

**STATE OF CONNETICUT**  
**State Innovation Model**  
***Community Health Worker Advisory Committee***  
**Meeting Summary**  
**Tuesday, March 20, 2018**  
**2:30 pm – 4:30 pm**

**Location:** Litchfield Room, CT Behavioral Health Partnership, Hartford Room (3<sup>rd</sup> Flr), 500 Enterprise Drive, Rocky Hill, CT 06067

**Members Present:** Terry Nowakowski (Chair), Grace Damio, Loretta Ebron, Milagrosa Seguinot, Tiffany Donelson, Lauren Rosato, Juan Carmona, Darcey Cobbs-Lomax, Liza Estevez

**Members on the Phone:** Mayce Torres, Ashika Brinkley, Michael Corjulo, Nicholas Peralta, Chioma Ogazi

**Members Absent:** Linda Guzzo, Yolanda Bowes, Thomas Buckley, Peter Ellis, Jacqueline Ortiz Miller, Migdalia Belliveau

**Other Participants:** Jenna Lupi, Katharine London, Ula Uszynski, Meredith Ferraro, Stanley Zazula, Maggie Litwin, Fatawu Mahama, Katie Henley (phone), Cecil Tengtanga, Erika Lynch, Maria Millan, Sabrina Trocchi, Lori Pasqualini, Giselle Carlotta-McDonald

**1. Call to Order and Introductions**

Terry Nowakowski served as Chair and called the meeting to order at 2:45 pm.

**2. Public Comments**

No public comments were submitted for discussion.

**3. Approval of Minutes**

Motion: to approve minutes from 2/20/2018 – Terry Nowakowski

First: Lauren Rosato

Second: Milagrosa Seguinot

All in favor

**4. Review Design Group Goals & Structure**

Since there were some new individuals attending the CHW Advisory Committee meeting, Katharine London began the meeting by discussing the Charter of the committee. Jenna Lupi read the CHW Advisory Committee's Charter. Then Katharine London gave some history about the committee and provided a quick summary of what the committee had discussed and decided on, including the CHW definition, scope, certification so far. Katharine London mentioned that materials such as the CHW White Paper, Committee Charter, Key Decisions Slides, Code of Ethics and Public Act 17-74 would be shared with new attendees.

Then Katharine London reviewed the Public Act 17-74 that passed last year. Includes the definition of CHWs and also directs the director of the State Innovation Model Program Management Office to study the feasibility of CHW certification, exam the fiscal impact and wants specific recommendations.

Recommendations include (1) requirements for certification and renewal of certification of community health workers, including any training, experience or continuing education requirements, (2) methods for administering a certification program, including a certification application, a standardized assessment of experience, knowledge and skills, and an electronic registry, and (3) requirements for recognizing training program curricula that are sufficient to satisfy the requirements of certification.

Katharine London mentioned that we will split into design group to tackle each of these three recommendations. Katharine London then went over key discussion points by design group. Stanley Zazula added that these key decisions points were discussed and input was gathered from with Carl Rush and Joanne Calista, national experts with a national perspective. Meredith Ferraro also mentioned that through research and talking with other states that touched on a lot of these points.

Laruen Rosato asked about the C3 project, and Meredith explained that C3 stands for CHW Core Consensus Project. This was a national study that looked at and updated the CHW core competencies (roles, skills and qualities). These were reviewed in depth by this committee and they put forth some recommendations which can be shared with everyone. These are believed to be what should be included with training.

Cecil Tengtenga asked about the definition because it is very broad. Lots of work being done between DMHSA and DPH already, how much engagement has been with these groups? CMS and HRSA federal funds that are funding similar things, hoping to be able to collaborate and have one representative group in CT to do things as one. Meredith Ferraro said this is really, what the goal of this committee is. Referred to CHW umbrella term, in CT over 25 identified. Idea is not to keep everyone separate but to recognize all the CHW titles and all potential CHW roles.

Lori Pasqualini asked if there would be a grandfathering process and fingerprinting. Katharine London added that we have not discussed at this level but grandfathering has been discussed. One absolute decision is that certification would be voluntary. Then Katharine London read the CHW definition that is in law.

## **5. Review Model States**

Katharine London then went through slides about some states requirements for CHW certification. Katharine London went through each states approach in RI, MA, FL, TX. What was different that RI did was this concept of a portfolio. Eight different categories of experience both personal and professional and the CHW would pick three to submit with their application. Most states look for a training certificate. MA focuses on proof of competency in the ten core competencies. FL requires passing an exam. TX is completion of a training or checking off work duties based on experience. Katharine London asked the group if there was something that jumped out to the group based on these examples. Sabrina Trocchi mentioned that she was somewhat relieved hearing that this certification might not fall under DPH, worried about restrictions and the CHW field is so broad. Cecil Tengtenga mentioned that he is in favor of the idea of a portfolio. Lauren Rosato added that she also liked this idea. Juan Carmona also agreed, good way of collecting experience and understanding the connection with the community. Lauren Rosato said she is not opposed to an exam, but not only an exam. Grace Damio stated that she doesn't want the process to be too restrictive. Terry Nowakowski thinks observation is important, because someone can see and observe these qualities, you can find this in a test. Grace Damio mentioned in her experience using testing for specialized roles. Maria Millan provided her experience

receiving FL CHW Certification during the grandfathering period, which required three references. Cecil Tengtenga mentioned testing is important to him for reciprocity.

## **6. Discussion: Timeline Expectations**

Stanley Zazula went over the timeline expectations to address Public Act 17-74. Facilitation team will gather as much information as possible to bring to the groups to help make decisions. Katharine London added that this report is due to the general assembly by October 1<sup>st</sup> and Meredith Ferraro added will need the summer months to prepare everything.

## **7. Breakout Sessions: Discuss Key Decision Points and Needed Resources**

Stanley Zazula went over design group membership.

### **Design Group 1**

Attendees: Juan Carmona, Darcey Cobbs-Lomax, Terry Nowakowski, Milagrosa Seguinot, Maria Millan, Lori Pasqualini, Ula Uszynski. Facilitator: Katharine London

Absent: Thomas Buckley, Mayce Torres (Mayce was on the phone for the full group discussion)

#### Process

The group will meet in person at Value Options on Tuesday, April 17 and Tuesday, May 15, 2:30-4:30.

We will schedule phone calls in between each meeting.

Katharine will send examples from other states and/or other professions in CT in advance of each discussion to facilitate our decision-making.

#### Topics for review

The group will make decisions on the following topics.

- 1) Required **work experience** and how to verify work experience (e.g. through references)
- 2) **Portfolio** of accomplishments and required documentation
- 3) **Length of time** for certification, **continuing education** required for renewal, any other renewal requirements
- 4) Alternative pathways to certification for
  - a. Experienced CHWs (**grandparenting**/grandfathering process)
  - b. **Reciprocity** for CHWs certified in another state
  - c. Individuals with related certification/training

(Note: After the meeting the topic came up of requiring applicants to agree to abide by a specific CHW **code of ethics**. At the next meeting the group will consider whether this topic belongs in Design Group 1.)

#### Off the table

The group decided **NOT** to include the following requirements:

- 1) Certification **exam** – rejected by the full committee because an exam would not assess key CHW skills
- 2) **Background checks** – should be conducted by employers because the type of background checks required may vary by the specific job duties (consider the background checks required to make home visits to frail elders vs. engaging justice-involved individuals in treatment)

- 3) **Education** - should be conducted by employers because the type of education required may vary by the specific job duties (consider the education required to assist clients in implementing very specific treatment protocols vs. connecting migrant worker to services)

Design Group 1 will not discuss CHW training requirements as that will be the responsibility of Design Group 3.

### Goals

Group members expressed a number of goals:

- 1) Simplify the application process for the applicant – try to keep it to one page if possible
- 2) Simplify the process for CHW references/supervisors
- 3) Simplify the review process for the entity that has to review submitted applications
- 4) Keep the cost down
- 5) Explore providing a cost subsidy or establishing a sliding fee scale for applicants for whom the application fee is a barrier. (Recommended this topic to Design Group 2)

### **Design Group 2**

Attendees: Tiffany Donelson, Lauren Rosato, Migdalia Belliveau, Sabrina Trocchi, Giselle Carlotta-McDonald, Loretta D. Lloyd-Ebron.

Absent: Dr. Robert Zavoski (or representatives: Nina Holmes/Dana Robinson-Rush)

Facilitators: Stanley Zazula, Fatawu Mahama

### Process

The group will meet in person at Value Options on Tuesday, April 17 and Tuesday, May 15, 2:30-4:30. We will schedule phone calls in between each meeting.

### Notes

Stanley Zazula started by reviewing the key decision points that need to be made by this group.

This group's key decisions points are as follows:

- 1) Determine Certifying entity
- 2) CHW Certification Board structure
- 3) Registry
- 4) Application Process: eligibility and steps
- 5) Who is responsible for Assessment?

It is important to note that this group included many new/first time participants to the CHW Advisory Committee. Because of this, there were many questions from this group in order to get clarity about the discussions and decisions made by the larger CHW Advisory Committee group so far. Majority of the discussion time was spent on this. During this meeting, the Design Group 2 was unable to make a decision on any of the key decision points.

### Summary of questions and answers raised during discussion:

- Why is certification voluntary and not mandatory? Group was briefed on past advisory group decision on making CHW certification voluntary.
- What value does certification bring to employers? Group was made aware of the ROIs available to employers about the worth of CHWs within the care team.

- Who will fund certification; the individual or employers? This is still to be determined.
- If specialty training is provided, who will be responsible for testing with different specialty requirements? Group discussed about third party involvement to process certifications.
- What are some of the skills employers want CHWs to have? C3 project was revisited to explain how the 10 roles outlined is the basis for the roles CHWs play within care teams.
- Will certification include a test? This is still to be determined.
- How can we have insurance companies pay for CHWs positions just like they pay for nurse aid assistance positions? This is still to be determined.

### Next Steps

Stanley Zazula mentioned that we will follow up with this group to schedule a phone call via doddle poll.

### **Design Group 3**

Attendees: Liza Estevez, Grace Damio, Erika Lynch

Absent: Ashika Brinkley (was on the phone for the full group discussion), Michael Corjulo (was on the phone for the full group discussion), Linda Guzzo, Chioma Ogazi (was on the phone for the full group discussion), Cecil Tengtenga (was in-person for full group discussion then had to leave)

### Process

The group will meet in person at Value Options on Tuesday, April 17 and Tuesday, May 15, 2:30-4:30. We will schedule phone calls in between each meeting.

### Notes

To start the discussion Meredith Ferraro wanted to go through each of the Key Decision Points for Training to first discuss what they are. These are the key decision this group will need to discuss and make recommendations on. Meredith Ferraro added that we may want to add more key decision points if the group feels they are needed.

### Key Decision Points

Content – identify Core Competencies – Meredith Ferraro brought copies of the roles and skills that the committee had already provided input on based on the C3 roles and skills, which are to be recognized nationally. Through discussion, this group decided what the committee has approved and already discussed at length, were appropriate core competencies.

Determine/develop type of assessment – Will need to do the research and report back to the rest of the committee. Don't want process that will be too onerous. Alaska and Florida are the only states with an exam. Felt written skills were important to assess for the purpose of case notes. To be a professional workforce this is important. Maybe an assessment for writing. What's necessary for the job? Some of the right people for the job may be eliminated with certain assessments.

Internship – Internship or some kind of community experience. Felt for those who are new and don't have experience. Gateway offers 80-120 hours. Apprenticeship was mentioned because the idea of having a mentor. Challenge with finding mentor and only mentoring is not enough.

# of hours – Number of hours for training. Surprised that FL only had 30 hours. Wanted to know if Carl might have a recommendation about this.

Training vendor criteria – Needs to meet certain standards, but doesn't need to be limited, can fit a bunch of different ways.

Instructor qualifications – Standards on the credit side, coming from the community college. Don't know if we should limit who should teach as long as they know what a CHW does. Also need to be able to teach. This group can put a recommendation based on preference to what this would be.

Training modality/methodology – How you teach. Participatory, empower, popular education verses didactic, also IBEST (integrated basic education skills training).

Standards for instructional methods – Whether training is online, hybrid, in-person. Thinking about are there some things that are difficult to learn online, that should require in-person training. If there is participatory, role modeling. Group agreed there shouldn't be a case where it is only online and the idea of hybrid was a maybe.

How does the training program assess proficiency? – Things that could be measured. How do other states do this. Is there a checklist?

Are there any other things that need to be thought about?

- How do people get accepted into training? – Coming from the college perspective, need GED or high school diploma. Felt this is something this group should discuss

What this group recommends is what this group feel is the best thing, not making decisions based on what employers want.

Focus for next steps:

# of hours

Training modality/methodology

Standards for instructional methods

Internship

## **6. Adjourn**

Terry Nowakowski made a motion to adjourn the meeting at 4:30 pm. There was a motion approved and second.