

CHW Toolkit

ENVIRONMENTAL SCAN REPORT

CHW Toolkit: Environmental Scan
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Background

This environmental scan focuses on understanding the Community Health Worker (CHWs) workforce in Minnesota with specific goals to identify:

- The number of former, current and prospective graduates of the CHW certificate programs offered by educational institutions around the state;
- The number of certificate holders currently employed as CHWs, where they are working and their scope of work.
- The number of certificate holders registered with the Minnesota Department of Human Services and eligible for Medicaid reimbursement.

This report offers a description of the current status of the CHW workforce as of January 2016.

Methods

To collect information on the existing CHW workforce, a 17-question survey (see Appendix 1) was developed and provided to the seven post-secondary educational institutions offering the CHW certificate course as of January 2015. The survey requested the number of certificate program enrollees and graduates' by year, demographics of past and current students, employment of graduates, and future enrollment and training offerings (e.g. customized certificate courses and continuing education). Some data had been collected via a previous survey by the Minnesota Department of Health in January 2015. The questions and data from the MDH survey were included as a subset in the current survey, so participants were requested to only supplement missing information. In addition, an in-person meeting was held with the Education Committee of the Minnesota CHW Alliance to further understand the current trends, opportunities and challenges in educating the CHW workforce.

Additional data was obtained from two recent statewide surveys of CHWs. In 2014, WellShare International conducted an internet-based survey of CHWs in Minnesota. The 31-question survey was completed by 150 eligible respondents and the report, *Perspectives on the Community Health Worker Workforce: Summary of Results from a Statewide Survey of CHWs in Minnesota*¹ was released in September 2015. In 2012, Wilder Research conducted a study for the American Cancer Society that included 23 key informant interviews and a survey of 245 CHWs in Iowa, Minnesota, South Dakota and Wisconsin. Of these, 82 CHWs were from Minnesota. The primary report, *Community Health Workers in the Midwest: Understanding and Developing the Workforce*² was released in June 2012.

Under its SIM Toolkit contract with the Minnesota Department of Health, WellShare International and its partner, the Minnesota CHW Alliance, also completed a statewide survey of employers (*Minnesota Community Health Worker Employer Survey*) that informed this environmental scan. Of the 151 eligible respondents, 90 (60%) reported hiring CHWs. Full data from the survey is available in a separate report.³

Information was also obtained from other sources including the U.S. Department of Labor Bureau of Labor Statistics and Iseek.org, a service of the Minnesota State Colleges and Universities system.

Definition of CHW

What is a CHW?

Minnesota does not have an official definition of a Community Health Worker, but the following definitions are useful to understanding who is a CHW in Minnesota.

U.S. Bureau of Labor Statistics

Community Health Workers (BLS Job Code 21-1094) *assist individuals and communities to adopt healthy behaviors. Conduct outreach for medical personnel or health organizations to implement programs in the community that promote, maintain, and improve individual and community health. May provide information on available resources, provide social support and informal counseling, advocate for individuals and community health needs, and provide services such as first aid and blood pressure screening. May collect data to help identify community health needs.*⁴

American Public Health Association

*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. A community health worker also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy.*⁵

Minnesota Community Health Worker Alliance

*Community Health Workers (CHWs) come from the communities they serve, building trust and vital relationships. This trusting relationship enables the CHWs to be effective links between their own communities and systems of care. This crucial relationship significantly lowers health disparities in Minnesota because CHWs: provide access to services, improve the quality and cultural competence of care, create an effective system of chronic disease management, and increase the health knowledge and self-sufficiency of underserved populations.*⁶

Education and Training

CHW Certificate Program

Originally developed in 2005, completion of the approved Minnesota CHW certificate course is required for CHWs to be reimbursed by Medicaid through the Minnesota Department of Human Services (Minnesota Statute 256B.0625 Subdivision 49, 2009). Minnesota is currently the only state that offers a standardized CHW certificate program through accredited post-secondary educational institutions.

In 2015/2016, the course curriculum is undergoing some revisions to have a stronger focus on pre-diabetes and pre-hypertension as well as strengthening existing materials. Currently, the course requires completion of 14 credits covering the following content:

- CHW Role, Advocacy and Outreach (2 credits)
- Organization and Resources (1 credit)
- Teaching and Capacity Building (2 credits)
- Legal and Ethical Responsibilities (1 credit)
- Coordination, Documenting and Reporting (1 credit)
- Communication and Cultural Competence (2 credits)
- Health Promotion Competencies (3 credits; includes healthy lifestyles, heart disease and stroke, maternal/child/teen health, diabetes, cancer, oral health, mental health)
- Internship (2 credits; 72-80 hours supervised practical experience)

Institutions offering the course typically require 16-17 credits, with additional course offerings in areas such as public speaking, medical terminology, and others. In part, the additional credits allow students to reach the financial aid threshold. Most courses can be completed over two semesters.

Institutions that Offer Certificate Program

As of January 2016, four schools within the Minnesota State Colleges and Universities (MnSCU) system, one private university and one vocational school offer the course. One additional institution is waiting for MnSCU approval to begin offering the course. Inver Hills Community College offered the course between 2005 and 2012, canceling their course in 2013. Minneapolis Community & Technical College added a spring semester course starting in 2013 to fill the gap. South Central Community College offered the certificate course, but no longer offers it due to limited enrollment and job opportunities for graduates. However, South Central has capacity to re-offer the course if employers were interested. Rochester Community & Technical College offers the course as needed to employers on a customized contract basis only. Table 1 provides an overview of each institution, course duration and mode of instruction. Course tuition (2015/2016 academic year) ranges from \$2,583 to \$11,288, and financial aid is available at all institutions. A high school diploma or GED is required to apply.

TABLE 1. POST-SECONDARY INSTITUTIONS OFFERING CHW CERTIFICATE COURSE

Institution / Website	Location (in MN)	Course Duration	Mode of Instruction
Minneapolis Community & Technical College (MCTC)	Minneapolis	17 credits (Fall or Spring/ Summer semesters)	In-person
Minnesota West Waiting for approval from MnSCU, possibly Summer 2016	Marshall	16 credits	Online or hybrid
Normandale Community College	Bloomington	16 credits / 2 semesters	In-person, Online in future
Northwest Technical College	Bemidji	17 credits / 2 semesters (Fall or Spring start)	Online, offsite (virtual meetings)
Rochester Community & Technical College (RCTC)	Rochester	16-17 credits/ 1 semester	In-person, Customized contract only
Summit Academy OIC	St. Paul	20 weeks	In-person
St. Catherine University	St. Paul	17 credits (2 semesters)	In-person or hybrid evening/ weekend

*Financial aid is available for qualifying students at all institutions.

Enrollees and Graduates

The seven higher-learning institutions who have offered and/or currently offer the CHW certificate course and who had data available reported graduating 658 certificate holders. (Dates of reporting vary and are noted below.) Inver Hills Community College offered the course between 2006 and 2012, but only one cohort of students commenced due to lack of public transportation to the site. However, Inver Hills was responsible for “grandfathering” in 63 CHWs following provisions in the 2009 Minnesota legislation authorizing reimbursement for CHW services. Because the “grandfathered” CHWs were required to eventually (by 2010) complete the CHW certificate course, they are not included in the 658 certificate holders due to potential double counting in other institution’s totals.

Of the six higher-learning institutions currently offering the course, five reported that a total of 251 students are enrolled (out of 1,576 ever enrolled). Table 2 details the number of graduates by school along with the ever, current and annual projected enrollment. Projected annual enrollment for most schools is between 10 and 20 students. MCTC enrolls double that per year and Summit Academy typically enrolls ten times as many students per year.

TABLE 2. NUMBER OF CHWS COMPLETING CERTIFICATE COURSE AND CURRENTLY ENROLLED BY SCHOOL

Institution					
Minneapolis Community & Technical College (MCTC)	Since January 2005	157 (4/16)	485	16 (4/16)	
Normandale Community College	Since 2014/15	14 (10/15)	45	28 (10/15)	
Northwest Technical College	Since 2013/14	4 (10/15)	46	33 (4/16)	
Rochester Community & Technical College (RCTC)	Since 2010/11	15 (12/15)	18	3 (4/16)	
South Central Community College	Since January 2005	22 (6/15)	23	0	
Summit Academy OIC	Since 2005/06	408 (1/15)	893	156 (1/15)	
St. Catherine University	Since 2010/11	38 (4/16)	73	15 (4/16)	
TOTAL		658	1,576	251	

Continuing Education/Professional Development

While the certificate course provides CHWs with the basis for practice, as with any health professional, continuing education is important for quality performance and professional development. In addition to employers, numerous organizations do offer formal learning experiences and networking for CHWs with some providing continuing education units or college credit. Table 17 lists some of the key organizations that currently or plan to provide continuing education. Past continuing education topics include: motivational interviewing, maternal and child health, asthma, electronic medical records, diabetes management, and many others.

TABLE 3. ORGANIZATIONS PROVIDING CONTINUING EDUCATION FOR CHWS

Organization / Website	Content	Frequency	Mode	Customizable	CEU/credit offered
American Lung Association	Asthma 101	Varies	Workshop	Yes	No
Many Faces of Community Health Conference (University of Minnesota, School of Public Health)	Varies	Annual	2-day conference	No	Yes
Minneapolis Community & Technical College	Varies	Varies	TBD	Yes	Yes
MN CHW Alliance	Varies	Varies	Workshop, Online	Yes	No

Organization / Website	Content	Frequency	Mode	Customizable	CEU/credit offered
MN CHW Peer Network (WellShare International)	Varies	8 times per year	Workshop, Online	No (topic suggestions welcome)	No
Normandale Community College	TBD	TBD	TBD	In planning stage	TBD
Northwest Technical College	Varies, Per certificate requirements	Varies	Online, Offsite	Yes	Yes
WellShare International	Varies	Varies	Online, Offsite	Yes	No

Workforce Characteristics

CHWs in the Minnesota Workforce

In May 2014, the U.S. Bureau of Labor Statistics (USBLS) estimated that 990 CHWs, or individuals who meet the USBLS definition for a CHW and might use the CHW title, were employed in Minnesota.⁶ Thirteen states (CA, FL, GA, IL, IN, MA, MD, MI, MO, NY, OK, PA, TX) have larger numbers of CHWs in the formal workforce, while Minnesota’s estimate is in the middle range (along with AK, AZ, CT, NC, NJ, NM, TN, UT, VA, WI). Earlier estimates (2002) from the Health Resources and Services Administration (HRSA) noted approximately 2,000 CHWs working in paid and unpaid capacities in Minnesota.⁷ The difference between estimates may be related to different definitions of CHWs or employment status (paid vs. unpaid).

Of the estimated number of CHWs employed in Minnesota, the number who have completed the certificate is difficult to ascertain. The 2016 *Minnesota Community Health Worker Employer Survey* indicated that 65% of 306 CHWs employed by 37 organizations who responded to the question had completed the CHW certificate program. The 2014 WellShare CHW survey found that 56% of respondents (CHWs) had completed the certificate course and 9% were in the process of completing it. The 2012 Wilder survey reported that 50% of respondents had completed the certificate (see Table 3).

TABLE 4. CHW CERTIFICATE HOLDERS IN THE MINNESOTA WORKFORCE

Status of CHW Certificate Completion	Employer Survey (2016; n=37 organizations reporting on 306 CHWs)	WellShare International CHW Survey (2014; n=149)	Wilder Survey (2012, N=82)
Completed CHW certificate	65%	56%	50%
Not completed CHW certificate	35%	44%	50%

Employer Organizations

Data from higher-learning institutions providing the CHW certificate course indicates that more than 145 different organizations around Minnesota hire CHWs who have completed the certificate course. Most employers are located in the Twin Cities metropolitan area. Table 4 shows the distribution of employers by county: Hennepin (102); Ramsey (22); St. Louis (5); Dakota (4); Beltrami (3); Blue Earth (2); and 1 each in Anoka, Brown, Douglas, Hubbard, Mille Lacs, Stearns and Washington. Two organizations also serve Blue Earth/Nicollet/Le Sueur and Stearns/Sherburne/Benton respectively. While this data indicates only 17 of 87 counties have organizations which hire CHWs, it is substantially limited by low self-reporting by graduated CHWs. Additionally, and as indicated above, many organizations hire CHWs who do not hold a certificate. These CHWs frequently work under grant programs, some of which are short-term positions.

TABLE 5. NUMBER OF ORGANIZATIONS EMPLOYING CHWS BY COUNTY

County	Number of Organizations Employing CHWs* (N=145)
Hennepin	102
Ramsey	22
St. Louis	5
Dakota	4
Beltrami	3
Blue Earth**	2
Anoka	1
Brown	1
Douglas	1
Hubbard	1
Mille Lacs	1
Stearns***	1
Washington	1

*Data from Minnesota institutions offering CHW certificate programs

**Also serves Nicollet and Le Sueur

***Also serves Sherburne and Benton

Minnesota organizations that hire CHWs are very diverse. Table 5 shows the number and percent of CHW certificate holders employed by organizational type as reported by post-secondary institutions offering the CHW certificate program. These organization types contrast with those reported in recent surveys (see Figure 1 and Table 6). However, the data is not directly comparable since each study derived data from different samples collected at varying time points. Table 5 only includes CHWs completing certificate programs while Figure 1 and Table 6 include CHWs who have not completed certificate programs as well as those who have completed certificate programs. Additionally, one institution (Summit Academy) that has graduated the largest number of CHWs completing the certificate program, also offered a joint

CHW/certified nursing assistant program. Therefore, Table 5 may include relatively higher numbers of home health care and long-term care employers.

Certified CHWs who self-reported employment to post-secondary institutions as noted in Table 5, indicated the greatest percent employment with health/social service organizations (26.9%), followed by home health care (20.0%), long-term care (15.2%), hospitals (8.3%), community clinics (6.9%), clinics not including community clinics (4.8%), government agencies (3.4%), and schools (3.4%). Other types of employers were medical supply company, behavioral health center, group home, insurance company, public health agency, blood donation, home services business, foundation, hospitality/food business, and pharmacy company.

TABLE 6. NUMBER OF CERTIFIED CHWS BY TYPE OF EMPLOYER

Type of Employer	CHW Certificate Holders Self-reporting Employment to Post-secondary Institutions (N/%)*
Health/social service organization (including non-profit, employment, property management)	39 (26.9%)
Home health care	29 (20.0%)
Long-term care	22 (15.2%)
Hospital including health care system	12 (8.3%)
Community health clinic	10 (6.9%)
Clinic, not CHC, including dental (1)	7 (4.8%)
Government agency, not public health	5 (3.4%)
School	5 (3.4%)
Medical supply company	3 (2.1%)
Behavioral health center	2 (1.4%)
Group home	2 (1.4%)
Insurance company	2 (1.4%)
Public health agency	2 (1.4%)
Other (blood donation, home services business, foundation, hospitality/food service business, pharmacy company)	5 (3.4%)

* Percentages do not add up to 100% due to rounding.

Figure 1 indicates the type of organization reported by employers hiring CHWs who responded to the 2016 *Minnesota Community Health Worker Employer Survey*. The majority of employers responding were clinics including community clinics (46%) followed by public health agencies (17%), community-based organizations (11%), and behavioral health providers (4%).

FIGURE 1. EMPLOYERS OF CHWS BY ORGANIZATION TYPE (N=85)

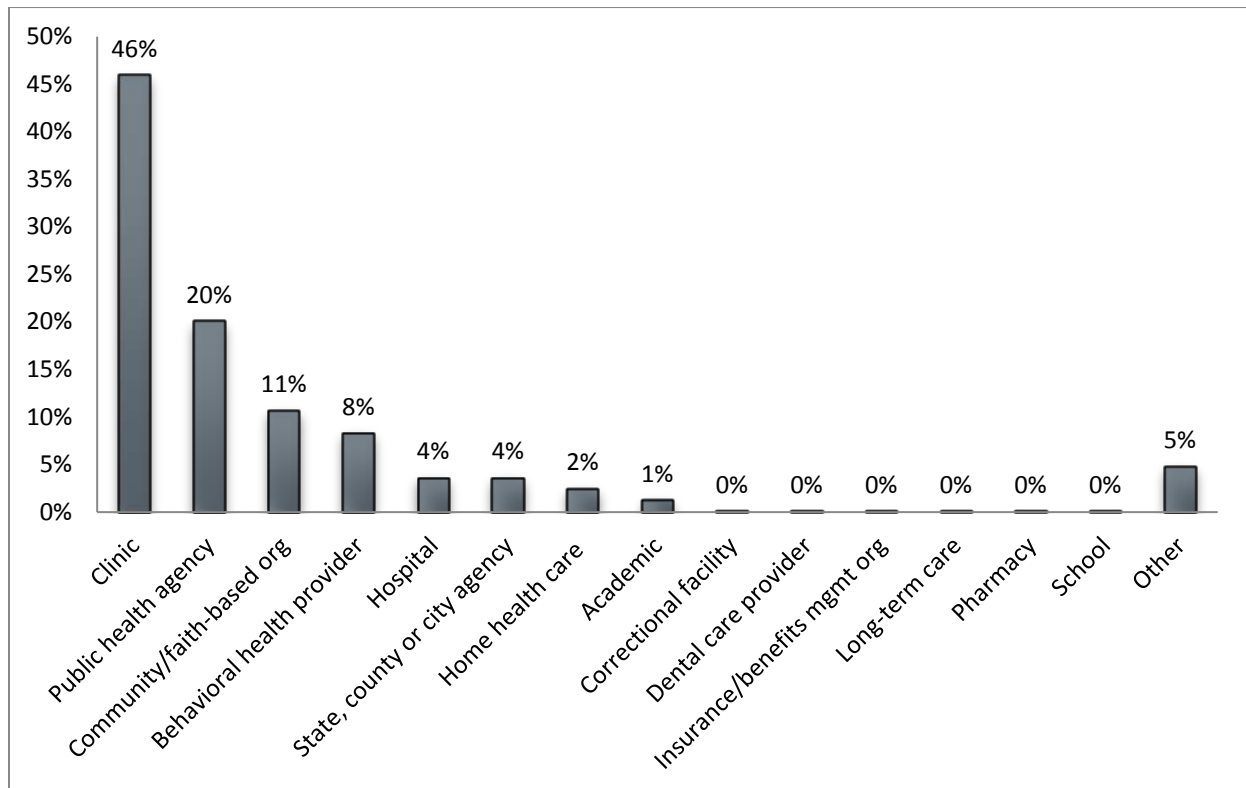


Table 6 shows data from two other surveys: WellShare International CHW Survey from 2014 and Wilder Survey of CHW employers from 2012. The data is not directly comparable due to different samples and collection time points, but provides varying perspectives on employers of CHWs. The WellShare sample is more heavily skewed to clinics (38%) and public health organizations (18%) while the Wilder sample had more non-profit organizations responding (54%).

TABLE 7. NUMBER OF CHWS BY TYPE OF EMPLOYER

Type of Employer	WellShare International CHW Survey (2014, n=107, multiple responses allowed)	Type of Employer	Wilder Survey (2012, N=82)
	22%	Non-profit organization	54%
	18%	Public health organization	12%
	16%	Other	11%
	15%	Clinic (private)	9%
	14%	Hospital	7%
	8%	Community Health Center (CHC)	6%
	6%	Indian Health Services clinic	1%

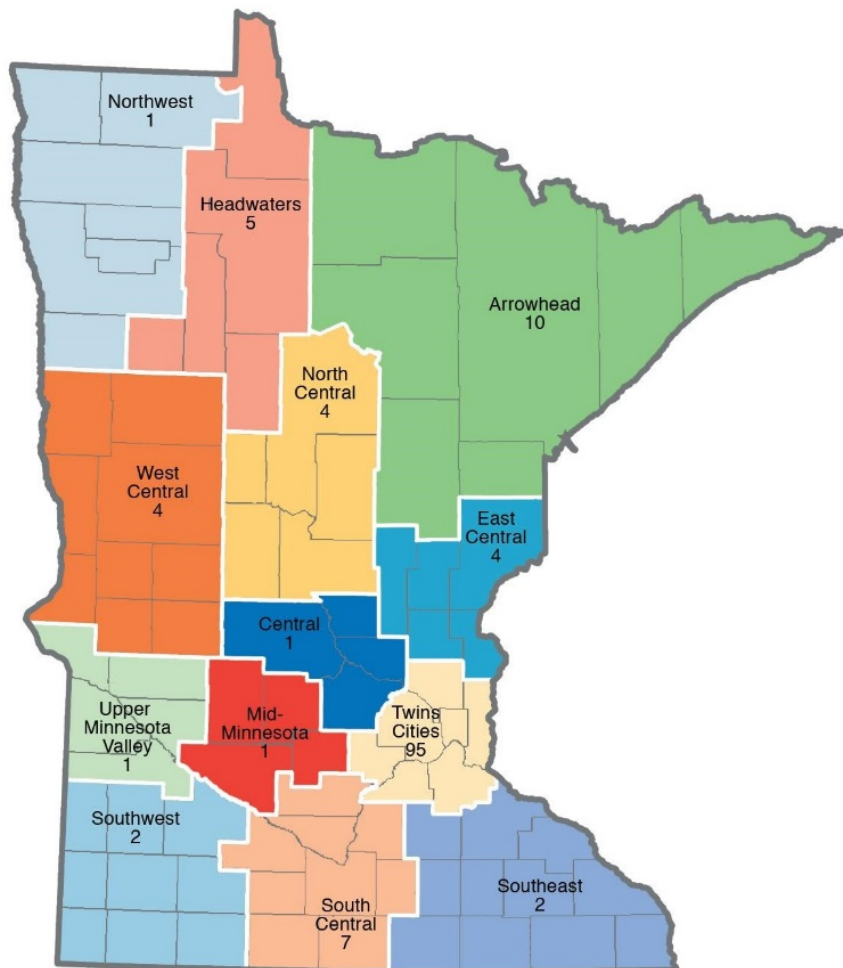
Location of Service Provision

CHWs work in every region of Minnesota. Data from the 2014 WellShare CHW survey suggests that the majority of CHWs (79%) provide services in the 7-county Twin Cities metropolitan area (see Figure 2 for a map of Minnesota with the number of CHWs listed by Minnesota Economic Development Region). In Greater Minnesota, CHWs are concentrated in key urban areas like Rochester, Willmar and St. Cloud, but reach out to most, if not all, counties around the State. (The number of CHWs who reported providing services by region in Greater Minnesota is: 1 in Northwest, 5 in Headwaters, 10 in Arrowhead, 4 in North Central, 4 in West Central, 4 in East Central, 1 in Central, 1 in Mid-Minnesota, 1 in Upper Minnesota Valley, 2 in Southwest, 7 in South Central, 2 in Southeast.)

The 2016 *Minnesota Community Health Worker Employer Survey*, which also included CHWs who had completed and not completed the certificate program, also showed a wide distribution of where CHWs provide services. Across the 45 counties reported, the majority of CHWs services were provided in Hennepin (48%), Ramsey (27%) and St. Louis (15%) counties, which also corresponds to where most CHW employers are located.

Similarly, the U.S. Bureau of Labor Statistics (BLS) reports that 730 CHWs were employed in the Minneapolis/St. Paul/Bloomington MN-WI metropolitan area. BLS data (from May 2015) also showed CHWs employed in Minnesota's central, northern counties and south-eastern counties, with no data for southwestern Minnesota.

FIGURE 2. NUMBER OF CHWS (N=120) REPORTING SERVICE PROVISION IN MINNESOTA ECONOMIC DEVELOPMENT REGIONS (AS OF JANUARY 2015)



Scope of Service Provision

CHWs provide a wide range of services. Respondents in the 2014 WellShare CHW survey identified the services outlined in Table 8 as part of their usual practice. Over half of CHWs reported providing assistance in gaining access to social services (55%) and implementing health promotion/education activities (51%). Key services also included: referral follow-up (48%), scheduling appointments (47%), providing social support (45%), and education/counseling (45%) and outreach (41%).

TABLE 8. PERCENT OF CHWS REPORTING PROVIDING SERVICES

Type of Service	CHWs Reporting Providing Service (%; n=148, 2014 WellShare CHW Survey)
Assistance in gaining access to social services or programs	55
Health promotion/education activities for people at fairs, events	51
Referral follow up	48
Schedule appointments for clients	47
Social support (e.g. listen and support individuals, run support groups)	45
Education/counseling	45
Outreach/case finding or recruitment	41
Care coordination/case management	34
Attend appointments with clients	32
Advocate for your community to improve the healthcare system	30
Determining eligibility for services	29
Advocate/org community to improve social/econ issues affecting health	29
Enroll people into health insurance programs	28
Home visits	28
Collect data	27
Organize your community to improve the healthcare system	26
Peer education or mentoring of other CHWs	24
Health screenings	24
Provide transportation to clients	24
Interpretation	20
Cultural mediation	17
Direct services (like HIV tests, etc.)	16
Translation	11
Fundraising or grant writing	11
Other	3

* Percentages do not add to 100% as individuals were allowed to choose more than one response.

Similarly, in 2016, respondents to the Minnesota CHW Employer Survey noted that their CHW employees perform the services outlined in Table 9. In this case, employers reported key services provided by their CHWs included assistance in gaining access to medical (91%) or non-medical services (83%), patient navigation (76%), building community capacity (74%), care coordination (74%), health promotion/education (72%), community advocacy (65%), social support (65%), building individual capacity (64%), transportation (52%), and interpretation or translation (41%). The least provided services included: cultural mediation (24%), direct services

(24%), and counseling (17%) along with other services (faith-based education/advocacy, strength-based support and resiliency).

TABLE 9. PERCENT OF EMPLOYERS REPORTING THAT CHWS PROVIDE TYPES OF SERVICES

Type of Service	Employers Reporting that CHWs Provide Service (%; n=57; 2016 MN CHW Employer Survey)
Assistance in gaining access to medical services or programs	91
Assistance in gaining access to non-medical services or programs	83
Patient navigation	76
Building community capacity (e.g. problem solving, resource identification)	74
Care coordination	74
Provide culturally appropriate health promotion/education	72
Community advocacy	65
Social support (e.g. advice, encouragement, financial help)	65
Building individual capacity (e.g. life skills development, values clarification, goal-setting)	64
Transportation	52
Interpretation or translation	41
Risk identification	37
Case management	29
Mentoring	26
Cultural mediation	24
Provide direct services	24
Counseling	17
Other (faith-based education and advocacy, strength-based support and resiliency)	3

Wages

Table 7 notes the hourly mean and median wages for CHWs in Minnesota according to various data sources. The hourly mean wage for CHWs ranges from \$12.80 to \$30.17 (mean \$18.35) according to the U.S. Bureau of Labor Statistics, with scientific research and clinical subspecialties paying the highest. The 2016 Minnesota CHW Employer Survey reported hourly mean wages of \$17.63 for new hires and \$22.45 for top earners and similar hourly median wages of \$17.00 and \$22.00 respectively with a range of \$13.00 to \$39.64. WellShare’s 2014 CHW survey noted a mean hourly wage of \$18.42, with a range of \$10.61 to \$60.00 per hour. (Note: WellShare’s survey relied on self-reported CHW status and the \$60 per hour amount was an outlier.) Iseek.org, a Minnesota State Colleges and Universities resource, notes a state-wide

median hourly wage of \$17.05 with a range from \$10.68 to \$23.77 depending on geographic location.⁹

TABLE 10. HOURLY MEAN AND MEDIAN WAGES FOR CHWS IN MINNESOTA

Data Source	Hourly Mean Wage for CHWs
U.S. Bureau of Labor Statistics (2014)	\$18.35
MN CHW Employer Survey (2016)	\$17.63 (new hires) \$22.45 (top earners)
WellShare International CHW Survey (2014)	\$18.42
	Hourly Median Wage
MN CHW Employer Survey (2016)	\$17.00 (new hires) \$22.00 (top earners)
Iseek.org (2015)	\$17.05

Medicaid Reimbursement Enrollment

For CHW services to be reimbursed by Minnesota Health Care Programs (MHCP; including Medical Assistance) the Minnesota Department of Human Services requires that the CHWs be certificate holders from a MnSCU-approved program and enroll as the rendering provider. The CHWs must also be supervised by a MHCP-enrolled physician, dentist, advanced practice registered nurse, certified public health nurse, or mental health professional and services must be ordered by one of these providers. More information is available on DHS’ CHW Provider Manual [website](#). As of April 2016, 54 CHWs holding the certificate have been fully enrolled. A total of 5 organizations requested reimbursement of CHW services from DHS between January 1, 2014 and December 31, 2015.

Demographics

Recent surveys have attempted to further understand other demographic characteristics of CHWs in Minnesota including gender, age, race/ethnicity, and education level. The sections below describe this data in more detail.

Gender of CHWs

Overall, recent surveys suggest that CHWs in Minnesota are primarily female. Additionally, data from students enrolled in certificate courses also suggests that the majority of CHWs are female. Respondents (see Table 10) in the 2014 WellShare CHW survey were 86% female and 11.5% male (with an additional 2.0% prefer not to answer and 0.5% other). The Wilder survey participants were 92% female and 8% male in Minnesota, while the regional average was 87%.

TABLE 11. GENDER OF CHWS IN MINNESOTA

Gender of CHWs	WellShare International Survey (2014; n=147)	Wilder Survey (2012, N=79)
	11.5%	8%
	86%	92%

Institutions offering the CHW certificate course also collect student data by gender. Table 11 shows past and current student data. Of students ever enrolled in a CHW certificate course at a Minnesota-based institution, 84% were female and 16% were male.

TABLE 12. GENDER OF STUDENTS EVER ENROLLED IN CHW CERTIFICATE COURSE BY SCHOOL

Institution	Years Course Offered	Data as of Date	Female	Male	Total
Minneapolis Community & Technical College (MCTC)	Since 2005/06	1/15	388	97	485
Normandale Community College	Since 2014/15	10/15	41	4	45
Northwest Technical College	Since 2013/14	10/15	39	7	46
Rochester Community & Technical College (RCTC)	Since 2010/11	1/15	9	2	11
South Central Community College	Course no longer offered	1/15	22	1	23
Summit Academy OIC	Since 2005/06	1/15	752	141	893
St. Catherine University	Since 2010/11	4/16	73	0	60
TOTAL			1,324	252	1,576
Percent			84.0%	16.0%	

Age of CHWs

While the Wilder survey did not report age statistics, the WellShare survey noted that respondents tended to be older with the highest number (29%) of respondents in the 50-64 age range followed by 40-49 year olds (24%), 30-39 year olds (18%), 25-29 year olds (16%) and those 65 years and older (3%). Table 12 provides a breakdown of CHWs in Minnesota by age.

TABLE 13. AGE OF CHWS IN MINNESOTA

Age of CHWs	WellShare International Survey (2014, n=147)
	16%

Age of CHWs	WellShare International Survey (2014, n=147)
30-39 years	18%
40-49 years	24%
50-64 years	29%
65 years and older	3%

Table 13 shows the age data for students ever enrolled in a CHW certificate course at accredited institutions in Minnesota. For institutions collecting age-related data, the majority of students skew older with the majority (41.9%) in the 31 to 65 year age bracket. Exceptionally, Summit Academy OIC enrolls a larger number (40.0%) of younger (16-24 year old) students.

TABLE 14. AGE OF STUDENTS EVER ENROLLED IN CHW CERTIFICATE COURSE BY SCHOOL

Institution	Data as of Date	16-24 years	25-30 years	31-65 years	Other
Minneapolis Community & Technical College (MCTC)	1/15	na	na	na	Range 19-76; Mean/Median 39
Normandale Community College	10/15	4	26	15	
Northwest Technical College	10/15	1	10	22	2014: (8) 18-29, (5) 30-65
Rochester Community & Technical College (RCTC)	1/15	1	3	7	
South Central Community College	1/15	na	na	na	
Summit Academy OIC	1/15	363	154	390	
St. Catherine University	1/15	na	na	na	
TOTAL		369	232	434	
Percent		35.7%	22.4%	41.9%	

Race/Ethnicity of CHWs

CHWs in Minnesota come from very diverse racial and ethnic backgrounds (see Table 14, Figure 3 and Table 15). Students who ever enrolled in a CHW certificate course at an accredited Minnesota institution (Table 14) show greater racial and ethnic diversity than respondents to the various statewide surveys. The majority of CHW certificate students are African or African American (57.9%), followed by White (14.6%), Latino (12.7%), Asian (6.2%), Other (5.9%), and American Indian (2.7%). Employers responding to the 2016 Minnesota CHW Employer Survey (Figure 3) reported that the majority of CHWs hired were White (28%), African American (17%), Hispanic/Latino (16%), Asian (10%), African (8%), and American Indian (1%). Similarly respondents in the 2014 WellShare CHW survey (Table 15) were White (21%), Latino (15%), American Indian (13%), Asian (13%), African-American (9%), Multi-racial (9%), and African (5%). Wilder Research participants (Table 8) were diverse also: White (40%), Hispanic (30%), African-American (15%), Asian (12%), African-born (9%), and American Indian (5%).

Again, as the samples for each dataset are different and collected at different time points, the data is not directly comparable. The survey data includes both CHWs who completed and those who did not complete CHW certificate programs. Also, the survey data is statewide, and, while not random, may be more representative of the entire State compared to institutional data where students have self-selected to attend. Additionally, institutions are located in larger population centers around the State which may have greater diversity than the State as a whole.

TABLE 15. RACE/ETHNICITY OF STUDENTS EVER ENROLLED IN CHW CERTIFICATE COURSE BY SCHOOL

Institution	Data as of Date	American Indian/Alaskan Native	Asian	Black/African American / African	Native Hawaiian/Other Pacific Islander	White	Hispanic/Latino	Other	TOTAL
Minneapolis Community & Technical College (MCTC) <i>(Data approximate)</i>	4/16	14.6	48.5	169.7		106.7	145.5	0	485
Normandale Community College*	10/15		1	26		6	11		44
Northwest Technical College	10/15	14	1	3		26	2		46
Rochester Community & Technical College (RCTC)	1/15			2		6	3		11
South Central Community College**	1/15			5		14	3		22
Summit Academy OIC	1/15	12	22	692		57	30	94	907
St. Catherine University	4/16	3	25	19		15	6		68
TOTAL		43.6	97.5	916.7	0	230.7	200.5	94	1583
Percent		2.7%	6.2%	57.9%	0%	14.6%	12.7%	5.9%	

* Chinese (1), Somali (17), African American (6), Ghanaian (2), Kenyan (1)

** Somali (3), Kenyan (1), Sudanese (1)

FIGURE 3. RACE/ETHNICITY OF CHWS FROM 2016 EMPLOYER SURVEY (N=322)

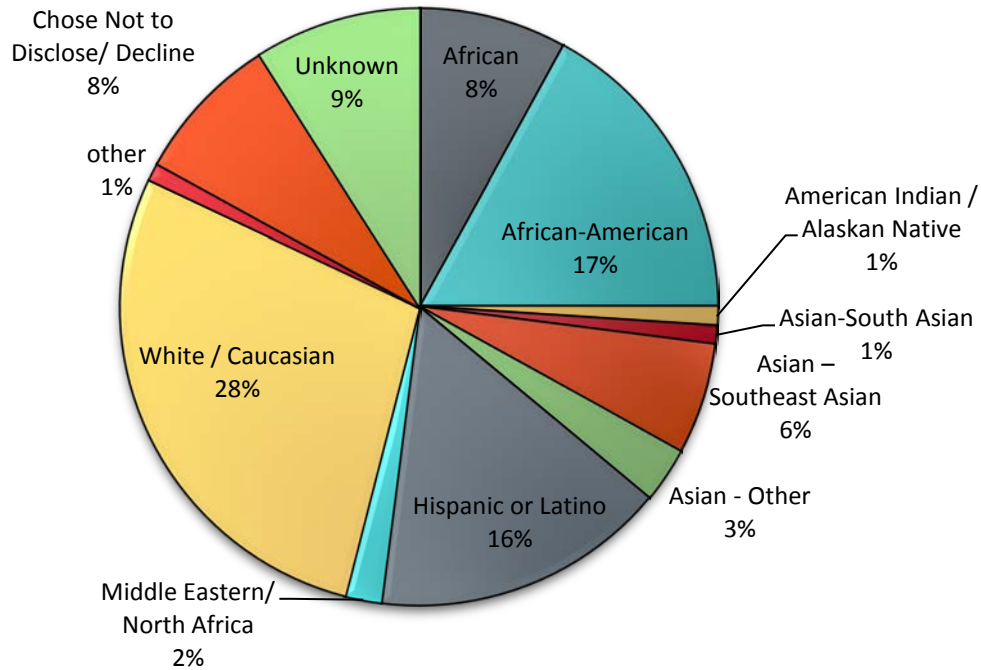


TABLE 16. RACE/ETHNICITY OF CHWS IN MINNESOTA

Race/Ethnicity of CHWs	WellShare International Survey (2014, n=150)	Wilder Survey (2012, N=82)

Education Level of CHWs

Compared to the overall Minnesota population, CHW participants in recent surveys have attained higher levels of education (see Table 16). WellShare’s survey noted that 46% of respondents had completed a bachelor’s degree or higher compared with 52% for the Wilder survey and 36% for Minnesota’s population overall.⁸ In WellShare’s sample (which was conducted online and may have skewed results towards more highly educated CHWs), 32% of CHWs had completed some college but no degree, while 30% of Wilder’s respondents and 22% of Minnesota’s overall population had achieved a similar level of education. Only 5% of

WellShare’s and Wilder’s sample had only attained a high school diploma or equivalent compared to 23% of the general population of adults in Minnesota.

TABLE 17. HIGHEST LEVEL OF EDUCATION COMPLETED BY CHWS IN MINNESOTA

Highest Level of Education of CHWs	WellShare International Survey (2014, n=146, adults over 18)	Wilder Survey (2012, N=82, adults over 18)	MN OHE (2014; ages 25-64)
Less than high school diploma	1%		6%
Some high school		0%	
High school diploma/GED	5%	5%	23%
Some college completed	32%		22%
Vocational training/some college		30%	
Associate’s degree	16%	12%	13%
Bachelor’s degree	30%	34%	24%
Master’s degree/PhD	16%	18%	12%

Discussion

More organizations are creating job opportunities for CHWs and are interested in hiring CHWs who have completed certificate programs. Schools are responding to this interest by enrolling more students, but some challenges remain including:

- Organizations still lack understanding about the benefits of hiring CHWs and how to finance them (including finer points of what can be reimbursed or not).
- For the majority of students, the CHW certificate program is their first encounter with higher education. For some, it is a career pathway and their gateway to additional education. As a result, while CHW certificate programs cover a significant amount of basic content, many CHWs need to develop more skills in areas such as professionalism, computers, electronic health records, etc.
- Similarly, the commitment required for study is new to most students. As a result, a relatively smaller percentage of students complete the CHW certificate programs than enroll (~40-50% complete).
- In-person certificate programs are not offered in all areas of the state, especially in Greater Minnesota. Specifically, the corners of the state, South Central, Arrowhead, and Fargo/Moorhead areas do not currently have institutions which offer CHW certificate programs, although online opportunities to complete the certificate now extend statewide. However, potential CHW certificate candidates may be unaware of job opportunities in these locations and employers may not be interested in creating CHW positions if they find a limited supply of CHWs holding certificates.

- Expansion of programs is difficult in the MnSCU system since it takes schools a long time to create approved programs. Minnesota West is currently awaiting approval from MnSCU to add a CHW certificate program in the southwest area of Minnesota (Marshall).
- Further, MnSCU requires that enrollees be debt-free when enrolling in school, which is a barrier for some prospective students.

Organizations are taking steps to meet the challenges. For example, some trends include:

- Organizations are hiring CHWs and covering tuition for CHW certificate programs. Or, they are identifying existing employee cadres that are not eligible for reimbursement (e.g. family advocates) and sending them through certificate programs. Even if organizations can afford tuition, most cannot afford to cover the CHWs' time away from work. Currently offered courses are intensive and require a substantial time commitment and employed CHWs find it very difficult to complete while also maintaining employment.
- Organizations are satisfied with the CHW certificate core competency training, but still want to increase the capacity of students. More specialized training is beyond the scope of the certificate program. Some schools, other organizations and employers are meeting this interest by creating standardized, customized, continuing education opportunities.
- Organizations are implementing improved data tracking systems to ensure accurate and comprehensive enrollment, graduation and demographic data on CHW certificate holders.

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Appendix 1

Survey of Institutions Offering the CHW Certificate Course

(List of questions. Original survey was formatted for entry into Excel.)

1. What year did you start offering the CHW certificate course?
2. For how many years have you offered the course?
3. How do you offer the course? (on campus, online, off-campus, other)
4. Where do you plan to offer the course in the future? (on campus, online, off-campus, other)
5. Projected future interest/annual enrollment in the program?
6. What do you do within or additional to the course credits to ensure CHWs are "practice ready"?
7. Do you currently offer any continuing education credits?
8. Do you plan to offer any continuing education credits?
9. Do you currently offer any customized training?
10. Do you plan to offer any customized training?
11. Gender (male, female, total) for all enrolled students (past & current), total and by academic year
12. Race (American Indian or Alaska Native, Asian, Black/African American/African, Native Hawaiian or Other Pacific Islander, White, Hispanic or Latino, Other) for all enrolled students (past & current), total and by academic year
13. Age (16-24, 25-30, 31-65) for all enrolled students (past & current), total and by academic year
14. Number of students who have completed program?
15. Number who are known to be working as a CHW?
16. Where CHWs work, if known, by EMPLOYER?
17. Where CHWs work, if known, by COUNTY?