

Summary of Adapting to COVID-19 in California: Preparing and Supporting Community Health Workers and *Promotores*

April 2020



California
Health Care
Foundation

On April 17, 2020, CHCF hosted an online gathering of more than 80 community health worker/*promotore* (CHW/P) experts from around California representing a broad range of perspectives including payers, advocacy groups, policy, government, colleges and universities, and health providers. The convening was designed to support attendees in sharing with one another, and with CHCF, what CHW/Ps are experiencing as a result of the COVID-19 pandemic, what their needs are, and how people have responded to quickly meet those needs. As a next step, CHCF will be pulling together a web page with helpful resources to close some of the identified gaps, including some tips shared at the convening. We will also reach out to CHW/Ps in California to hear directly from them about their experiences and needs now and in the coming months. We look forward to communicating what we learn. Everything we hear will help us identify how CHCF can be responsive to the field in the face of the COVID-19 pandemic.

As a first step in this ongoing dialogue, we want to share what we heard at the April 17 convening.

Meeting participants were broken into small groups and discussed the following questions. Summaries of their responses are below.

What new challenges are CHW/Ps experiencing right now because of COVID-19?

- **Access to, and skills for using, technology to connect virtually with community participants/patients**
 - Training/technical skills development and ongoing support
 - Understanding of innovations for engaging with patients (telehealth, etc.)
 - Lack of access to appropriate technology/equipment to work virtually
 - Digital divide in communities served
 - Continuing to keep CHWP staff engaged virtually to keep them updated and to share best practices
- **Connecting with patients through social distancing**
 - Being physically separated from the communities served
 - Limited in-person/face-to-face contact and no home visits
 - Challenges with effective virtual services including individual and group health education sessions
 - Unable to reach patients with no technology/phones
 - Limited ability to connect with their teams virtually for support
- **Accessing personal protective equipment**
- **Loss of employment and support services/training**
 - Job loss / hours reduced
 - Funding challenges / discontinued programs
 - Lack of continued resources to support work/outreach (technology, training, etc.)

- **Increasing need in communities**
 - Social support required for program participants
 - Challenges with job loss and fear requires focus on other needs (e.g., less focused on program-related topics such as diabetes)
- **Fewer resources in communities available for participants/patients**
 - Lack of community resources including food and economic support
- **Misinformation and/or fear about COVID-19**
 - Increased general anxiety
 - Decreased opportunities for community/personal interaction
- **Limited connection with other CHW/Ps**
 - Inability to share best practices and resources
 - Impact on CHW/P self-care and support
- **Challenges balancing their own safety and well-being with the needs of the community**
 - Increased stress related to their own personal needs while seeing increased needs in the community that are difficult to address
 - Managing their own financial, medical, emotional, familial fallout related to COVID-19
- **Rapid and continued change**
 - Regular changes in roles and responsibilities
- **Lack of support in policy**
 - Inability to share “on the ground” knowledge of the impact on communities

What are effective ways you’ve prepared and supported CHW/Ps to adapt to this crisis?

- **Provide information and support to CHW/P trainees and CHW/P workers**
 - Share regular updates and information to support effective work practices including policy, safety, protocols, and best practices
 - Provide support for self-care including regular check-ins, mentoring, and networking
 - Develop virtual/online resources for information and continued insights and professional development
- **Develop and/or deliver new trainings specific to COVID-19**
 - Case-based scenarios with applicable skills
 - Safe, effective practices
 - Consider future work changes beyond the current crisis
- **Teach ways to effectively use virtual platforms and apps to form and maintain connections and to deliver services remotely**
 - Technology skills and trainings
 - Adapt CHW/P work to virtual visits, and provide tools and resources to support engaging communities and patients virtually (motivational interviewing on the phone, how to educate people about COVID-19, etc.) including what can be done virtually and what may be less effective virtually
 - Utilize a variety of technology and software (Zoom, Nextdoor, WhatsApp, Remind, Google Hangout, etc.)
- **Update or create tools to help workers educate or support community partners around COVID-19**

- Develop script/assessment tool to conduct phone outreach (high-risk clients, COVID-19 education, etc.)
 - Use online tools (e.g., for case management forms)
 - Develop curricula/models for online classes (e.g., asthma classes)
- **Shift CHW/P services and training to virtual delivery**
 - Virtual sessions with clients and communities
 - Online classes and trainings
 - Create opportunities for remote CHW/P internships
- **Provide equipment and services needed for CHW/Ps to work remotely**
 - Including laptops and VPN access
- **Partner with other organizations to provide training, technical assistance and resources**
 - Colleges
 - Health plans for training and TA
 - IHSS (coordinate services particularly for hard-to-reach patients)
 - Foundations
 - Health providers — share information and also best practices for reaching clients and communities
 - Local/county government agencies
- **Produce educational materials for the community that are culturally and linguistically relevant**
 - Continually update with new COVID-19 information as needed
- **Increase communication within teams**
 - Regular team meetings to share best practices, problem solve, provide peer support, and update workflows
 - Set realistic expectations given current challenges
 - Provide a variety of communications (virtual meetings, emails, online tools and resources) to continually engage and support the work
 - Check in regarding self-care
- **Maintain jobs and salaries**
- **Leverage CHW/P role within the delivery system**
 - Allow CHW/Ps to lead coordination with social services and resources
 - Share experiences and knowledge of resources with health plans and other payers
 - Support other community organizations and create learning networks to share effective engagement strategies and emerging practices
- **Engage in policy work to share and understand emerging policy issues**
 - Host national policy call
- **Identify how community partners' needs have shifted and the impact on the community**
 - Created a resource workgroup to identify gaps in resources for home-bound patients

What do you imagine will be expected of CHW/Ps in the next three to nine months?

- **Increased ability to use technology to engage with community partners remotely**
 - There will be continued virtual work rather than in-person services

- CHW/Ps can play an important role in ensuring that the increased use of technology in health care doesn't leave community members behind (especially those at risk, such as older adults)
- Providing technical support for families, learning new phone skills, emotional support
- Continued challenges of discussing really hard issues on an online platform that are sensitive even in person (e.g., mental health, suicide, substance use disorder issues)
- **Increased need for the support of CHW/Ps**
 - Due to increase in number of people entering poverty
- **Need for CHW/Ps to help with contact tracing**
 - Build on experience with other infectious diseases (tuberculosis, sexually transmitted infections, etc.)
 - Can include connection to data platforms
- **Changes in funding of CHW/Ps**
 - Opportunities to make sustainable changes for overall CHW/P services and also telehealth
- **Changes in training needs of CHW/Ps — more standardized and more virtual offerings**
 - Virtual networking and training opportunities
 - Revised training based on lessons from COVID-19 and from virtual services
 - Create an information warehouse for collaboration and information on public benefits
- **Supervisors of CHW/Ps will learn how to better maximize their potential**
- **Loss of CHW/Ps in the workforce, given the broad economic downturn**
- **CHW/Ps will address local needs, including social determinants of health**

More information about this event is available online at www.chcf.org/covid19chw