Lehigh Valley Health Network LVHN Scholarly Works

Department of Community Health and Health Studies

Integrating Community Health Workers into Primary Care Practice to Better Serve Older Adults

Yendira Rosario Lehigh Valley Health Network, Yendira.Rosario@lvhn.org

Gloria Rivera
Lehigh Valley Health Network, Gloria.Rivera@lvhn.org

Luz Cruz

Lehigh Valley Health Network, Luz.Cruz@lvhn.org

Brenda Frutos Lehigh Valley Health Network, Brenda.Frutos@lvhn.org

Cathy A. Coyne PhD, MPH
Lehigh Valley Health Network, Cathy A.Coyne@lvhn.org

Follow this and additional works at: https://scholarlyworks.lvhn.org/community health and health studies

Part of the <u>Community Health and Preventive Medicine Commons</u>, and the <u>Health Services</u> <u>Research Commons</u>

Published In/Presented At

Rosario, Y. Rivera, G. Cruz, L. Frutos, B. Coyne, C. A. (2019, April 13). *Integrating Community Health Workers into Primary Care Practice to Better Serve Older Adults*. Poster Presented at: The Unity Conference, The 20th Anniversary of the National Conference For and About CHW's, Las Vegas, NV.

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.

Integrating Community Health Workers into Primary Care Practice to Better Serve Older Adults

Yendira Rosario, Gloria Rivera, Luz Cruz, Brenda Frutos, MPH, Cathy Coyne, PhD, MPH Lehigh Valley Health Network, Allentown, Pa.

INTRODUCTION

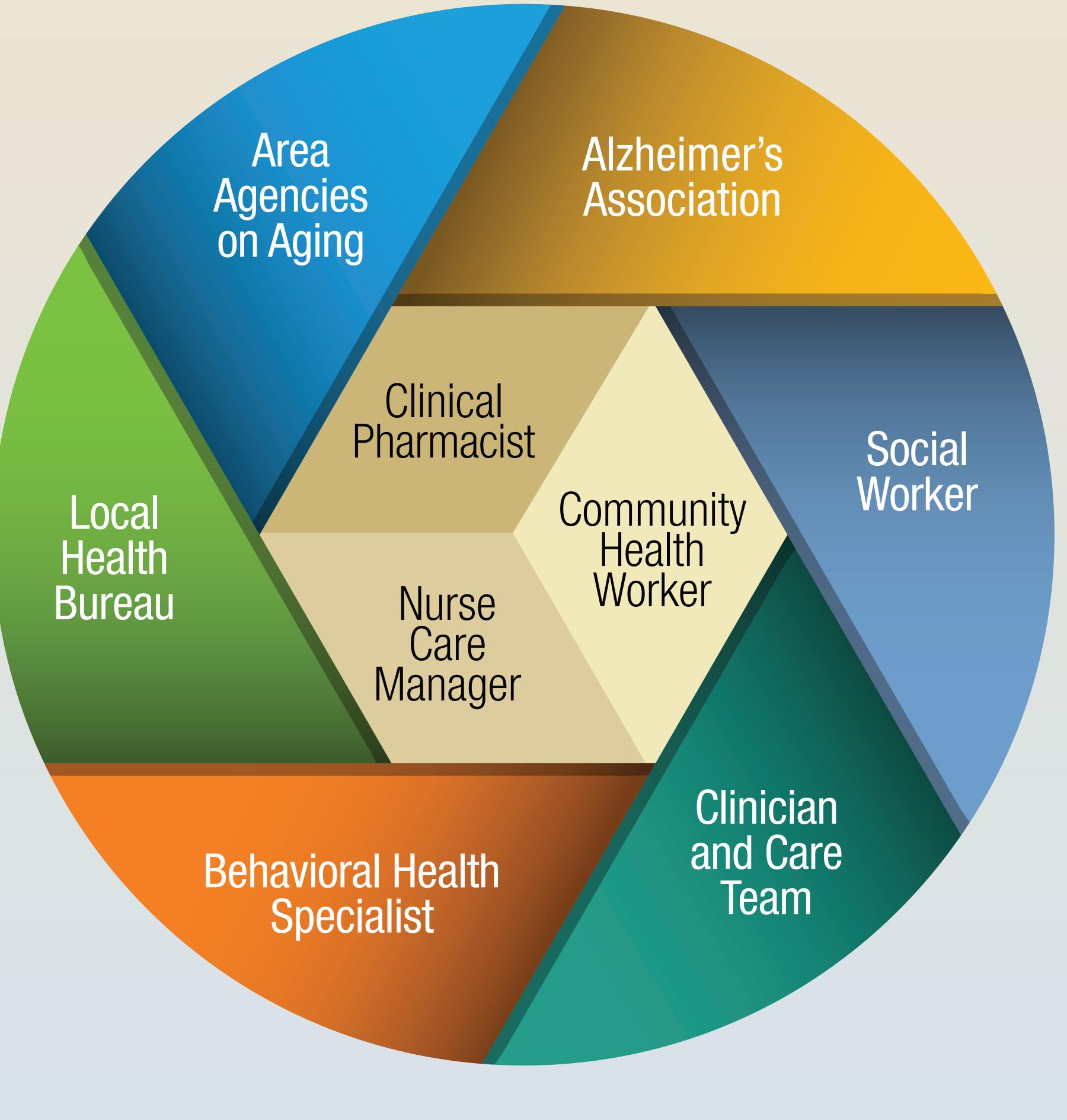
Although Community Health Workers (CHWs) have been working in small non-profits for decades performing outreach and other related activities, they are relatively new to health care teams in the US. CHWs have faced challenges when integrating into these teams due to the culture of health care and its institutionalized hierarchy.

In a program designed to improve the health of geriatric patients with complex needs, CHWs were teamed with nurse care managers and pharmacists. These interdisciplinary teams focused on helping patients to attain their health and social goals, maintain independence, navigate the health care system, and obtain community resources. CHWs were able to cross the cultural divide and gain the trust of fellow team members and providers, enabling an interdisciplinary approach to elderly primary care.

After 3 years of implementation, the CHWs performed nearly 1,600 home visits among geriatric patients in primary care:

- 388 geriatric patients have had at least one CHW home visit
- Mean age 74.9 years
- 66% Female
- 61% Hispanic/Latino
- 52.9% Spanish-speaking

PROGRAM DESIGN



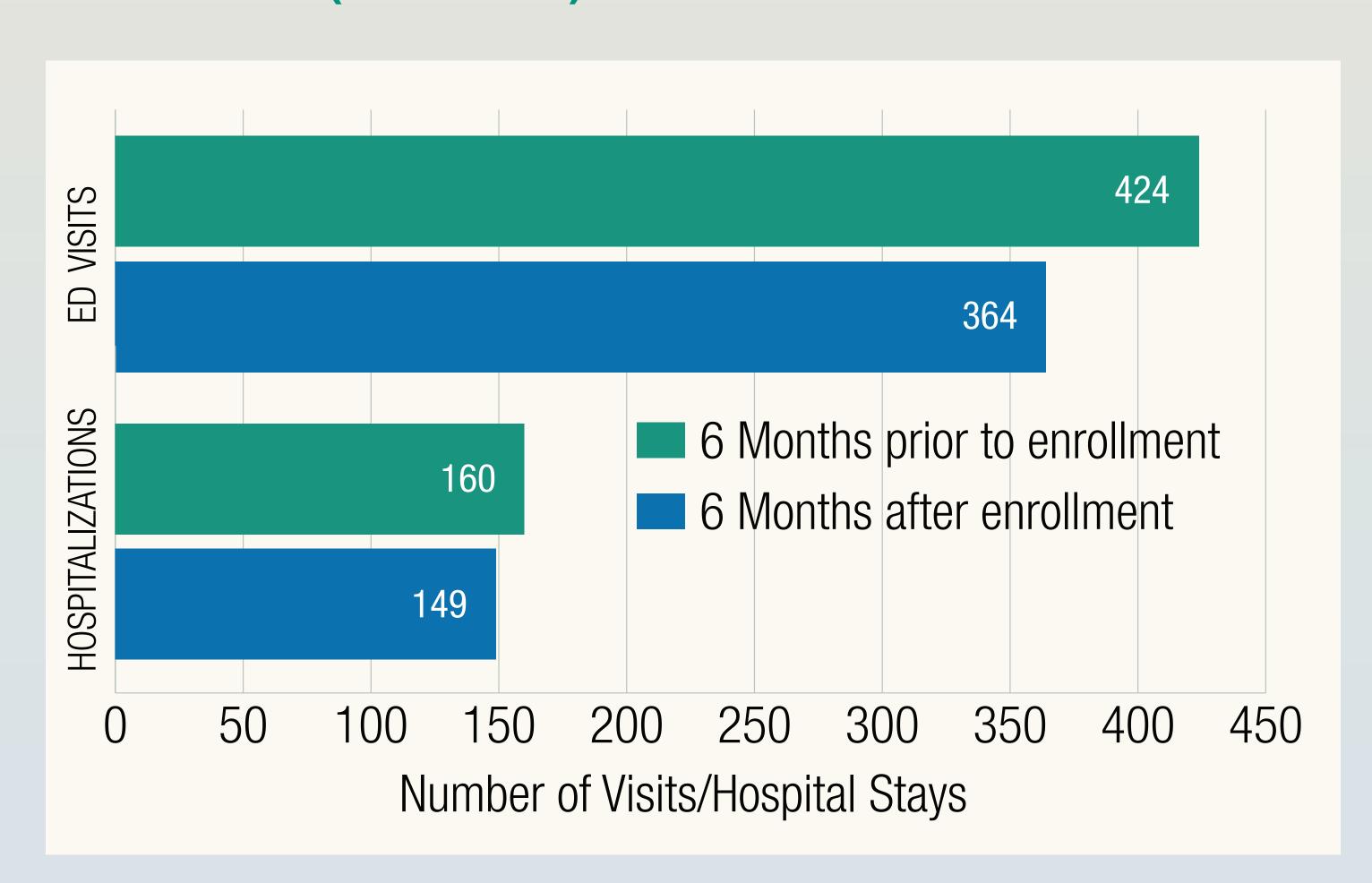
PRIMARY CARE

OUTCOMES

GERIATRIC PATIENTS WITH ADVANCE DIRECTIVE (AD) IN ELECTRONIC MEDICAL CHART

	% Patients with AD
Patients engaged by home visit team	16.4%
Other geriatric patients in primary care	8.5%

HEALTH CARE UTILIZATION BEFORE AND AFTER PROGRAM ENROLLMENT IN GERIATRIC PATIENTS (N = 606)



These findings are not limited to CHW interventions, but include the collective efforts of the interdisciplinary teams.

DISCUSSION

CHALLENGES

- Non-conventional role in health care
- Lack of trust
- Role clarity between CHWs and social workers
- CHW's credentials
- Office space for CHWs
- Documentation in the electronic medical record system

CONCLUSION

- CHWs are well-suited to work in clinical settings
- CHWs bring unique understanding, perspectives, and value to care teams and organizations
- CHWs have demonstrated their abilities to adapt to health care settings
- CHWs are well-positioned to support those marginalized from the health care system to seek care
- Strategies for integrating CHWs into clinical settings include:
- Providing formal training
- Creating a positive and supportive work environment
- Building trust and open-communication with clinicians and staff
- Encouraging CHW participation in practice meetings and daily huddles

ACKNOWLEDGMENTS AND DISCLAIMER

This demonstration project is funded by the Geriatrics Workforce Enhancement Program grant awarded by the U.S. Department of Health and Human Services (USDHHS), Health Resources and Services Administration (HRSA). The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of HRSA, or the USDHHS.



