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SUBSTITUTE HOUSE BILL 2436

State of Washington 65th Legislature 2018 Regular Session

& Health Wellness (originally sponsored House Care Representatives Robinson, Riccelli, Pollet, Ormsby, and Santos)

READ FIRST TIME 01/26/18.

AN ACT Relating to defining community health workers and their 1 2 roles; adding a new section to chapter 43.70 RCW; and creating a new

section. 3

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BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON: 4

NEW SECTION. 5 **Sec. 1.** (1) The legislature finds that:

- 6 (a) The community health worker task force was convened by the 7 healthier Washington initiative in 2015 to develop policy and system change recommendations related to the community health worker 8 The task force considered the continuum of community 9 workforce. health workers, from volunteers, to generalists who support the 10 health and well-being of individuals and communities, to those who 11 12 work in specialized roles.
 - (b) The task force issued a report with recommendations related to: The definition, roles, skills, and qualities of community health workers; community health worker training and education; and finance related matters.
 - (c) The nine accountable communities of health across the state as part of the medicaid transformation demonstration are all pursuing projects that incorporate community health workers, in addition to many other programs utilizing community health workers across the state.

p. 1 SHB 2436 1 (2) Therefore the legislature intends to create consistency 2 across the state by defining community health workers and their roles 3 as recommended by the task force's report.

NEW SECTION. Sec. 2. A new section is added to chapter 43.70 RCW to read as follows:

- (1) A "community health worker" means a frontline public health worker who is a trusted member of or who has a uniquely close understanding of the community served. This trusting relationship enables the worker to serve as a liaison, link, or intermediary between health and social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.
- 13 (2) A "frontline public health worker" means someone who works to 14 improve community health or the health of populations.
- 15 (3) The roles and activities of a community health worker may 16 include:
 - (a) Cultural mediation among individuals, communities, and health and social service systems. Cultural mediation includes educating individuals and communities about navigating health and social service systems and educating systems about community perspectives and cultural norms to build health literacy and cross-cultural communication.
 - (b) Providing culturally appropriate health education and information including conducting health promotion and disease prevention education in a manner that matches linguistic and cultural needs of participants or a community, providing necessary information to understand and prevent diseases, and to help people manage health conditions.
 - (c) Conducting outreach including finding and recruiting individuals that would benefit from services, following up on health and social service encounters with individuals, families, and community groups and helping problem solve any barriers, conducting home visits to provide education, assessment, and social support, and presenting information at agency and community events.
 - (d) Care coordination, case management, and system navigation including participating in making referrals, care coordination, and case management with an emphasis on connecting individuals to their medical home or primary care provider, connecting individuals to community resources and services, documenting and tracking individual

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and population level data, and informing decision makers and systems about community assets and challenges.

- (e) Providing coaching and social support including providing support and informal coaching to individuals, motivating and encouraging people to obtain insurance coverage, care, and other services when applicable, supporting self-management of disease prevention and management of health conditions within the parameters set by the organization and supervisor, and planning and leading support groups.
- (f) Advocating for individuals and communities, including advocating for individuals as well as for the basic needs and perspectives of communities, which may include participating in policy advocacy.
- (g) Building individual and community capacity including building capacity of individuals to manage their health and well-being by teaching skills, expanding the individual's knowledge and supporting their empowerment to participate in individual, family, community, and systems improvement, strengthening a sense of community and social connection, identifying and coordinating the use of individual and community assets and strengths, defining community development pathways, strengthening and diversifying leadership, increasing participation in decision making, and training and building individual capacity with community health worker peers and among groups of community health workers to improve individual and community health.
- (h) Implementing individual and community assessments including participating in design, implementation, and interpretation of individual-level assessments, such as home environmental assessments, and community-level assessments, such as surveys of community assets and challenges.
- (i) Participating in evaluation and research including evaluating community health worker services and programs, identifying and engaging research partners, supporting community consent processes, identifying priority issues and evaluation and research questions, developing evaluation and research design and methods, data collection, and interpretation, reviewing findings with the community, and engaging stakeholders to take action on findings.
- 38 (4) By July 1, 2019, the department shall adopt rules defining 39 the direct services that community health workers may provide.

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(5) By July 1, 2019, any public or private entity that employs a community health worker shall perform a fingerprint-based background check through the Washington state patrol for all community health workers performing the roles described in subsections (3) and (4) of this section. A background check for each community health worker must be completed prior to the community health worker performing the roles described in subsections (3) and (4) of this section on behalf of the entity.

(6) By October 1, 2018, to the extent of the department's existing authority the department shall begin to implement the recommendations of the community health worker task force related to training and education. The department shall report to the legislature on the progress of implementation no later than July 1, 2020.

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