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# Mecklenburg County Public Health Department - Community Health Worker Initiative

## A UNIQUE APPROACH

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The Community Health Worker Initiative (CHWI) was created by Mecklenburg County's Public Health Department *to organize, strengthen, and sustain positive relationships between community partners and stakeholders deeply invested in the CHW profession in Mecklenburg County.*<sup>1</sup> Partners for Impact was tasked with researching and writing a report to offer Mecklenburg County's CHWI information gleaned from other communities in order to improve upon the work already underway locally. The consultant's research focused around the four goals of the Mecklenburg County CHWI:

1. Leading and Coordinating Collaborative Groups
2. Facilitating and Coordinating Trainings and Technical Assistance
3. Participating in Policy Development and System Change Management
4. Implementing and Directing Programs and Strategies using the CHW Model (Internal Service Only)<sup>2</sup>

In other words, what can Mecklenburg County's CHWI consider doing to strengthen its infrastructure and workforce after learning from other CHWIs? The consulting team assumed from the outset that CHWIs like Mecklenburg County were fairly common and, therefore, best practices to consider would quickly emerge. **What the consultants found, however, is that Mecklenburg County's CHWI is unique in both purpose and design.** Nowhere could the consulting team locate another localized model incorporating all three components of Mecklenburg County's CHWI: an association of CHWs, a program dedicated to a community change initiative, and diverse community stakeholders running CHW programs. As a result, the attention of this report shifted to helping Mecklenburg County recognize the strength in its current model.

Much of the information provided in this report is intended to support the case that Mecklenburg County has a CHWI worthy of stakeholder commitment. A commitment that includes sustaining the project as it grows and changes over the next few years. The report is divided into three overview sections: CHWs as professionals, CHWI in other communities, and tool kits. A fourth section offers recommendations. Following each section are links to additional information or tools relevant to Mecklenburg County's CHWI.

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<sup>1</sup> Mecklenburg County Public Health Department's [Community Health Worker Initiative](#) webpage.

<sup>2</sup> Ibid.

### DEFINING THE COMMUNITY HEALTH WORKER (CHW) PROFESSION

In 2017, the North Carolina Department of Health and Human Services (DHHS) launched a community health worker survey to learn more about Community Health Workers (CHWs). Specifically, there were questions for CHWs regarding the roles they were filling in addressing health care needs and their attitudes around the need to create a statewide network of CHWs. This survey followed a similar one conducted with programs to learn more about how these programs were integrating CHWs into the overall health care system.<sup>3</sup> The desire to better identify CHWs and how they are being utilized throughout NC is important for Mecklenburg County because the local CHWI has been working in parallel with the state on a better definition of CHWs and, as Mecklenburg County seeks to strengthen its CHWI network, learning from, and connecting with, an evolving statewide effort is logical. In fact, Mecklenburg County's CHWI is well positioned to contribute to and influence statewide efforts because of the evolving structure already in place in the county, at a time when the state is still developing professional standards and a professional network.

Considerable attention has been focused on CHWs over the past ten years, particularly as it relates to defining the profession. North Carolina is not alone in trying to create a better understanding of how CHWs impact the social determinants of health in both urban and rural communities. The *North Carolina Community Health Worker Survey* (summer 2017) was influenced by similar efforts in Indiana, Massachusetts, Michigan, and New York.<sup>4</sup>

Who is a CHW? Depending on the community, the program, and even the worker, those practicing community health work have been given many titles. In an effort to better define and place parameters around what describes a CHW, several national organizations, most notably the American Public Health Association's CHW Section, promote a common definition:

*A community health worker is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.*

*A community health worker also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy.<sup>5</sup>*

Additionally, many states have undertaken efforts to professionalize CHWs by defining professional standards, determining certification criteria, and establishing educational programs that lead to certification and/or licensure. Three levels of credentialing and professionalization appear to be emerging around the country regarding CHW training and education: certificates or degrees from community colleges, on-the-job training, and state-level CHW certification. Minnesota was the first state to offer a post-secondary statewide CHW curriculum.<sup>6</sup> Several other states have established formal training, education, and certification processes including Massachusetts, Arizona, Missouri, and Pennsylvania.

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<sup>3</sup> [North Carolina Community Health Worker Survey](#). Summer 2017. NCDHHS Report.

<sup>4</sup> Ibid.

<sup>5</sup> [APHA CHW Section webpage](#).

<sup>6</sup> Minnesota Department of Health, [Community Health Worker webpage](#).

North Carolina has undertaken some preliminary work around professionalizing CHWs including creating pilot programs offering [core competency](#) training at more than a dozen community colleges, including Central Piedmont Community College in Charlotte.<sup>7</sup> In 2020, UNC Pembroke was enlisted by the state to evaluate training programs and establish a CHW data repository and registry.<sup>8</sup> While North Carolina's efforts are underway to create statewide CHW standards, training, and educational opportunities, navigating this emerging system is complex because it involves multiple agencies/institutions including NCDHHS, NCDHHS' Office of Rural Health, NC AHEC, NC Community Colleges, and UNC Pembroke. Mecklenburg County, in its efforts to provide training and technical assistance to its local CHW Initiative, will want to maintain direct relationships with the principal entities behind North Carolina's training, education, and certification efforts in order to help local CHWs and CHW programs efficiently access information and understand developing opportunities.

In addition to training related to statewide core competencies and certification, there are a number of training opportunities available to CHWs offered through state and university toolkits, national associations and providers. The good news is that most states are adopting very similar core competencies, making universal training applicable to most localities and programs. Still, there is a growing body of available training and a lot of time and energy can be invested in sorting through the options. Several best practices training and training providers are listed in the *To Learn More* section below.

There is a broad consensus that CHWs play a critical, professional role in serving the often unmet needs of people, especially low income individuals, with both chronic and short-term health conditions. Many states have adopted professional standards for CHWs and instituted training/certification programs to deliver skills to match those standards. In addition to setting professional standards for CHWs, those choosing this career need to be valued as professionals including stature, compensation, retention, and resources. Mecklenburg County's CHWI centers the CHW in its mission statement: *strengthen the CHW workforce in an evidence-based manner through collaboration, education, and mentorship.*<sup>9</sup> Furthermore, Mecklenburg County's Queen City (QC) Community Connect Coalition was designed to *unify CHWs across organizations in a collaborative forum by creating an environment that equips and empowers those to serve Mecklenburg County communities.*<sup>10</sup> Mecklenburg County is on the forefront in North Carolina in terms of building a supportive, professional environment for all CHWs.

### ***To Learn More:***

[North Carolina DHHS Community Health Workers](#)

[North Carolina Community Health Worker Survey, Summer 2017.](#)

[NC AHEC Community Health Worker Program](#)

[CHW Training](#)

[Rural Health Information Hub](#)

[Integrating CHWs in NC Medicaid](#)

[Community Health Workers: Their Important Role in Public Health](#)

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<sup>7</sup> NCDHHS, [Community Health Worker webpage](#). A review of several community college programs indicate non-credit offerings for CHW programs that lead to eligibility for listing as NC Certified Community Health Worker.

<sup>8</sup> UNC Pembroke, ["UNCP research team to study new training curriculum for community health workers."](#) July 30, 2020.

<sup>9</sup> Mecklenburg County Public Health, *Community Health Worker Initiative*, fact sheet.

<sup>10</sup> Mecklenburg County Public Health Department's [Community Health Worker Initiative](#) webpage.

### COMMUNITY HEALTH WORKER INITIATIVES (CHWI)

As mentioned at the outset of this report, Mecklenburg County's CHW Initiative (CHWI) is unique in that it is organized into three components: Mecklenburg County's CHW Program, Queen City Community Connect Coalition (QC Connect), and Stakeholder Advisory Collaborative (SAC). Mecklenburg County's Community Health Worker Program oversees *A Guided Journey*<sup>11</sup> and other internal Community Health Worker Projects and provides backbone support for the community-wide initiative. Queen City (QC) Community Connect Coalition is an association of community health workers practicing in Mecklenburg County. Finally, the Stakeholder Advisory Collaborative is composed of organizational representatives from across the County who deploy Community Health Workers, including direct supervisors and program directors

When looking at the four overarching goals of Mecklenburg's CHWI (listed in the introductory section above) this structure makes sense and may even prove to be an emerging best practice approach. Many of the CHWIs reviewed were either tied to universities or developed state-wide policy, while few attempted to incorporate all levels of stakeholders (CHWs, program supervisors, and local key decision makers). Furthermore, most of the CHWIs studied were designed to educate large systems, for example CHW certification across a state. Even the term CHWI is somewhat fluid, at times the term *initiative* is interchangeable with *program*. Regardless, they are all pointing to better ways to define, train, deploy, and evaluate CHWs and the impact they have on their communities and the social determinants of health for those they serve.

Where Mecklenburg County is unique is in that it is a county-run initiative that not only focuses on specific CHW programs, but also on systems change, technical assistance, education and mentoring, and data sharing. In other words, Mecklenburg County's CHWI is an initiative for CHWs, CHW programs, and local stakeholders who want to advance quality public health care delivery utilizing CHWs. These pieces all exist in many other communities, but not as comprehensive as in Mecklenburg County. For example, the [Texas Association of Promotores & Community Health Workers](#) is a statewide nonprofit focused on supporting CHWs through membership, continuing education, and advocacy. The Foundation for Healthy Generations sponsored the [Washington State Community Health Worker Task Force](#) (2015-2016) to develop statewide policy and systems change recommendations. [SEAHEC](#) (Southeast Arizona Health Education Center) provides regional CHW training and capacity building technical assistance. The [National Association of Community Health Workers](#) offers members access to training, networking, and resources. Also, at the national level is [MPH Salud](#), a nonprofit organization working to advance healthcare in Latino and Hispanic communities. Their approach to CHWs is to offer advocacy, training, and consultation services to local communities. In addition, there are numerous literature review reports and studies (examples are linked in the *To Learn More* section below) discussing the importance of CHWs in the delivery of care coordination, the need for standards and policy to support CHWs, and how best to train and certify CHWs. All of these initiatives are advancing the work of CHWs, but, unlike Mecklenburg County, they are highlighting specific aspects and not attempting to address the issue holistically.

So, how does Mecklenburg County define its initiative within the larger scope of CHWIs as evolving systems? First, Mecklenburg County is supporting an evolving network within the local community and is well positioned to support a network for all organizations with CHWs in the county. Second, Mecklenburg County's CHWI should continue to deepen its collaborative relationship with statewide efforts to standardize CHWs and

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<sup>11</sup> Support for new and expecting mothers.

create a robust professional network. Work already underway in Mecklenburg County can inform and strengthen emerging statewide efforts while providing access for its CHWs to professional development opportunities. Third, Mecklenburg County should tap into national efforts to professionalize CHWs and share its experience with other communities as it continues to develop a more formalized systems-level CHWI. While Mecklenburg County can learn from individual CHW programs<sup>12</sup> (oftentimes also described as CHWI), remaining focused on systems will ultimately provide more benefits locally as the Mecklenburg County CHWI truly develops into a network for all CHWs and agency-level CHW programs.

### **To Learn More:**

[Community Health Workers Can Be a Public Health Force for Change in the United States](#)

[Integrating Community Health Workers into NC Medicaid](#)

[Mobilizing Community Health Workers to Address Mental Health Disparities for Underserved Populations](#)

[NCDHHS Implementing Recommendations: NC Community Health Worker Initiative](#)

[Perspectives on the Community Health Worker Workforce](#)

[States Implementing Community Health Worker Strategies, CDC Technical Assistance Guide](#)

### **TOOLKITS**

There are quite a number of toolkits available related to CHWs, touching on a variety of relevant aspects of the work, including training, education, and evaluation. An in-depth evaluation of all toolkits would take considerable time. Still, a review of readily available toolkits has produced several that should be known to Mecklenburg County's CHWI. The first is a [technical assistance guide](#) from the Centers for Disease Control (CDC). While the audience for the CDC's toolkit is state healthcare agencies, there is still much for Mecklenburg County to glean, especially its section [Integration of CHWs into Organizations and Care Teams](#). Another valuable toolkit designed especially for employers of CHWs comes from the Minnesota [Community Health Worker Alliance](#) and was created in partnership with the [Minnesota Department of Health](#). This employer's guide offers very practical guidance around hiring and supervising CHWs, while also providing information related to program planning and evaluation. While written specifically for programs in Minnesota, much of the information is relevant for all CHWI and can be easily modified for local needs. This toolkit also provides information related to determining CHWs return on investment (ROI), an increasingly important factor when promoting the value of CHWs as professionals and securing funding for including CHWs in care coordination. Also designed to assist employers/programs with CHW onboarding is the [Community Health Worker Orientation Toolkit](#) from the Edward M. Kennedy Community Health Center in Massachusetts. This is a very practical orientation training checklist tied to core competencies for CHWs.

A useful toolkit aimed at CHW program implementation comes from a collaboration between the American Hospital Association and the National Urban League (with funding from the Robert Wood Johnson Foundation). [Building a Community Health Worker Program: The Key to Better Care, Better Outcomes, and Lower Costs](#) is an excellent overview of key components of CHW programs, albeit primarily in healthcare settings. The report concludes with a comprehensive resources section (including resources already referenced in this report). An incredibly valuable resource related to measurements and evaluation comes from The Medical Care Blog, [Evaluating Community Health Worker Programs](#). This is a comprehensive effort based upon reviewing many toolkits and then synthesizing the best into one resource section. There is a lot of great

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<sup>12</sup> A good example of a best practice CHW program comes from Asheville, NC, as illustrated in this [YouTube video](#).



information provided within this toolkit and a comprehensive list of references for further consideration. Another exceptional model to explore is the [Innovation Learning Laboratory for Population Health](#) at the Morehouse School of Medicine. Focusing on demonstration projects, the Innovation Learning Laboratory seeks to foster unique healthcare models, research and community engagement, and effective training *that generate innovative technology-driven healthcare models and fuel teaching and learning for population health improvement*.<sup>13</sup> More specific to North Carolina, DHHS has recently issued guidance related to integrating CHWs into [NC Medicaid](#). Finally, some great work related to CHWs and CHWIs has been produced by the University of Pennsylvania. Their [IMPACT](#) model is certainly worth exploring for its evidence-based approach to addressing the underlying social determinants of health by utilizing CHWs.

There continues to be a growing body of literature related to evaluating CHW programs. Mecklenburg County should consider the following questions for their CHW Initiative. How does it address the social determinants of health? How can the return on investment for utilizing CHWs be quantified? How are CHWs treated as professionals, including training/certification, compensation, retention, resources, and value. There are several good resources to help further explore and address these questions. Adopting a toolkit is an emerging best practice and an excellent place to start is with The Medical Blog post [Evaluating Community Health Worker Programs](#) by Jess Williams at the Pennsylvania State University. Dr. Williams provides a good, succinct overview of measuring value, offers a toolkit she and her colleagues developed and then provides resource links to consider other CHW toolkits that they've reviewed and found helpful. On the provider's side, the [Minnesota CHW Alliance Toolkit](#) offers employers insight into hiring CHWs, integrating them into care delivery and understanding the value of CHWs to clients, organizations, and care-delivery teams.

Mecklenburg County's CHWI has begun assembling a *CHW Programming Toolkit* on its Community Health Worker Initiative webpage.<sup>14</sup> Ultimately, maintaining a toolkit targeting all three aspects of Mecklenburg County's initiative - CHWI, QC Connect, and SAC - will enhance the work already underway in support of the CHWI's stated goals, especially the second goal: *facilitating and coordinating trainings and technical assistance*.<sup>15</sup> As Mecklenburg County furthers its efforts to evaluate its CHWI, reviewing toolkits related to assessment, evaluation, and return on investment will be helpful.

### **To Learn More:**

[On the Front Lines of Health Equity: Community Health Workers](#)

[States Implementing Community Health Worker Strategies, CDC Technical Assistance Guide](#)

[Community Health Worker \(CHW\) Toolkit: A Guide for Employers](#)

[Edward M. Kennedy Community Health Center Community Health Worker Orientation Toolkit](#)

[Building a Community Health Worker Program: The Key to Better Care, Better Outcomes, and Lower Costs](#)

[Evaluating Community Health Worker Programs, The Medical Care Blog](#)

[IMPACT Model, Penn Center for Community Health Workers](#)

[Community Health Workers and Return on Investment \(ROI\)](#)

[Medicaid Health Plan Community Health Workers Have Positive Impact on Care](#)

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<sup>13</sup> [Innovation Learning Laboratory at Morehouse School of Medicine](#) webpage.

<sup>14</sup> Mecklenburg County Public Health Department's [Community Health Worker Initiative](#) webpage.

<sup>15</sup> Mecklenburg County Public Health, *Community Health Worker Initiative*, fact sheet.

## **RECOMMENDATIONS**

As previously stated, Mecklenburg County's CHWI is quite unique and is its own promising best practice. After reviewing the available literature and resources in light of the model that has been developed locally, the consulting team offers the following three recommendations:

### **Articulate the model**

Mecklenburg County's CHWI is built on three "legs" (Mecklenburg County's commitment to providing backbone support to the community-change initiative, QC Connect, and SAC), essentially connecting localized networks into one big network in order to implement its four overarching goals. Additionally, the initiative has clear and compelling Vision, Mission, and Values statements. Building upon these components to succinctly articulate how this model is unique and well-suited for success in Mecklenburg County is a logical next step. Consideration of the main audiences and seeking their assistance in determining how best to articulate this model will be important.

### **Stakeholder commitment**

Mecklenburg County has created a CHWI network that is not found elsewhere. Understanding that stakeholders often desire to commit to a "proven" best practice model, Mecklenburg County's CHWI will need to be intentional in how it articulates this evolving model and what it asks of its community partners. A great start has been the formation of the CHWI's [three stated objectives](#). Engaging in vulnerable dialogue to help all stakeholders - CHWs, community partners, and institutions - understand the potential community impact by collectively entering this unexplored territory will strengthen the resolve to help the model succeed. This may be important if there are no traditional funding mechanisms to support this collective effort.

### **Documenting and sharing emerging practices**

Exploring this evolving network model with commitments from all stakeholders will undoubtedly result in the emergence of some unique practices. These practices may come from within the CHW community or it may come from within a specific organization. Learning to identify, articulate, and share those practices will help the model evolve in ways that support one or more of the initiative's "legs" while, ultimately, increasing the benefit to the overall community.

## **CONCLUSION**

Mecklenburg County's CHWI is an unique and incredible resource, not only for local CHWs and organizations utilizing CHWs, but for those in the community who benefit from the care, experience and expertise that CHWs possess. Having a collaborative umbrella that invites all levels of stakeholders into cooperative, supporting relationships is the true benefit of the CHWI in Mecklenburg County. Reviewing available best practices, resources, toolkits, and information related to CHWs and CHWIs quickly demonstrates that Mecklenburg County has a unique model that will continue to serve CHWs, agencies, and beneficiaries well. Implementation of the recommendations in this report will strengthen the local CHWI and clearly articulate its value to all.

### **To Learn More:**

[MHP Salud: Advancing the CHW Profession](#)

[Report: Perspectives on the Community Health Worker Workforce](#)

[Community Health Workers Can Reduce Hospitalizations](#)

[Community Health Workers in Michigan](#)

[Arizona Community Health Workers Network](#)