

California Health Care Foundation



Understanding California's Workforce of Community Health Workers and Promotores (CHW/Ps) Summary of Survey Research

s trusted community members with lived experience, community health workers and promotores (CHW/Ps) have a long history of connecting those not well served by the traditional health care system with culturally responsive health and social services. CHW/Ps are increasingly recognized as a critical part of the health care workforce in California.

With support from the California Health Care Foundation, Healthforce Center at UCSF conducted a series of surveys with CHW/Ps, health care employers, and training institutions to gain a more thorough understanding of the needs and perspectives of the current workforce and to better understand the challenges and opportunities related to employment and training.

Key Highlights from the Surveys

➤ The COVID-19 pandemic highlighted the crucial need for CHW/Ps and created even more demand for workers.

- ➤ For the state with the largest population in the country, California provides relatively few opportunities for CHW/P training. Large parts of the state, such as the far north and Central Valley, don't have training programs. Most active programs (17 out of 24, or 71%) are located in the San Francisco Bay Area or greater Los Angeles area (see Figure 1).
- ➤ More clinics than hospitals employ CHW/Ps. Seventy-nine percent of clinics that responded to the survey employed CHW/Ps, compared to 39% of hospitals.
- ▶ If funding was not a barrier, both hospitals and clinics would hire more CHW/Ps especially hospitals. Both types of organizations plan to hire more CHW/Ps in the next 12 months. However, hospitals report that they would ideally hire about 12 times more CHW/Ps; clinics would ideally hire about three times more (see Figure 2).
- ➤ Both hospitals and clinics worry about sustainability for CHW/Ps especially clinics. One hundred percent of clinics report concerns about the sustainability of CHW/P employment in their organization,

compared to 60% of hospitals. Concerns included ensuring funding for the role and finding and retaining qualified CHW/Ps.

- ➤ There is excitement, and some concern, about the new opportunity to bill for CHW/P services, either through California's State Plan Amendment or through the CalAIM initiative. Some employers highlight the potential benefits of these funding opportunities, such as improving access to preventive care, demonstrating return on investment for the CHW/P profession, and creating more demand for the role. Others note potential downsides, including the risk of over-medicalizing the profession, and excluding CHW/Ps who do not work in health care settings.
- ➤ Employers expect the number of CHW/Ps to grow and hope to see more clearly defined career ladders and respect for the profession. Only half of CHW/Ps report there are opportunities to advance in their roles.
- ➤ CHW/Ps are already playing a critical role in health systems. The type of work that respondents most often report performing include (1) identifying and referring people to community resources, and (2) providing case management, coordination, and navigation.
- ➤ Pay for CHW/Ps varies widely. Based on data from two of the research reports, pay ranges from \$16—\$30 per hour.

Figure 1. CHW/P Training Programs in California

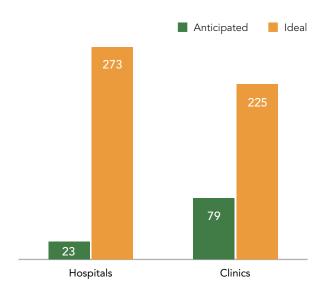


• Public Health Institute (Northern Adverse Childhood Experiences Collaborative of the Population Health Innovation Lab), Online

Note: The map represents the locations where these programs are based and does not reflect additional training locations if additional locations are offered.

Source: Jacqueline Miller, Amy Quan, and Susan Chapman, <u>Understanding California's Community Health Worker/Promotor Workforce:</u> <u>CHW/P Training Programs</u>, The California Health Care Foundation, February 2023.

Figure 2. Anticipated New Hires



Source: Timothy Bates, Jacqueline Miller, and Susan Chapman, <u>Understanding California's Community Health Worker/Promotor</u> <u>Workforce: CHW/P Health Care Employers</u>, The California Health Care Foundation, February 2023.

"I hope that we are recognized for the work that we do. I think that there are more and more evidence-based programs and more data on the changes that we make in the community. So I think for us, the big picture is to be recognized as professionals and to be compensated as professionals and hopefully have a more steady source of funding for the promotoras, because a lot of the time we notice that the funding is gone, but the health issues are still there."

- Community health worker/promotor

"I would say [there is a growing need for more promotores] not just our organization, but I think in other organizations. What we have seen with the pandemic has been very detrimental to our communities. Whatever inequities were there are now only accentuated with the pandemic and we have seen the effectiveness of the promotores model. Because the folks that we've been able to connect with throughout the pandemic rely on that trust with promotores to tell them where to go or to seek services."

- Community-based organization delegate

Understanding California's Community Health Worker/*Promotor* Workforce: The Series

Despite being a critical part of California's health workforce, there are relatively little comprehensive data on community health workers and promotores (CHW/Ps) in California. With funding from CHCF, Healthforce Center at UCSF fielded surveys of CHW/Ps, the institutions that train them, and the organizations that employ them. The survey data, published in a series of reports, paint a more complete picture of the current CHW/P workforce as well as challenges and opportunities related to training and employment. This picture can inform policy decisions as the state looks to support and expand this important workforce. To learn more, visit www.chcf.org/chw.

About the Authors

Susan Chapman, RN, PhD, FAAN, is a professor of social and behavioral sciences in the School of Nursing at UCSF and is a faculty affiliate of the Philip R. Lee Institute for Health Policy Studies (IHPS) and Healthforce Center at UCSF. Amy Quan, MPH, is a research analyst at Healthforce Center at UCSF. Timothy Bates, MPP, and Jacqueline Miller, BA, are senior research data analysts with IHPS at UCSF and are affiliated with Healthforce Center at UCSF. IHPS is an interdisciplinary collection of concerned researchers who share a mission — to improve health and transform health care in the United States by working across competing interests, collecting evidence, informing policy, and improving practice.

About the Foundation

The <u>California Health Care Foundation</u> is an independent, nonprofit philanthropy that works to improve the health care system so that all Californians have the care they need. We focus especially on making sure the system works for Californians with low incomes and for communities who have traditionally faced the greatest barriers to care. We partner with leaders across the health care safety net to ensure they have the data and resources to make care more just and to drive improvement in a complex system.