



**Building Healthy  
Communities**

[mhpsalud.org](http://mhpsalud.org)

# **Building & Sustaining Community Health Worker Programs in Health Centers**

# Facilitators



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# OUR PURPOSE

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MHP Salud embraces the strengths of our communities to support more individuals and families to live full, healthy lives.

Deeply embedded in the communities we serve, MHP Salud works to develop trust among our neighbors, understanding that it's up to all of us to create a strong, healthy foundation for today ... and tomorrow. Leading the Community Health Worker model, we believe in serving communities in which we live, work and play and we believe stronger tomorrows come through stronger collaboration.

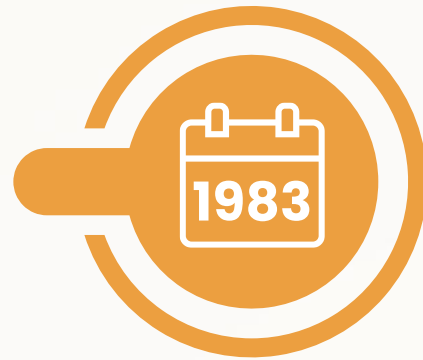
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# OUR LEGACY

# OUR IMPACT

Founded by Catholic sisters in Michigan to increase health care access for Migratory and Seasonal Agricultural farmworkers.



Began expanding to serve the Rio Grande Valley, reaching underserved individuals and families in isolated border communities and colonias.



Began evolving and growing to meet community needs, offering additional services to help older adults and families.



Launched national training and technical assistance to support health centers, community-based organizations and others, strengthening and growing the CHW profession while improving care to the underserved.



Expanded into Florida and developed the state's first certified CHW certification and apprenticeship program, training and equipping the next generation of CHWs to serve our communities.



**123,000**

Individuals reached annually

**7,000+**

Participants find hope and access to mental health and healthcare, nutrition, parenting education and support, older adult well-being and connections, *and more*



**50+**

Training and technical assistance sessions impacted hundreds of health centers and organizations



Nearly **100**

Community Health Workers trained through the certification and apprenticeship program



# A Four-Session Small Group Training

**Tues, 1/13/2026**

**Session 1:**

Groundwork for  
Success: Understanding  
the Community Health  
Worker Role in Health  
Centers

**Tues, 1/27/2026**

**Session 2:**

Building Stronger Teams:  
Community Health  
Worker Collaboration,  
Role Alignment &  
Workflow Design

**Tues, 2/4/2026**

**Session 3:**

Workforce Recruitment  
and Retention Strategies

**Tues, 3/10/2026**

**Session 4:**

Sustaining and Growing  
Your Community Health  
Worker Program: Workforce  
Well-Being & Long-Term  
Program Development



**YOU ARE  
HERE**

# Small Group Training Expectations

## Attendance:

- We kindly ask that you attend all four sessions.
- If you can't make it, please invite a colleague from your health center to join in your place, as it's important that everyone has a voice.

## Engagement:

- Be present and engage actively; *your insight matters!*
- Please keep your cameras on to foster a sense of connection.
- Feel free to ask questions and participate through chat, by raising your hand, or unmuting to share your thoughts.
- Let's respect and support one another throughout our discussions.

**Thank you for being a part of this small group learning experience!**

# Objectives

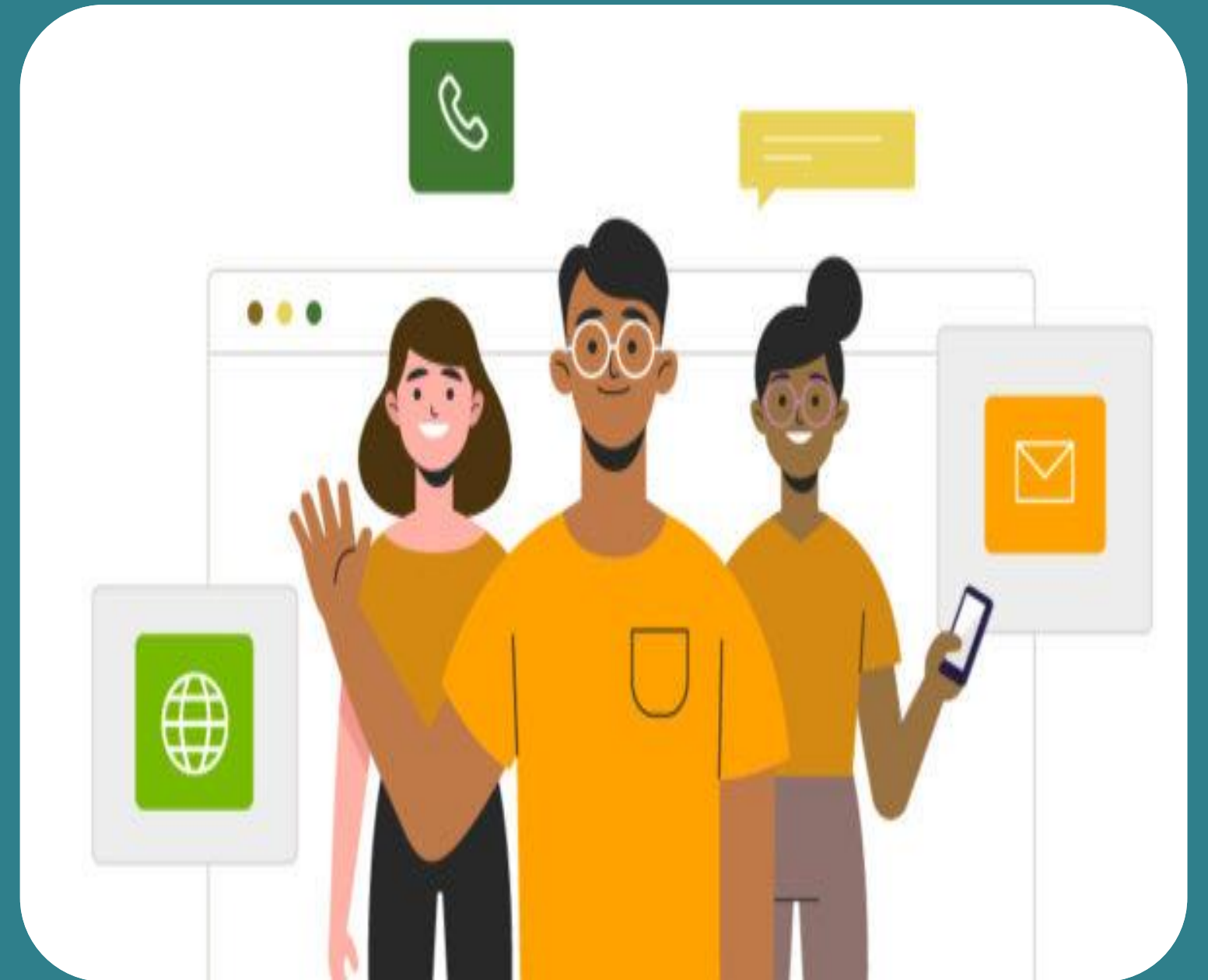
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By the end of this session, participants will be able to:

- ❖ **Objective 1:** Define and understand the Community Health Worker (CHW) role and purpose on a care team.
- ❖ **Objective 2:** Explore and identify workflow approaches that align with health center teams.
- ❖ **Objective 3:** Identify effective communication strategies that support Community Health Workers integration into care teams.

# Dinamica

What words come to mind when you think of a Community Health Worker?





## Integrating Community Health Workers to Build Stronger Teams

Healthcare workflows define how work moves across people, roles, and systems

# A Closer look at Common Community Health Worker Program Models

## Stand-alone programs

- Programs consist mainly of CHW-only activities

## CHWs as part of an integrated health care team

- Health intervention programs (trying to change health outcomes)

- What type of Community Health Worker Program does your health Center operate?
- Or are you exploring integrating a CHW Program ?
- Do you need support starting or strengthening your CHW program?



# Implementing CHW Integration

## 1. Assess Needs

Identify patient population needs and workflow gaps

## 2. Define Roles

Establish clear CHW responsibilities and scope

## 3. Train Team

Provide CHW training and clinical team orientation

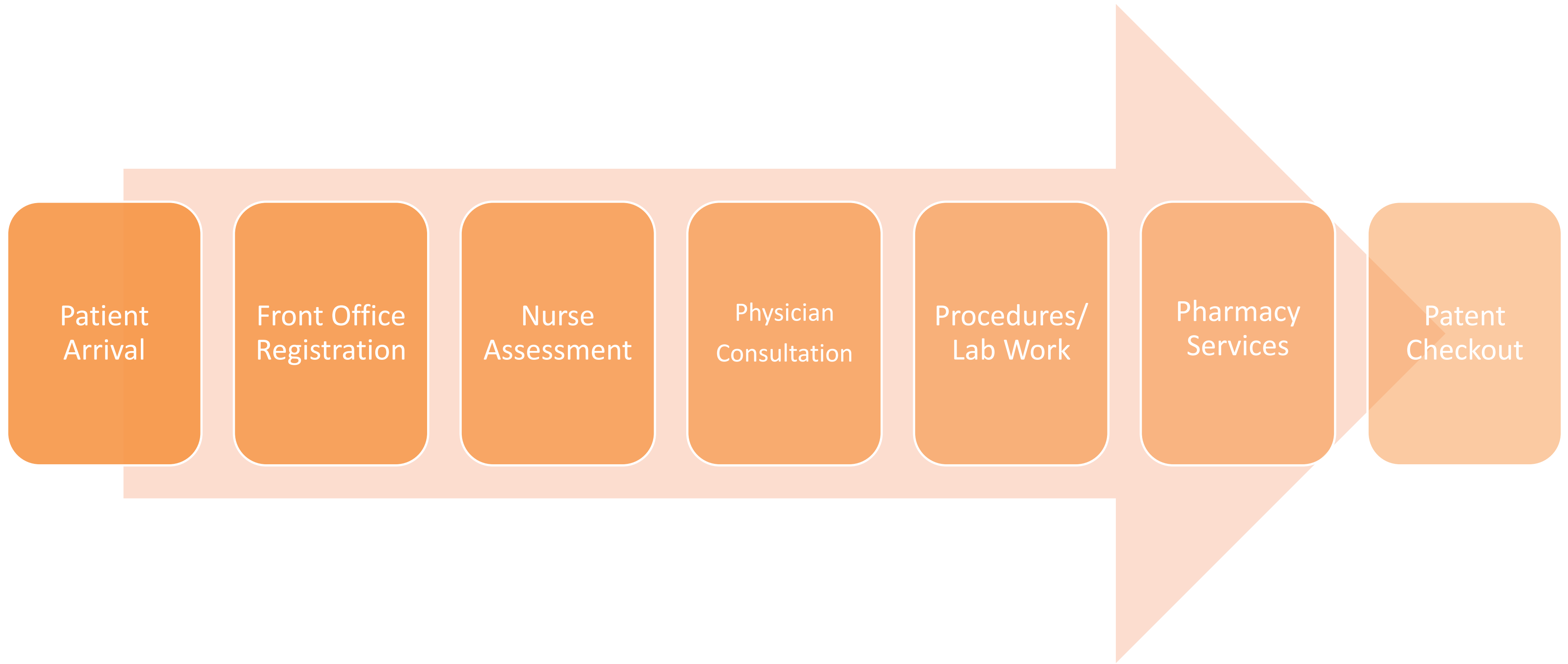
## 4. Integrate Systems

Connect CHW activities with EHR and workflows

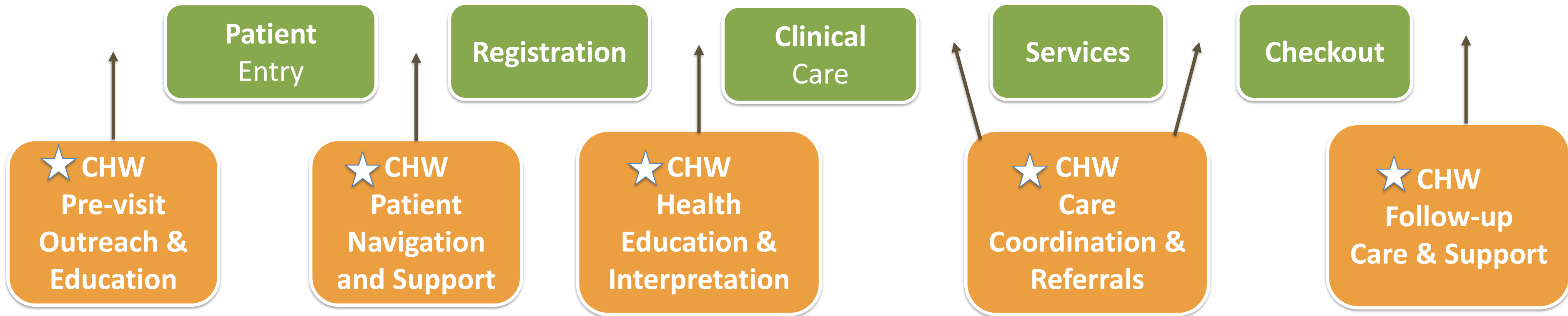
## 5. Monitor & Evaluate

Track outcomes and adjust processes

# Traditional Healthcare Workflow



# CHW Integration Points in Healthcare Workflow



★ = CHW Touchpoint: Community Health Workers support patients at key stages throughout their care journey

# CHW Roles at Each Touchpoint

## Pre-Visit

- Appointment reminders & scheduling support
- Pre-visit health education
- Insurance & documentation assistance
- Transportation coordination

## During Visit

- Patient navigation & check-in support
- Language interpretation & mediation
- Health literacy support
- Care coordination with clinical team

## Post-Visit

- Follow-up calls & medication adherence
- Home visits & health coaching
- Community resource referrals
- Social and health support services

# Benefits of CHW Integration

## Patient-Directed Benefits

- ✓ Improved access to care
- ✓ Better health terminology understanding
- ✓ Enhanced patient satisfaction
- ✓ Reduced barriers to care

## Health Center Benefits

- ✓ Improved patient outcomes
- ✓ Reduced no-show rates
- ✓ Better care coordination
- ✓ Enhanced team efficiency
- ✓ Stronger community connections

Community Health Worker outcomes demonstrate measurable return on investment and improved health system performance.



## Community Health Workers

CHWs are most effective when their role is clearly defined, respected, and integrated into workflows—not added as an afterthought.

# Health Center Roles on a care team

*CHWs complement members of their care team they do not replace them*



## CHW Non-clinical role

- Reinforces care plans and follow-up
- Identifies barriers
- Provides education and coaching
- Connects to community resources
- Ongoing engagement and trust



## Social Worker / Case Manager

- Clinically trained, systems-focused
- Crisis intervention and complex cases
- Psychosocial assessments and counseling
- Handles high-risk or mandated services



## Clinical Staff (RN, MA, Provider)

- Licensed/clinical roles
- Creates and modifies care plans
- Diagnoses and treats conditions
- Provides clinical education and medical advice
- Orders tests, medications, procedures

# Examples of Staff overlap interactions



A nurse and CHW both call the patient for appointment reminders, leading to confusion



A social worker discusses housing options, while the CHW provides different guidance due to lack of coordination



A provider refers a patient to case management, but the CHW is not included for follow-up support



A CHW is asked to complete clinical assessments instead of education and navigation

# Example of a Visual Healthcare Workflow

Work with your interdisciplinary team to map the current care process for your target population.

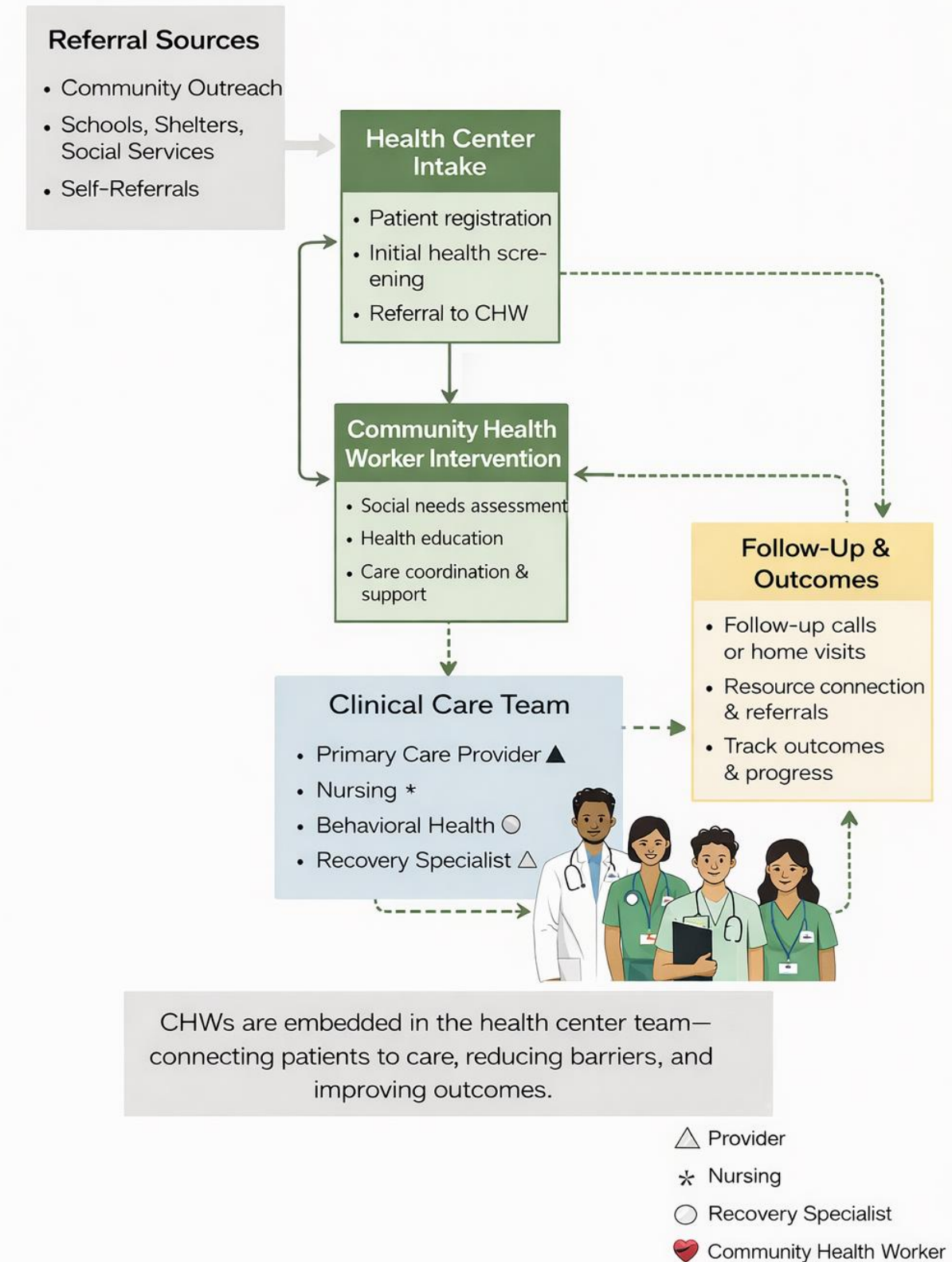
For Each Step, Identify:

- What happens? (Current process)
- Who is involved? (Roles responsible)
- How is it documented? (EHR, forms, notes)
- What can be improved? (Gaps & opportunities)

Helpful Tips

- Gather existing policies, protocols, and procedures
- Map using whiteboards, sticky notes, or poster paper
- Expect it to be messy at first—refine together
- Make sure all voices are heard

## Health Center Program

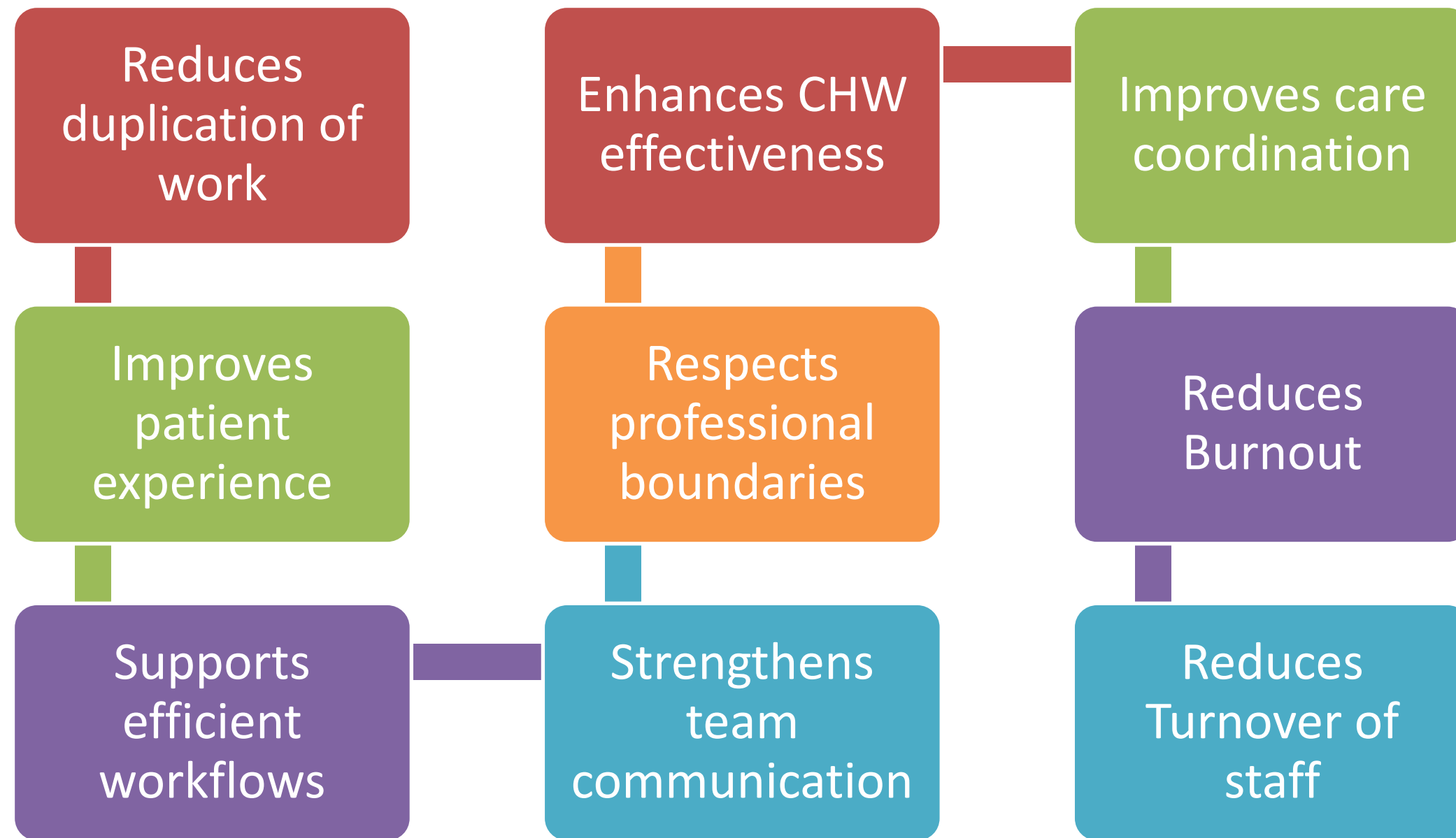




## Effective Communication

**Strong teams are built when workflows support communication, accountability, and collaboration**

# Benefits of Clear Communication in Care Teams



**Clear workflow helps teams work more efficiently, communicate better, and deliver coordinated, patient-directed care.**

# Practical Communication Strategies

## Team Huddles

- Brief (5–10 minutes) Use plain language (avoid clinical jargon)
- Include and encourage the CHW's perspective
- Share key patient barriers and priorities
- Use closed-loop communication (“I heard you say...”)

## Warm Handoffs

- Introduce the CHW during or immediately after the visit
- Explain the CHW role to the patient and team

## Shared Documentation

- CHW notes visible in the Electronic Health Records
- Clear handoff notes between roles
- Standard operating procedures and Visuals



# Exploring CHW Integration in Health Center Workflows

## *Key Principle:*

*CHWs should be embedded where decisions happen, not just after problems occur.*

**Purpose:** Identify where Community Health Workers (CHWs) fit into care team workflows and how communication supports care coordination.

### Heights Health Center

A rural health center serves a large geographic area where many residents are uninsured, have limited transportation, and delay care due to cost concerns.

Community members often rely on seasonal work, have limited internet access, and are unfamiliar with available health center services or financial assistance programs.

The health center has noticed:

High numbers of uninsured patients using the emergency room for non-emergency care

Missed appointments due to transportation and communication barriers

Incomplete financial assistance and insurance applications

Limited follow-up after referrals

### Health Center Needs

The health center has noticed:

- High numbers of uninsured patients using the emergency room for non-emergency care
- Missed appointments due to transportation and communication barriers
- Incomplete financial assistance and insurance applications
- Limited follow-up after referrals

To address these challenges, the health center plans to expand community-based outreach and enrollment support using Community Health Workers (CHWs).

# Exploring CHW Integration in Health Center Workflows

## *Key Principle:*

*CHWs should be embedded where decisions happen, not just after problems occur.*

**Purpose:** Identify where Community Health Workers (CHWs) fit into care team workflows and how communication supports care coordination.

## Group Task

Describe the health centers need **and** outline why a clearly defined workflow—with a specific role for CHWs—is necessary for this program to succeed.

As a group, consider:

- Where CHWs should be placed in the workflow (outreach, intake, enrollment, follow-up)
- Which team members CHWs must communicate with and when
- What information needs to be shared to support care coordination
- What risks exist if CHW roles and handoffs are not clearly defined

## STEP 2: Workflow Touchpoints & Team Role

Workflow Stage	What service is being provided?	Who Is Involved?	What Does the CHW Do?	How Is Information Shared?
Pre-Visit Planning	Intake	MA, Nurse, Care Coordinator	Identify social needs, flag barriers	CHW notes shared in EHR or huddle
Patient Check-In				
Clinical Visit				
Referrals				
Post-Visit Follow-Up				

# Share Your Key takeaways!



Share something that stood out that you can implement moving forward?



**Questions?**

# Free Resources for CHWs and Health Centers

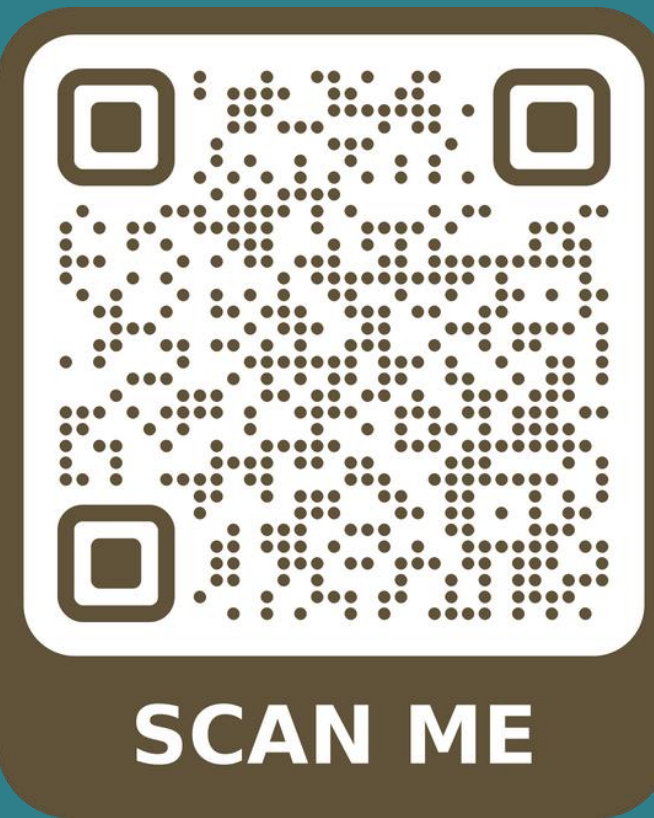
[mhspalud.org/online-resources](https://mhspalud.org/online-resources)

## CHWs in Action: Building Community Connections



Published On: January 3, 2025

"This shows how we are all connected by having similar life or work experiences. It does not matter how far we live from each other; we are still connected in some form. It also shows a common denominator, which is the willingness to help others ... the fact that we are willing to help others can become a positive life changer for someone in need." — Monica Alvarez, CHW, MHP Salud, on using her favorite Dinámica, "Unity Web."



Impact Evaluation Study by MHP Salud  
August 2024



Published On: October 18, 2024

A two-part article series that explores a CHW-driven community initiatives strategic response to identified mental health challenges that impact MSAWS  
**Person-Centered Mental Health Awareness**

# HRSA NTTAP

MHP Salud is a HRSA-funded National Training & Technical Assistance Partner (NTTAP) and Health Center Resource Clearinghouse TA partner.

Through this work, MHP Salud provides training and technical assistance to FQHCs and look-alike programs to build or enhance Community Health Worker (CHW) programs to better serve Migratory and Seasonal Agricultural Workers.

**For training or technical assistance, please contact: [nttap@mhpsalud.org](mailto:nttap@mhpsalud.org)**

*This webinar is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of awards totaling \$678,959 with 0% financed with non-government sources. The contents are those of the authors and do not necessarily represent the official views of, nor an endorsement by, HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).*

# Thank you!

## Connect with us:

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