

Tennessee Community Health Worker Survey

The purpose of this survey is to inform activities of the Community Health Worker Collaborative and to determine the needs of Tennessee Community Health Workers (CHWs) and the organizations that use them.

COMMUNITY HEALTH WORKERS (CHWs) assist individuals and communities to adopt positive behaviors, conduct outreach to implement programs in the community that promote, maintain, and improve individual and community well-being. These trusted, well-informed individuals may provide information on available resources, provide social support and informal counseling, advocate for individuals and community needs, and provide basic services. They may work in clinics, community agencies, schools, and other settings.^{1, 2}

Please Note: All responses will be reported in aggregate; no individual responses or personal contact information will be shared. Any contact information provided will be used to share information regarding Community Health Workers only.

1 What is your organization's name?

2 Is your organization a(n)

- Clinic
- Community Based Organization
- Early Intervention Program
- Hospital or Medical Center
- School
- State-wide Organization
- University
- Government
- Other

If other, please specify:

For the following questions, Community Health Worker(s) refers to paid or unpaid individuals who are trusted members of and/or have a close understanding of the community they serve.

3 Please select the option(s) that apply to your organization.

- My organization currently uses CHWs
 - My organization currently trains CHWs
 - My organization does not currently use or train CHWs, nor do we plan to in the future
 - My organization does not currently use or train CHWs, but we plan to in the future
- (Check all that apply)

4 What county/counties does your organization's Community Health Workers serve?

- 5 The population(s) my organization's Community Health Workers serve include:
- Children/Adolescents
 - Families
 - Homeless
 - Immigrants
 - Incarcerated or formerly incarcerated
 - LGBTQI
 - Men
 - Racial/ethnic minorities
 - People with disabilities
 - Populations challenged by poverty
 - Pregnant women/new mothers
 - Refugees
 - Seniors/older adults
 - Uninsured
 - Women
 - Other
- (Check all that apply)

If other, please specify other population(s) served:

- 6 Please select the category that best represents you
- I am a Community Health Worker
 - I am a Supervisor of Community Health Worker(s)
 - I hire Community Health Worker(s) - paid or unpaid
 - Other role within organization
- (Check all that apply)

If other, please indicate your role within organization.

- 7 Within my organization, Community Health Workers are called?
- Coordinators (i.e., care or prevention)
 - Case Managers
 - Community Health Workers
 - Community Organizers
 - Health Advisors
 - Educators (i.e., health or parent)
 - Healthy Living Directors
 - Lifestyle Coaches
 - Long Term Care Ombudsmen
 - Peer (i.e., counselors or health providers)
 - Promotor/Promotoras
 - Other
- (Check all that apply)

If other, please specify the other Community Health Worker title(s) used by your organization:

- 8 My organization has used Community Health Workers for
- Less than 1 yr.
 - 1 - 2 yrs.
 - 3 - 5 yrs.
 - 6 - 8 yrs.
 - More than 8 yrs.

- 9 What specific services do the Community Health Workers at your organization provide?
- Advocacy
 - Capacity building
 - Community organizing
 - Case management (assessments, client/case recruitment, home visits, referral follow-ups, risk identification)
 - Direct services (clinical, first aid, health screenings, etc.)
 - Navigation (healthcare insurance enrollment, referrals, etc.)
 - Peer education/mentoring
 - Transportation to clients
 - Social support groups
 - Translation/Interpretation
 - Other
- (Check all that apply)

If other, please specify other service(s) offered by Community Health Workers.

- 10 Are your organization's Community Health Workers paid?
- Yes, paid
 - No, they are unpaid volunteers
 - Other

If other, please specify

- 11 How many Full Time Equivalent (FTEs) Community Health Worker positions are part of your organization? (paid or unpaid)
- Less than 1.0 FTE
 - 1-2 FTEs
 - 3-5 FTEs
 - 6-8 FTEs
 - More than 8 FTEs
 - Unsure

- 12 What funding sources support your organization's Community Health Worker positions?
- Contracts
 - Donations
 - Grants
 - Institutional funds
 - Insurance or TennCare reimbursement
 - Patient billing (out-of-pocket cost)
 - Other
- (Check all that apply)

If other, please specify other funding type:

- 13 On average, how many hours does a Community Health Worker in your organization work per week?
- Less than 5 hrs.
 - 5 - 10 hrs.
 - 11 - 20 hrs.
 - 21 - 40 hrs.
 - Other

If other, please specify.

14 What type of formal education or training does your organization require for Community Health Workers?

- No formal education required
 - GED/HS diploma
 - Vocational/tech training
 - College certificate
 - Associate degree
 - Bachelor degree
 - Other
- (Check all that apply)

If other, please specify.

15 Do your organization's Community Health Workers receive training specific to their role?

- Yes
- No
- Unsure

16 How does your organization benefit from using Community Health Workers?

17 Would you or your organization be interested in presenting information about your Community Health Worker program at an upcoming Community Health Worker Collaborative meeting?

- Yes
 - No
 - Unsure
- (Technical capabilities available for remote partners.)

If yes, please provide name, contact number, and email.

18 What is the main reason that your organization does not currently use Community Health Workers (CHWs)?

- Do not have funding for CHW program
 - Cannot be reimbursed for CHW services
 - Lack of leadership support (i.e., not beneficial or not needed to meet organizational needs)
 - Do not have organizational infrastructure needed to support a CHW program
 - Other
- (Check all that apply)

If other, please specify reason organization does not use CHWs

19. Please answer "Yes," "No," or "Don't Know" to the following statements about Community Health Workers (CHWs) in Tennessee (TN):

- | | Yes | No | Don't Know |
|--|-----------------------|-----------------------|-----------------------|
| 19a The CHW role/experience provides a pathway to other job opportunities in TN. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 19b In general, more education is needed about the CHW role in TN. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 19c A certification program is needed for CHWs in TN. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 19d CHWs are recognized as important roles in TN. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

- 20 A statewide organization that offers training and certification for Community Health Workers (CHWs), provides opportunities for networking and advocacy, and promotes the use of CHWs, would be helpful to your organization and/or its CHWs.
- Strongly agree
 Agree
 Unsure
 Disagree
 Strongly disagree

Please explain why or why not this type of organization would be helpful.

- 20a. If such a statewide organization existed in TN, where should it be based?
- A non-profit organization
 A department of state government
 A state college or university
 Other

If other, please specify other base

- 20b. Would you or your organization be interested in supporting its Community Health Workers (CHWs) involvement in a statewide CHWs organization?
- Yes
 No
 Unsure
 Not Applicable

- 21 Would you or your organization be interested in joining the Community Health Worker Collaborative (a multi-disciplinary task force focused on CHWs)?
- Yes
 No
 Unsure
 (Technical capabilities available for remote partners.)

Please provide name, contact number and/or email to join Community Health Worker Collaborative.

(Skip if contact information was already entered above.)

- 22 Do you know additional contacts who should receive this survey?
- Yes
 No

Please list name and email additional survey contact(s).

(Please separate multiple contacts with semicolon.
Example: John Doe - johndoe@gmail.com; Jane Monroe - janemonroe@gmail.com)

Survey developed by: Meharry-Vanderbilt Alliance and Siloam Family Health Center

Some questions adapted from: Massachusetts Department of Public Health and the Arkansas Community Health Worker survey

1) Community Health Workers. 2017. Bureau of Labor Statistics. Retrieved Dec 8, 2017 from <https://www.bls.gov/oes/current/oes211094.htm>.

2) Community Health Workers. 2017. American Public Health Association. Retrieved Dec 8, 2017 from <https://www.apha.org/apha-communities/member-sections/community-health-workers>.

23 Please add any additional thoughts or comments regarding CHWs and/or this survey here.
