Frequently Asked Questions

The following questions were unable to be answered during the webinar due to time constraints. If you have additional questions for the presenters, feel free to contact them directly.

Q: How were you able to get a group homeless women to be a focus group?

Kimberly/HSHS St. John’s: There is a non-profit organization called Mercy Communities located within Enos Park. We partnered with them to learn about their clients’ specific access issues.

Q: Is the Community Health Worker a nurse, MSW?

Tracey/ Southern Illinois University School of Medicine: We do not require a specific degree or license for a CHW. One of our CHWs was a social worker, one did not have a degree, and one was working on her degree in psychology. We hire more based on their ability to be patient centered and commitment to the client and lived experience. We have found that degree doesn’t equal outcomes and that the person’s personality and ability to establish trust are the essential components.

Q: What is a Healthcare Learner?

Tracey/ Southern Illinois University School of Medicine: A healthcare learner is any person who has not graduated their current program of study- for us this includes medical students, nursing students, nurse practitioner students, physical assistant students, business students, social work students, pharmacy students.

Q: How many Community Health Workers do you have?

Kimberly/HSHS St. John: Two: 1.0 FTE and 0.5 FTE

Q: How is the CHW time balanced between internal coordination and external work?

Tracey/ Southern Illinois University School of Medicine: I am not sure how you are defining internal coordination versus external work so I will attempt to answer but please send me an email if I am off base answering your question.

We have attempted to keep paperwork to a minimum. When you look at programs and engagement research-excessive documentation decreased engagement so we have focused on documenting the essentials only – this allows the CHWs to focus on their work with the clients.

Community development work is done by a CHW who is hired .3FTE during the summer who solely focuses on this- she lives in the neighborhood and sets up the direction for the year for community programs and lets the
residents take the lead to make sure these activities happen. As Director I present, attend meeting, do contract negotiations, and data analysis – this allows the CHW to focus on client engagement.

Q: How were the families "enrolled" in Community Health Care worker program? Advertised in community, at dr. office, etc.?

**Kimberly/HSHS St. John’s:** In the beginning we primarily advertised through flyers the Neighborhood Association and neighborhood events. We spent a large part of the two quarters embedding the CHW into the community through community engagement initiatives such as attending the Neighborhood Association meetings, volunteering at the weekly church dinner and other church activities, volunteering at neighborhood activities, hosting an after-school family health fair at the elementary school in the neighborhood, etc.

As a result of the focus group outcomes, we formed an Advisory Council comprised of neighborhood residents and at least one person from each focus group. They routinely provided names of residents they knew would benefit from the program. We also formed a Providers Council made up of social service and healthcare agencies located within Enos Park boundaries. Through that council we established a referral pattern between agencies and to our CHW program. Lastly, as word of mouth has increased we have a lot of clients who self-refer into the program. There is no paid advertising and we do not advertise through doctors’ offices.