



TEXAS
Health and Human
Services

Texas Department of State
Health Services

Promotor(a) or Community Health Worker Training and Certification Program Advisory Committee Meeting

October 30, 2024

Promotor(a) or Community Health Worker (CHW) Training and Certification Advisory Committee Meeting

FOR QUESTIONS AND COMMENTS:

You may submit your questions/comments to
CHW@dshs.texas.gov

Thank you.



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Promotor(a) or Community Health Worker (CHW) Training and Certification Advisory Committee Meeting

AGENDA

Wednesday, October 30, 2024, 10:00 A.M. – 12:30 P.M. CST

1. Welcome and Introductions ←
2. Consideration of July 22, 2024, draft meeting minutes
3. Health Promotion and Chronic Disease Prevention Section update
4. Update on Collaboration with DSHS Regarding Core Competencies Enhancements
5. Artificial Intelligence, Machine Learning and Promotoras de Salud: Leveraging Technology for Community Empowerment
6. Advisory subcommittee updates
7. Committee member sharing
8. Public Comment
9. Agenda items for next meeting
10. Adjourn



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Health Promotion and Chronic Disease Prevention Section Updates

October 30, 2024

Raiza Ruiz, MPA, CPM

Community Health Worker and School Health Branch Manager

General Updates

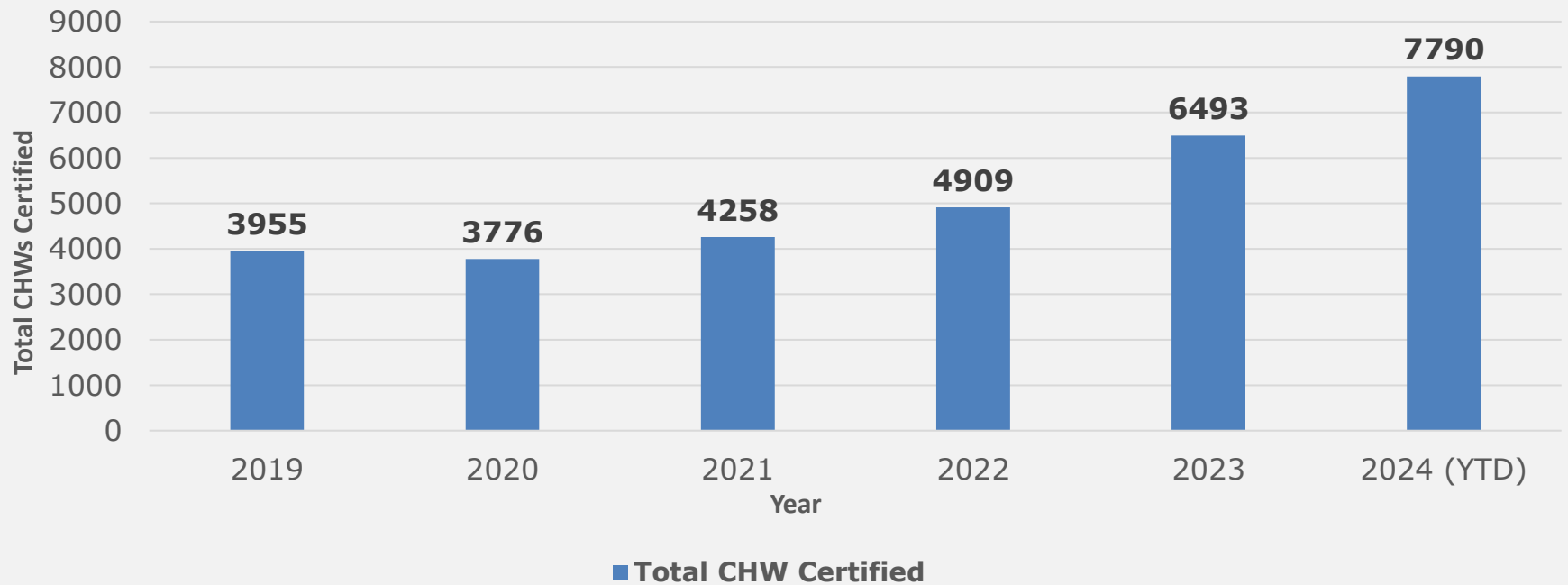
- DSHS submitted the FY 2026–2027 budget request (Legislative Appropriations Request) to the Texas Legislative Budget Board on September 6, 2024.
 - Includes an Exceptional Item for General Revenue funding over the biennium to hire three full time employees to review CHW and CHW instructor applications more quickly.
- The updated [CHW Program Policy](#) was approved and posted on the CHW Program website.
 - The Policy is now available in English and Spanish.
- The CHW Program website Law, Regulation and Policy has been updated to include:
 - Relevant legislation passed in the 89th Legislative Session
 - New standards for CHW and CHW Instructors protected information, as required by Government Code, Section 552.11765.
- The proposal to enhance the DSHS Core Competencies was approved by Dr. Jennifer A. Shuford, DSHS Commissioner on August 20, 2024.

Community Health Worker (CHW) Training and Certification Program Updates



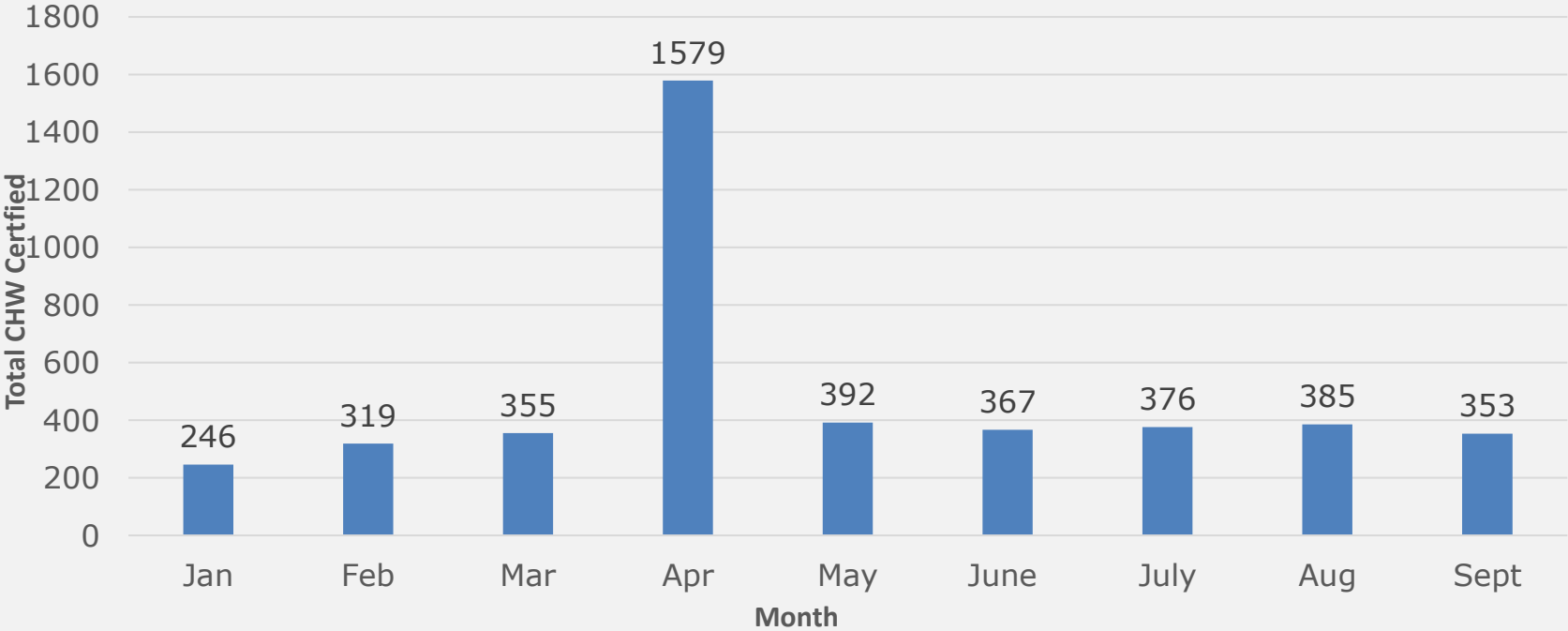
CHW Certification

Total CHWs Certified by Year

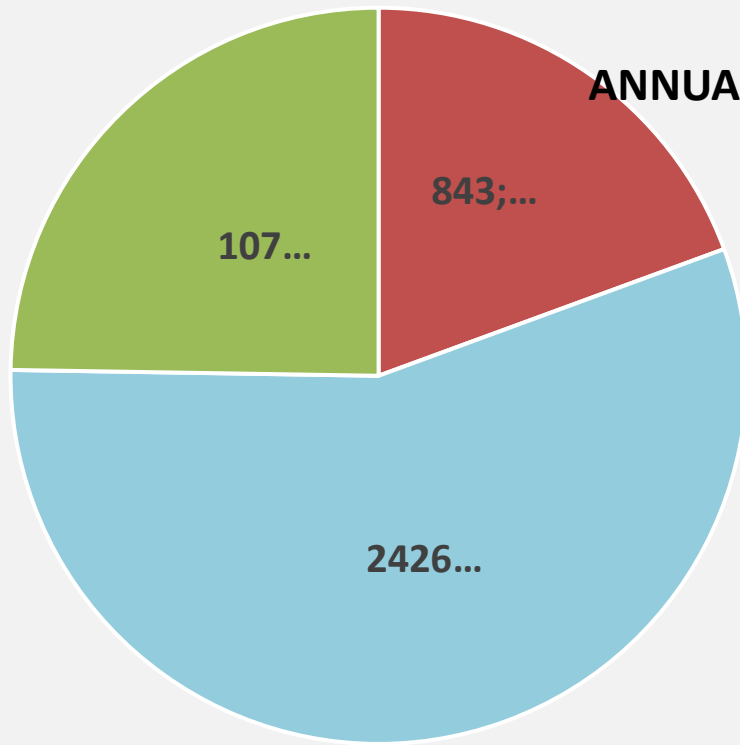


CHW Applications Received

CHW APPLICATIONS RECEIVED



Annual Applications Received by Type

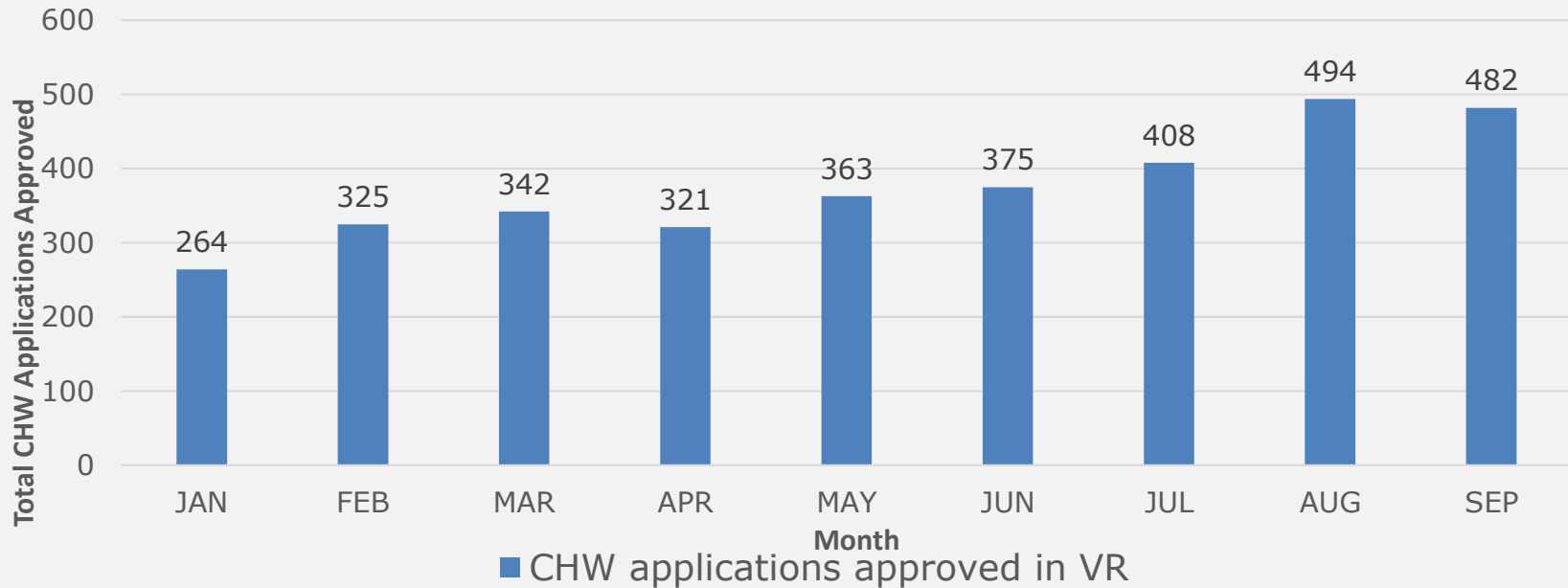


ANNUAL CHW APPLICATIONS RECEIVED BY TYPE

- CHW applications received - Experience
- CHW applications received - Training
- CHW applications received - Renewal

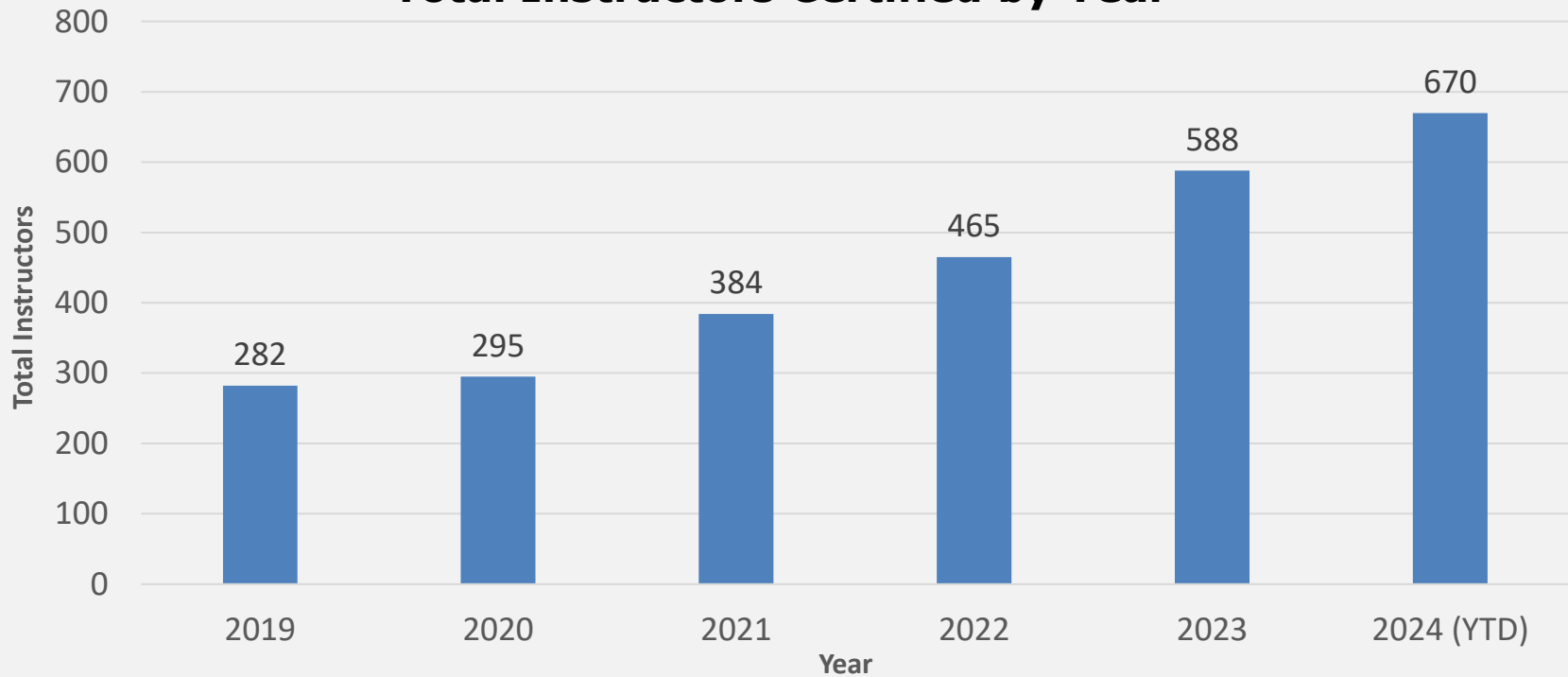
CHW Certifications Approved

CHW APPLICATIONS APPROVED



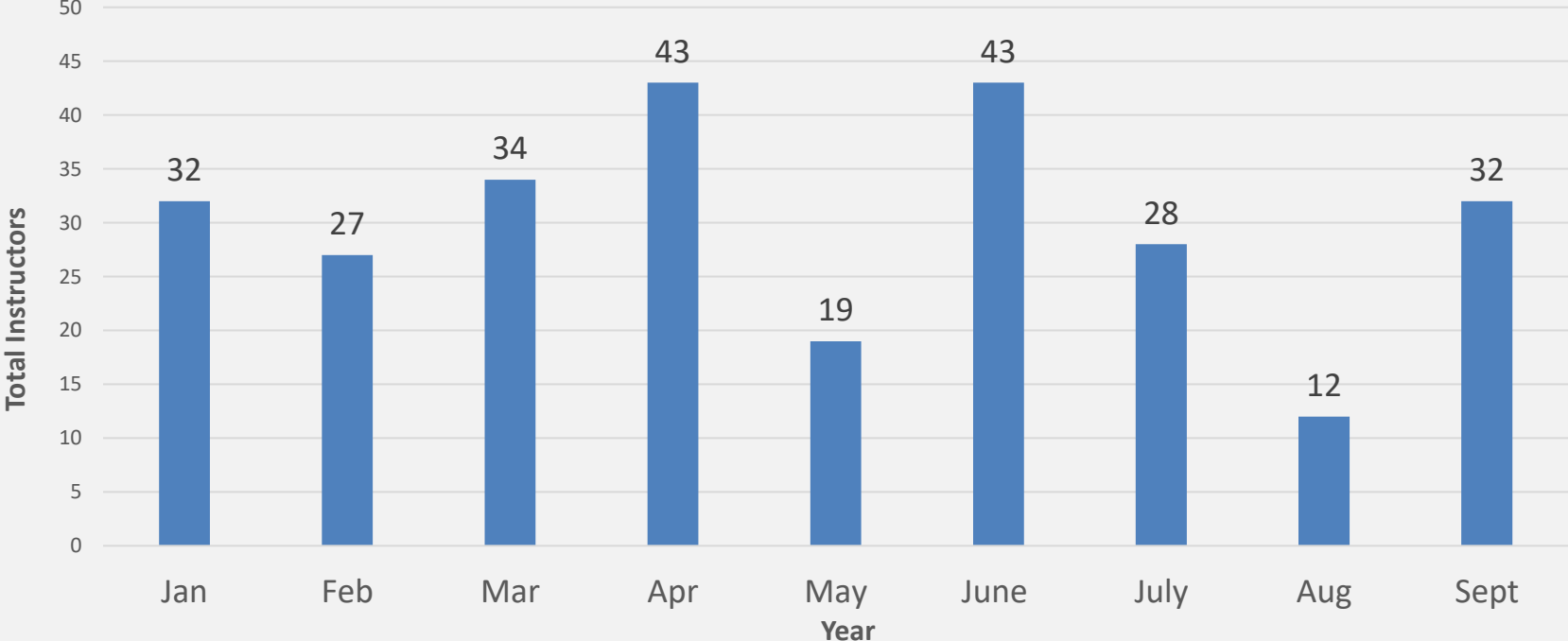
CHW Instructor (CHWI) Certification

Total Instructors Certified by Year

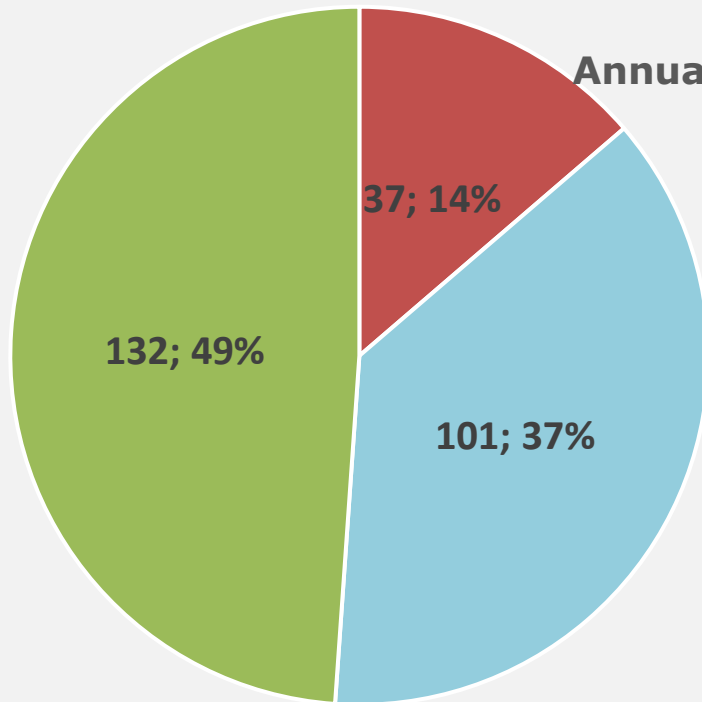


CHWI Applications Received

CHW Instructor Applications Received



CHWI Applications Received by Type

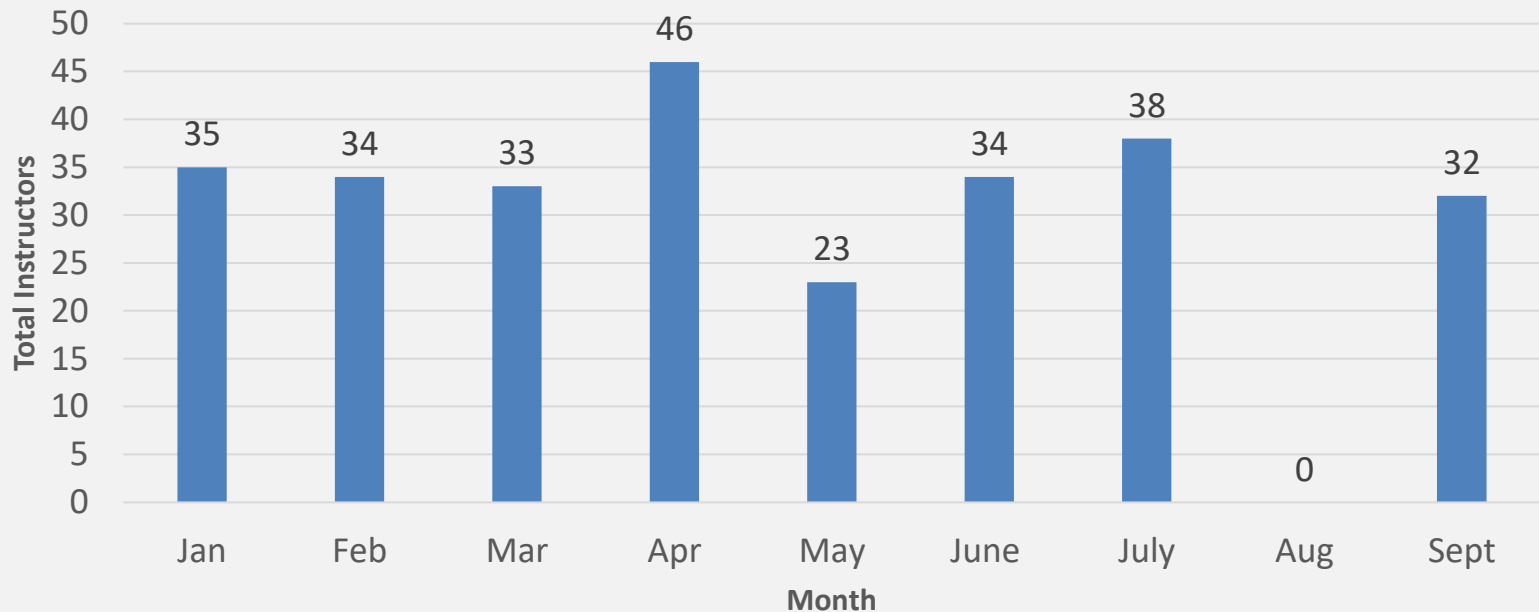


Annual Instructor Application Received by Type

- Instructor applications received - Experience
- Instructor applications rec'd - Training
- Instructor applications received - Renewal

CHW Instructor Certification (Cont.)

Instructor Applications Approved in VR



Curriculums

- Currently, the CHW Program has 7 curriculums under review, totaling 18.5 credits hours.
- From July 1 to September 30, 2024, the program has approved 15 **new** curriculums totaling 32.5 credit hours.



Thank you!

Community Health Worker Training and Certification Program

dshs.texas.gov/community-health-worker-or-promotora-training-certification-program


[Email: chw@dshs.texas.gov](mailto:chw@dshs.texas.gov)

512-776-2576

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Welcome

Ashley Rodriguez, CHWI-McKesson Institute

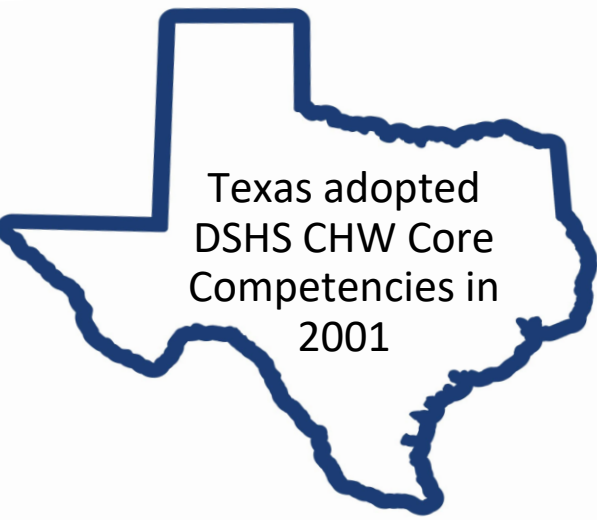
**Roxana Lopez, CHWI-Texas Association of
Promotores & Community Health Workers**

Workgroup Update:

**Update on Collaboration with
DSHS Regarding Core
Competencies Enhancements**

Ashley Rodriguez, CCHW, CCHWI
Roxana Lopez, CCHW, CCHWI

Background

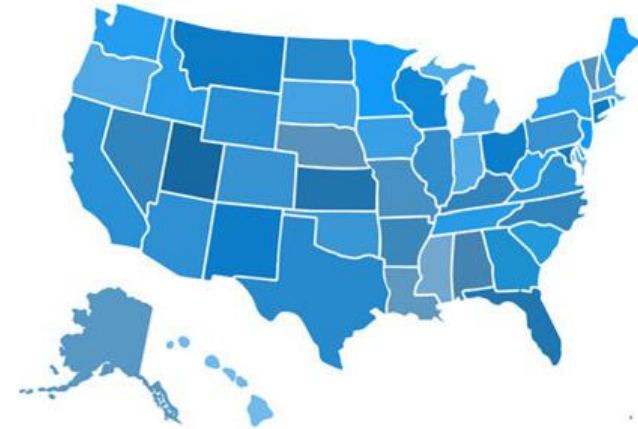


Texas adopted
DSHS CHW Core
Competencies in
2001



The Community Health Worker (CHW) Core Consensus Project (referred to as the C3 Project) built upon the rich history of the CHW workforce in the U.S. and Texas, with the primary aims:

- 1) expand cohesion in the CHW field;
- 2) contribute to the visibility and greater understanding of the full potential of CHWs to improve health, community development, and access to systems of care.



Across the U.S., the C3 Core Competencies have been adopted in multiple states including:

AZ, MA, MI, MS, NV, UT

On August 2024, DSHS approved the enhancement of the existing Texas CHW core competencies based on the C3 national model.

The Why

Supports CHW Sustainability Efforts

Expands CHWs Scope of Work

May Support CHW Job Opportunities

Supports Employer's Knowledge Base

CHWs DO Conduct Research & Evaluation in Texas

Ad-hoc Workgroup/Stakeholders



Ashley Rodriguez,
CHW representative from
Region 2/3 , Assistant
Presiding Officer , and
Workforce Development
DSHS CHW Advisory
Committee Chair



Roxana Lopez, the
President of the Board
of Directors of the
Texas Association of
Promotores &
Community Health
Workers (TAPCHW)



Kim Bush,
Program Director at The
University of Texas Health
Science Center at Tyler
*(former DSHS CHW Advisory
Committee leader)*



Dr. Julie St. John,
researcher with the C3
project & Associate
Professor, Texas Tech
University Health Sciences
Center

DSHS CHW Core Competencies & C3 CHW Core Competencies + Roles at a Glance

C3 Core CHW Competencies	C3 Core CHW Roles	DSHS Core CHW Competencies
1. Communication Skills	1. Cultural Mediation Among Individuals, Communities, and Health and Social Service Systems	1. Communication Skill
2. Interpersonal and Relationship-Building Skills	2. Providing Culturally Appropriate Health Education and Information	2. Interpersonal Skill
3. Service Coordination and Navigation Skills	3. Care Coordination, Case Management, and System Navigation	3. Service Coordination Skill
4. Capacity Building Skills	4. Providing Coaching and Social Support	4. Capacity-Building Skills
5. Advocacy Skills	5. Advocating for Individuals and Communities	5. Advocacy Skills
6. Education and Facilitation Skills	6. Building Individual and Community Capacity	6. Teaching Skills
7. Individual and Community Assessment Skills	7. Providing Direct Service	7. Organizational Skills
8. Outreach Skills	8. Implementing Individual and Community Assessments	8. Knowledge Base on Specific Health Issue
9. Professional Skills and Conduct	9. Conducting Outreach	
10. Evaluation and Research Skills	10. Participating in Evaluation and Research	
11. Knowledge Base		

Source: <https://www.c3project.org/roles-competencies>

Source: <https://www.c3project.org/roles-competencies>

Workgroup Action: CHW Workforce Feedback

Listening Sessions

- In partnership with TAPCHW, conducted **6** listening sessions in December with up to 15 CHWs/CHWIs
- Held 1 listening session with CHW Training Centers (*within the monthly TAPCHW training center call*)
- Post-surverys sent to all participants.

Agenda

1. Present on background
 - a.C3 background info
 - b.current DSHS Competencies
 - C.CHWs role in research & evaluation
 - d.proposal/cross walk
2. Feedback questions/discussion
3. CHW Q&A

	Strongly disagree	Disagree	Neutral	Agree	Strongly Agree
I believe adding the new competency - Evaluation is good for the CHW workforce	□□	☒	☒	☒	☒
I agree the new competency falls within the CHW scope of work	□□	☒	☒	☒	☒
I agree the new competency proposed is applicable to my work/job	□□	☒	☒	☒	☒
I feel adding this competency would improve my skillset	□□	☒	☒	☒	☒
I feel adding this competency would support sustainability to the CHW workforce	□□	☒	☒	☒	☒

The Workgroup's Formal Advisory Proposal

Proposal: **Align & enhance** some of the language of the DSHS core competencies for CHWs and CHW Instructors with key C3 Project roles and competencies + **add 1 new** competency

- DSHS created a crosswalk and incorporated proposed enhancements to the existing DSHS Core Competencies for CHWs outlining current competencies and proposed changes. Overall, very few DSHS CHW core competencies needed to be amended.
- Proposed changes:
 - Expand “Interpersonal Skills” to “Interpersonal Skills **and Relationship-Building**” and minor edits to sub skill descriptions.
 - Expand “Service Coordination Skills” to “Service Coordination Skills **and Navigation**” and add minor edits to sub skill descriptions.
 - Expand “Teaching” to “**Teaching and Education**” and minor edits to sub skill descriptions.
 - Add one new competency for “**Evaluation and Research**” - *DSHS does not currently have this competency.*
- Vote was **approved** by DSHS CHW Advisory Committee to: continue the work of scoping, building, and enacting the changes & updates to the Texas DSHS CHW Core Competencies

Language Changes or Enhancements to the Existing DSHS CHW Core Competencies

Summary of Language Changes or Enhancements to the Interpersonal Skills and Relationship-Building Core Competency

- “Relationship building” was added to the Interpersonal Skills and **Relationship-Building Core Competency** name.
- “Respect professional standards” was added to the “Set personal and professional boundaries and **respect professional standards**” skill.

Summary of Language Changes or Enhancements to the Service Coordination Skills and Navigation Core Competency

- “Navigation” was added to the “Service Coordination Skills and **Navigation** Core Competency.
- “Appropriate” was added to “Coordinate **appropriate** referrals, follow-up, track care and referral outcomes”.
- The new skill **“Plan and facilitate individual and organizational goals and/or group action plan and goal attainment”** was added.

Summary of Language Changes or Enhancements to Teaching and Education Core Competency

- “Education” was added to the “Teaching and **Education** Core Competency”.
- “Interactive” was added to “Set a variety of **interactive** teaching and coaching methods for different learning styles and ages”.

Language Changes or Enhancements to the Existing CHW Core Competencies

New Core Competency: Evaluation and Research

- **Identify important concerns and conduct evaluation and research to better understand root causes.**
- **Apply the evidence-based practices of Community Based Participatory Research (CBPR) and Participatory Action Research (PAR).**
- **Participate in evaluation and research processes.**
- **Participate in individual assessment through observation and active inquiry.**
- **Collaborate with other educators .**

Current State: New DSHS Approval

Approval received from Dr. Jennifer A. Shuford, Texas Department of State Health Services Commissioner, for the proposal to **enhance** the DSHS Core Competencies



Additional Information on the Proposal

- The Plan: work with additional CHW stakeholders across Texas to gain feedback. Stakeholders will include, *but are not limited to*:
 - Other DSHS Advisory Committee Members;
 - Local CHW Associations in Texas;
 - Individual CHWs/Promotores
- Work with DSHS to build a comprehensive management timeline for the implementation of the existing DSHS enhanced CHW core competencies. The CHW or Promotor(a) and Certification Program will provide technical support to certified CHW training centers across the state to accommodate the changes and implementation of enhanced CHW core competencies.


Next Steps and Tentative Timeline

- Interviews and Focus Groups: Sept. 9 – Mar. 14, 2025
- Core Competency Implementation: Mar. 2025 to July 2025
- Non-DSHS Implementation Activities: July 2025 to Feb. 2026
- Enhanced core competencies become effective: Feb. 19, 2026

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Welcome

Leticia Villarreal Sosa, PhD, LCSW, SSW
University of Texas Rio Grande Valley



ARTIFICIAL INTELLIGENCE (AI), MACHINE LEARNING (ML), AND PROMOTORAS DE SALUD: LEVERAGING TECHNOLOGY FOR COMMUNITY EMPOWERMENT

LETICIA VILLARREAL SOSA, PHD, AM, LCSW; UNIVERSITY OF TEXAS RIO GRANDE VALLEY

I WANT TO ACKNOWLEDGE MERIDA ESCOBAR, SOUTHWEST TEXAS PROMOTORES ASSOCIATION AND THE STPA TEAM WHO LED AND SUPPORTED THIS PROJECT.

ABOUT THE PROJECT

- **Award:** Hub Specific Pilot Grant Program
- **Title:** Artificial Intelligence, Machine Learning, and Promotoras de Salud
- The South Texas Promotoras/es Association (STPA) serves the Rio Grande Valley (RGV), a 94% Hispanic/Latino community along the U.S.-Mexico border, gravely underserved and in great need of access to culturally responsive, evidence-based mental health services
- This was our first AIM-Ahead experience (AIM-Ahead is an NIH program that seeks to increase participation of underrepresented groups in the development of AI/ML models used for improving health. AIM stands for Artificial Intelligence/Machine Learning)



Albert Garcia, STPA, IT Technical Support



Dr. Tamer Oraby, Associate Professor School of Mathematical and Statistical Sciences UTRGV
AIM-AHEAD SC-HUB Research on disease modeling and ML



Dr. Leticia Villarreal Sosa, Associate Dean for Research and Faculty Development, School of Social Work, UTRGV



Otila Garcia, STPA, coordinates the work with STPA



Juventino Hernandez Rodriguez, Lic Psychologist and Asst. Professor



Dr. Bianca Villalobos, Licensed Psychologist and Assistant Professor in the Dept of Psychological Sciences



Merida Escobar, PI STPA Founder and President

BACKGROUND

The South Texas Promotoras/es Association (STPA) serves the Rio Grande Valley (RGV), a 94% Hispanic/Latino community along the U.S.-Mexico border, gravely underserved and in great need of access to culturally responsive, evidence-based mental health services.

In this context of high need, Promotoras/es de Salud/Community Health Workers are a key resource to help community members access mental health services

Promotoras de Salud and Community Health Workers (Promotoras) are lay members of the community who serve as vital bridges between vulnerable communities and health care systems.



THE STUDY

- Given the limited capacity for the mental health workforce to reach underserved populations, STPA's long-term goal is to increase access to mental health services for those in need in the RGV.
- AIMS
 - Evaluate the effectiveness of AI/ML and mental health training for Promotoras de Salud.
 - Develop and evaluate a pilot project focused on (a) using AI/ML to identify predictors for depression and/or anxiety; and (b) informing a small community-based health education intervention.

THE RESEARCH QUESTIONS

Our Research Questions:

1. Can AI/ML be used to enhance the Promotoras / CHW model and address behavioral health and social determinants of health community interventions?
2. What are the challenges and facilitators to training Promotoras/CHWs to use AI/ML?
3. How effective is AI/ML in predicting/detecting depression/anxiety cases and identifying the need for mental health services, compared to standard community screening?
4. How acceptable is an AI/ML-informed mental health project to Promotoras and the communities they serve?



The University of Texas
Rio Grande Valley™

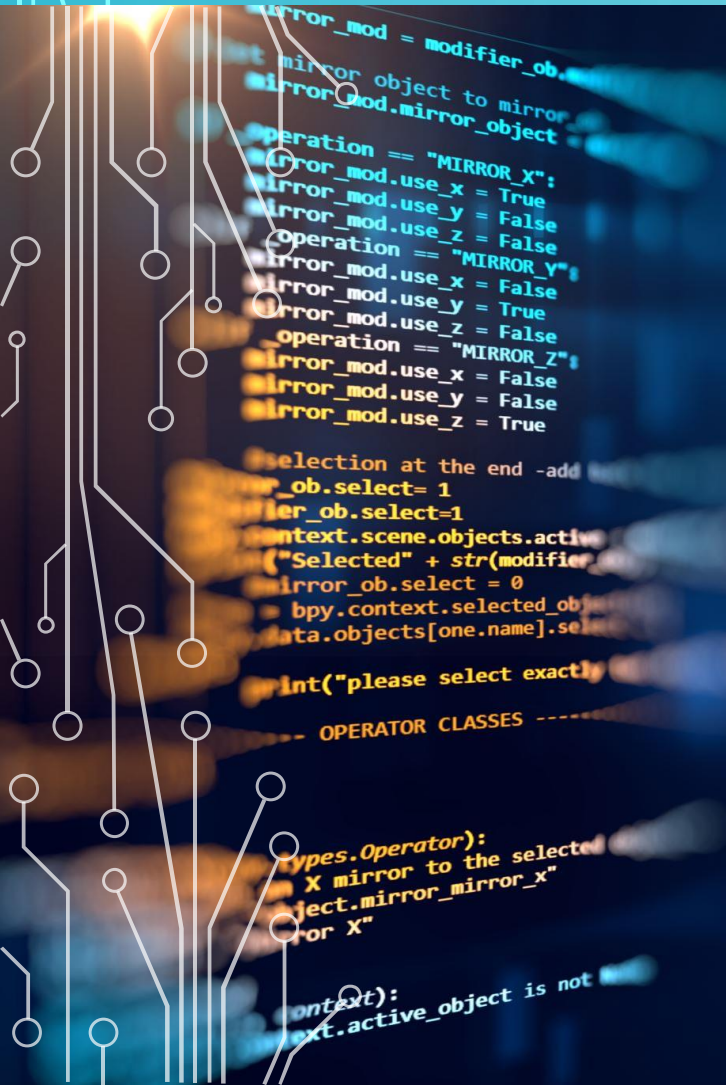


PROJECT SIGNIFICANCE

- The Rio Grande Valley (RGV) is in critical need of mental health services.
- Artificial intelligence and other digital and mobile technologies are a great potential to extend the reach of Promotoras, enhancing their efforts to disseminate health information, coach individuals regarding health behavior, identify mental health issues, and bridge access to care.
- The integration of AI/ML with the Promotoras model to address depression and anxiety in underserved areas is crucial to the prevention and identification of mental health issues.
- Successful implementation of the proposed project will unveil many possible pathways to decrease health disparities by reducing access to care barriers and ensuring early detection and intervention.

WHAT IS ARTIFICIAL INTELLIGENCE

- Artificial Intelligence (AI) was developed by studying how the human brain "thinks", learns, and makes decisions to solve problems or complete tasks. AI makes a computer, robot, or other pieces of technology "think". In other words, they process data in the same way as humans.
- It's the simulation of human intelligence by a machine.
- AI has been a part of our lives without us knowing. We use AI when we book a ticket online, scroll through our newsfeed, socially network, or read restaurant menus and reviews, speak into our phones. AI drives even simple chat assistants when shopping online or ordering food.



MACHINE LEARNING

- Training computer programs to recognize patterns and tackle complex problems.
- Neural networks – extract information from examples in a data set by searching for patterns in layers or multiple steps. Then when it encounters new situations, it can problem solve.
 - For example, completing a sentence using proper English grammar



AI ADVANTAGES AND DISADVANTAGES

Advantages

- Already widely used (like Siri, Alexa, or ChatGPT)
- Highly effective in performing specific tasks within a narrow scope
- Can perform some tasks faster and more accurately than humans.
- Can handle large amounts of data
- Does not get tired and can work 24/7
- Can improve through machine learning

Disadvantages or limitations

- Limited in its ability to reason, problem-solve, and adapt outside of its scope
- Limited to specific task within a narrow scope.
- It's only as good as the data you put into it. (For example, a video streaming service keeps tracks of what you watch and gives you suggestions)

DEMOGRAPHICS OF THE PROMOTORES TRAINED

Age range between 42-70

13 self identified as Hispanic/Latino/and 1 self identified as white

13 female and 1 male

Education level: 7% no formal education (1), 50% high school education (7), 29% associates degree (4), and 14% (2) had a bachelor's degree

9 listed their primary language as Spanish, and 3 listed their primary language as English

The number of years worked in the community range from 3-40 years

WHAT COMPUTER DEVICES DO YOU HAVE AT HOME?

79% had a computer or
laptop (11)

64% had a tablet (9)

86% had a smart phone
(12)

WHAT ELECTRONIC DEVICES DO YOU HAVE ACCESS TO AT WORK?



COMPUTER OR LAPTOP
85% (11)



TABLET 31% (4)



SMARTPHONE 31% (4)



I DON'T HAVE ACCESS
TO ELECTRONIC
DEVICES AT WORK 8%
(1)

WHERE DO YOU HAVE ACCESS TO THE INTERNET?

Home – 100%
(14)

Work – 64% (9)

Community center
- 29% (4)

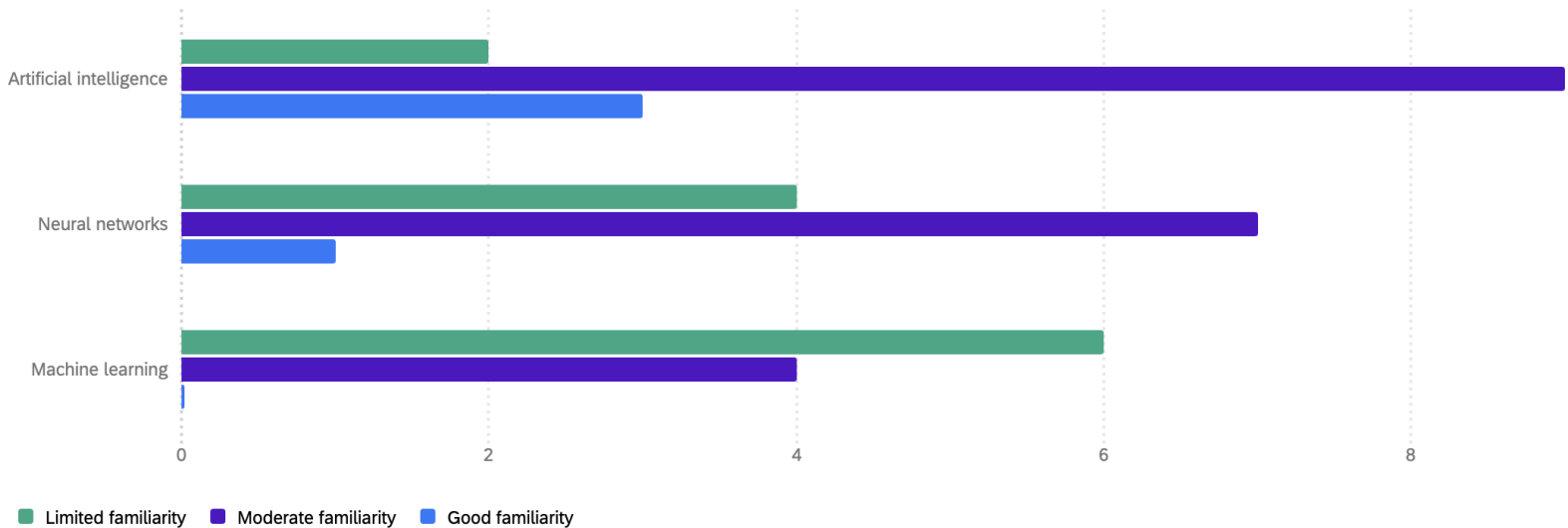
School/University
– 9% (1)

Public places like
a library or
coffee shop -
21% (3)

Smart phone -
(100%)

HOW FAMILIAR WERE YOU WITH.... BEFORE

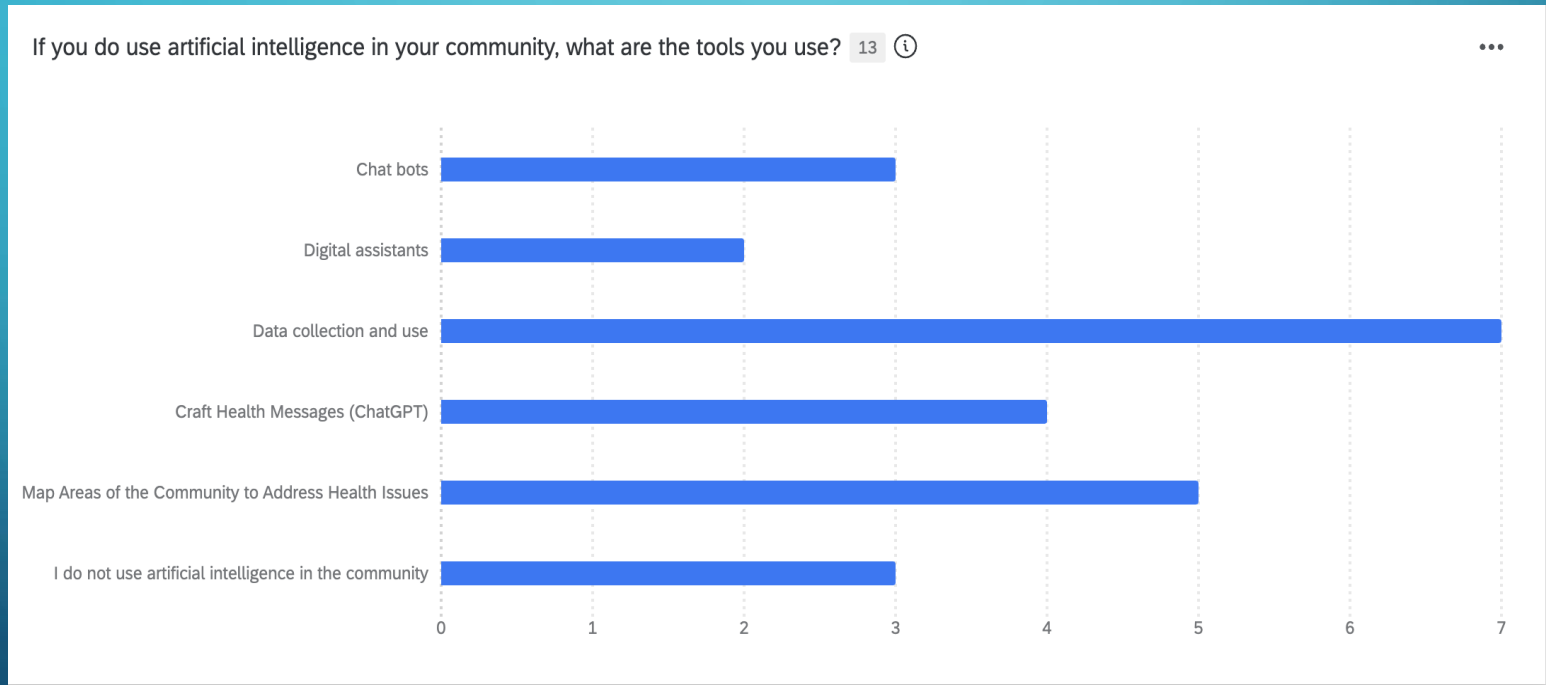
Before the training, how familiar were you with each of the following? 14 ⓘ



HOW FAMILIAR ARE YOU WITH... AFTER?



WHAT FORMS OF AI DO YOU USE IN THE COMMUNITY?



IF YOU DON'T USE IT, WHY?



STILL LEARNING



SOME FOLKS DO NOT
KNOW HOW TO USE
THEIR SMART PHONES

OTHER BENEFITS

Promotoras felt empowered

It helped their legitimacy and increased community perception of their expertise.

They were excited to learn about AI and how to use it to facilitate their work.

THANK YOU!



We will continue to expand this project and provide the workshop to additional promotores de salud and implement with additional community members.



Questions?



My contact information: leticia.villarrealsoa@utrgv.edu

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CHW Advisory Committee: Subcommittee Discussion



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Subcommittee Discussion:

- **Lead:** Discussion regarding subcommittee changes
- **Request:** New members for the remaining subcommittees
- **Respond:** To questions from members

CHW Advisory Committee: Subcommittee Discussion



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Current CHW Subcommittees List:

- Workforce Solutions and Employment Opportunities subcommittee
- Communication and Outreach subcommittee
- CHW Training and Certification subcommittee

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Public Comment Procedures



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- All speakers must identify themselves and the organization they are representing before speaking
- Three-minute time limit
- Do not include health or other confidential information
- Rules of conduct apply to public comments made

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Thank you

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