



**MULTNOMAH COUNTY
AGENDA PLACEMENT REQUEST
NOTICE OF INTENT**

Board Clerk Use Only

Meeting Date: 7/18/13
Agenda Item C.2
Est. Start 9:30 am
Date 7/3/13

Agenda Title: NOTICE OF INTENT to submit an application for up to \$60,000 to develop a Community Healthy Workers' competency assessment system.

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.

Requested Meeting Date: 7/18/13 **Time Needed:** N/A

Department: Health **Division:** Community Capacitation Center

Contact(s): Noelle Wiggins and Alison Frye

Phone: 503-988-3663 **Ext.** 26646; 27029 **I/O Address:** 448/2; 160/9

Presenter Name(s) & Title(s): N/A. Consent item.

General Information

1. What action are you requesting from the Board?

Authorization for the Director of the Health Department to submit an application for up to \$60,000 to the Northwest Health Foundation to develop an interactive, performance-based core competency assessment methodology and system for Community Health Workers (CHWs).

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

In the context of health care reform at the national and state levels, CHWs are assuming an increasingly important role as members of public health and health care teams. Definitions of CHWs vary from jurisdiction to jurisdiction; the essential characteristic which unites the field is that CHWs are trusted members of the communities in which they work. Currently, multiple states are developing training and certification requirements for CHWs and

payment formulas that can include CHWs. Essential to both endeavors is access to widely accepted methods and procedures for assessing the competencies of CHWs. Competency assessment is necessary for CHWs at various stages of their careers as certification systems are put in place.

Given these challenges, the task of determining how best to assess the knowledge and skills of CHWs has not received the systematic attention it deserves. Health and social service providers and health payers are increasingly asking how they can be assured that CHWs have achieved expected skill levels. The time for a systematic effort to identify and create language and promising practice for competency assessment for CHWs has arrived.

Stakeholders from Massachusetts and Oregon will collaborate to develop an interactive, performance-based core competency assessment methodology and system for CHWs. Variations on a basic competency assessment will be useful for jurisdictions that require distinct but overlapping core competencies. Flexible methods and indicators will be required for assessing competency given varying levels of training among CHWs currently, e.g. CHWs who have just completed initial training, CHWs who have had prior training, and experienced CHWs who have had little or no training. All of these workers may soon anticipate qualifying for certification under new regulations. The system for assessing competency that will be developed in this project will be used locally and will be useful for CHWs, directors of CHW programs and CHW certification boards around the United States.

3. Explain the fiscal impact (current year and ongoing).

The grant will provide the Health Department up to \$60,000 for a 6 month project for our role in the development in the competency assessment.

4. Explain any legal and/or policy issues involved.

The project will include developing a basic competency assessment for CHWs. This could affect implementation of training and certification requirements as part of Health Care Transformation in Oregon.

5. Explain any citizen and/or other government participation that has or will take place.

Citizens (CHWs/CHW programs) will be involved in testing the competency assessment system.

Grant Application/Notice of Intent

If the request is a Grant Application or Notice of Intent, please answer all of the following in detail:

- **Who is the granting agency?**

The granting agency is Northwest Health Foundation

- **Specify grant (matching, reporting and other) requirements and goals.**

The goal of the grant is to develop a CHW competency assessment for CHWs in Oregon that has the potential for national use. No reporting requirements have been identified.

- **Explain grant funding detail – is this a one time only or long term commitment?**

The grant award is anticipated for September 1st for a 6 month project period. It is a one-time award.

- **What are the estimated filing timelines?**
The application is due on August 1st, 2013.
- **If a grant, what period does the grant cover?**
The 6-month project period covers September 1st, 2013 through March 1st, 2014.
- **When the grant expires, what are funding plans?**
The project is finite in nature as it is focused on developing a competency assessment system that can be used in existing programs.
- **Is 100% of the central and departmental indirect recovered? If not, please explain why.**
All indirect costs will be covered with grant funds.

Required Signatures

**Elected Official
or Department/
Agency Director:** Lillian Shirley/s/kj **6-28-13**
(signature) **Date:** _____

Name/Title:

Budget Analyst: Althea Gregory /s/ **7-3-13**
(signature) **Date:** _____

Name/Title: