

Community Health Worker: Tasks in Primary Care

NOTE: This is not an exhaustive list, but is meant as a guide for program implementation

1. Application assistance, resource connection, and follow-up as needed:

- a. Refer to Medicaid enrollment assisters
- b. Electronic Health Record patient chart enrollment (“MyChart”)
- c. Patient Screenings: Social Determinants of Health, Depression
- d. Direct connection to primary care: appointments, providers
- e. Financial Assistance
- f. Local “service clubs” for vision and hearing assistance (ex: Lions Club)
- g. Tobacco Cessation screening and referral
- h. Health care and social service access / system navigation
- i. Medication Assistance Programs
- j. Dental resources and services
- k. Referral to community resources, such as clothing, food supplementation, housing, immigration and legal assistance (limited)
- l. City and county recreation opportunities

2. Transportation assistance / resources

- a. Scheduling/arranging transportation
 - i. **NOTE:** In general, CHW staff should NOT transport clients in personal vehicles. If they are expected to do so, there needs to be an agency policy in place providing guidance and support, as well as mileage and compensation.

3. Interpretation

- a. Scheduling appointments and follow-up on no-shows to determine barriers to attendance
- b. Asking provider limited questions on behalf of the parent/patient due to language barrier
- c. **NOTE:** Unless specifically trained as a medical interpreter, bilingual CHWs should not be expected to act as an interpreter during health-related appointments.

4. Chronic Disease Self-management (requires additional, topic-specific training)

- a. Nutrition and weight self-management
- b. Chronic disease self-management (Diabetes, Uncontrolled Lipids, High Blood Pressure, etc.)
 - i. Healthy Eating, Active Living groups (such as Living Well with Chronic Disease, Tomando Control de su Salud/Diabetes)
- c. **NOTE:** Self-Management includes:
 - i. Setting SMART goals
 - ii. Learning to make healthier choices
 - iii. Plate method
 - iv. Food label reading
 - v. Ways to increase daily activity
 - vi. Practicing self-care

Community Health Workers DO NOT:

1. Medically assess or diagnose; interpret lab/test results; make medical/mental health recommendations
2. Provide any medical or mental health “therapy”, “counseling”, or “therapeutic intervention”

Community Health Workers DO:

1. Walk alongside the client to provide peer support and resources connection
2. Increase communication and trust between the care team and the client/family
3. Strive to always leave the client with three essential things: **that the client was seen, heard, and respected**