Traditional Health Worker Commission

AGENDA

August 24, 2015

1:00 PM - 4:00 PM
Lincoln Building Transformation Center
421 SW OAK St. Suite 775
Portland, Oregon 97204

Conference#: 1-866-590-5055, code: 2766017#
Participate by
Webinar: https://attendee.gotowebinar.com/rt/3821007780016032513

#	Time	Topic	Content
1.	10 min 1:00 – 1:10	**Welcome Minutes review and approval**	• Introductions-Welcome (please sign in) • Review Agenda • Review Minutes • Approve Minutes
2.	1:10 – 1:15	**OHA Updates**	• Registry • THW RAC
3.	1:15 – 1:45 1:45-2:30	**New Business**	• Unity Center (for mental health) presented by Chris Farentinos LSO Director of Behavioral Health Services at Legacy • RAC and Rule Discussion by Subcommittee Areas of Concern
4.	2:30 – 2:45	**BREAK**	
5.	2:45 – 3:30	**New Business, Cont'd**	• RAC and Rule Discussion by Subcommittee Areas of Concern
6.	3:30 – 3:45	**Subcommittee Updates**	• Systems Integration Subcommittee • TEMPS Subcommittee • Scope of Practice Subcommittee
7.	15 min 3:45 – 4:00	**Public Comment & Adjournment**	

Meeting Materials:
Commission Meeting Minutes & Agenda
Subcommittee Agendas & Meeting Minutes

Next THW Committee Meeting:
September 28, 2015 - 1:00 PM - 4:00 PM
Lincoln Building Transformation Center
421 SW OAK St. Suite 775, Portland, Oregon 97204

If you have a disability and need a modification, or need an interpreter to attend or fully participate in this event, please contact:
April Turner, Health Equity Workforce Coordinator
Office of Equity and Inclusion
971-673-3359 April.Turner@state.or.us
Host Code (April): 8629036#

The Oregon Health Authority Office of Equity and Inclusion (OEI) strives to ensure the comfort and safety of staff and visitors by requiring a smoke free environment and encouraging a fragrance free environment. This request is included in notices for board meetings, hearings, public events and all other meetings sponsored or hosted by the OHA Office of Equity and Inclusion.

Traditional Health Worker Commission
DRAFT Meeting Minutes

July 27, 2015 | 1:00 – 4:00 pm
Office of Equity and Inclusion, Transformation Training Room

Attendees: Edna Nyamu, Keesha Dumas, Raeben Nolan, Kris Anderson, Jennifer Jensen, (Catherine Potter proxy for **Roxanne McAnally), Maria Sanchez, Cheryl Badaracco,**-Susan Palmer (proxy for **Noelle Wiggins**), **Ashlen Strong** (phone)
Public: Renee Balcom, Frances Purdy
OHA Staff: April Turner, April Johnson, Ty Schwoeffermann, Shawn Clark

#	Topic	Content
1.	**Welcome Minutes review and approval**	• Agenda reviewed • Motion made and carried to approve minutes
2.	**Action Items Review**	• Certification requirement for Commission & Subcommittee Members, cont'd: o Set an effective date for the encouragement of commission and subcommittee members to be certified. o Discuss: process for excluding current commissioners; if it should be a requirement for ORCHWA-recommended seats; and how it will impact term renewals. • Wrap up THW Resource List: purpose of list is to provide potential sources of CEUs for THWs. There's a question about why it's necessary to have programs apply for CEU approval if THWs can take CEUs from non-approved programs?
3.	**OHA Updates**	• Transformation Center o The next Quality Health Outcomes Council is 9/14/15. Ty will reach out the THW Commissionbers to request participation as a panel member. Initial results of statewide survey will be available. o Transformation Center rec'd several applications for the Coordinated Care Model Summit on November 16th and 17th; all presentation proposals which applied for the CCM summit will receive a notice by August 16th. The first day is dedicated to Health Equity and the second day is a broader CCM summit. There will be a cost associated with attending both events. The CCM summit costs $35 and the health equity summit will be $25. The cost to attend both will likely be lower at $50. There will be scholarships for attendance. .THW Registry: Update and Enhancement Project o Registry numbers: CHW: 153, PSS: 382, PWS: 23, Doula: 18 • OHA Reorg Update o OEI has contracted with six Equity and Inclusion coaches o No updates yet on reorganization • THW Rules Project o RAC being created for THW Rules: each subcommittee needs to provide input and send a rep to the RAC. Feedback is needed by August 7th so April will have it before the RAC starts. o April will schedule three lunch time meetings so Commission members can attend by phone. Potential RAC members: Roxanne, Raeben, Cheryl, Lakeesha, Renee, Ashlen, and _____.

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4.	**Subcommittee Updates**	• Systems Integration Subcommittee
		  o Made final edits to contracting tip sheet, adding language about THWs as change agents to each benefits page.
		  o No longer planning to discuss NPI numbers, determined it's an employment issue (employers may/may not require it).
		  o Discussed speakers bureau idea and developing a presentation about the Commission
		  o Began looking at the Rule and will make edits in a Google doc.
		  o One issue: two different definitions of "certified"
		  o Another issue, especially for doulas, is that the state expects certification but requires only training (doula certification consists of training plus several other requirements).
		• TEMPS Subcommittee
		  o Updated training program application to include PSS and subcategories for PSS and PWS
		  o Discussed grandfathering; lang "indiv who have worked or volunteered in ____ role… the grandfathering process will end June 30, 2016. It would not require an assessment or incumbent worker training. ACTION ITEM: provide info in Google Doc version of the Rules.
		  o Will work on reciprocity with other states (this language will take the place of incumbent assessments).
		• Scope of Practice Subcommittee
		  o Finalized micro/meso level roles for all worker types, working on supervision standards, then next will work on ethical standards.
		  o Need to discuss the remainder of the work w/TEMPS committee.

5.	**New Business**	Billing for CHW Services – Renee Balcom, President Liberty Advocacy Group, Inc. • Started in 2011, have 19 staff; half of revenue is from home care business. • Filling a need where there were no services before (No SSA office there) • Providing services to California border cities. • Provides several types of services, case mgmt. & care coordination, health education, crisis assistance, transition of care, wellness supports, independent living support, etc. • Works with All Care • Four primary sources of revenue; contract w/AllCare and OpenDoor Clinic • 93 clients served to date • Results: reduction in ER use, education support, wellness • They will AllCare via fee for service by quarter hour; had a system created for billing. Uses TrackVia, costs $199/mo for 10 users, then per user after that; it's customizable. • Customized system (cost about $6,000) is linked to Quick Books, Excel, and Shift Planner (a phone app with GPS that IDs where advocates are at all times, $33/month). The system can be adopted to use with any worker type. • Health advocates are salaried; home care providers are hourly. • Referral sources: hospitals, churches, senior centers, etc.
6.	**Old Business**	• Bylaws Completion and Vote—postponed until August meeting.
7.	**Public Comment & Adjournment**	• No public comments

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Oregon Health Authority | Office of Equity and Inclusion

THW Commission Attendance Chart for 2015												
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
Kristen Anderson			X	X	X	X	X					
Cheryl Badaracco	X		X	X	Ex	X	X					
Keesha Dumas	X	X	X	X	X	X	X					
Rod Evans	X	X		X	X	X						
Lydia Gray-Holifield			X	X								
Jennifer Jensen				X	X	X	X					
Ally Linfoot	X	X		X	X	X						
Roxanne McAnally	X	X	X		X	X	(proxy)					
Connie Miyao	X	X	X	X	Ex							
Raeben Nolan	X	X	X	X	X	X	X					
Edna Nyamu	X	(proxy)	X	X	X	X	X					
Maria Sanchez	X		X	X	X	X	X					
Jennine Smart	X	X	X	X	X	Ex	Ex					
Ashlen Strong	X	X		X	(proxy)	X	(phone)					
Noelle Wiggins	X	X	X	X	X	(proxy)	(proxy)					
Paul Wild					X	Ex	Ex					
THW VAC												
THW VAC												
THW/PSS VAC												
OMA VAC												
ONA VAC												
Labor Org VAC												

Traditional Health Worker Commission Training Evaluation Metrics and Program Scoring (TEMPS) Committee Meeting

AGENDA

August 24,, 2015
9:00 am to 12:00 pm
Transformation Center
Lincoln Building, Suite 750
421 SW Oak St. Portland, OR 97204
1-866-590-5055, Participant Code: 2766017#

Cheryl Badaracco , Chair

#	Time	Topic	Content
1.	9:00 – 9:10 10 minutes	Minutes	Introductions and Review of July 27,2015 Minutes and August 24, 2015 Agenda
2.	9:10– 9:20 10 minutes	Final Review of Training Program Application	Review Changes made to include Peer Support Specialists with specialized worker types: addiction, family , mental health and youth
3.	9:20-10:20 60 minutes		Meet with Scope of Practice Committee to work on supervision standards.
4.	10:20- 10:35 15 minutes	Break	
5.	10:35-11:35 60 minutes	Rule Change Suggestions	Discuss Rule changes, determine areas of consensus and make recommendation as a THW Commission Committee. Refer to minutes/changes made at the July 27, 2015 meeting
6.	11:35-11:40 5 minutes		Discuss how to include PSS/PWS specialty areas into application and curriculum (adult additions, adult mental health, behavioral health youth and family)
7.	11:40-11:50 10 minutes	Agenda	Develop Agenda
8.	11:50-12:00 10 minutes	Public Comment	

Training Evaluations Metrics Program Scoring (TEMPS) subcommittee minutes

7-27015 Office of Equity and Inclusion Portland, OR 9:00 AM to Noon

Members attending		Representing	Public	Representing
X	Cheryl "Che" Badaracco	Traditional Health Worker (THW)Commission/CHW		
	Arika Bridgeman-Bunyoli	Community Health Worker(CHW)		
X	Raeben Nolan	THW Commission/Doula(phone)		
X	Tammi Paul	Peer Support Specialist –Family		
ill	Rollin Shelton	Peer Support / Wellness Specialist		
X	AMH Staff Shawn Clark	Addictions and Mental Health Division (AMH)		
	AMH Staff Nicole Currier	Addictions and Mental Health Division (AMH)		
	OEI Staff April Turner	Office of Equity and Inclusion (OEI)		

Topic	Discussion Notes	Action/Member Assigned
Minutes	Raeben moved to approve the minutes. Cheryl seconded. Minutes of 6-22-2015 were approved as amended.	
Follow Up From June 22, 2015 Meeting	April Johnson sent a letter to the applicant of the "Changing Perspectives PSS Training Program "notifying them that they were not approved. Cheryl will ask for THW Commission names of resources to post to the THW resource webpage at the THW Commission Meeting today. Shawn will check with April Johnson and April Turner to see if the applicants for Morrison Center's PSS Parent Mentor Training program were notified that they were not approved.	Cheryl will ask for Commission ideas for resource list. Shawn will follow up on non-approval letter or status of the application.
Review and Revision of the Training Program	TEMPS reviewed the revised Training Program Application. They made further edits. Shawn will revise the document to include the suggested edits and send it to the Committee for one last look. (see attached)	The final review will be on the next TEMPS agenda.

Application		
Incumbent Worker Training	TEMPS will recommend to the THW Commission and April Johnson that incumbent worker training should be eliminated in the new rule. In addition, they recommend the people who are currently applying to be grandfathered not be held up, as the incumbent worker training has not been developed.	Shawn will make track changes and forward to April Johnson and TEMPS
Grandfathering	The TEMPS recommend that the grandfathering language in the new rule read as follows: Individuals who have worked or volunteered in the capacity of a community health worker, peer wellness specialist or personal health navigator in the state of Oregon at least 3000 hours from January 1, 20104 to June 30, 2014 maybe certified if they successfully complete the application including the background check. They recommend the grandfathering option close on June 30, 2016. The same would apply to peer support specialist who work at least 2000 hours.	Shawn will make track changes and forward to April Johnson and TEMPS
THW Rule Change Recommendations	See above for incumbent worker training and grandfathering recommendations Discussed eliminating the option for a provisional certification Further, clarify the various types of Peer Support and Peer Wellness Specialists Discuss equivalency (page 3) Stopped at page **six** of the current rule Will add to the agenda for the next meeting	
Agenda Development	Final review of the Training Program Application Document Review Training Program Application if one is submitted Discuss Rule changes, determine areas of consensus and make recommendation as a THW Commission Committee. Discuss how to include PSS/PWS specialty areas into application and curriculum (adult mental health, adult additions, family, behavioral health youth)	
Public Comment	None	

Parking Lot
• Review one training program per meeting. The application must be to the TEMPS by the second week of the month(put on the agenda)

Resources for Traditional Health Workers

All Traditional Health Workers

- Health Systems Division (HSD)
- Office of Equity and Inclusion (OEI)
- Oregon Health Authority (OHA)
- Oregon Home Care Commission (OHHC)
- Trauma Informed Oregon (TIO)

Community Health Workers

- Oregon Community Health Workers Association (ORCHWA)
- Multnomah County Community Capacitation Center (MCCC)
- CHWCentral.org
- CWIS Toolkit for THWs
- American Public Health Association (APHA)
- Robert Wood Johnson Foundation

Doulas

- Birthingway
- Childbirth and Postpartum Professional Association(C.A.P.P.A)
- Doulas of North America (D.O.N.A)
- International Center for Traditional Childbearing (I.C.T.C.)
- Lamaze
- Oregon's Doula Association
- Northwest Area Childbirth Educators Forum(NACEF)
- International Childbirth Education Association (ICEA)

Peer Support Specialists and Peer Wellness Specialists

- Addiction Counselor Certification Board of Oregon (ACCBO)
- Alternatives Conference
- Federation of Families for Children's Mental Health
- Mental Health America of Oregon (MHAO)
- National Wraparound Initiative
- Northwest Addiction Technology Transfer Center (NWATTC)
- Oregon Family Support Network(OFSN)
- Peerpocalypse
- Think:kids
- Youth M.O.V. E.

Personal Health Navigators

►The Oregon Administrative Rules contain OARs filed through September 15, 2014◄

QUESTIONS ABOUT THE CONTENT OR MEANING OF THIS AGENCY'S RULES?
CLICK HERE TO ACCESS RULES COORDINATOR CONTACT INFORMATION

OREGON HEALTH AUTHORITY, DIVISION OF MEDICAL ASSISTANCE PROGRAMS

DIVISION 180

TRADITIONAL HEALTH WORKERS

410-180-0300

Purpose

The purpose of these rules is to establish criteria, description, and training requirements for Traditional Health Workers (THW) which include community health workers, personal health navigators, peer wellness specialists, peer support specialists, and other health care workers not regulated or certified by the state of Oregon. These rules set forth the procedures for THW certification and enrollment in a registry maintained by the Authority. These rules also establish curriculum guidelines for training programs seeking to train THWs and the procedures for Authority approval of training programs.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0305

Definitions

The following definitions apply to OAR 410-180-0300 through 410-180-0380:

(1) “Authority” means the Oregon Health Authority.

(2) “Authority Approved Training Program” (Training program) means an organization that has a training program with curriculum that meets Authority standards for one or more types of THWs and has been approved by the Authority to train those types of THWs.

(3) “Birth Doula” means a birth companion who provides personal, non-medical support to women and families throughout a woman's pregnancy, childbirth, and postpartum experience.

(4) “Birth Doula Certification Organization” means an organization nationally or internationally recognized for training and certifying birth doulas, and whose educational requirements includes the core curriculum topics as described in section (2) of 410-180-0375 of these rules.

(4) “Certified Traditional Health Worker” means an individual who has successfully completed a training program as required by these rules, and has applied for and been ~~certified by~~accepted into the State registry by the Authority for one of the THW types; or a grandfathered THW who has been accepted into the State registry~~certified~~ by the Authority.

(5) “Community Based Organization” (CBO) means a public or private nonprofit organization that is representative of a community or significant segments of a community, which may be located within or in close proximity to the community it serves; and is engaged in meeting that community’s needs in the areas of social, human, or health services.

(6) “Community Health Worker” has the meaning given that term in ORS 414.025.

(7) “Contact Hour” means a training hour, which includes classroom, group or distance learning. Contact hour does not include homework time, preparatory reading, or practicum.

(8) “Competencies” mean key skills and applied knowledge necessary for THWs to be effective in the work field and carry out their roles.

(9) “Equivalency” means an individual has fulfilled the requirements of a course or combination of courses, by completing a relatively equivalent course.

(10) “Grandfathered THW” means an individual who has been certified by the Authority as an THW as a result of their prior THW work experience and fulfillment of all additional requirements for grandfathering as set forth in these rules.

(11) ~~“Incumbent Worker Training” means training offered by an approved training program for individuals eligible for grandfathering that assesses for and addresses any gaps in THW competencies.~~

(12) "Peer" means any individual who has similar life experience, either as a current or former recipient of addictions or mental health services, or as a family member of an individual who is a current or former recipient of addictions or mental health services.

(13) “Peer Support Specialist” means a person providing peer delivered services to an individual or family member with similar life experience (addiction to addiction, mental health condition to mental health condition, family member of a child or youth with a mental health condition to family member of a child or youth with a mental health condition, young adult to a young adult). A peer support specialist must be:

Comment [1]: Need this definition to clarify training requirements as described in 0375 section.

Comment [2]: I appreciate this clarification

Comment [3]: Should this be changed to core curriculum, as actual competencies are not what is written in the rules?

Comment [4]: This will be able to be deleted if suggestions made by TEMPS is approved

Comment [5]: I would suggest that 'family member of a person' be changed to 'family member of a child or youth'

(a) A self-identified person currently or formerly receiving mental health services; or

(b) A self-identified person in recovery from an addiction disorder, who meets the abstinence requirements for recovering staff in alcohol and other drug treatment programs;

(c) A self-identified person in recovery from problem gambling; or

(d) A family member of an individual who is a current or former recipient of addictions or mental health services.

(14) “Peer Wellness Specialist” has the meaning given that term in ORS 414.025.

(15) “Personal Health Navigator” has the meaning given that term in ORS 414.025.

(16) ~~“Provisionally Certified THW” means an individual who has temporary certified status, pursuant to OAR 410-180-0327.~~

(17) "Registry" means a list of certified THWs maintained by the Authority.

(18) "THW Applicant" means an individual who has applied for THW certification.

(19) “Traditional Health Worker” (THW) means a community health worker, peer wellness specialist, personal health navigator, peer support specialist, ~~or~~ birth doula, and other potential traditional health care workers.

(20) “Training Program Applicant” means an organization or entity that has applied for Authority approval of its training program and curricula for any of the THW types.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0310

Community Health Worker, Peer Wellness Specialist, Personal Health Navigator Certification Requirements

(1) To be certified as a community health worker, peer wellness specialist, or personal health navigator, an individual must successfully complete all required training offered by a training program for that individual’s THW type, complete all application requirements to be on the state registry, and be successfully accepted into the state registry. [needs to mention OHA certification process].

(2) Individuals who have worked or volunteered in the capacity of a community health worker, peer wellness specialist or personal health navigator in the state of Oregon at least 3000 hours

Comment [6]: This will also be able to be deleted if TEMPS suggestions re grandfathering is accepted - there won't need to be any provisional certification

Comment [7]: please note this only needs changing if we are going to change rule to truly reflect the purpose which was to open door to other THW types, this would require ALOT of change to the rule so things are more loosely defined around similarities - may not be practical at this point given direction the state has gone in

Comment [8]: Is it always an organization? Adding entity would be more inclusive.

from January 1, 2004 to June 30, 2014 but have not completed a training program are eligible for certification ~~if they successfully complete approved incumbent worker training~~.

(3) Individuals who have completed some or all of the certification training requirements may receive equivalency for previously completed training. The training program shall determine equivalency requirements.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0312

Peer Support Specialist Certification Requirements

(1) To be certified as a peer support specialist, an individual must:

(a) Successfully complete all required training offered by a training program for peer support specialist, complete all application requirements to be on the state registry, and be successfully accepted into the state registry; or

(b) ~~Be certified by an entity whose qualifications for the certificate includes completion of an Authority approved training program for peer support specialists and a minimum of 20 hours of continuing education every three years.~~

(2) Individuals who have worked or volunteered in the capacity of a peer support specialist in the state of Oregon at least 2000 hours from January 1, 2004 to June 30, 2014 but have not completed a training program are eligible for certification ~~if they successfully complete an approved incumbent worker training.~~

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0315

Birth Doula Certification Requirements

To be certified in Oregon as a birth doula, an individual must:

(1) Successfully complete an OHA-approved birth doula ~~training~~ certification program; or

Comment [9]: Is this practical? realistic with types of programs we have? better to delete? would be a good discussion for RAC

Comment [10]: I don't believe that this is practical as a training program as our trainings build on themselves. TEMPS discussed this also.

Comment [11]: No one else but the state should be able to certify given how we've clarified certification is defined - is too confusing when we don't have a true competency and assessment based certification process - this should be deleted as clean up issues on how use term certification

Comment [12]: Keep training instead of certification, because it is confusing with state use of certification

(2) Have successfully completed all birth doula training requirements as described in OAR 410-180-0375 through one or a combination of non-approved birth doula training programs and meet the cultural competency course requirements through an approved training program for doulas.

(1) Successfully complete an authority-approved training program for birth doulas and complete all other requirements as specified in OAR 410-180-0375; or

(2) Successfully complete all birth doula training requirements as described in OAR 410-180-0375 through a combination of one or more programs and pathways;

Comment [13]: Here is what we recommend instead. of the previous language.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0320

THW Continuing Education Requirements

(1) To maintain certification status, all THWs must complete at least 20 hours of continuing education during every three year renewal period.

(2) Continuing education hours taken in excess of the total number required may not be carried over to the next renewal period.

(3) The Authority shall award continuing education hours for:

(a) Additional THW training offered by an Authority approved training program; and

(b) Any other Authority approved training or event.

(4) Requests for approval of other continuing education may come from ~~the hosting organization or from~~ a certified THW attending the training or event.

Comment [14]: "Approval of" continuing ed hours is different from "award of" referred to in (3). I am not sure what is meant by this. I would suggest the edits I've made for "approval of" as something separate from the "awarding of"

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0325

Application and Renewal Process for Traditional Health Worker (THW) Certification and Registry Enrollment

(1) Individuals seeking THW certification and registry enrollment must:

(a) Be at least 18 years of age;

(b) Not be listed on the Medicaid provider exclusion list;

(c) Have successfully completed all training requirements for certification pursuant to these rules; and

(d) Submit to the Authority all required documentation and a completed application on an Authority prescribed form.

(2) Peer support specialists as defined in OAR 410-180-0305(13)(b), (c) who choose to have their background check completed by an outside entity pursuant to 410-180-0326 may be certified by that entity.

Comment [15]: Can't have 2 certifying bodies with how we agreed to clarify/clean up rule with what certification means.
This section (2) needs to be re-written to reflect ACCBO is doing the background check not certifying people for the state. We decided that to clean this up people are not certified by the state until the state accepts their application, background check and places them onto the registry.

(a) The entity's certification requirements must include all peer support specialists certification requirements set forth in these rules.

(b) Peer support specialists must have either:

(A) The outside entity submit the certification and background check information to the Authority; or

(B) Submit to the Authority all required documentation and a completed application on an authority prescribed form.

(3~~2~~) Individuals seeking THW certification and registry enrollment as a grandfathered community health worker, peer wellness specialist, personal health navigator, or peer support specialist must:

(a) Be at least 18 years of age;

(b) Not be listed on the Medicaid provider exclusion list;

(c) Submit to the Authority all required documentation and a completed application on an Authority prescribed form;

(d) Submit a minimum of one letter of recommendation and competency evaluation on an Authority prescribed form from any previous employer or supervisor for whom THW services have been provided from January 1, 2004 to June 30, 2014;

(e) Except for peer support specialists, all THW's must submit verifiable evidence of working or volunteering in the capacity of a community health worker, peer wellness specialist or personal health navigator for at least 3000 hours from January 1, 2004 to June 30, 2014;

(f) Peer support specialists must submit verifiable evidence of working or volunteering in the capacity of a peer support specialist for at least 2000 hours from January 1, 2004 to June 30, 2014;

(g) Verifiable evidence may include but is not limited to pay statement, services contract, student practicum, or volunteer time log.

(4~~3~~) Applications are available on the THW program webpage or a paper copy may be obtained upon request to the Oregon Health Authority Office of Equity and Inclusion.

(5~~4~~) Applicants may withdraw from the process at any time by submitting written notification to the Authority.

(6~~5~~) Except for birth doulas, Applicants who complete a training program after August 2, 2013 must apply for certification within three years of program completion.

(7~~6~~)Except for birth doulas, pplicants who have completed a training program more than three years prior to application for certification shall be denied certification. If the Authority denies certification, the applicant may file an appeal with the Authority for an exemption.

(8~~7~~) If the Authority determines that an applicant has met all ~~certification~~ requirements, the Authority shall notify the applicant in writing granting the individual certification as a THW and add the individual to the registry.

(9~~8~~) Certification is valid for 36 months from the date of certification.

(10~~9~~) A THW seeking certification renewal must:

(a) Submit a completed renewal application on an Authority prescribed form; and

(b) Provide written verification indicating the certificate holder has met the applicable requirements for continuing education set forth in OAR 410-180-0320.

(11~~0~~) Renewal applications must be submitted to the Authority no less than 30 days prior to the expiration of the current certification period.

(12~~1~~) The Authority shall remove a THW from the registry if the THW fails to renew certification within the renewal period.

(13~~2~~) THWs who have been removed from the registry following certification expiration shall be denied renewal unless they file an appeal with the Authority within 60 calendar days and are granted an exemption.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665

Comment [16]: This limitation should not apply to birth doulas since many have been in practice for several years.

Comment [17]: Same here for birth doulas

Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 3-2014, f. & cert. ef. 1-15-14

410-180-0326

Background Check Requirements

(1) All individuals seeking certification and registry enrollment as a community health worker, peer wellness specialist, birth doula, peer support specialist as defined in OAR 410-180-0305 (13) (a) and (d), or personal health navigator must have a background check conducted by the Authority in accordance with 943-007-0010 through 0501 specifically incorporating and limited to 407-007-0200 to 407-007-0250, and 407-007-0280 to 407-007-0325, and 407-007-0340 to 407-007-0370 and expressly not incorporating 407-007-0275 (Disqualifying Convictions Under ORS 443.004 for Aging and People with Disabilities Programs) and 407-007-0277 (Disqualifying Convictions under 443.004 for Mental Health or Alcohol and Drug Programs). The Authority may deny certification to a new or renewal applicant based on a fitness determination applying a weighing test for potentially disqualifying convictions or conditions.

(2) To be certified, enrolled on the registry, and eligible for reimbursement under Medicaid, peer support specialists as defined in OAR 410-180-0305(13)(b) and (c) must pass a background check. The background check may be conducted by the Authority or an entity with a contract with the Authority to provide background checks.

(a) If the Authority conducts the background check, the Authority's fitness determination shall comply with the provision of section (1) and shall include the application of a weighing test for potentially disqualifying convictions or conditions, or if otherwise excluded from participation in the medical assistance program.

(b) If the contracting entity conducts the background check, the provisions of 407-007-0277(Disqualifying Convictions under ORS 443.004 for Mental Health or Alcohol and Drug Programs) shall apply.

(c) Peer support specialists described in section (2) may determine which entity shall conduct the background check.

(3) Individuals seeking certification who are excluded from participating in the medical assistance program shall be denied certification and registry enrollment. The Authority shall consult with the Office of the Inspector General to determine if the applicant is excluded from participation.

Comment [18]: Unclear what this is in here for - participation in what? why need to be in rule? has inspector general provided clarity and that can be addressed here?

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 181.537, 414.635 & 414.665
Hist.: DMAP 3-2014, f. & cert. ef. 1-15-14

~~**410-180-0327**~~

Comment [19]: This section can be deleted given passage of time and if we get rid of incumbent training requirement for grandfathering process

~~**Provisional THW Certification**~~

~~(1) Individuals may qualify for provisional certification if:~~

~~(a) They are eligible for grandfathering as described in OAR 410-180-0310 and 410-180-0312 but have not yet completed incumbent worker training; or~~

~~(b) They have completed or matriculated in a non-approved training program between February 4, 2010 and August 2, 2013 provided:~~

~~(A) The individual successfully completes the training program; and~~

~~(B) The training program includes a minimum of 40 contact hours of training.~~

~~(2) Individuals seeking provisional certification must:~~

~~(a) Be at least 18 years of age;~~

~~(b) Submit a completed application on an Authority prescribed form; and~~

~~(c) Submit one of the following:~~

~~(A) Verifiable evidence of working or volunteering in the capacity of a community health worker, peer wellness specialist, or personal health navigator for at least 3000 hours from January 1, 2004 to June 30, 2014; or~~

~~(B) Verifiable evidence of working or volunteering in the capacity of a peer support specialist for at least 2000 hours from January 1, 2004 to June 30, 2014; or~~

~~(C) Written documentation of successful completion of a training program that includes at minimum 40 contact hours of training.~~

~~(3) Applications are available on the THW program webpage or a paper copy may be obtained upon request to the Oregon Health Authority Office of Equity and Inclusion.~~

~~(4) If the Authority determines that an applicant has met all provisional certification requirements, the Authority shall notify the applicant in writing granting provisional certification.~~

~~(5) Provisionally certified THWs may become certified if:~~

~~(a) The individual successfully completes remaining training requirements or incumbent worker training from a training program within one year from the provisional certification date; or~~

~~(b) The non-approved training program completed by the provisionally certified THW becomes Authority approved.~~

~~(6) Provisionally certified THWs seeking certification must comply with OAR 410-180-0325.~~

~~(7) The Authority shall revoke provisional certification if the individual does not complete the remaining training requirements within one year from the date of provisional certification.~~

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0339

THW Certification through Reciprocity

(1) Individuals who have been certified as a THW in another state are eligible to apply for certification without completing an Authority approved training program

(a) applicants must submit proof of current certification in another state; if the certifying state uses a different title for the THW type applying for, the applicant must include supporting documentation that their certification requirements meet or exceed those of a recognized type in Oregon

(b) applicants must complete all application requirements to be on the state registry, and be successfully accepted into the state registry

(2) Birth doulas who have been trained in another state are eligible to apply for certification as long as they can prove they have completed the core curriculum requirements as described in 410-180-0375 and met all additional requirements in 410-180-0375.

Comment [20]: This is just to provide a starting point for the conversation

Comment [21]: I think that part of the reciprocity needs to include some type of 'orientation' or training specific to Oregon process/work/legislation, etc.

Comment [22]: Added wording for birth doulas here too.

410-180-0340

Standards of Professional Conduct

(1) A certified ~~or provisionally certified~~ THW, pursuant to OAR 410-180-0305 must comply with Standards of Professional Conduct set forth in this rule. The violation of the standards may result in the denial of an application for certification or suspension or revocation of certification.

(2) THWs must:

(a) Acquire, maintain and improve professional knowledge and competence using scientific, clinical, technical, psychosocial, governmental, cultural and community-based sources of information;

(b) Represent all aspects of professional capabilities and services honestly and accurately;

(c) Ensure that all actions with community members are based on understanding and implementing the core values of caring, respect, compassion, appropriate boundaries, and appropriate use of personal power;

(d) Develop positive collaborative partnerships with community members, colleagues, other health care providers, and the community to provide care, services, and supports that are safe, effective, and appropriate to a community member's needs;

(e) Regardless of clinical diagnosis, develop and incorporate respect for diverse community member backgrounds including lifestyle, sexual orientation, race, gender, ethnicity, religion, age, marital status, political beliefs, socioeconomic status or any other preference or personal characteristic, condition or state when planning and providing services;

(f) Act as an advocate for community members and their needs;

(g) Support self-determination and advocate for the needs of community members in a culturally competent, trauma informed manner

(h) Base decisions and actions in support of empowerment and respect for community member's culture and self-defined health care goals using sound ethical reasoning and current principles of practice;

(i) Maintain individual confidentiality; and

(j) Recognize and protect an individual's rights as described in section (3) of this rule.

(3) Individuals being served have the right to:

(a) Be treated with dignity and respect;

(b) Be free from theft, damage, or misuse of personal property;

(c) Be free from neglect of care, verbal, mental, emotional, physical, and sexual abuse;

(d) Be free from financial exploitation;

(e) Be free from physical restraints;

(f) Voice grievances or complaints regarding services or any other issue without discrimination or reprisal for exercising their rights;

(g) Be free from discrimination in regard to race, color, national origin, gender, sexual orientation, socioeconomic status, size, type of diagnosis, criminal history, or religion; and

(h) Have their information and records confidentially maintained.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0345

Denial, Suspension or Revocation of Certification

(1) The Authority may deny, suspend, or revoke certification when an applicant or certificate holder fails to comply with ORS 414.665 or these rules.

(2) The Authority shall deny, suspend, or revoke certification pursuant to ORS 183.411 through 183.470 and the applicant or certificate holder may request a contested case hearing.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0350

Training Program Requirements

(1) All training programs must:

(a) Meet the curriculum requirements for the THW type being trained;

(b) Demonstrate active efforts to establish equivalency for students who have previously completed training that meets one or more training requirements for their THW type;

(c) Requires~~Demonstrate active efforts to involv~~e experienced THWs be involved in developing and teaching the core curriculum;

(d) Must be a culturally diverse CBO or requires ~~Demonstrate active efforts to~~ collaboratione with at least one culturally diverse CBO;

Comment [23]: Need to discuss how this relates to doula training programs

(e) Demonstrate the use of various teaching methodologies including but not limited to popular education and adult learning;

(f) Demonstrate the use of various training delivery formats including but not limited to classroom instruction, group and distance learning;

(g) Demonstrate efforts to make training inclusive and accessible to individuals with different learning styles, education backgrounds, and student needs;

(h) Demonstrate efforts to remove barriers to enrollment for students;

(i) Demonstrate inclusion of cognitive and practical examinations to evaluate and document the acquisition of knowledge and mastery of skills by the individual trained. This examination:

(A) May be any combination of written, oral, or practical competency tests; and

(B) Must assess THW competencies covered in the curriculum.

(j) Demonstrate the inclusion of a method or process for the individual trained to evaluate and give feedback on the training experience;

(k) Maintain an accurate record of each individual's attendance and participation in training for at least five years after course completion;

(l) Agree to verify and provide the Authority with names of individuals who successfully completed the training program when those individuals apply for certification and registry enrollment; and

(m) Agree to issue a written letter or certificate of completion to all successful training program graduates.

Comment [24]: More commonly used

(2) ~~All training programs that provide incumbent worker training for individuals eligible to grandfather into the NTHW program must also:~~

Comment [25]: Can delete this (2) if getting rid of incumbent training piece

~~(a) Require students to submit an Authority prescribed competency evaluation form from any previous employer, THW coach or supervisor or volunteer coordinator or supervisor for whom THW services have been provided in the five years prior to the date of application~~

~~(b) Include a pre-course assessment to evaluate student's current level of knowledge and skill; and~~

~~(c) Provide training that addresses gaps in competencies identified in the employer competency evaluation and pre-course assessment.~~

(3) Training program applicants must submit an application to the Authority. At a minimum, the training program application must include:

(a) Contact information for the individual or entity, including director name and contact information;

(b) Syllabus and course materials that demonstrate curriculum requirements are met; language per comment #23 above.

(c) Indication of the training type to be offered:

(A) Curriculum for community health workers, peer wellness specialists, peer support specialists, personal health navigators, and birth doulas; and

(B) Additional curriculum for:

(i) Community health workers;

(ii) Peer wellness specialists

(iii) Peer support specialists; and

(iv) ~~Incumbent worker training~~

(d) An overview of the teaching philosophy and methodology;

(e) A description of the method of final examination as described in section (1) (h);

(f) A list of instructors, including experienced THWs ~~if available~~;

(g) A description of the geographic area served;

(h) If the applicant is not a CBO, a signed agreement with description of the partnership with a CBO;

Comment [26]: Need to discuss this in relationship to doula training programs, since these are not usually a CBO

(i) A description of the approach for recruiting and enrolling a diverse student population to meet the needs of the community, including any strategies for reducing barriers to enrollment; and

(j) An indication of whether academic credit may be given for successful completion of training program.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0355

Application and Renewal Process for Authority Training Program Approval

(1) Training program applications are available on the THW program webpage or by requesting a paper copy from the Oregon Health Authority Office of Equity and Inclusion.

(2) Training program applicants must submit an application at least 90 days in advance of the first expected class day.

(3) If an application is incomplete, the Authority shall send notice requesting the additional materials required. The notice shall specify the date by which additional materials must be submitted. Unless the Authority grants an extension, if the applicant does not respond within the specified time, the Authority shall return the application to the applicant and take no further action.

(4) If the Authority determines that an applicant has met all training program requirements, the Authority shall send written notice of program approval. The written notice of Authority approval shall be made available to any student or partnering organization that requests a copy.

(5) The Authority shall maintain a list of training programs. The list shall be available to the public.

(6) The training program must apply to renew its approval status every three years.

(a) Renewal applications are available on the THW program webpage or by requesting a paper copy from the Oregon Health Authority Office of Equity and Inclusion.

(b) Training programs must complete and submit the renewal application no less than six months prior to the expiration of the current approval period.

(c) At a minimum, training programs seeking renewal shall report:

(A) Summary of any proposed changes to the curriculum;

(B) Number of students trained in the three year approval period

(7) Training programs that fail to submit a renewal application pursuant to section (6) (b) of this rule must submit a new application and may not apply for renewal of its current approval.

(8) The Authority may conduct site visits of training programs, either prior to approving or renewing a training program application, or at any time during the three year approval period.

(9) During the three year approval period, any change made to a training program shall be reported to the Authority within 30 days of the decision to make the change.

(a) Changes that must be reported include:

(A) Changes to the training program director or primary contact;

(B) Changes to the teaching methodology;

(C) Changes to the curriculum; and

(D) Any other change that is not consistent with or not represented in the initial application for approval.

(b) If the Authority determines that the reported changes meet the training program requirements described in OAR 410-180-0350, the Authority shall approve the change.

(c) The Authority may request additional information and justification for the reported change.

(d) If the Authority determines that the reported changes do not comply with the training program requirements described in OAR 410-180-0350, the Authority may deny the change or revoke training program approval.

(10) A training program applicant or approved training program may request a temporary waiver from a requirement in these rules. A request for a waiver must be:

(a) Submitted to the Authority in writing;

(b) Identify the specific rule for which a waiver is requested;

(c) Identify the special circumstances relied upon to justify the waiver;

(d) Describe alternatives that were considered, if any, and why alternatives, including compliance, were not selected;

(e) Demonstrate that the proposed waiver is desirable to maintain or improve the training of THWs; and

(f) Indicate the proposed duration of the waiver, not to exceed one year.

(11) If the Authority determines that the applicant or program has satisfied the conditions of this rule, the Authority may grant a waiver.

(12) An applicant or an approved training program may not act on or implement a waiver until it has received written approval from the Authority.

Comment [27]: has sunset

~~(13) AMH peer support specialist training programs approved prior to August 2, 2013 may remain approved if:~~

~~(a) The program currently provides a minimum of 40 hours of training; or~~

~~(b) The program increases its curriculum to a minimum of 40 hours of training.~~

~~(c) The program must submit to the Authority a peer support specialist program renewal application by October 2, 2013~~

~~(A) The renewal application and waiver request is available on THW program webpage or by requesting a paper copy from the Oregon Health Authority Office of Equity and Inclusion;~~

~~(B) If the renewal application is not submitted before October 2, 2013, the program must apply as a new training program.~~

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0360

Denial, Suspension or Revocation of Training Program Approval

(1) The Authority may deny, suspend or revoke training program approval when an applicant or approved program has failed to comply with ORS 414.665 or these rules.

(2) If the Authority denies, suspends, or revokes approval it shall send written notice and explain the basis for its decision.

(3) An applicant or approved training program may request that the Authority reconsider its decision and may request a meeting with Authority staff. The request for reconsideration and a meeting, if requested, must be submitted in writing within 30 days of the date the Authority mailed the written decision of denial, suspension or revocation. The request must contain a detailed statement with supporting documentation explaining why the requestor believes the Authority's decision is in error. The Authority shall issue a written decision on reconsideration following review of the materials submitted by the applicant or training program and a meeting with the applicant or training program, if applicable.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0370

Community Health Workers, Peer Wellness Specialists, Personal Health Navigators, and Peer Support Specialists Core~~Certification~~ Curriculum Standards

(1) All Authority approved curricula used to train community health workers, peer wellness specialists and personal health navigators must:

(a) Include a minimum of 80 contact hours, which addresses the core curricula topics set forth in section (2) of this rule and any other additional curriculum topics specific to the type of worker being trained;

(b) Provide training that addresses all the major roles and core competencies of community health workers, peer wellness specialists and personal health navigators in Oregon as listed and

defined in Oregon Health Policy Board's Report "The Role of Non-Traditional Health Workers in Oregon's Health Care System" incorporated by reference. (http://www.oregon.gov/oha/oei/docs/nthw-report-120106.pdf, January 2012)

(2) An Authority approved core curriculum for community health workers, peer wellness specialists and personal health navigators shall, at a minimum, introduce students to the key principles of the following topics:

(a) Community Engagement, Outreach Methods and Relationship Building;

(b) Communication Skills, including cross-cultural communication, active listening, and group and family dynamics;

(c) Empowerment Techniques;

(d) Knowledge of Community Resources;

(e) Cultural Competency and Cross Cultural Relationships, including bridging clinical and community cultures;

(f) Conflict Identification and Problem Solving;

(g) Conducting Individual Strengths and Needs Based Assessments;

(h) Advocacy Skills;

(i) Ethical Responsibilities in a Multicultural Context;

(j) Legal Responsibilities;

(k) Crisis Identification and Problem-Solving;

(l) Professional Conduct, including culturally appropriate relationship boundaries and maintaining confidentiality;

(m) Navigating Public and Private Health and Human Service Systems, including state, regional, and local;

(n) Working with Caregivers, Families, and Support Systems, including paid care workers;

(o) Trauma-Informed Care, including screening and assessment, recovery from trauma, minimizing re-traumatization;

(p) Self-Care;

(q) Social Determinants of Health;

(r) Building Partnerships with Local Agencies and Groups;

(s) The Role and Certified Scope of Practice of Traditional Health Workers;

(t) Roles, expectations, and supervisory relationships for Working in Multidisciplinary Teams, including supervisory relationships;

(u) Data Collection and Types of Data;

(v) Organization Skills and Documentation and use of HIT;

(w) Introduction to Disease Processes, including chronic diseases, mental health, tobacco cessation, and addictions (warning signs, basic symptoms, when to seek medical help);

(x) Health Across the Life Span;

(y) Adult Learning Principles - Teaching and Coaching;

(z) Stages of Change;

(aa) Health Promotion Best Practices; and

(bb) Health Literacy Issues.

(3) In addition to the core curriculum set forth in section (2), training programs for community health workers shall include the following topics:

(a) Self-Efficacy;

(b) Community Organizing;

(c) Group Facilitation Skills;

(d) Conducting Community Needs Assessments;

(e) Popular Education Methods; and

(f) Principles of Motivational interviewing.

(4) In addition to the core curriculum, set forth in section (2) training programs for peer wellness specialists shall include the following topics:

(a) Self-Efficacy;

(b) Group Facilitation Skills;

(c) Cultivating Individual Resilience;

(d) Recovery, Resilience and Wellness Models; and

(e) Principles of Motivational interviewing.

(5) An Authority approved curriculum for peer support specialists shall include a minimum of 40 contact hours that include:

(a) The core curriculum set forth in section (2)(a) through (p);

(b) The Role and Scope of Practice of Peer Support Specialists; and

(c) Recovery, Resilience and Wellness.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0375

Birth Doula ~~Certification~~ Core Curriculum Standards

Comment [28]: Core instead of Certification

(1) All Authority approved curricula used to train birth doulas must include a minimum of the following:

(a) 16 contact hours in Labor Support training;

(b) 4 contact hours in Breastfeeding training;

(c) 12 contact hours in Childbirth Education; and

(d) 6 contact hours in Cultural Competency training.

(2) Authority approved birth doula training curricula must also incorporate the following components and students must:

(a) Be CPR-certified for children and adults;

(b) Read five books from an Authority approved reading list;

(c) Write a 500 to 1000 word essay on the value of labor support;

(d) Create a community resource list;

(e) Submit evaluations from work with three families and one provider;

(f) Attend at least three births and three postpartum visits; and

(g) Have a valid food handler's permit.

(1) All birth doulas seeking certification with the state must complete a minimum of 40 contact hours that include the following requirements:

(a) Complete a minimum of 28 in-person contact hours through an Authority approved training program for birth doulas that addresses the core curricula topics set forth in section (2) of this rule, or, alternatively, individual doulas may complete these 28 in-person contact hours through other training program(s) provided by a birth doula certification organization as long as the 28 contact hours meet the core curricula topics set out in section 2 of this rule."

(b) 6 contact hours in Cultural Competency training.

(c) 6 contact hours in one or more of the following topics as they relate to doula care:

(A) Interprofessional collaboration; or

(B) HIPPA compliance; or

(C) Trauma-informed care;

(2) All core curriculum for training birth doulas shall, at a minimum, introduce students to the key principles of the following topics.

(a) Anatomy and physiology of labor, birth, maternal postpartum, neonatal transition, and breastfeeding;

(b) Labor coping strategies, comfort measures and non-pharmacological techniques for pain management;

(c) The reasons for, procedures of, and risks and benefits of common medical interventions, medications, and Cesarean birth;

(d) Emotional and psychosocial support of women and their support team;

(e) Birth doula scope of practice, standards of practice, and basic ethical principles;

(f) The role of the doula with members of the birth team;

(g) Communication Skills, including active listening, cross-cultural communication, and interprofessional communication;

(h) Self-advocacy and empowerment techniques;

(i) Breastfeeding support measures;

(j) Postpartum support measures for the mother-baby dyad;

(k) Perinatal mental health;

(l) Family adjustment and dynamics;

(m) Evidence-informed educational and informational strategies;

(n) Community Resource referrals;

(o) Professional Conduct, including relationship boundaries and maintaining confidentiality;

(p) Self-Care.

(3) All doulas seeking state certification must meet the following additional requirements:

(a) Be CPR-certified for children and adults.

(b) Create a community resource list on an authority approved form.

(c) Document attendance at a minimum of three births and three postpartum visits using an authority approved form.

Comment [29]: Here is what we recommend for this section.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

410-180-0380

THW and Training Program Complaints and Investigations

(1) Any individual may make a complaint verbally or in writing to the Authority regarding an allegation as to the care or services provided by a certified ~~or provisionally certified~~ THW pursuant to OAR 410-180-0305 or that an approved training program has violated THW statutes or these rules.

(2) The identity of an individual making a complaint shall be kept confidential to the extent permitted by law but may be disclosed as necessary to conduct the investigation and may include but is not limited to disclosing the complainant's identity to the THW's employer.

(3) If a complaint involves an allegation of criminal conduct or that is within the jurisdiction of another local, state, or federal agency, the Authority shall refer the matter to the appropriate agency.

(4) The Authority shall investigate complaints and take any actions that are necessary for resolution. An investigation may include but is not limited to:

(a) Interviews of the complainant, program management or staff, and other students; or

(b) Interviews of the complainant, caregivers, clients, client's representative, client's family members, and witnesses, and employer management and staff;

(c) On-site observations of the training program, the client, THW performance and client environment; and

(d) Review of documents and records.

(e) Utilize complaint and investigation findings to identify trends and potential areas for quality improvement.

Stat. Auth.: ORS 413.042, 414.635 & 414.665
Stats. Implemented: ORS 414.635 & 414.665
Hist.: DMAP 42-2013(Temp), f. & cert. ef. 8-2-13 thru 1-29-14; DMAP 66-2013, f. & cert. ef. 12-3-13

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