



COACHing for COVID: A Qualitative Assessment of Incorporating Community Health Workers into Primary Care-Based COVID-19 Outreach.

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Background

- In July 2020, OHSU Family Medicine at Richmond developed a workflow to support clinic patients with acute social and medical needs who test positive for COVID-19.
- The workflow relies on **Community Health Workers (CHWs)** to screen patients for social and medical needs and connect them with community resources.
- The goal of the workflow is to reduce barriers to patients' ability to maintain isolation by addressing social determinants of health (SDH).

Objective

- Develop a comprehensive understanding of the **design, implementation, and maintenance** of the workflow via key informant interviews, with the **goal of creating guidance for other primary care practices** interested in developing a similar workflow.

Methods

- **Qualitative study** utilizing a **semi-structured interview** guide to conduct key informant interviews
- Setting: FQHC housed in the department of family medicine at an academic health center
- Participants: **Six clinic personnel** involved in developing the workflow
- Analysis: **Immersion-crystallization approach** using Miller and Crabtree's¹ five phase analysis strategy: describing, organizing, connecting, corroborating/legitimizing, representing the account

Prominent Themes Derived Across Semi-Structured Interview Topics

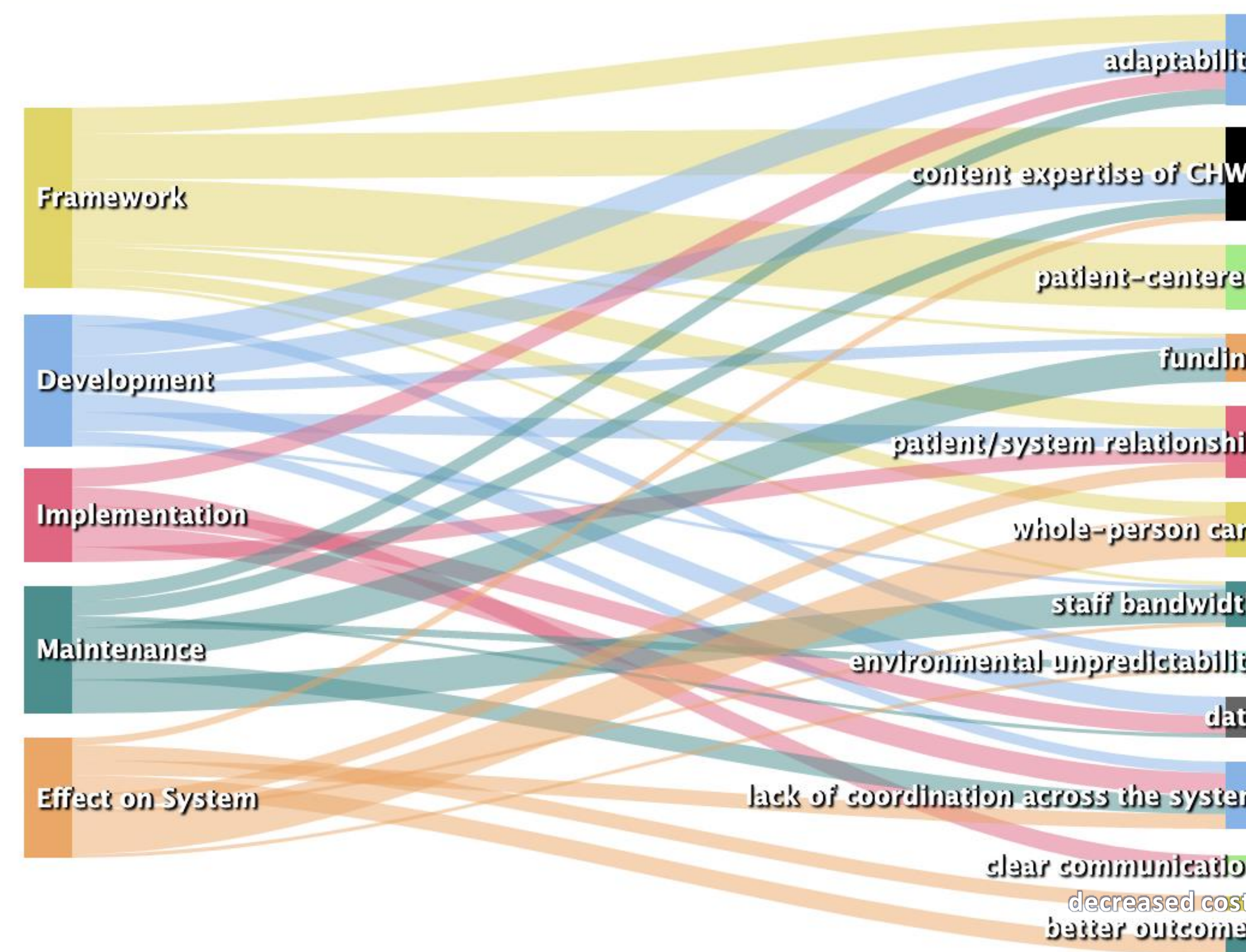


Figure 1. When interviewing six key personnel involved in the workflow using semi-structured interview topics (left), prominent and overlapping themes (right) emerged across these topics.

“Community health workers are, in the best case, from the community, experts in community resources, experts in system navigation, and they are, by design, non-medicalized, so they're not gonna be caught up in the medical piece of it. They are going to be your experts in community...they are the content experts.”

Quote 1. Key personnel describing the importance of CHW's content expertise in implementation of the workflow.

Results

- Prominent themes emerged across interview topics (Figure 1)
- **Prominent facilitators:** adaptability, content expertise of CHWs (Quote 1), and patient-centeredness
- **Prominent barrier:** lack of coordination across the healthcare system
- **Dual facilitator/barrier:** Identifying COVID-positive patients using EHR data was seen as a barrier to developing the workflow, while the use of an EHR to facilitate communication among team members and patients was seen as a benefit to implementation of the workflow.
- **Benefits to the healthcare system and clinic:** decreased spread of COVID, reduced healthcare costs and improved health outcomes.
- **Benefits to patients:** improved outcomes and focus on whole-person care which was seen as improving patient trust in the healthcare system.

Conclusions

- Personnel from a variety of disciplines expressed that integration of CHWs into COVID-19 outreach was beneficial to both patients and the primary care practice.
- For other practices interested in implementing such a workflow, key informants identified **themes for success including a project framework built on patient-centeredness, adaptability and the unique content expertise of CHWs.**
- Clinics looking to establish similar workflows should be certain to identify funding and dedicated staff time for the project. **Hiring CHWs is strongly encouraged** though a modified version of the workflow could be performed by other clinic staff.