



Community Health Worker  
Collaborative of South Dakota

# 2021 - 2023 Strategic Plan

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## TABLE OF CONTENTS

<b>INTRODUCTION.....</b>	<b>3</b>
Community Health Worker Collaborative of South Dakota .....	3
CHWSD Advisory Board.....	3
2021 – 2023 Goals .....	3
<b>SOUTH DAKOTA SUMMARY .....</b>	<b>4</b>
Introduction to Community Health Workers .....	4
Introduction to Community Health Representatives.....	4
CHWs and CHRs in South Dakota .....	4
<b>SUPPORTIVE FINDINGS .....</b>	<b>5</b>
CHW Associations and Organizations Environmental Scan Findings.....	5
CHW Associations and Organizations Interview and Survey Findings.....	5
CHW Workforce Survey Findings .....	6
<b>VIRTUAL STRATEGIC PLANNING PROCESS.....</b>	<b>7</b>
<b>2021 – 2023 GOALS, OBJECTIVES, AND STRATEGIES .....</b>	<b>7</b>
Goal A: Awareness .....	7
Goal B: Training .....	8
Goal C: Workforce Development.....	9
Goal D: Reimbursement.....	10
Goal E: Career Ladder / Lattice .....	11

## INTRODUCTION

**The Community Health Worker Collaborative of South Dakota (CHWSD) Strategic Plan** is a collaborative effort of state and local partners working to develop and sustain the Community Health Worker (CHW) profession in South Dakota. Throughout 2020, the CHWSD and partners worked to better understand the CHW profession, workforce priorities, and sustainability efforts. This background work directly influenced the development of this strategic plan.

## COMMUNITY HEALTH WORKER COLLABORATIVE OF SOUTH DAKOTA

The CHWSD is guided by the South Dakota Department of Health (SD DOH), Office of Chronic Disease Prevention and Health Promotion – specifically the Diabetes Prevention and Control and Heart Disease and Stroke Prevention Programs.

The CHWSD was developed in early 2020 to lead the development of a CHW workforce in South Dakota. The mission of the CHWSD is to promote, support, and sustain the CHW profession in South Dakota. The vision of the CHWSD is a well-established statewide network of CHW professionals who provide a wide range of services for South Dakotans.

## CHWSD ADVISORY BOARD

The CHWSD Advisory Board is a standing committee to provide professional guidance to the CHWSD and SD DOH leadership. The CHWSD Advisory Board is comprised of 16 individuals who support various aspects of the CHW profession and workforce in South Dakota. CHWSD Advisory Board members assisted in the strategic planning process and provided input and feedback to develop the completed plan.

## 2021 – 2023 GOALS

The CHWSD Strategic Plan 2021 – 2023 focuses on five (5) goal areas to support the CHWSD’s mission and the development of a CHW workforce in South Dakota. The five (5) goal areas are:

- Awareness
- Training
- Workforce Development
- Reimbursement
- Career Ladder / Lattice

The goals, objectives, and strategies listed in this strategic plan were developed collaboratively by a diverse group of stakeholders who convened virtually via Zoom (due to COVID-19) on November 17, 2020. Additionally, stakeholders were able to provide additional feedback via email regarding draft goals, objectives, and strategies, with the CHWSD Advisory Board reviewing and finalizing the plan in early 2021.

## SOUTH DAKOTA SUMMARY

South Dakota is a geographically and demographically diverse state with a total land area of 77,116 square miles, making it the 17th largest state<sup>1</sup>. There are approximately 10 people per square mile<sup>2</sup>, with only five of the 66 counties having more than 30,000 people. Although rather large geographically, as of 2019, South Dakota is home only to an estimated 885,000 individuals, with the largest cities (Sioux Falls and Rapid City) having a population of just over 190,000 and 75,000 respectively, with a combined metro-area of around 350,000<sup>3</sup>.

The prevalence of health disparities is high in South Dakota, particularly related to chronic diseases and associated risk factors. This in turn can lead to poorly managed health, especially for individuals with chronic diseases. For South Dakota adults, 84% of the population older than 50 have at least one chronic condition, and an estimated one-third have more than one chronic condition<sup>4</sup>. Additionally, 65% of adults are considered overweight or obese, and only 18% meet the recommended amount for both aerobic and muscle strengthening activity<sup>5</sup>. Obesity is a complex health issue that is impacted by genetics, environment, and behavior. These risk factors have been shown to increase the likelihood of certain diseases like heart disease, diabetes, hypertension, stroke, cancers (endometrial, breast, and colon), and other health problems.

## INTRODUCTION TO COMMUNITY HEALTH WORKERS

When it comes to CHWs, South Dakota is relatively new to developing a formal CHW workforce. Many CHW and CHW-like positions have been established across South Dakota through private funding and grant funding, but, prior to April 2019, no formal CHW reimbursements were available.

In April 2019, the South Dakota Department of Social Services (SD DSS), Division of Medical Services announced that CHW services provided by a CHW agency enrolled with South Dakota Medicaid will be reimbursable. This change in reimbursement models through SD DSS opened the door for formal CHW programs to help South Dakotans better manage their health while working to prevent further health concerns.

The Community Health Worker Collaborative of South Dakota (CHWSD) has adopted the American Public Health Association's (APHA) definition of a Community Health Worker. A Community Health Worker (CHW) is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

## INTRODUCTION TO COMMUNITY HEALTH REPRESENTATIVES

South Dakota is home to nine (9) American Indian tribes. All nine (9) tribes have Community Health Representative (CHR) programs, with eight (8) of the nine (9) programs managed directly by the individual tribes. CHR is a term that is sometimes used interchangeably with the CHW term but is used specifically for tribal programs. Indian Health Service defines the Community Health Representative (CHR) Program as, "a unique concept for providing health care, health promotion, and disease prevention services. CHRs have demonstrated how they assist and connect with the community, and their work has become essential to the spectrum of Tribal community oriented primary health care services. CHRs are great advocates, in part, because they come from the communities they serve and have tribal cultural competence."<sup>6</sup>

## CHWS AND CHRS IN SOUTH DAKOTA

As of late 2020, there are approximately 90 CHWs or CHW-like positions in South Dakota. Of these 90 CHWs, approximately 85 are employed as CHRs within a tribal CHR program. Grants and/or organizational support primarily fund all CHW positions in South Dakota (outside of the CHR positions).

<sup>1</sup> United States Census Bureau. (2012). State area measurements and internal point coordinates.

<https://web.archive.org/web/20180316004512/https://www.census.gov/geo/reference/state-area.html>

<sup>2</sup> United States Census Bureau. (2019). QuickFacts South Dakota. <https://www.census.gov/quickfacts/SD>

<sup>3</sup> World Population Review. (2020). Population of counties in South Dakota. <https://worldpopulationreview.com/us-counties/states/sd>

<sup>4</sup> South Dakota Department of Health. (2016). Behavioral risk factor surveillance survey data. Pierre: South Dakota Department of Health, Office of Data and Health Statistics. <http://bit.ly/2AK8iXd>

<sup>5</sup> South Dakota Department of Health. (2020). Key data - Chronic disease infographic. <http://bit.ly/2AK8iXd>

<sup>6</sup> Indian Health Service. (2020) Community Health Representatives. <https://www.ihs.gov/chr/>

## SUPPORTIVE FINDINGS

To assist the CHWSD and key stakeholders in developing a relevant, comprehensive, and attainable strategic plan, preparation work was completed to better understand different aspects of the CHW profession, both locally in South Dakota, and on a more national level.

### CHW ASSOCIATIONS AND ORGANIZATIONS ENVIRONMENTAL SCAN FINDINGS

#### OVERVIEW

To assist the CHWSD in developing as an organization to support and sustain the CHW profession in South Dakota, a comprehensive environmental scan was conducted as part of the data collection and research phase of the CHWSD introduction. As the environmental scan was conducted specifically to guide the CHWSD and CHW Workforce in South Dakota, the document and the related content is specific to South Dakota.

#### DATA COLLECTION PROCESS

This environmental scan was conducted using information sourced from state associations'/organizations' websites, state department of health (or department of health equivalent) websites, as well as additional resources, as noted. Information regarding CHW wages (and number of CHWs in each state) was sourced from the U.S. Bureau of Labor Statistics Occupational Employment Statistics for Community Health Workers.

#### AREAS OF FOCUS

Various areas of focus were explored when examining CHW associations and organizations across the United States, including organizational information (organization type, website, funding sources, leadership structure, etc.), leadership overview information, and CHW wages information.

#### KEY FINDINGS

The CHW Associations and Organizations Environmental Scan Report identified nine (9) model states/organizations for the CHWSD to further connect with and interview to influence the development of the CHWSD and the CHW workforce in South Dakota. The nine (9) model states/organizations identified were: Arizona, Florida, Massachusetts, Minnesota, Nevada, New Mexico, Oregon, Texas, and the Indian Health Service Community Health Representative Program.

### CHW ASSOCIATIONS AND ORGANIZATIONS INTERVIEW AND SURVEY FINDINGS

#### OVERVIEW

To help the CHWSD better understand how other state associations and organizations began, sustain their services, and promote the CHW workforce within their state, the CHWSD connected with priority states identified in the CHW Associations and Organizations Environmental Scan for South Dakota report.

#### DATA COLLECTION PROCESS

All interviews were conducted via phone with the leadership of each state's association or organization. All states identified in the Environmental Scan for South Dakota were interviewed, except for Minnesota. The Minnesota Community Health Worker Alliance indicated that they were going through staffing changes and noted that most responses to the questions could be found on their website. Phone interviews were scheduled for 45 minutes to one hour.

#### INTERVIEW QUESTIONS

A list of over 20 questions was used as a guide when conducting each interview. Questions ranged from organizational questions to workforce questions to questions regarding CHW training and workforce development.



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## KEY FINDINGS

Findings varied based on each interview conducted, with the following themes being identified as common themes from more than one interview:

- Promoting relationship building amongst CHWs
- Utilizing dual titles to build the CHW workforce
- Utilizing the title “coalition” instead of “association” to encourage ally participation
- Recognizing the lack of recognition of the CHW profession
- Identifying concerns with the scope of work creep/CHWs replacing current positions
- Securing sustainable funding for CHWs and organization
- Developing/promoting professional development opportunities – such as an annual conference and/or CEU opportunities
- Including CHWs within the leadership board of the organization
- Utilizing CHW workforce to tackle specific projects or focus areas
- Developing a system to maintain a list of CHWs
- Recognizing and responding to challenges associated with communicating with CHWs
- Developing a certification process for CHWs

## CHW WORKFORCE SURVEY FINDINGS

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### OVERVIEW

The Community Health Worker Collaborative of South Dakota (CHWSD) launched a statewide workforce survey to better understand information about current Community Health Worker (CHW) and CHW-like programs in South Dakota, as well as information about organizations’ thoughts regarding future CHW programs. Some of the questions used within the survey were adapted from a previous set of workforce interview questions utilized by the South Dakota Department of Health in 2015 to interview key stakeholders regarding CHWs.

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### DATA COLLECTION PROCESS

A Survey Monkey survey link was sent to a various organizations across South Dakota, including, but not limited to, hospitals, medical clinics, tribal programs, behavioral health programs, etc.

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### SURVEY QUESTIONS

Survey logic was included within the survey, meaning if an organization indicated that they did not have a current CHW program, they were then advanced to respond to questions regarding a future CHW survey. If an organization indicated that they have a current CHW or CHW-like program, they then were asked questions about their current program, before being asked if there would be opportunities for additional CHW program(s). Organizations that responded yes were then also asked about a future CHW program.

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### KEY FINDINGS

The majority of respondents indicated not currently having a CHW or CHW-like program. Organizations also expressed interest in developing a CHW program. Responses regarding pay, training, and other relevant items related to CHW program development all aligned closely with other findings.

## VIRTUAL STRATEGIC PLANNING PROCESS

Due to the 2020 COVID-19 pandemic, an in-person strategic planning meeting was not possible. Instead, a virtual strategic planning meeting was held to allow individuals to participate safely. The meeting was held on November 17, 2020 via Zoom. The morning session featured a comprehensive overview of the CHWSD and supporting work. The afternoon session featured breakout sessions focused on each of the five (5) goal areas.

Following the virtual strategic planning meeting, all comments and feedback were collected and categorized according to the goal area. All individuals who participated in the virtual strategic planning were given the opportunity to review and provide comments or suggestions regarding the draft goals, objectives, and strategies prior to the CHWSD Advisory Board finalizing the strategic plan.

## 2021 – 2023 GOALS, OBJECTIVES, AND STRATEGIES

The CHWSD Strategic Plan 2021 – 2023 focuses on five (5) goal areas to support the CHWSD’s mission and the development of a CHW workforce in South Dakota. The five (5) goal areas are:

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### GOAL A: AWARENESS

**Introduce, summarize, and explain the CHW profession.**

#### OBJECTIVES

1. Increase the number of individuals who utilize and/or complete the CHW Planning and Assessment Toolkit to 100 by 2022 and 250 by 2023.
2. Host a CHWSD conference for CHWs and CHW allies in 2022.
3. Increase the number of CHWs and CHW allies who subscribe to CHWSD communications from 30 in 2020 to 100 in 2021 and 300 by 2023.
4. Create a CHWSD website by 2020.
5. Host 4 – 6 webinars to increase awareness of CHW services by 2023.
6. Transition 4 CHWSD Advisory Board positions to active CHWs by 2022.

#### STRATEGIES

1. Promote the CHW profession to a broad medical, behavioral health, dental health, and social services audience through conferences, webinars, and a quarterly newsletter.
2. Work with each of the nine (9) tribal CHR programs and other CHR programs to further promote the CHR profession and continue to collaborate to further the CHW profession in South Dakota.
3. Promote the CHW Planning and Assessment Toolkit utilizing the incentive of free CEUs and promotion of the toolkit through completion of a comprehensive marketing plan.
4. Maintain a one-stop information hub on the CHWSD website to include information for prospective and current CHWs as well as employers, allies, etc.
5. Define the value proposition of CHWs for the employer and the patient through quantitative and anecdotal evidence.
6. Develop and promote materials to compare the CHW profession, training, etc. to other health care-related professions to avoid misinformation and scope of work creep.
7. Develop a CHWSD Advisory Board to advise the CHWSD and assist in promoting the CHW profession.
8. Develop website content and marketing materials for patients and the general public on CHW services and benefits.
9. Promote CHWSD as the central hub for the CHW profession and allies in South Dakota by offering networking, marketing, continuing education, and overall CHW awareness.

## GOAL B: TRAINING

Promote current CHW training programs and assist organizations in developing additional training programs.

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### OBJECTIVES

1. Increase the number of certificate-level trained CHWs from 85 in 2021 to 95 by 2022 and 125 by 2023.
2. Increase the number of organizations offering certificate-level CHW training from 2 in 2021 to 3 by 2022 and 4 by 2023.
3. Train 25 certificate-level CHWs to offer additional evidence-based programs (National DPP, Better Choices, Better Health SD, etc.) by 2023.
4. Establish and maintain a library of CHW and chronic disease resources and promote use among partners and stakeholders by 2022.

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### STRATEGIES

1. Collaborate with the South Dakota Department of Social Services, Division of Medical Services (SD DSS, DMS) to review, audit, and provide guidance training programs to ensure each program provides evidence-based practice and promising practice training.
2. Continue to support and promote established CHW training programs in South Dakota while assisting organizations in developing CHW training programs and disease-specific training programs.
3. Work with providers to promote continuing education units including but not limited to chronic disease management, behavioral health, dental health, and social services.
4. Leverage grants, sponsorships, and employer support to offer scholarships for CHW trainees.
5. In partnership with the Wegner Health Sciences Library at USD, develop, maintain, and promote a comprehensive, South Dakota-specific digital library of CHW and chronic disease resources, to be housed on the CHWSD website.
6. Assist SD DOH in disseminating evidence-based prevention and management programming to CHWs.
7. Remain up-to-date in local and regional offerings that affect social determinants of health and health equity for patients.
8. Create a resource guide on the CHWSD organization website to include resources for CHWs to refer to. Promote the Helpline Center and partner with their established database to provide access to information regarding social determinants of health and health equity.



## GOAL C: WORKFORCE DEVELOPMENT

Promote the CHW position and scope of work and integrate CHWs into the community as well as medical and social services organizations.

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### OBJECTIVES

1. By 2022, assist at least 4 - 5 facilities in establishing a pilot CHW program. By 2023, assist 10 facilities to implement a CHW program.
2. Collaborate with and support CHR programs in South Dakota to continue to develop the workforce, promote utilization of existing services, and identify their evidence-based best practices.
3. By 2023, increase the number of CHWs subscribed in the CHWSD CHW Directory to 125 CHWs.

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### STRATEGIES

1. Promote the CHW profession through various avenues, including outreach targeted at, but not limited to high school students, young professionals, individuals already employed in a health care-related field, and community members with a keen understanding of their community and/or prospective populations served.
2. Leverage professional organizations and partners to promote and/or develop community/clinical linkages in supporting local CHW programs.
3. Develop success stories and promotional materials highlighting pilot programs and disseminate state-wide.
4. Promote and manage a CHW Directory to accurately track the number of trained CHWs in South Dakota and utilize the Directory to promote CHW-SD services.
5. Develop a referral and communication system for CHWs that do not work in the same system as providers who refer CHW services.
6. Work with payers to review and expand locations CHW services can be offered to further integrate CHW programming into all aspects of clinical and community organizations.
7. Work with current programming at organizations to transition CHW-like programs to formal CHW programs that employ certificate-trained CHWs.
8. Promote CHW training and continuing education opportunities and provide support for CHWs in their work within communities.
9. Strengthen partnerships with payers/insurance providers and educate them on reimbursement models and opportunities for covering CHW services.
10. Identify provider and CHW ally champions to support CHWs and the development of CHW programs.
11. Implement strategies for the delivery of workforce development and continuing education to practicing CHWs, chronic disease educators, providers, and health care organizations.

## GOAL D: REIMBURSEMENT

Educate organizations regarding CHW reimbursement and work collaboratively with payers to cover CHW services.

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### OBJECTIVES

1. Work to increase the number of organizations utilizing CHW reimbursement from 3 in 2021 to 5 by 2022 and 8 by 2023.
2. Assist one private payer in covering at least one CHW service by 2023.

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### STRATEGIES

1. In partnership with the SD DSS, DMS, promote CHW reimbursement through SD Medicaid.
2. Connect with private payers and other payer sources to cover CHW services.
3. Develop resources and guides for organizations to calculate prospective return on investment (ROI) for CHWs and actual ROI after implementing a CHW program.
4. Work with SD DSS, Division of Behavioral Health to reimburse CHW services in behavioral health settings and examine training protocol and referral guidelines.
5. Assist other medical, dental, and social services areas to develop a CHW reimbursement model, including referral guidelines.

## GOAL E: CAREER LADDER / LATTICE

**Promote cross-training of health care professionals to also train as a CHW. Ensure CHWs have the skills and tools needed to advance their career as a CHW.**

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### OBJECTIVES

1. By 2023, assist 2 individuals already working in a health-related field (e.g., CNAs, EMTs, social workers) in cross-training as a CHW.
2. By 2023, implement a pilot program with at least 2 facilities to develop a CHW program that includes cross-trained CHWs.
3. By 2023, establish/adapt/promote at least 3 CHW-specific trainings regarding chronic diseases (diabetes, heart disease and stroke, etc.).
4. By 2023, collaborate with at least 4 CHW-like programs to explore implementing further CHW services.

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### STRATEGIES

1. Create evidence-based career ladder strategies and promote to the current CHW workforce, encouraging CHWs to complete additional training in disease specific areas and/or advance to management of a CHW program.
2. Work with applicable health care professionals and professional organizations to promote cross-training to the CHW profession.
3. Develop professional networking opportunities to further establish communication and professional development for CHWs.
4. Assist CHWs in advancing their education by offering and promoting opportunities for specialized training in disease-specific and/or evidence-based interventions or furthering their training to an associate degree.



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[www.chwsd.org](http://www.chwsd.org)