

**Program #40038 - Health Promotion and Community Capacity Building** 2/24/2014

**Department:** Health Department **Program Contact:** Noelle Wiggins  
**Program Offer Type:** Support **Program Offer Stage:** As Requested  
**Related Programs:** 40045  
**Program Characteristics:** In Target

**Executive Summary**

A key role of public agencies is to support communities to identify and solve persistent problems. This program increases community capacity to identify and solve health problems. Activities include training Community Health Workers (CHWs), preventing youth violence, teaching empowering health promotion approaches, conducting community-based participatory research (CBPR), and coordinating the Health Promotion Change Process. These activities support health care reform and cut health care costs by giving people and communities the tools they need to protect and promote their own health.

**Program Summary**

This program helps people both inside and outside the Health Department to develop the skills and knowledge they need to improve health, increase health equity, and cut health care costs by addressing the social determinants of health, via five primary strategies: 1) providing Oregon Health Authority-approved training for Community Health Workers (CHWs); 2) assisting a variety of groups to learn to use empowering strategies such as popular education to promote health; 3) conducting community-based participatory research (CBPR) and evaluation projects that increase power and improve health in communities most affected by inequities; 4) preventing youth violence through relationship building and comprehensive planning; and 5) leading the MCHD Health Promotion (HP) Change Process.

Since March of 2013, the CCC has trained 94 of the 300 CHWs called for in Oregon's Medicaid waiver and is on track to train 150 by March of 2014. We were the first organization statewide to receive OHA approval of our CHW training curriculum. We partnered with the Defending Childhood Initiative of DCHS to train 88 CHWs about children's exposure to violence. Additionally, we participated on the OHA's Traditional Health Worker Steering Committee, received funding to develop a competency assessment for CHWs, partnered with PSU to found the Oregon CHW Research and Education Consortium, partnered with the Oregon CHW Association to lead a CHW Pilot Project funded by Kaiser Permanente, and partnered with the Cradle to Career Project to develop a Community Education Worker project.

Our Youth Violence Prevention Partnership continued to bring together youth and law enforcement at 5 community sites to jointly address the underlying causes of violence affecting young people. Staff and community partners in our CDC-funded STRYVE (Striving to Reduce Youth Violence Everywhere) project completed development of a comprehensive plan to prevent and reduce youth violence, began implementation of 2 evidence-based strategies in 4 community sites, and partnered with the City of Portland on the Black Male Initiative. During 2012-13, the HP Change Process: 1) continued to strengthen skills, build capacity and provide mutual support through monthly meetings; 2) Developed a training, "Turning Ideas into Action," with staff from the Health Equity Initiative; and 3) Partnered with the Training Unit to provide empowering health promotion training to new employees.

**Performance Measures**

Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer
Output	Number of participants in training classes	823	1,750	2,000	2,000
Outcome	% of participants in training courses who report increased ability to promote health	94%	92%	96%	95%
Outcome	% of participants who report increased understanding of the relationship between inequality and health	90%	N/A	94%	93%
Output	Number of youth engaged in violence prevention evidence-based strategies and awareness building	N/A	N/A	500	500

**Performance Measures Descriptions**

1) Number of participants in training classes represents the sum of all participants in each training class offered. The same participant may be counted more than once. 2 & 3) Percentage of participants in training courses who report increased ability to promote health and increased understanding of the relationship between inequality and health is defined as participants who rate this item one or two on a post-evaluation survey. A score of one is the highest score.

## Legal / Contractual Obligation

CDC standards for local public health agencies will soon make health promotion a mandatory service. New regulations require that Community Health Workers participate in an approved 80-hour training curriculum in order to be included in a state registry. CHWs' inclusion in the state registry qualifies their employers for Medicaid reimbursement for CHW services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2014</b>	<b>2014</b>	<b>2015</b>	<b>2015</b>
Personnel	\$653,426	\$242,611	\$561,515	\$242,853
Contractual Services	\$0	\$750	\$0	\$0
Materials & Supplies	\$221	\$31,684	\$17,213	\$26,401
Internal Services	\$0	\$134,470	\$90,783	\$60,746
<b>Total GF/non-GF</b>	<b>\$653,647</b>	<b>\$409,515</b>	<b>\$669,511</b>	<b>\$330,000</b>
<b>Program Total:</b>	<b>\$1,063,162</b>		<b>\$999,511</b>	
<b>Program FTE</b>	6.24	2.56	5.62	1.94

<b>Program Revenues</b>				
Indirect for Dept. Admin	\$26,261	\$0	\$22,477	\$0
Intergovernmental	\$0	\$306,337	\$0	\$320,000
Other / Miscellaneous	\$0	\$103,178	\$0	\$10,000
Service Charges	\$0	\$0	\$10,000	\$0
<b>Total Revenue</b>	<b>\$26,261</b>	<b>\$409,515</b>	<b>\$32,477</b>	<b>\$330,000</b>

## Explanation of Revenues

Health Promotion & Community Capacity Building is funded with county general fund as well as multiple revenue contracts that reimburse the program for providing training for Community Health Workers and conducting research and evaluation.

County General Fund: \$669,511  
Federal STRYVE grant: \$275,000  
Defending Childhood Initiative grants: \$40,000  
Community Health Worker Training contracts: \$15,000

## Significant Program Changes

**Last Year this program was:** 40038 Health Promotion and Community Capacity Buil

Our program offer increased because of sharply increased revenue from CHW training and research and evaluation projects. This is the result both of health care reform and years of careful relationship- and credibility-building. Additionally, we received funding from the Defending Childhood Initiative that allowed us to hire 2 FTE Community Health Workers to assist with facilitation of the STRYVE Coalition, present about the STRYVE project at conferences, and be primary facilitators of the Youth Empowerment Strategies (YES) curriculum.