

The Emerging Role of the Community Health Worker: Nurses As Champions and Policy Leaders in Health Systems Transformation

Kathy Karsting RN, MPH

MCAH Program Manager, Nebraska DHHS Division of Public Health; Public Health Nurse Leader (2015-2017), Robert Wood Johnson Foundation

INTRODUCTION

Active engagement of nurses in health systems transformation is necessary if nurses are to remain visible, relevant, and impactful. The nursing profession has a long and credible history developing the workforce to meet health needs of the population. Nurses have critical assets to offer in the continuing development and transformation of a health care workforce capable of producing population health, well-being and equity.

ACKNOWLEDGEMENTS

The author acknowledges with deep appreciation the dedication and contributions of the Nebraska Action Coalition, the Project Team members, and Steering Committee members who so generously provided professional expertise and guidance throughout the course of the project. (Appendix D)

Acknowledged with appreciation is the support of NE DHHS for participation by the author in the Robert Wood Johnson Foundation Public Health Nurse Leader program, 2015-2017. The views expressed here are solely the responsibility of the author and do not represent official position or policy of the Nebraska Department of Health and Human Services.

Contact the author:
kathy.karsting@nebraska.gov
July 2017

NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES

FUTURE OF NURSING®
NEBRASKA ACTION COALITION

METHODS

- Convened a Project Team of nurse leaders, and a multi-disciplinary Steering Committee.
- Project Team members used the *dialectic method*: individuals with different opinions and perspectives coming together to engage in thoughtful discussion and learning with the goal of reaching consensus on shared and common findings.
- *Central question*: What do nurses contribute to health systems transformation? *Secondary question*: What do nurses contribute to workforce transformation? *Case study*: The role of nurses in the emerging CHW workforce in Nebraska.
- Project Team members drew on the RWJF Culture of Health framework, emphasizing engagement, shared values, integration, and collaboration.

METHODS

- The Project Team was informed by these foundational work products:
 - Profiles of nursing leadership in the CHW movement in Nebraska
 - NE CHW Project Inventory
 - Policy Crosswalk
 - Bibliography

RESULTS

Nursing Recommendations for Development of the Community Health Worker Role in a Transforming Health System (Table 1)

Community Health Workers:

Recommendations for the Future of Nursing - Nebraska Action Coalition (Table 2)

CONCLUSIONS

The project inventory demonstrates that the emerging community health worker movement in Nebraska is both highly dynamic and highly variable in setting, population, health concerns of focus, training and supervision. Nebraska lacks state-wide, state-level consensus and adoption of CHW role description, competencies, curriculum, supervision, and career ladders. There is no generally accepted framework in Nebraska for the CHW role that has withstood tests of consumer confidence and satisfaction, broad community engagement, and integration with the existing health professions. Projects involving community health workers are springing up in a climate of innovation and absence of unifying expectations or purpose.

The Project Team readily located examples of excellent nursing leadership in the emerging CHW movement in Nebraska. In other cases nurses have been curiously silent about CHWs, or overtly oppositional. Cohesive engagement, leadership, and positive purpose on the part of nurses, nationally and in Nebraska, will benefit:

- Effective teams
- Integrated and ethical care for individuals and communities
- Greater diversity in clinical and community practice

- More equitable and positive outcomes in the population

TABLE 1

Nursing Recommendations for Development of the Community Health Worker Role in a Transforming Health System

1. The public as well as providers must be informed of the role, preparation, and verified competencies of each group of health worker, at every level.
2. A consistent core curriculum should be developed, delivered by qualified trainers or educators, and successfully completed by all individuals using a specific health worker title.
3. Broad, cross-sector collaboration and participation, including consumers, providers, payers and workers, should inform and help define the role and expectations of new health workers.
4. Standards for supervision, support, and retention for each group of health workers are essential for assuring quality, continuity, morale, and ethics of service delivery.
5. Career ladder opportunities for new workers are necessary in order to fully engage, retain, and grow a qualified, diverse health care workforce to serve the population.
6. New health worker roles should be developed to function as respected members of integrated teams bridging clinical care and community resources and services, not to function in isolation without accountability to team and system.
7. Development of new health worker roles should encompass and address the integrated physical, dental, and behavioral health needs of the population across the lifespan, as well as an understanding of the social determinants of health and equity in populations.
8. Definition of new roles in the health care workforce must identify the boundaries of expected practice, and explicitly prohibit the performance of services and duties that require a license from a professional licensing board.
9. Performance measures and outcomes for community team-based care should focus on describing and measuring individual, community, and population health outcomes attributable to integrated team interventions. Individual health workers do not produce outcomes absent the contributions of other team members, including patients and consumers.
10. Nurses are well-qualified and well-positioned to serve as champions and as policy leaders for a changing health care workforce. Nurses contribute curricula, training, supervision, standards, career opportunities, ethics and social justice to the health care workforce and to health systems.

TABLE 2

Community Health Workers: Recommendations for the Nebraska Action Coalition

1. Engage and educate audiences of nurses about the emerging community health worker (CHW) role.
 - Describe the current reality of the CHW role in Nebraska.
 - Identify the synergy between nursing practice and the CHW role in community and clinical care teams.
 - Identify barriers to growing successful integrated, multi-disciplinary care teams.
 - Identify the unique contributions nurses bring to successful integrated, multi-disciplinary care teams.
 - Identify the leadership role of nurses as champions and in shaping policy to benefit the public's health and well-being as new health care roles emerge.
2. Convene opportunities for nurse-CHW communication and collaboration.
 - Showcase exemplars of nurse-CHW collaboration, and nurse contributions to elevating the CHW role.
 - Create listening opportunities for CHWs and Nurses to identify and acknowledge mutual attributes, strengths, synergies, and limitations.
 - Create an environment of quality improvement, measurable outcomes, and equity to chart a forward-moving course for collaborative roles and practice.
3. Work collaboratively with the Public Health Association of Nebraska as well as other stakeholders and stakeholder organizations with a statewide perspective, in order to mobilize nurses' positive contributions as partners in moving CHW policy and guidance forward in Nebraska (see Table 1, above).
4. Continue to strive for broad, collaborative, and cross-sector engagement in health systems transformation, as prompted by the RWJF Culture of Health framework. Involve consumers and CHWs, as well as nurses and others. Identify ways transformation in the health care workforce will help achieve improved population health, well-being, and equity.

APPENDIX D

**The Emerging Role of the Community Health Worker (CHW):
Nurses as Champions and Policy-leaders in a Transforming Health Care System**

PROJECT TEAM MEMBERS

Teresa Anderson, RN, BSN, Director
Central District Health Department
Grand Island, NE

Margaret Brockman, RN, MSN
Administrator, Office of Rural Health
NE Dept. of Health and Human Services
Lincoln, NE

Mary Cramer, PhD, APHN-BC, FAAN
Professor, University of Nebraska Medical Center
(UNMC) College of Nursing
Omaha, NE

Christine Eisenhauer, PhD, APRN-CNS, PHCNS-BC, CNE
Assistant Professor of Nursing, Northern Division, UNMC College of Nursing
Norfolk, NE

Kate Fiandt, PhD, APRN-NP, FAANP, FAAN
Professor and Associate Dean
UNMC College of Nursing
Omaha, NE

Amy Ford, DNP, ARNP-NP, WHNP-BC
UNMC College of Nursing
Omaha, NE

Nick Guenzel, PhD, APRN-NP,
Assistant Professor
UNMC College of Nursing
Lincoln, NE

Pat Lopez, MSN, RN
Public Health Association of Nebraska
Co-Chair PHN Section
Lincoln, NE

Julie Rother, BSN, RN, CPH, Director
Northeast NB Public Health Department
Wayne, NE

Marilyn Valerio, PHD, MA, BSN, RN
Nebraska Action Coalition
Omaha, NE

STEERING COMMITTEE MEMBERS

Connie Benjamin, Executive Director
Nebraska American Association of Retired Persons (AARP)
Lincoln, NE

Alison Keyser-Metobo, MPH
Epidemiology Surveillance Coordinator
NE DHHS Division of Public Health
Lincoln, NE

Josie Rodriguez
Administrator, Office of Health Disparities and Health Equity
NE DHHS Division of Public Health
Lincoln, NE

Amber Wagner-Connolly, DNP, MSN, RN
Assistant Professor
Clarkson College
Omaha, NE

Victoria Vinton, MSN, RN
Director, Nebraska Action Coalition - Future of Nursing
Omaha, NE

Co-serving on the Project Team and shown above:
Margaret Brockman
Julie Rother
Pat Lopez