**Community Health Worker training teaches high-touch, high-tech support for better health**
***Building a trusting relationship is key to making a difference***

Some experts have referred to trust as a social determinant of health – meaning a factor outside of a medical office that can influence as much as 80% of a person’s health and wellness. If someone doesn’t trust health information or their health care provider, they’re not likely to comply with what they need to do to be their best self.

Thus, the importance of Community Health Workers (CHWs). These community health care workers are local, trusted members with a close understanding of the community they serve. This trusting relationship enables the CHW to facilitate access to services by serving as a link between health and social services
and community organizations.

OSF HealthCare, through an innovative partnership with East Peoria-based Illinois Central College (ICC), has created new training for the next generation of digitally-enabled CHWs. Many of the CHWs will soon begin working with [federally-qualified health centers (FQHCs)](https://www.hrsa.gov/opa/eligibility-and-registration/health-centers/fqhc/index.html), under a [Medicaid Innovation Collaborative (MIC)](https://newsroom.osfhealthcare.org/state-funding-collaboration-to-expand-health-care-access--in-underserved-areas/) contract with the state of Illinois. MIC is aimed at improving health and wellness by providing underserved individuals with a personalized approach to coordinated care that leverages CHWs and digital tools to provide the right care, at the right time, using the right method that works for the individual and their family or caregivers.

Karlen Sandall, manager of the [OSF OnCall](https://www.osfhealthcare.org/oncall/) Digital Health Worker program, says the training makes it clear that trust is critically important and that connecting individuals with community resources is one way of providing help beyond the clinic or hospital.

“It shows we’re caring about not only what’s bringing them into our health care center, but also what’s going on outside of that; how we can bridge those gaps and keep them healthy all the way around, I think really shows we want to build trust with them, and we want to align them with the resources that are going to keep them safe and healthy.”

Sandall says CHWs will be embedded in the communities they serve and will represent the diversity of those neighborhoods. Many in the first CHW class already served as Pandemic Health Workers which were developed during the early stages of the COVID-19 pandemic, helping to support individuals through digital tools to keep them connected to their care team and any resources they might need to keep them healthy and out of the hospital. Sandall says they’re passionate and most have already visited many community-based organizations (CBOs).

“To understand all of their offerings … to understand the funding because that changes a lot with CBOs. That’s something we learned with the pandemic and aligning individuals to resources so as they gather more expertise, they’re definitely going to be able to guide and support individuals from the community to the resources they need.”

Maura Lansing is one of those passionate, newly-trained CHWs who also worked to support individuals during the height of the COVID-19 pandemic. She says the training through ICC went beyond what she already knew through first-hand experience.

“We talked about and learned about how we could become community advocates and we could actually plan community events based around a health care issue, and all the different ways we could reach out to the community at large, as well as helping individual patients.”

**Class uses specially-trained actors**

Ann Willemsen-Dunlap of [OSF Jump Simulation](https://www.jumpsimulation.org/) is a curriculum developer who designed the training to exceed core competencies identified but not yet finalized by the Illinois Board of Higher Education and the Illinois Department of Public Health. Willemsen-Dunlap incorporated the use of Jump’s standardized participants (SPs) – trained actors - a unique aspect of the curriculum.

“They’re trained to do both coaching and give feedback to our community health worker learners and help shape the way they go forward and interact with clients later. Not many programs have this,” Willemsen-Dunlap explains.

The capstone project for the training included using an SP in a scenario with a man recently diagnosed with diabetes. Lansing used what she learned about motivational interviewing, which includes the OARS approach – open questions, affirmations, reflective listening and summary reflections. Lansing says every aspect helped build trust, and it was particularly impactful to acknowledge the recently-diagnosed man was trying to be the best grandparent by helping watch his grandchildren regularly.

“’I know that’s a lot of hard work. Can we possibly include a quick 10-minute walk each day with the grandchildren so that you don’t feel like you’re having to add exercise into your already busy schedule?’” Lansing says he felt heard and understood. “He seemed like, ‘Wow, she understands what I’m going through.’”

Willemsen-Dunlap says the digitally-equipped and trained CHWs will not only coordinate care with FQHCs and their provider partners, they’ll help by serving as additional eyes and ears for medical providers.

“When it comes to interacting with the clients and seeing what’s happening in their home or living environment … they can take that back to the provider and help the provider understand what might need to be tailored in some specific way to maximize treatment effectiveness.”

More advanced training will enable them to help individuals and families use digital tools that might be needed for education, remote monitoring, or even a virtual exam. They can also provide calming reassurance, especially at a stressful time during a pending or recent diagnosis.

“Having this neutral third party who’s able to manage the tech and be that intermediary and that calming, confident presence is going to be very important,” Willemsen-Dunlap stresses.

The next training session for becoming a certified digitally-enabled CHW starts July 11 through ICC. It includes 12 sessions of online instruction (Monday and Wednesday evenings) over the first six weeks, followed by a two-week internship for participants who do not have previous CHW experience.

[Here is more information](https://campusce.icc.edu/pdi/course/EventDetail.aspx?C=3546) and an option to register.