Executive Summary

Community health workers/promotoras (CHWs/Ps) are members of the target population and share many of the same social, cultural, and economic characteristics. As trusted members of their community, CHWs/Ps provide culturally appropriate services and fulfill multiple roles. CHWs/Ps are the bridge between the diverse populations they serve and the healthcare system with the lens of social justice to transform communities.

The El Sol Training Center uses a variety of tactics to apply the guiding frameworks in order to develop an ecosystem of transformational learning experiences. Before all else, the inspiration and guiding approach of the El Sol Training Center stems from Popular Education.

El Sol’s Training Center continues to take on the prime responsibility of workforce development for CHWs/Ps.

This summary provides a high-level summary of the various learning methods El Sol used to train CHWs/Ps.
Between July and December 2021, El Sol hosted 20 webinars over 13 topics. Of the 13 topics, 7 were presented in English and Spanish. A total of 382 people were trained.

Topics included:

- Group Facilitation (English and Spanish)
- The Definition and Role of the CHW/Promotor (English and Spanish)
- Popular Education (English and Spanish)
- CHW/Promotor Recruitment
- Supervision (English and Spanish)
- Stress Management (English and Spanish)
- Training and Professional Development of CHW/Promotor
- Self-Care (English and Spanish)
- Program Evaluation
- Sustainability
- Conflict Resolution
- Integrating CHWs/Ps in the Healthcare System
- Community-Based Organizations

“\textit{It was very helpful in learning more about the history and the purpose/value of CHWs}!”
Webinar Objectives

Objectives of trainings focused on the participant learning general concepts, theory and philosophy and themes of each topic and being able to apply them into their daily work.

Overall, trainings were successful. Those who responded to the webinar evaluation survey indicated high level of understanding the objectives and appreciation for the content and presenters.

On average, 62% of participants found the information shared to be new to them and displayed a high-level of understanding. Participants shared that this information was useful both on a professional and personal level and that it was applicable to their daily work.
One-on-one
CHW/P Workforce and CBO Technical Assistance

Workforce Development One-on-One

The workforce development 7-question survey was developed to gauge how committed and prepared CHWs/Ps were to look for and apply for a CHW/P positions within the community.

Overall, those who responded to the survey felt a high level of commitment and preparedness to sought out CHW/P positions in the community.

Of the 31 responses:

- **71% SPANISH**
- **29% ENGLISH**

The main area that needs more focus and strengthening is the how and where.

For example:

- How and where do potential applicants apply for these types of positions? (Websites? Agencies?)
- What is needed of them to apply? (Resumes? Transcripts? References?)

Quantitative Results (n=31)

Table below provides the results of the three 4-point Likert Scale Questions.

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, how ready do you feel to interview for a position as a CHW in your desired setting?</td>
<td>3.51</td>
</tr>
<tr>
<td>Overall, do you feel like this training series prepared you to apply for a job in your desired field?</td>
<td>3.48</td>
</tr>
<tr>
<td>Overall, has this training series helped you solidify your commitment to becoming a CHW?</td>
<td>3.55</td>
</tr>
</tbody>
</table>

The overall average across the three questions was **3.55**

The average response when asked how do you feel like this training series prepared you to apply for a job in your desired field, on a scale of 1 (not ready at all) and 4 (very ready) is **3.48**

The average response when asked how ready do you feel to interview for a position as a CHW/P in your desired setting is **3.51**
Lunch and Learn for Workforce Development

This purpose of this presentation was to provide assistance on how to look for a job as a CHW/P now that they have completed the training program. Six participants attended this one hour presentation.

Topics included:

- Fast facts on application tracking system and recruitment
- Tips/best practices on how to format resume and the importance of a strong cover letter with examples on both
- Resume Do’s and Don’ts
- Titles, positions and keywords to search on job search engines
- FAQs such as what certificates and trainings to list on resume
- A list of places where they could begin the job search such as health systems, community benefit departments, health departments, health plans such as managed medicaid plans and CBOs
- A template to continue working on their elevator speech and discussed the importance of how they introduce themselves and the value they bring to organizations

Responders were asked to indicate their favorite trainings

Out of all the following trainings, which ones were your favorite? (n=29)

- How to properly conduct visits
- Ethics trainings/ code of ethics for CHWs/Ps
- Knowledge of what influences our values
- Health Outreach
- Emotional intelligence
- Cultural competency/humility
- Social determinants of health

Responses were favorably to all qualitative questions pertaining to the training curriculum. We can deduce that CHWs/Ps feel that they have the knowledge to do the work and that the training curriculum is well designed to meet their needs as individuals and key health pioneers in the community.

Overall, responders scored very high in terms of their commitment, passion and readiness to carry out the vital roles of a CHW/P.
C3 Core Competency Self-Reflective Survey

This survey was created in an effort to integrate key CHW/P roles and competencies into curriculum training and determine the readiness to integrate and perform the various skills necessary in this field.

The C3 Competencies offer a single set of CHW/P roles and competencies for reference by those both inside and outside the field as they work to build greater support for and sustainability among CHWs/Ps in all settings. These Competencies include:

1. Communication Skills
2. Interpersonal and Relationship-Building Skills
3. Service Coordination and Navigation Skills
4. Capacity Building Skills
5. Advocacy Skills
6. Education and Facilitation Skills
7. Individual and Community Assessment Skills
8. Outreach Skills
9. Professional Skills and Conduct
10. Evaluation and Research Skills
11. Knowledge Base

Demographics:
Of the 67 respondents, 15 (22%) were in Spanish and 52 (78%) were in English. Majority of participants were between 25 – 44 years old (40%). Majority of participants indicated having some college courses with no credit (18%), Bachelor’s Degree (16%) or were a high school graduate with a diploma or through GED (15%). Most participants identified themselves as Hispanic/Latino (46%) or Asian/Pacific Islander (21%). Majority of participants identified that they have been working in the community for 3-5 years (24%) and between 1-2 years (22%). Ten percent of participants had less than 1 year of experience.

67 TOTAL RESPONSES
### Core Competencies and Impact on You

This section included open-ended questions to capture the responders experience with the core competencies and impact of these on their personal and professional lives.

Of the core competencies, which area do you feel you’ve made the biggest advancement?

<table>
<thead>
<tr>
<th>Core Competencies</th>
<th>Number of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication Skills</td>
<td>23</td>
</tr>
<tr>
<td>Interpersonal and Relationship</td>
<td>27</td>
</tr>
<tr>
<td>Building Skills</td>
<td>23</td>
</tr>
<tr>
<td>Service Coordination and Navigation Skills</td>
<td>27</td>
</tr>
<tr>
<td>Advocacy Skills</td>
<td>23</td>
</tr>
<tr>
<td>Education and Facilitation Skills</td>
<td>16</td>
</tr>
<tr>
<td>Individual and Community Assessment Skills</td>
<td>27</td>
</tr>
<tr>
<td>Outreach Skills</td>
<td>24</td>
</tr>
<tr>
<td>Professional Skills and Conduct</td>
<td>27</td>
</tr>
<tr>
<td>Evaluation and Research Skills</td>
<td>13</td>
</tr>
<tr>
<td>Knowledge Base</td>
<td>24</td>
</tr>
</tbody>
</table>

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**What qualities and motivation do you have to serve your community?**

1. Passion to help people and the community; caring
2. Ability to communicate and dialogue with the community; good-active listener
3. Compassionate, kind-hearted and empathetic
4. Resourceful, flexible and responsible; can find solutions/resources
5. Self-resilient and want to help others become more resilient

**What are examples of skills or experiences you already have that you feel will be useful in this work?**

1. Communication skills
2. Networking skills
3. Problem solving skills
4. Being a part of the community
5. Navigating the current health care system in the County
6. Own life experiences; getting through tough times
7. People skills
8. Resilience
9. Self-reflective
10. Understanding and embracing different cultures

**What motivated you to become a CHW/P, what about this works speaks to you?**

1. The drive, love and passion to help vulnerable populations; passionate heart focused on service; giving back; fulfilling work
2. Learning about the community talking to people and hearing their stories
3. Helping people and families reach their goals
4. Advocate for vulnerable populations; closing the gap between language disparities and service
5. Being a trusted source of information/resources

**What are internal skills and qualities you feel you come in with that have helped your career as a CHW/P?**

1. Compassion
2. Passion to help others
3. Empathy
4. Understanding of culture
5. Ability to connect with people
6. Open minded
7. Strong communication skills
8. Patience
9. Own experience
10. Resilience
Clinic Based CHW/P Training

The Clinic Based CHW/P curriculum had a total of six units with fifteen modules of training. A few of the modules included: Scope of Work for Clinical Community Health Worker, Ethics in Healthcare Delivery, and Patient Advocacy and Support among others.

Each module allowed the learner to define key terms, demonstrate understanding of key concepts, identify issues, discuss the importance of understanding the concept, and apply the skills learned. The average number of responders to evaluations throughout all modules was 18 participants.

When participants were asked what they liked most about the workshop, overall responses were positive and show gratitude. Noteworthy responses are:

“Having the clinician who understands CHW work to present the topic, and not someone in compliance but knowledge of clinical practice or CHW role.”

“The explanation and examples given to further understanding.”

“Breakout sessions were helpful to discuss the topics.”
Overall, participants found the various teaching approaches helpful and conducive to adult learning styles. Collaborative and interactive methods were appreciated throughout all modules. Instructors that had relevant experience, were engaging, and patient with the participants, increased participant satisfaction.

Participant success can be shown through the Quantitative Response Analysis. The confidence levels as related to the training in the pre- and post-test objective results increased significantly across three modules.

Below are three examples of module examples that displayed a significant positive increase in knowledge:

**Unit 5, Module 2:** Patient Advocacy and Support

Increase in knowledge identifying local respite care resources

On a Likert scale of one to four, based on the results from the pre and post-tests, respondents displayed an increase in confidence levels as related to the learning objectives of this training.

<table>
<thead>
<tr>
<th>Pre-test: 6</th>
<th>Post-test: 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel confident that I can define what is meant by having a social support network.</td>
<td>I feel confident that I can define what is meant by having a social support network.</td>
</tr>
<tr>
<td>I feel confident that I can describe how inclusion of family and friends in care giving can take place.</td>
<td>I feel confident that I can describe how inclusion of family and friends in care giving can take place.</td>
</tr>
<tr>
<td>I feel confident that I can describe how to help caregivers and patients manage chronic care with support.</td>
<td>I feel confident that I can describe how to help caregivers and patients manage chronic care with support.</td>
</tr>
<tr>
<td>I feel confident that I can identify local respite care resources to be able to provide patients and family members.</td>
<td>I feel confident that I can identify local respite care resources to be able to provide patients and family members.</td>
</tr>
</tbody>
</table>

**Unit 5, Module 3:** Patient Centered Integrated Strategies

Increase in confidence applying the five elements of effective care coordination

On a Likert scale of one to four, based on the results from the pre and post-tests, respondents displayed an increase in confidence levels as related to the learning objectives of this training.

<table>
<thead>
<tr>
<th>Pre-test: 8</th>
<th>Post-test: 8</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel confident that I recognize the importance of patient navigation in healthcare.</td>
<td>I feel confident that I recognize the importance of patient navigation in healthcare.</td>
</tr>
<tr>
<td>I feel confident that I identify ways CHWs support patient centered strategies.</td>
<td>I feel confident that I identify ways CHWs support patient centered strategies.</td>
</tr>
<tr>
<td>I feel confident that I identify and develop at least two trust building skills with patients.</td>
<td>I feel confident that I identify and develop at least two trust building skills with patients.</td>
</tr>
<tr>
<td>I feel confident that I can become familiar with the principles of care coordination.</td>
<td>I feel confident that I can become familiar with the principles of care coordination.</td>
</tr>
<tr>
<td>I feel confident that I can describe the common C-CHW activities within care coordination.</td>
<td>I feel confident that I can describe the common C-CHW activities within care coordination.</td>
</tr>
<tr>
<td>I feel confident that I can apply the five elements of effective care coordination.</td>
<td>I feel confident that I can apply the five elements of effective care coordination.</td>
</tr>
</tbody>
</table>
On a Likert scale of one to four, based on the results from the pre and post-tests, respondents displayed an increase in confidence levels as related to the learning objectives of this training.

Qualitative Feedback:

What’s one important thing you learned today?

• “Importance of exercise and eating healthy”
• “How to support a client prepare healthy meals by going to where clients shop, make a shopping list, make recipes for a meal”
• “Approaching diets in a sensitive way goes a long way”
• “Use patient centered approach, use weight inclusive approach, change takes time”
• “Helping people to see that making small adjustments is key to changing bad habits.”
• “How much trauma can influence our behavior in healthy habits.”

Summary

Based on the results from the pre- and post- tests, respondents displayed an increase in confidence levels as related to the objectives of this training. Respondents displayed a general and high-level understanding of the Qualitative Response to Knowledge Questions.

Across all fifteen modules, there are two modules that displayed the highest level of success.

Unit 4, Module 2: Medical Terminology and Body Systems

In the Quantitative Response Analysis, based on the results from the pre and post-tests, respondents displayed a 25% increase in overall confidence levels as related to the learning objectives of this training.

Unit 6 Module 1: Health Promotion & Active Living

In the Quantitative Response Analysis, based on the results from the pre and post-tests, respondents displayed a 36% increase in overall confidence levels as related to the learning objectives of this training.
The training objectives would allow the learner to define key terms, demonstrate understanding of key concepts, identify issues, discuss the importance of understanding the concept, and apply the skills learned. The average number of responders to evaluations throughout all modules was forty-one participants. When participants were asked what they liked most about the workshop, overall responses were positive and show gratitude. Noteworthy responses are provided below:

- “Having a life coach, help with my strengths. Today’s speaker, Herisa helped me gain more confidence in becoming a CHW.”
- “The presenters had a huge, and very helpful toolbox, absolutely amazing class/workshop. I am absolutely amazed!”
- “The PP was great, I will definitely go back to it.”
- “At first, I thought it was a lot of group work, but I love it! Working with different people and seeing different opinions, viewpoints etc., is great because it teaches us a lot and it keeps one open-minded as well.”

Demographics:
A total of 66 attendees responded to the pretest. Of the total, 14 (22%) were completed in Spanish and 52 (78%) in English. A total of 61 attendees responded to the post-test. Of the total, 14 (23%) were in Spanish and 47 (77%) were in English.

Race/Ethnicity
- 53% Hispanic/Latino
- 15% White
- 12% Asian/Pacific Islander
- 7.5% African American

Education Background
- 23% College Degree
- 23% College/No Degree
- 15% High School/GED
- 11% Trade/Vocational School
- 9% Associates Degree

CHW/P Experience
- 43% 1-3 years
- 26% Over 10 years
- 11% Less than 1 year
Instructors greatly impacted the growth of participants through their interactive teaching methods. The material provided for the trainings was also helpful to participants. Participants have stated that the material will continue to be useful after the completion of the training. In addition, the opportunity to collaborate with other participants allows for an engaging experience. In brief, the instructor, materials provided, and group work increased participant satisfaction.

Participant success can be shown through the Quantitative Response Analysis. The confidence levels as related to the training in the pre- and post-test objective results increased significantly across four modules.

Below are three examples of module examples that displayed a significant positive increase in knowledge:

**Unit 2, Module 3: Leadership of the CHW/PS**

Confidence in understanding all the objectives.

For question 1, there was a 17% increase in knowledge. For question 2, there was a 5% increase in knowledge. For question 3, there was a 6% increase. Overall, for this unit, there was an average of 9% increase in knowledge.

**Unit 1, Module 3: Healthcare and Health Policy**

Average increase in knowledge for this unit.

In Unit 1: Health Care and Policy, there were four questions. For question 1, there was a 12% increase in knowledge. For question 2, there was a 15% increase in knowledge. For question 3, there was a 20% increase and for question 4, there was an increase of 14%. Overall, for this unit, there was an average of 16% increase in knowledge.
In Unit 3: Home Visitation, there were four questions. For question 1, there was a 9% increase in knowledge. For question 2, there was a 5% increase in knowledge. For question 3, there was a 24% increase and for question 4, there was an increase of 18%. Overall, for this unit, there was an average of 14% increase in knowledge.

Across all eighteen modules, there are two modules that displayed the highest level of success.

**Unit 1, Module 4: Introduction to CHWs**

In the Qualitative Response to Knowledge Questions: Post-test, 94% of respondents had a good understanding of the post-test question.

**Unit 2, Module 2: Emotional Intelligence**

In the Qualitative Response to Knowledge Questions: Post-test, 96% of respondents had a good understanding of the post-test question.
Basic CHW Training

Of the total, 14 (22%) were completed in Spanish and 52 (78%) in English. A total of 61 attendees responded to the post-test. Of the total, 14 (23%) were in Spanish and 47 (77%) were in English.

<table>
<thead>
<tr>
<th>How has El Sol’s CHW/P Training Center contributed to your personal development?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Increased confidence</td>
</tr>
<tr>
<td>• Increase understanding of role and responsibility of CHW</td>
</tr>
<tr>
<td>• Increased motivation and passion to serve the community</td>
</tr>
<tr>
<td>• Understanding advocacy</td>
</tr>
<tr>
<td>• Understanding my own learning style</td>
</tr>
<tr>
<td>• Ability to self-reflect</td>
</tr>
<tr>
<td>• Tools necessary to teach popular education</td>
</tr>
<tr>
<td>• Feeling valuable and productive</td>
</tr>
<tr>
<td>• Empathy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How have the trainings at El Sol contributed to your professional life?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Clearer understanding of role and responsibility</td>
</tr>
<tr>
<td>• Effective learning process</td>
</tr>
<tr>
<td>• Accountability for self</td>
</tr>
<tr>
<td>• More confidence</td>
</tr>
<tr>
<td>• More defined purpose</td>
</tr>
<tr>
<td>• Understanding the health care system and how to navigate it</td>
</tr>
<tr>
<td>• Using emotional intelligence in daily interactions</td>
</tr>
<tr>
<td>• Processing and self-reflection</td>
</tr>
<tr>
<td>• Resilience</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How does being a trained CHW enhance your own skills and life?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Feel connected to the community</td>
</tr>
<tr>
<td>• More organized</td>
</tr>
<tr>
<td>• Better time management skills</td>
</tr>
<tr>
<td>• Serving the community with confidence</td>
</tr>
<tr>
<td>• Enhanced knowledge</td>
</tr>
<tr>
<td>• Building up the community while building myself</td>
</tr>
<tr>
<td>• Self-motivated</td>
</tr>
<tr>
<td>• Public speaking</td>
</tr>
<tr>
<td>• Communication styles</td>
</tr>
</tbody>
</table>

There was a statistically significant difference between pre and post-test results in all modules and units (p=0.01.)

The increase in knowledge was substantial.

Overall, participants indicated an increased ability to connect people to information and resources in communities served. They gained knowledge, skills, tools, and resources to be applied to job (specifically mentioned: cultural competency, case study skills, organizational skills, workload prioritization, effective connections with community members, and roles and boundaries of CHWs/Ps). Trainings provided a good introduction and foundation of knowledge and skills for newer CHWs/Ps. Additionally, trainings provided helpful, useful, important, relevant, current, and applicable information and materials for on and off the job. Format of trainings was easy and understandable and on-line classes were enjoyable and convenient. Participants also experienced an increased knowledge of specific health issues faced by communities served.
El Sol’s CHW/P Training Center continues to enhance the workforce of CHWs/Ps. The CHW/P model strongly emphasizes engagement of people with lived experience in the communities they serve, and with a skill set that includes, but goes beyond services to individuals to identify and explore strategies to address drivers of poor health at the neighborhood and community level.

El Sol will continue developing and implementing trainings and building capacity to strengthen CHWs/Ps to serve as catalysts for change through a holistic transformative learning approach.