

# Traditional Health Worker Toolkit

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## Overview:

The Oregon Health Authority's (OHA) Office of Equity and Inclusion (OEI) promotes health equity, diversity and inclusion for all Oregonians. Its mission is to eliminate health gaps and promote optimal health in underserved communities, vulnerable populations and immigrant and refugee communities across the state. OEI works with state and local governments and community partners to identify and advance policy and program-based solutions that are culturally specific and culturally competent. Key focal areas include support for a traditional health workforce and the Traditional Health Worker (THW) Commission.

The THW Commission promotes the traditional health workforce in Oregon's health care delivery system to achieve Oregon's Triple Aim of better health, better care, and lower costs. The THW Commission advises and makes recommendations to the Oregon Health Authority, to ensure the program is responsive to consumer and community health needs, while delivering high quality and culturally competent care. The THW Commission encourages Coordinated Care Organizations, health systems and to support the integration of THWs, which ensures the delivery of high quality, culturally and linguistically appropriate care that will result in improving the health outcomes of all Oregonians while reducing health disparities.

## Traditional Health Worker 101

### Who are Traditional Health Workers?

Traditional Health Workers (THWs) are trusted individuals from their local communities who may also share socioeconomic ties and lived life experiences with health plan members. THWs have historically provided person- and community-centered care by bridging communities and the health systems that serve them, increasing the appropriate use of care by connecting people with health systems, advocating for patients, supporting adherence to care and treatment, and empowering individuals to be agents in improving their own health.

As some THWs are an emerging workforce and their best and promising practices continue to evolve. As such, all documents provided are considered living documents and will be updated as practices develop.

### Traditional Health Workers are:

- **Community Health Worker (CHW):** 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.
- **Peer Support Specialists (PSS):** A Peer Support Specialist (PSS) is an individual with shared lived experience with substance use and/or mental health who provide supportive services to a current or former consumer of mental health or addiction treatment.
  - a. **Recovery Peer:** A person in addiction recovery with two years abstinence who provides support services to people seeking recovery from addiction.
  - b. **Mental Health Peer:** A person with lived experience of mental health who provides support services to other people with similar experiences.
  - c. **Family Support Specialist:** A person with experience parenting a child or youth who has experience with substance use or mental health who supports other parents with children or youth experiencing substance use or mental health.
  - d. **Youth Support Specialist:** A person with lived experience with substance use or mental health treatment who also had difficulty accessing education, health or wellness services who want to strictly provide support services with people under the age of 30.
- **Peer Wellness Specialists (PWS):** A Peer Wellness Specialist (PWS) is an individual who has lived experience with a psychiatric condition(s) plus intensive training, who works as part of a person-driven, health home team, integrating behavioral health and primary care to assist and advocate for individuals in achieving well-being.

- **Personal Health Navigators (NAV):** A Personal Health Navigator (PHN) is an individual who provides information, assistance, tools, and support to enable a patient to make the best health care decisions. Also known as Patient Health Navigators.
- **Birth Doulas:** A Birth Doula is a birth companion who provides personal, nonmedical support to birthing person's and families during pregnancy, childbirth, and postpartum experience.

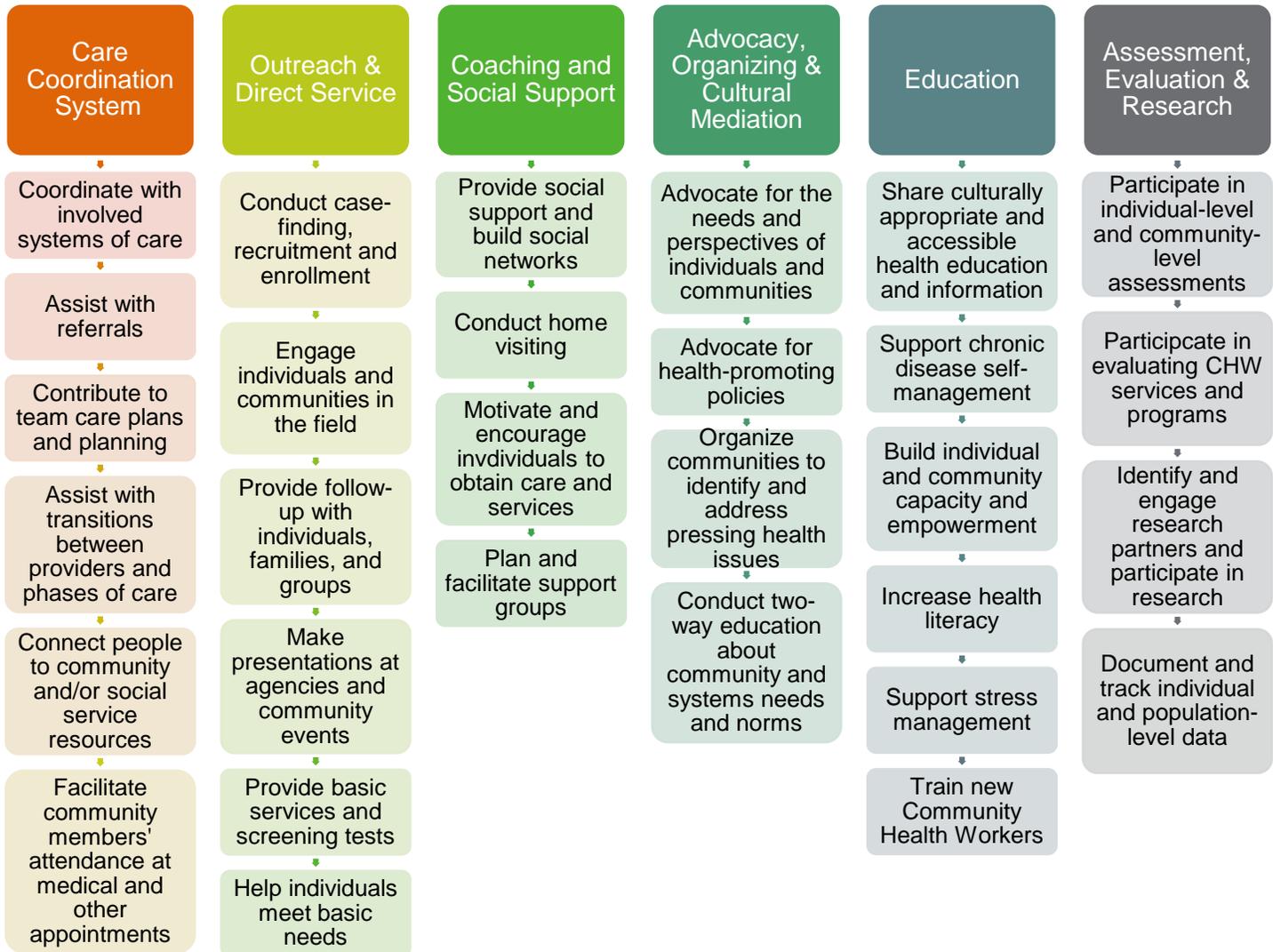
#### **What services do Traditional Health Workers provide?**

- Outreach and mobilization services to community members; working with members in their familiar environments.
- Community and cultural liaising; supporting connections among individuals, family members, community members, providers, and health systems within a context of cultural beliefs, behaviors and needs.
- System navigation (i.e. medical or non-medical navigation, community resource connection, and coordination of care.
- Health promotion, coaching, and prevention.

#### **How can a member access a Traditional Health Worker?**

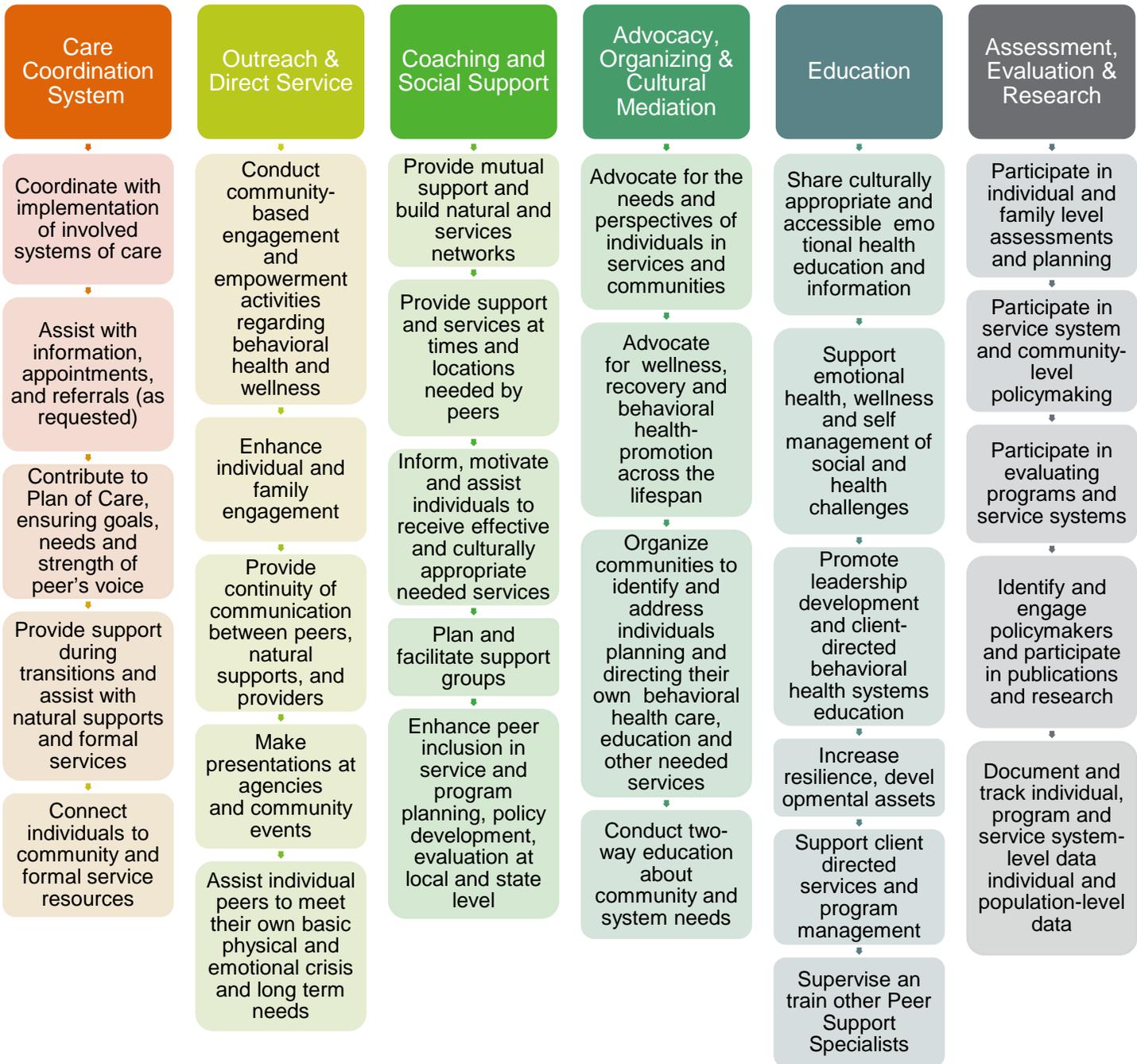
An Oregon Health Plan member can request the use of a traditional health worker through their primary care provider, a local community based organization or program, or by looking for a THW by name or by worker type on the [Traditional Health Worker Registry](#).

## Scope of Practice: Community Health Workers



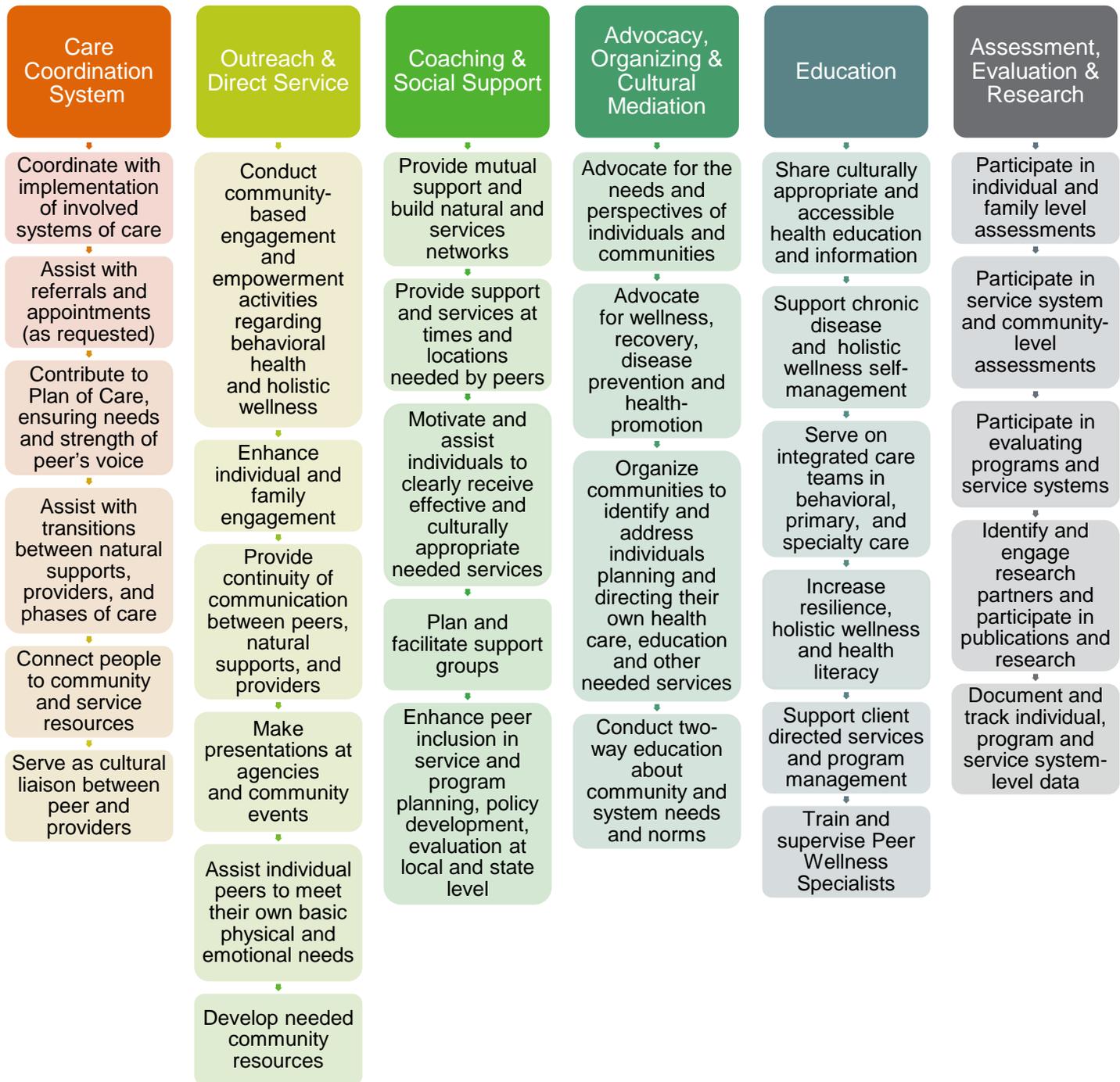
\*Success of above roles are dependent on knowledge and skills gained through community membership and shared life experience. This list is not intended to be either prescriptive or all-inclusive.

## Scope of Practice: Peer Support Specialist



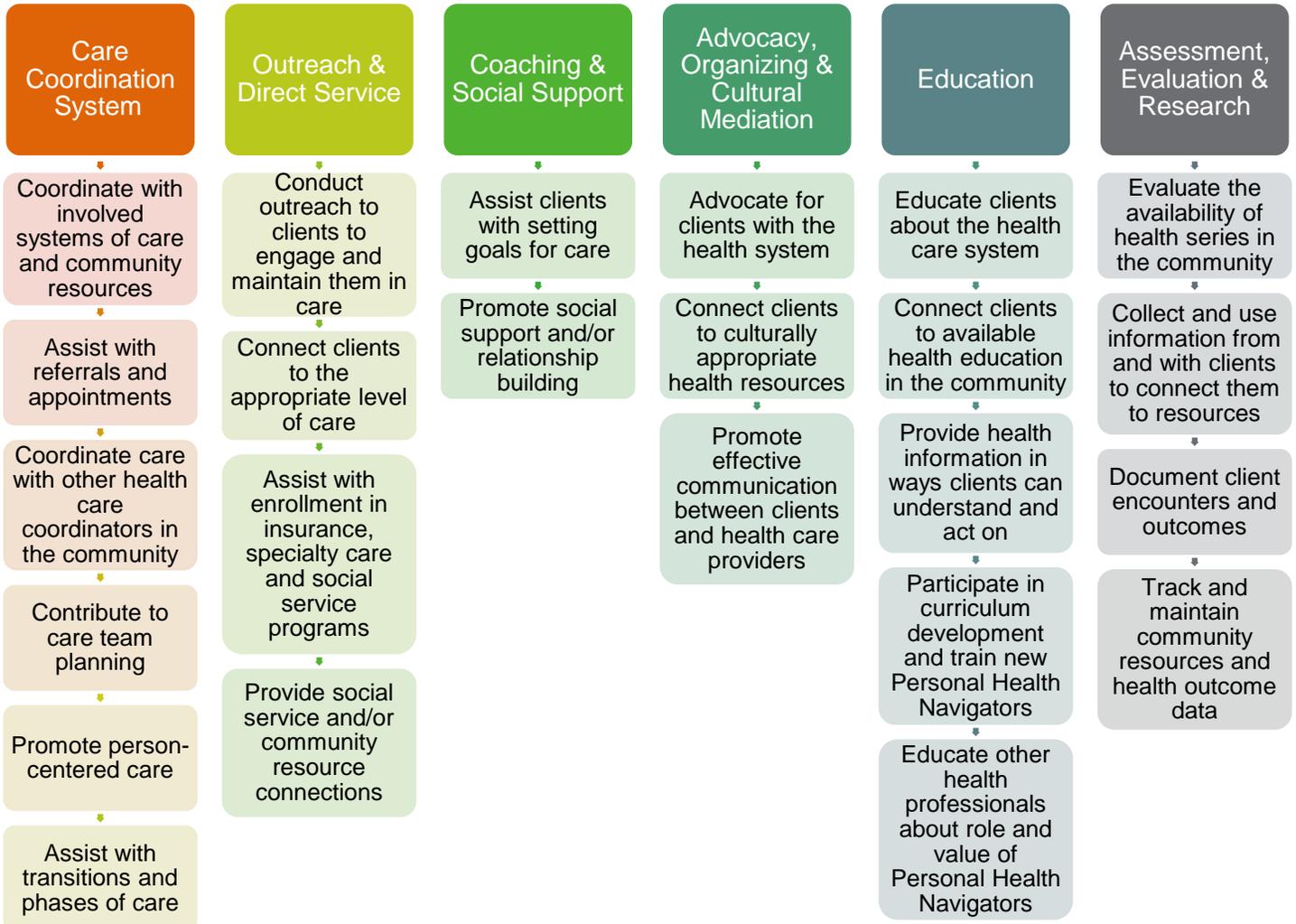
\*Success of above roles are dependent on knowledge and skills gained from life experience similar to that of the peer (adult, young adult, family/parent) being assisted. This list is not intended to be either prescriptive or all-inclusive.

## Scope of Practice: Peer Wellness Specialist



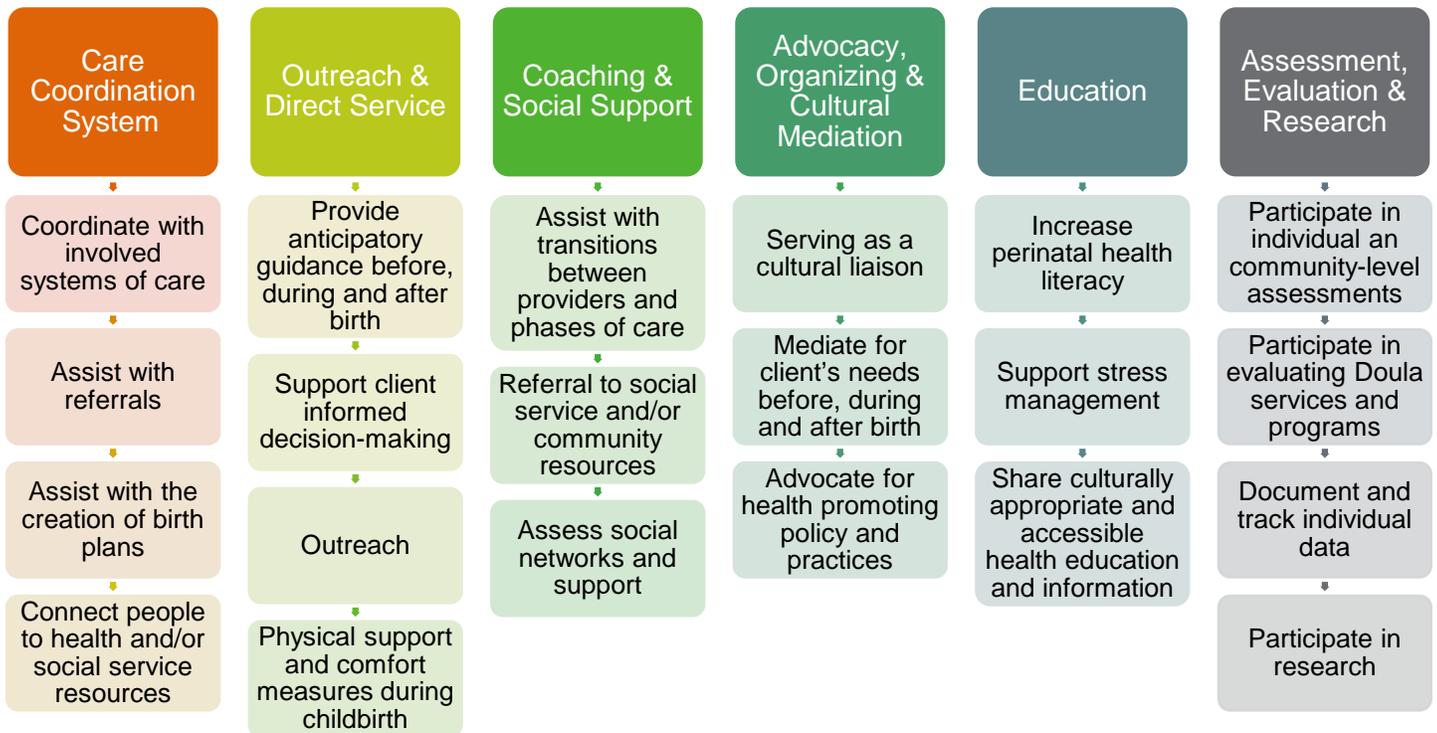
\*Success of above roles are dependent on knowledge and skills gained from life experience similar to that of the peer (adult, young adult, family/parent) being assisted. This list is not intended to be either prescriptive or all-inclusive.

## Scope of Practice: Personal Health Navigator (aka Patient Health Navigator)



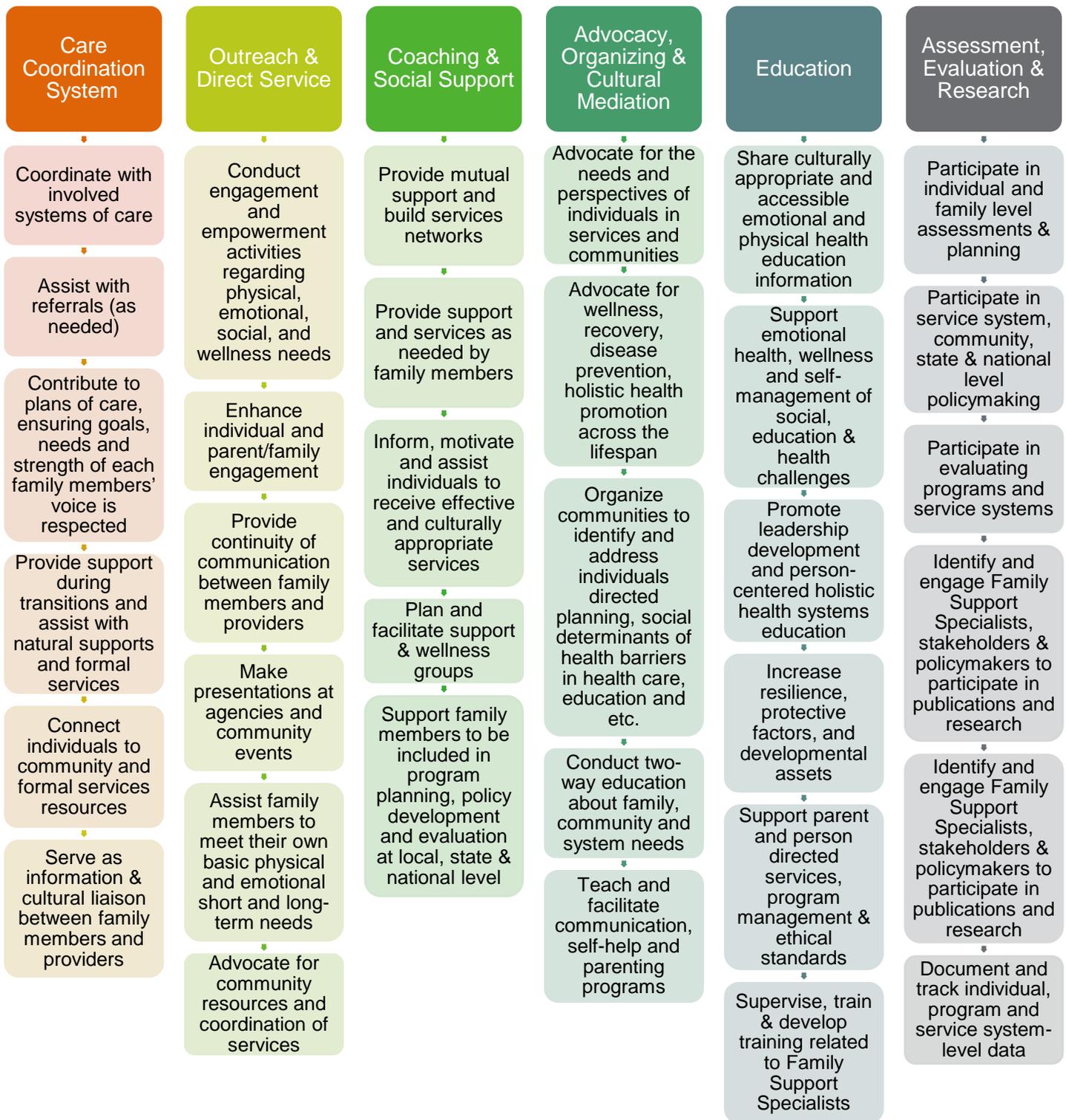
\*Success of above roles are dependent on knowledge and skills gained from life experience similar to that of the peer (adult, young adult, family/parent) being assisted. This list is not intended to be either prescriptive or all-inclusive.

## Scope of Practice: Birth Doula



\*Success of above roles are dependent on knowledge and skills gained from life experience similar to that of the peer (adult, young adult, family/parent) being assisted. This list is not intended to be either prescriptive or all-inclusive.

## Scope of Practice: Family Support/Wellness Specialist



\*Success of above roles is dependent on the application of the knowledge and skills gained from life experience similar to that of the peer (adult, young adult, family/parent) being assisted. This list is not intended to be either prescriptive or all inclusive.

## Benefits of Integrating Community Health Workers

### OAR 410-180-0305 (6)

Community Health Worker means an individual who:

- a. Has expertise or experience in public health;
- b. Works in an urban or rural community, either for pay or as a volunteer in association with a local health care system;
- c. To the extent practicable, shares ethnicity, language, socioeconomic status and life experiences with the residents of the community where the worker serves;
- d. Assists members of the community to improve their health and increases the capacity of the community to meet the health care needs of its residents and achieve wellness;
- e. Provides health education and information that is culturally appropriate to the individuals being served;
- f. Assists community residents in receiving the care they need;
- g. May give peer counseling and guidance on health behaviors; and
- h. May provide direct services such as first aid or blood pressure screening

Community Health Workers are trusted community members who promote health through a variety of strategies, from connecting people to existing services, to sharing culturally appropriate education and information, to organizing communities to identify health issues and address the social determinants of health.

### TRIPLE AIM:

| <b>CARE</b><br>(quality, availability, reliability)   | <b>COST</b><br>(lower, contain, affordability)  | <b>HEALTH</b><br>(improve lifelong health)  |
|---|---|---|
| <ul style="list-style-type: none"><li>• A diverse workforce able to provide culturally responsive education and solutions</li><li>• Link medical and social services</li><li>• Reduce or eliminate barriers to access and treatment</li></ul> | <ul style="list-style-type: none"><li>• Reduce no show rates</li><li>• Reduce emergency room visits</li><li>• Improve patient engagement and chronic disease management</li></ul> | <ul style="list-style-type: none"><li>• Promote and engage consumers in self-management</li><li>• Support preventative care and early treatment</li><li>• Support treatment follow-up</li><li>• Address social determinants of health</li></ul> |

## Benefits of Integrating Peer Support Specialists

### OAR 410-180-0305 (13)

“Peer Support Specialist” means a person providing peer delivered services to an individual or family member with **similar life experience**. A peer support specialist must be:

- 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.

A Peer Support Specialist is a member of the community they serve and builds trust through sharing of similar life experiences; addict to addict, consumer to consumer; parent to parent etc. A Peer Support Specialist is also an agent of system change by confronting stigma within systems and communities and providing a role model for recovery.

### TRIPLE AIM:

| <b>CARE</b><br>(quality, availability, reliability)   | <b>COST</b><br>(lower, contain, affordability)  | <b>HEALTH</b><br>(improve lifelong health)   |
|---|---|--|
| <ul style="list-style-type: none"><li>• Higher engagement rates</li><li>• Making connections with consumers alienated from service providers/systems</li><li>• Building trust through mutuality and shared life experiences</li><li>• Improves access to services</li></ul> | <ul style="list-style-type: none"><li>• Lower no-show rates</li><li>• Lower emergency room visits</li><li>• Lower costs for ancillary systems</li><li>• Creates linkages between addiction, mental, and physical health</li></ul> | <ul style="list-style-type: none"><li>• Lower rates of acute care episodes</li><li>• Role model a recovery lifestyle</li><li>• Promote lifelong recovery</li></ul> |

## Benefits of Integrating Peer Wellness Specialists

### OAR 410-180-0305 (14)

Peer Wellness Specialist means an individual who is responsible for assessing mental health service and support needs of the individual's peers through community outreach, assisting individuals with access to available services and resources, addressing barriers to services and providing education and information about available resources and mental health issues in order to reduce stigmas and discrimination toward consumers of mental health services and to provide direct services to assist individuals in creating and maintaining recovery, health and wellness.

A Peer Wellness Specialist is a member of the community they serve and builds trust through sharing of similar life experiences; consumer survivor to consumer survivor. A Peer Wellness Specialist focuses on whole health, recovery and wellness, which includes chronic disease management.

### TRIPLE AIM:

| <b>CARE</b><br>(quality, availability, reliability)   | <b>COST</b><br>(lower, contain, affordability)  | <b>HEALTH</b><br>(improve lifelong health)  |
|---|---|---|
| <ul style="list-style-type: none"><li>• Higher engagement rates</li><li>• Making connections with the disenfranchised o Building trust through similar life experiences</li><li>• Improves coordination of addiction, mental, and physical health</li></ul> | <ul style="list-style-type: none"><li>• Lower no-show rates</li><li>• Lower emergency room visits</li><li>• Lower costs for ancillary systems</li></ul> | <ul style="list-style-type: none"><li>• Lower rates of acute care episodes</li><li>• Improved overall health/wellness</li><li>• Promote lifelong recovery</li></ul> |

# Benefits of Integrating Personal Health Navigators

## OAR 410-180-0305 (15)

Personal Health Navigator means an individual who provides information, assistance, tools and support to enable a patient to make the best health care decisions in the patient’s particular circumstances and in light of the patient’s needs, lifestyle, combination of conditions and desired outcomes.

A Personal Health Navigator coordinates care, treatment, communication, and payment information for individuals facing complex or chronic health care challenges.

### TRIPLE AIM:

| <b>CARE</b><br>(quality, availability, reliability)   | <b>COST</b><br>(lower, contain, affordability)  | <b>HEALTH</b><br>(improve lifelong health)  |
|---|---|---|
| <ul style="list-style-type: none"><li>• Higher engagement rates</li><li>• Making connections with the disenfranchised o Building trust through similar life experiences</li><li>• Improves coordination of addiction, mental, and physical health</li></ul> | <ul style="list-style-type: none"><li>• Lower no-show rates</li><li>• Lower emergency room visits</li><li>• Lower costs for ancillary systems</li></ul> | <ul style="list-style-type: none"><li>• Lower rates of acute care episodes</li><li>• Improved overall health/wellness</li><li>• Promote lifelong recovery</li></ul> |

# Benefits of Integrating Birth Doulas

## OAR 410-180-0305 (3)

A Birth Doula provides continuous, culturally responsive one to one support to women and their families just before, during, and after childbirth, focusing on their needs for education, emotional care, physical comfort, reassurance and advocacy.

“Birth Doula” means a birth companion who provides personal, nonmedical support to women and families throughout a woman's pregnancy, childbirth, and post-partum experience.

### TRIPLE AIM:

| <b>CARE</b><br>(quality, availability, reliability)  | <b>COST</b><br>(lower, contain, affordability)   | <b>HEALTH</b><br>(improve lifelong health)   |
|--|--|--|
| <ul style="list-style-type: none"><li>• Higher patient satisfaction rates</li><li>• Advocates and facilitates clarity in communication</li><li>• Higher levels of psychosocial support and improved attachment</li></ul> | <ul style="list-style-type: none"><li>• Shorter average labor lengths and decreased use of pain relief medications and interventions</li><li>• Lower rates of Cesarean births</li><li>• Higher newborn APGAR scores</li><li>• Lower hospital readmissions for mothers and babies</li></ul> | <ul style="list-style-type: none"><li>• Lower morbidity and mortality rates for mothers and infants</li><li>• Lower incidence of maternal mental health complications associated with childbirth</li><li>• Higher rates for breastfeeding success and duration</li></ul> |

# Integrating and Retaining Traditional Health Workers into Healthcare Delivery Systems

## Integration Guidance

1. Provide an opportunity for current staff to have their concerns/fears addressed.
2. Have an open facilitated discussion with current staff regarding probable changes in adding Traditional Health Workers (THW) to a program.
3. Collaborate and establish relationships with local community-based organizations, community-based health clinics, residential treatment facilities, social service organizations, public health and behavioral health organizations.
4. Training/information sharing regarding the value of adding Traditional Health Workers to the team should be provided to current staff. Items to include:
  - a. Differences in boundaries/ethics
  - b. Wellness Approach
  - c. Recovery and resilience Principles (for peer delivered services)
  - d. Engagement/Inspiration
  - e. Coaching to enhance/update THW competencies specific to the work tasks
  - f. Value added for each of the five Traditional Health Worker roles
5. Identify a THW supervisor within hiring organization per appropriate OARs [309-019-0130](https://www.oregon.gov/oha/OEI/Pages/309-019-0130.aspx)  
If you have already hired Traditional Health Workers, include them in these conversations.

## Retention and Support Guidance

THWs are an emerging workforce in health systems and guidance on integration continues to evolve. Below is the THW Commission's recommended practices for retention and support.

1. THWs need to connect with others doing similar work:
  - a. Traditional Health Worker Commission (Oregon Health Authority-Office of Equity and Inclusion)
  - b. Office of Consumer Activities Oregon Health Authority
    - Consumer-Survivor: Consumer-Survivor
    - Family Member: Family Member
      1. Family members of seniors
      2. Adult family members
      3. Child-aged family member
    - Young Adult: Young Adult
    - Addiction: Addiction
  - c. Oregon Community Health Workers Association
  - d. Oregon Doula Association
  - e. Oregon Family Workforce Association
2. Support participation in ongoing training/professional development

## Healthcare Delivery Systems Contracting with a Community-Based Organization (CBO)

Traditional Health Workers (THWs) are agents of change and advocates for the individuals they serve. A THW's role includes promoting health and wellness, facilitating change and the shifting of culture within an organization and the individuals and families serving systems they navigate.

### When contracting with a community-based organization:

1. Require [co-supervision](#) between clinical supervisor and appropriate THW specialty supervisor.
  - a. Some THW roles may require a specific number of supervision hours. This should be considered during budget planning.
  - b. Budgets submitted by the CBO should reflect the cost of any additional supervision.
2. The CBO should provide policies and procedures that:
  - a. Reflect flexibility in staffing to allow for staff self-care or care for consumer family members.
  - b. Support professional development and opportunities for THWs to network within their professional organization.
  - c. Reflect flexibility in staffing to allow for consumer engagement and stakeholder/policy related activities.
3. National Provider Identifier (NPI) number and state Medicaid and CCO provider enrollment must be established for THW services that will be billed to Medicaid.
4. Remember, most CBOs do not use Electronic Medical Record software programs.
  - a. Negotiate how data will be gathered and reported when developing the contract.
  - b. Include reporting requirements as exhibits.
5. Invoice processing and payment should be streamlined and efficient since smaller CBOs may not have the means to wait extended periods of time for payment.
6. Know the requirements, limitations and implications for a variety of funding streams, such as, grants, public and private funding, and etc. to help build capacity for CBOs.
  - a. Example: A sub recipient contract may be required if a CBO's total book of business is supported by more than \$500,000 a year in federal funding.
  - b. Additional assistance may be needed to orient the CBO to the additional federal requirements if a sub recipient contract is required.
7. Create a comprehensive contract review process with a focus on providing technical assistance. Common areas for technical assistance needs may include:
  - a. Policies and procedures
  - b. Documentation of services (particularly for THW's that will be billing Medicaid)
  - c. Documentation of supervision
  - d. Reporting requirements
  - e. Liability issues and insurance requirements
  - f. Maintaining records and billing procedures for services to individuals not billable to insurance and non-medical billable prevention/outreach/education and systems advocacy services.

# Recommendations on Support and Supervision for Traditional Health Workers

## Policy

OAR 410-180-0300

[http://arcweb.sos.state.or.us/pages/rules/oars\\_400/oar\\_410/410\\_180.html](http://arcweb.sos.state.or.us/pages/rules/oars_400/oar_410/410_180.html)

## Rationale

The ability of Traditional Health Workers to be effective and satisfied in their work depends to a large degree on the quality of support and supervision they receive. Support and supervision for THWs is important for at least three reasons.

1. Many THWs bring unique perspectives based on life experience as members of communities most affected by inequities. As such, they are often new to the norms and expectations of positions within community-based organizations and health systems. Many THWs have experienced systematic discrimination and historical and personal trauma.
2. Excellent support and supervision can provide a buffer and bridge between THWs and systems, which are often unfamiliar with and even doubtful of their skills and potential contributions. Further, excellent supervisors can provide the mentoring, which supports THWs to develop as ethical professionals, and the support that helps THWs deal with potential re-traumatization and vicarious trauma.
3. Excellent support and supervision promotes retention of THWs and increases their effectiveness, thus promoting health and well-being in the communities THWs serve.

## Qualities of Effective THW Supervisors

Effective supervisors do not necessarily need to possess ALL the recommended qualities; however, supervisors who are a member of the community served with more of the recommended qualities are more likely to be successful in their work.

- Experience as a THW, preferably of the same THW worker type
- Member of the community being served
- Understand, value and respect the role of THWs and the life experience they bring to their roles
- Creative
- Supportive/mentor-coach mindset
- Non-judgmental
- Flexible
- Patient
- Active, reflective listener
- Team-oriented
- Willingness to grow, change and learn
- Availability to meet the individual needs of worker

## Skills

- Problem-solver (able to identify and resolve problems before they grow)
- Able to create a safe environment
- Conflict resolution/mediation skills (able to resolve conflicts in a productive rather than a punitive way)
- Organizational skills
- Documentation skills
- Proactive (able to take appropriate action decisively when needed)

- Communication skills
- Ability to stay present and practice both self and community care
- Use one's lived experience to effectively navigate structurally unjust barriers and/or policies as a way to advocate on behalf of traditional health workers
- Ability to practice shared leadership
- Ability to remove organizational barriers that limit THW effectiveness
- Ability to find resources for THW job continuity and advocate for program sustainability

### **Knowledge**

- Awareness of THW certification and other THW types, in order to be able to promote coordination
- Understanding of the [intersectionality of power and privilege](#)
- Have an equity and empowerment lens
- Awareness of different systems, i.e. Coordinated Care Organizations, Local Health Departments, Community Based Organizations, etc.
- Familiar with the full range of THW roles and the socio-ecological model
- Knowledge about the community or communities of focus
- Understanding of historical trauma, vicarious trauma, and trauma-informed supervision

### **Standards of Excellent Practice**

- Cultivate a network of resources to share with the THW team, or assure that the team creates such a network
- Act as a link between the THW team and larger health and social service systems
- Support the team to maintain ethical standards
- Foster and/or support the development of peer networks for THWs (e.g., through participation in CHW professional associations, etc.)
- Foster and/or support the professional development of THWs and encourage their involvement in system change opportunities
- Practice cultural humility and openness to learning about other communities, beliefs, and practices

## Best and Promising Practices & Other Resources

Below is a list of recommended practices based on THW expertise, evidence (when available), and community knowledge that have shown to be effective. For more information, connect with the subject matter experts listed.

### Community Health Worker Resources

- [Oregon Community Health Workers Association Best and Promising Practices: Integration of Community Health Workers into Clinical Settings](#) (Oregon Community Health Workers Association)
- [Community Health Workers Evidence-Based Models Toolbox](#) (U.S. Department of Health and Human Services Health Resources and Services Administration)
- [2016 Recommendations on CHW Roles, Skills, and Qualities](#) (The Community Health Worker Core Consensus Project)
- [Community Health Workers Toolkit](#) and [Evaluation Impact](#) (Rural Health Information Hub)
- [Oregon Community Health Workers Association Contracting Model](#)
- [Communities in Action: Pathways to Health Equity](#)
- [Cardiovascular Disease: Interventions Engaging Community Health Workers](#) (The Community Guide)
- [Is Theory Guiding Our Work? A Scoping Review on the Use of Implementation Theories, Frameworks, and Models to Bring Community Health Workers into Health Care Settings](#) (Journal of Public Health Management & Practice)
- [Strengthening the Effectiveness of State-Level Community Health Worker Initiatives Through Ambulatory Care Partnerships](#) (J Ambul Care Manage)
- [Diffusion of Community Health Workers Within Medicaid Managed Care: A Strategy To Address Social Determinants Of Health](#) (Health Affairs)

For more information, contact [Oregon Community Health Workers Association](#)

### Peer Support Specialist Resources

Substance Use and other Addictions

- [Transition Age Youth Substance Use Disorder Peer Support Best Practice Manual](#)
- [Substance Use Disorder Forensic Peer Best Practice Curriculum](#)
- [Substance Use Disorder Peer Delivered Services Child Welfare Best Practices Curriculum](#)
- [Substance Use Disorder Peer Delivered Services for Older Adults Best Practice Curriculum](#)
- [Gambling Disorder Peer Delivered Services Best Practices Manual](#)
- [Substance Use Disorder Peer Supervision Competencies](#)

Mental Health

- [International Association of Peer Supporters](#)
- [Copeland Center for Wellness and Recovery](#)
- [Intentional Peer Support](#)
- [National Practice Guidelines \(Peer Support Specialists\)](#)

For more information, contact [Traditional Health Worker Commission](#).

### Peer Wellness Specialist Resources

Resources are in development.

For more information, contact the [Traditional Health Worker Commission](#).

**Personal Health Navigator**

Resources are in development.

For more information, contact the [Traditional Health Worker Commission](#).

**Birth Doula**

Resources are in development.

For resources and information contact: Oregon Doula Association, <http://www.oregondoulas.org/>