page
- CHW Tools and Resources
- Recent Articles

CHW Tools and Resources

- Community Preventive Services Task Force Findings: Interventions Engaging Community Health Workers for Cardiovascular Disease and Control
- A Community Health Worker Training Resource
- Technical Assistance Guide: Community Health Workers Technical Assistance Guide for 1305 Grantees [PDF-515K]
- Summary: State Laws for Community Health Workers [PDF-680K]
- Summary: CDC Support for Community Health Workers in Chronic Disease Prevention and Health Promotion [PDF-274K]
- Summary: Interventions Engaging Community Health Workers for Cardiovascular Disease and Control [PDF-446K]
- Community Health Worker Policy Evidence Assessment Report [PDF-677K]
- Summary: Community Health Worker Policy Evidence Assessment Report [PDF-231K]
- Policy Brief: Addressing Chronic Disease through Community Health Workers [PDF-923K]
- Field Note: Clinical-Community Health Worker Initiative in the Mississippi Delta to Improve Cardiovascular Disease [PDF-246]
- Field Note: The St. Johnsbury, Vermont, Community Health Team Model to Improve Coordination of Care [PDF-364]
- Implementation Guide: The St. Johnsbury Community Health Team Model [PDF-1.6M]
- Online Course: Promoting Policy and Systems Change to Expand Employment of Community Health Workers
- Fotonovela: Controlling Hypertension by Learning to Control Sodium Intake [PDF-3.0M]
  - Fotonovela: Cómo Controlar su Hipertensión – Aprenda a controlar su consumo de sodio [PDF-3.0M]
- Promotora Guide: Controlling Hypertension by Learning to Control Sodium Intake [PDF-1.0M]
  - Guía de la Promotora: Cómo Controlar Su Hipertensión—Aprenda a controlar su consumo de sodio [PDF-1M]

During today's presentation, we'll spend some time highlighting a select number of tools. Given our limited time, we've considered those items that are most relevant to the work that is being carried out in the states.
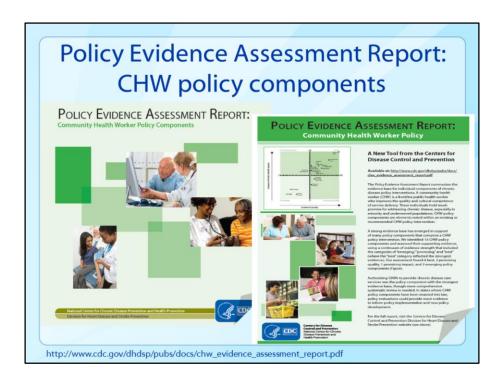
First we have the CHW e-learning course.

This course is designed to provide state programs and other stakeholders with basic knowledge about CHWs. For example official definitions of CHWs, workforce development, and other topic areas.
The course covers how states can become engaged in policy and systems change efforts to establish sustainability for the work of CHWs, including examples of states that have proven success in this arena.
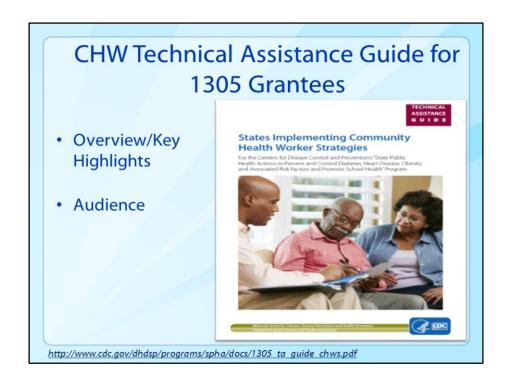
The six-session course covers
1. CHWs' roles and functions
2. Current status of the CHW occupation
3. Areas of public policy affecting CHWs
4. Credentialing CHWs
5. Sustainable funding for CHW positions
6. Examples of states successful in moving policy and systems change forward

http://www.cdc.gov/dhdsp/pubs/chw_elearning.htm

The policy group within the Applied Research and Translation team here at the CDC have developed several CHW related products. From State law fact sheets to policy evidence assessment reports.

The Community Health Worker Policy Evidence Assessment Report summarizes the evidence bases for community health worker policies to inform researchers, evaluators, and practitioners. There is also a one page summary of the full report.

The toolkit also houses the CHW Technical Assistance Guide for 1305 Grantees
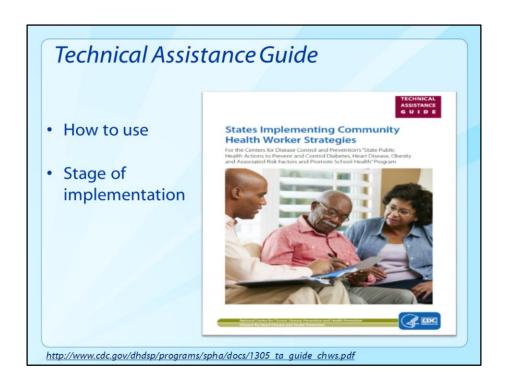
Overview/Key Highlights:
> The guide is categorized into 2 parts: health systems and CCLs
> It Summarizes the CHW activities of 9 organizations as it relates to Domains 3 & 4
> Offers strategies and practice-based recommendations for states to consider in their implementation efforts

Provides references to evidence-based literature to supplement the guidance
And the Resources section that provides contact information from the profiled organizations and list states implementing similar strategies

Audience:

The audience for this guide is primarily Funded state partners implementing CHW strategies in 1305. However, it is important to note that the information found in this Guide is applicable and would be useful to other grantees (e.g., 1422) and audiences.

Technical Assistance Guide

- How to use
- Stage of implementation

States Implementing Community Health Worker Strategies

For the Centers for Disease Control and Prevention's "State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health" Program

http://www.cdc.gov/dhdsp/programs/spha/docs/1305_ta_guide_chws.pdf

How to use:

Identify examples of what has worked and not worked from others

Identify opportunities that might align with your context

Tailor and apply strategies that meet those alignments. This TA guide is particularly helpful since it is specifically designed for 1305 awardees

Connect to peers through resource pages
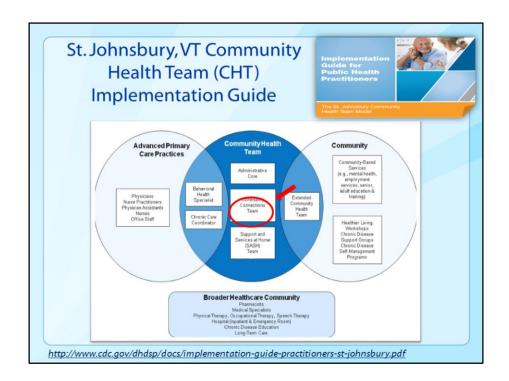
Stage of implementation:

Exploratory – this guide is a bit beyond exploratory stage. A user of this guide should have a pretty good idea of what the context is for CHW in your state so that you can make the most use out of this resource.

Development or Full implementation Stage
 – for those in the development or full implementation stage, you'll be able to quickly see opportunities that would align with the work that is in preparation or in full implementation.
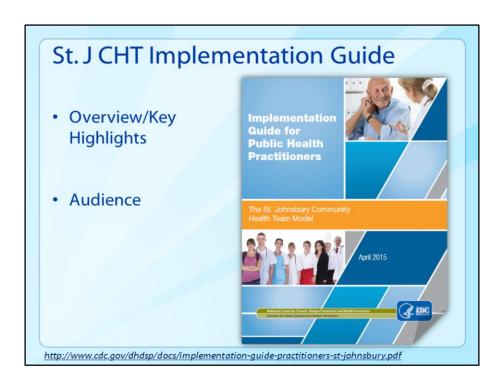
Maintenance
 – for those in the maintenance stage, the guide might be used to determine how to tweak some of your current work

St. Johnsbury, VT Community Health Team (CHT) Implementation Guide

http://www.cdc.gov/dhdsp/docs/implementation-guide-practitioners-st-johnsbury.pdf

Another tool we'd like to highlight today is the St. Johnsbury Community Health Team Model.

To provide some context, this slide provides a visual illustration of the St. Johnsbury, VT CHT. DHDSP sponsored a 30-month rigorous evaluation of this program. The first objective of the evaluation was to describe the core components of the St. Johnsbury model and identify lessons learned for replication. We learned about the make up and role of the community health team, specifically community health workers, and the interaction with primary care and community.
The community health workers are called the Community Connections team. Using the evaluation findings, we created an implementation guide.

St. J CHT Implementation Guide

- Overview/Key Highlights

- Audience

http://www.cdc.gov/dhdsp/docs/implementation-guide-practitioners-st-johnsbury.pdf
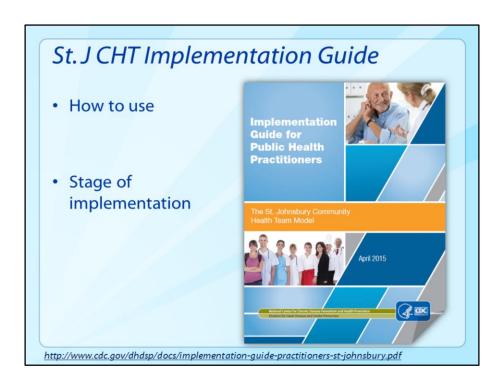
Overview/Key Highlights:

In-depth detail of CHW program

Multiple aspects addressed (e.g., team-based care, CHW financing, etc.)

Evaluation guidance and examples Proposes concrete steps to implementation

Audience:

Health system administrators

Community program implementers

Program managers of state public health

departments

How to use:

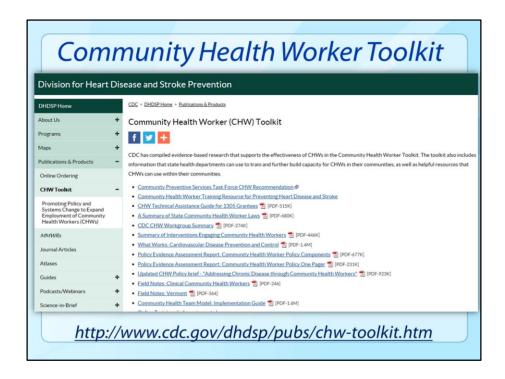Identify specific steps for adaptation and replication

Modify conceptual model into core components applicable to your setting

Consider program outcomes beyond health outcomes

Utilize as a reference for potential evaluation activities
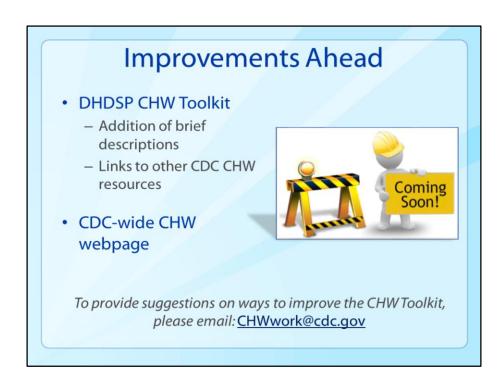
Stage of implementation:

Exploratory

Development
Full implementation
Maintenance

Don't Read: Go to CHW webpage and highlight the following resources based on time:

- *CHW Training resource*
- *Policy resources*
- *E-learning*
- *Educational material (English and Spanish)*
- *Million Hearts*
- *Publications*

Improvements Ahead

- **DHDSP CHW Toolkit**
  - Addition of brief descriptions
  - Links to other CDC CHW resources

- **CDC-wide CHW webpage**

To provide suggestions on ways to improve the CHW Toolkit, please email: CHWwork@cdc.gov

We are working on more content to be added to the DHDSP CHW toolkit. Additionally, we plan on adding brief descriptions, and links to other CHW resources on our page.

The Chronic Center's CHW workgroup is also in the final stage of developing a CDC-wide CHW webpage. Please contact the workgroup at chwwork@cdc.gov with any questions or feedback.

MODERATOR: Thank you Amara for the great presentation. At this time, we'll take any questions that the audience may have. You may submit questions through the Q&A box.

Here we have a few questions.

When will the CDC-wide CHW website be available?

The website should be available by the early fall. It is in the final development phase. For more information please contact the NCCDPHP CHW Workgroup at CHWWORK@cdc.gov.
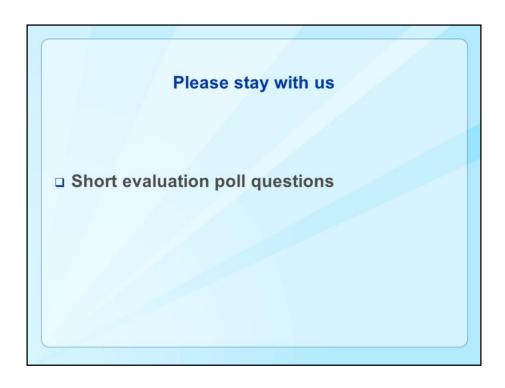
Can I share the tools and resources on the tool-kit?
Yes, all publications on the CHW toolkit are public domain. So long as you acknowledge the source, you do not need to request permission to adapt and use any of the materials within it. Please share the webpage and its contents.

What other CHW related products are in the pipeline?
The ART and Eval team are working on various CHW related products. You can keep up to date by visiting the CHW toolkit. E.g?

Moderator: Thank you once again Amara for that informative presentation.

Please stay with us

❑ **Short evaluation poll questions**

MODERATOR: Please stay with us for a three short poll questions.

*NOTE (**don't read**) Pull up on polls and pause for 15 seconds after each poll question.*

Poll 1. I am interested in learning more about CHW resources
Yes
Maybe
No

Poll 2. The information presented was helpful to me.
Yes
Somewhat
No not at all

Poll 3. I plan to attend future Coffee Break sessions
Yes
Maybe
No

Reminders!

All sessions are archived and
the slides and script can be accessed at:
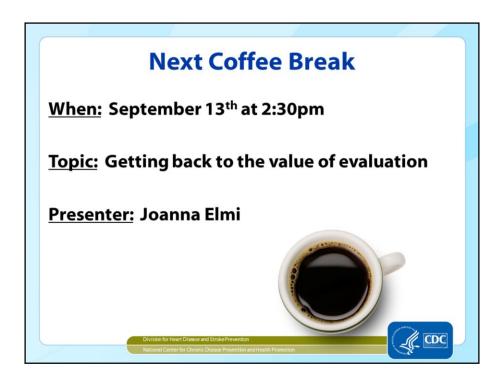**http://www.cdc.gov/dhdsp/pubs/podcasts.htm**

If you have any questions, comments, or topic
ideas send an email to:
AREBheartinfo@cdc.gov

MODERATOR:

All sessions are archived and the slides and script can be accessed at our Division website. Today's slides will be available in 2-3 weeks.

If you have any ideas for future topics or have any questions, please contact us at the listed email address on this slide.

Next Coffee Break

When: September 13th at 2:30pm

Topic: Getting back to the value of evaluation

Presenter: Joanna Elmi

Division for Heart Disease and Stroke Prevention
National Center for Chronic Disease Prevention and Health Promotion

CDC

MODERATOR:

Our next Coffee Break is scheduled for Tuesday, September 13th , 2016 and is entitled **"Getting back to the value of evaluation."**

Thank you for joining us. Have a terrific day everyone. This concludes today's call.