

Department: Health Department **Program Contact:** Noelle Wiggins
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Adopted
Related Programs: 40060, 40025
Program Characteristics:

Executive Summary

Health Promotion and Capacity Building works to improve health and eliminate inequities through the Community Capacitation Center (CCC). Program activities include training community health workers (CHWs) and others; conducting community-based participatory research; evaluating CHW and related models; and managing projects that employ CHWs. These activities provide communities with the knowledge and skill set to identify and solve their most pressing health issues.

Program Summary

Health Promotion and Capacity Building, through the Community Capacitation Center (CCC), develops and implements culturally-appropriate and culturally-specific approaches tailored to the self-identified needs of communities. The CCC has three main program areas.

Education and Training: The CCC uses popular (empowerment) education to train community health workers (CHWs), CHW supervisors, and others. CHWs have been identified as key to health system transformation. The CCC-developed 90-hour curriculum was the first to be approved by the Oregon Health Authority and qualifies CHWs for certification. Since March of 2013, the CCC has provided initial certification training for over 350 CHWs. In addition, the CCC provides continuing education training on topics such as chronic disease prevention and management and prevention of violence affecting youth. Curricula are developed or adapted for cultural specificity in communities most affected by inequities. The CCC also helps build system capacity to use the CHW model effectively, and provides training on popular (empowerment) education to a variety of participants.

Research and Evaluation: Internal and external programs contract with the CCC for community-based participatory research and evaluation of CHW and related models. These forms of research and evaluation involve community members in every step of the process to further build their knowledge and skills. CCC's research and evaluation is also coordinated with academia, health systems, community partners, and others to identify and fill gaps in CHW research. Internally, the CCC partners with Chronic Disease and Violence Prevention (40060) and Adolescent Sexual Health Equity Program (40025) to evaluate the Centers for Disease Control and Prevention (CDC) Preventing Teen Dating Violence and Youth Violence by Addressing Shared Risk and Protective Factors grant.

Project Management: With funds from Early Learning Multnomah (ELM), Northwest Health Foundation (NWHF), and Social Venture Partners, the CCC leads the Community Education Worker (CEW) Program. CEWs are trained community health workers who participate in additional training to support parents to prepare their children to succeed in kindergarten and beyond and advocate for needed changes at the school, district, and state levels.

Performance Measures

Measure Type	Primary Measure	FY16 Actual	FY17 Purchased	FY17 Estimate	FY18 Offer
Output	Number of participants in training classes	1,448	2,000	2,000	1,200
Outcome	Percent of participants in training courses who report increased ability to promote health	96.7%	95%	95.7%	95%
Outcome	Percent of participants reporting increased understanding of relationship between inequality and health	94.2%	93%	93.4%	93%
Outcome	Percent of participants in CHW training courses whose empowerment increased from baseline to follow-up	70%	70%	70%	65%

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), 4) 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.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2017	2017	2018	2018
Personnel	\$650,880	\$301,502	\$578,237	\$89,619
Contractual Services	\$7,000	\$241,896	\$1,500	\$374,456
Materials & Supplies	\$34,585	\$29,807	\$28,519	\$23,310
Internal Services	\$155,388	\$68,105	\$141,744	\$10,281
Total GF/non-GF	\$847,853	\$641,310	\$750,000	\$497,666
Program Total:	\$1,489,163		\$1,247,666	
Program FTE	5.86	2.74	4.47	0.85

Program Revenues				
Indirect for Dept. Admin	\$23,631	\$0	\$609	\$0
Fees, Permits & Charges	\$0	\$0	\$142,000	\$0
Intergovernmental	\$0	\$548,001	\$0	\$0
Other / Miscellaneous	\$0	\$111,000	\$0	\$497,666
Service Charges	\$142,000	\$0	\$0	\$0
Total Revenue	\$165,631	\$659,001	\$142,609	\$497,666

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, conducting research and evaluation, and managing projects.

Revenue from fees and contracts: Janus Youth \$8,000, NAYA \$35,000
 United Way Early Learning Model: \$454,666
 Training Fees: \$142,000

Significant Program Changes

Last Year this program was: FY 2017: 40038A Health Promotion and Community Capacity Building

FY17 Program Offer 40038B, Public Health Approach to Preventing Community Violence, was integrated into FY18 Program Offer 40060 to better align the Public Health Division's place-based approach to improving neighborhood health through prevention activities. This move contributes to the reduction in number of participants in training classes for FY18.