Minnesota Community Health Worker Alliance
Supervisor Round Table Meeting
April 23, 2020

The CHW Role and Deployment in a Pandemic

Present: Heather Lorenz, Winona Health; Kelly Fluharty, Winona Health; Connie Norman, Sanford Bemidji; Heidi Favet, Essentia Ely; Sarah Nelson, Generations Health Care, Duluth; Terri Janssen, SMOC, Worthington; Roxanne Hayenga, Minnesota West, Worthington; Carrie Harris, City of Minneapolis, Carla Kohler, CLUES, St. Paul; Laura Sanka, Wellshare, Minneapolis, Mohamed Ibrahim, Mayo Clinic Health System Mankato; Tara Nelson, IMAA/Mayo Clinic Rochester; Rebecca Busse, M Health Fairview St. Paul; Marie Tran, MDH; Kristen Godfrey Walters, Hennepin HealthCare, Anne Ganey, MN CHW Alliance, Mankato.

Update on Waivers for CHWs Reimbursement for Phone and Internet visits. Anne Ganey, MPH, Minnesota Community Health Worker Alliance.

CHWs are approved to receive reimbursement for telehealth services. Link to the updated provider manual:
https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=DHS-320036

Deploying CHWs as a Provider Extender in Infectious Disease. Terri Janssen, Public Health Nurse, SMOC, Worthington, MN

Terri provided an overview and lessons learned from the deployment of CHWs to extend heath care providers in managing infectious disease in rural Minnesota.

Innovative Methods of Reaching At-Risk Populations. Mohamed Ibrahim, CHW, Mayo Clinic Health System CHW Program.

When COVID hit and non-English speaking populations were not getting critical information, Mohamed created a series of remote methods to get information to communities and to allow people to have their questions answered. He shared those methods and their results.

Preserving Critical CHW Services During COVID. Tara Nelson, CHW Supervisor, InterCultural Mutual Assistance Association (IMAA) and Mayo Family Practice Clinics.

As COVID rapidly approached, the CHW Program at IMAA realized their services would be needed more than ever but must be delivered a different way. They created a strategic plan to safely continue CHW services. Tara shared the plan and results.

ROLES OF CHWS REFERENCED IN THE PRESENTATIONS AND MEMBER UPDATES

In Clinics and Hospitals
- In the Emergency Room with trauma clients impacted during COVID
- Closing treatment gaps
- Clinical triage
- Screening
- Help with calling the doctor
- Help with health care access and support
- Hospital discharge- first call and follow up support
- Identifying gaps in health care and mental health
- Screening for COVID
- Screening for SDOH; needs
- Access to and delivery of meds
- Medication monitoring (take as prescribed) and support
- Virtual home visits

Public Health
- Contact tracing
- Identify county Public Health gaps
- Work with employers so employees can have time off work for quarantine
- Work with employers to allow time off for self/family-isolation
- Access to screening (chronic disease)

Community Support Work
- Assist charter schools, churches and childcare providers in working with families
- Identify and collate resources, including hours and services
- Planning help with community/county/schools
- Identify neighborhood sites for children's lunch pickup

Individual and Family Outreach and Support
- Assess needs, particularly around the Social Determinants of Health
- Grant access
- Access to resources
- Providing food- food delivery and emergency food access
- Support services

- Outreach to current clients (going back 6 to 12 months)
- Reassurance calls
- Support services; housing, food, financial, unemployment, insurance, current info, school info, etc.
- Outreach to all patients twice a week
- Ask about family- address family needs
- Help deal with evictions, find housing

Cultural Mediation
- Trust
- Understand traditional supports and barriers
- Know the right contact people
- Language
- Phone access- purchase of phone minutes is critical
- Reassurance calls
- Explanation of flattening the curve, need for self-isolating
- Answering questions (these are long conversations)
- Access to current and changing information in culturally/linguistically appropriate format
- Reassurance/informational zoom meetings for community in the language
- Address and decrease fear; self-isolation is scary, against cultural norms
- Use culture as a positive- for example oral culture- use technology to give info orally.
- Identify 1 person in each apartment building or each floor of public housing to get info and they share with the building or floor.
- Use What's Ap to communicate.
- Use What's Ap groups to share current/changing info and provide to community.
- Cultural voice over on materials in English (Clip Ap)
- Keep people up to date with Governor's Orders

Health Education and Teaching
- Provide instructions for self-isolating
- Explanation of need for self-isolating, flattening the curve
- Answering question (These are long conversations.)
- Virtual home visits
- Virtual groups and presentations
- Assurance visits, phone or computer
- Teaching people how to use technology
- Mental health support
- Heath education
- Reassurance- address and decrease fear.

- Keep people up to date with Governor's Orders
- Provide dental kits to encourage dental hygiene

Planning
- Immediate plan for work from home
- How to follow HIPAA Guidelines with remote work
- Workflow creation

Critical Needs CHWs are Addressing
- Fear
- Lack of access to information
- Lack of access to information in easily understood formats
- Lack of information in cultural/linguistic appropriate format
- Health care access
- Food insecurity
- Evictions/housing/homelessness
- Getting PPE for staff and clients
- Need for up to date information in various formats (Language, simplicity, clarity)

Surprises
- The high number of people who need help
- The number of people with Social Determinants of Health needs; food access and financial concerns have been a huge need
- The high level of fear and need for reassurance
- Critical need for information- updates as things change, new Governor's Orders
- Number of questions people have and the length of conversations
- People need to be able to ask their questions and get answers