



MASSACHUSETTS
GENERAL HOSPITAL

CENTER FOR COMMUNITY
HEALTH IMPROVEMENT

FIVE QUESTIONS WITH SARAH OO:

Sarah Abernethy Oo has been the Director for Community Health Improvement at the MGH Chelsea HealthCare Center since 1997. She leads a team of 45 community health workers who help underserved patients access the health care system and address their social determinants of health. Programs CHWs work with include immigrant and refugee health and social services, family and community violence, early childhood home visiting, disease management and cancer prevention.

This past October, Sarah was asked to co-lead the **Community Health Worker Collaborative** for the **Partners HealthCare** system. We asked Sarah to share her thoughts and experience with the Collaborative:

What role do community health workers play on the healthcare team?

Sarah Oo: Community health workers (CHWs) work on the frontlines with vulnerable patients to help them identify and address barriers to good health, from navigating the complexities of the health care system to resolving a housing crisis. Because of their shared life experience with the patients they serve, CHWs have a special awareness of the challenges these patients face and, over time, can build trusting relationships. CHWs meet the patients where they are at, through home visiting and accompanying patients to key appointments both within the health system and in the community. They help patients establish patient centered goals and strategies, creating confidence and self-efficacy so that people can manage their health concerns independently.

What is the Medicaid ACO?

Sarah Oo: Under an Accountable Care Organization (ACO) model, care is better coordinated, and physicians are rewarded for providing high quality care while keeping costs down. This contrasts with the traditional fee-for-service model. Partners plans to roll out the ACO to all its Medicaid (MassHealth) patients across the system in March of this year.

Why are community health workers important to the successful rollout of the Medicaid ACO?

Sarah Oo: As part of the Medicaid ACO rollout, we are screening patients for the social determinants of health—things like food insecurity, housing, community safety and others.

These social determinants can have an enormous impact on a person's health, and identifying patients who screen positive for one or more is the first step. Community Health Workers play a critical role in helping to address these social determinants by linking patients to healthcare, social and other services and resources they may need.

Because of the trusting relationships that they establish with patients, CHWs often are uniquely positioned to understand and address areas where there are breakdowns in a patient's health and well-being. These could include a history of trauma, fear, cultural barriers, language barriers and gaps in health education. CHWs provide eyes and ears into the patient's home and life as an invaluable addition to the care team's ability to address any challenges the patient is facing.

Tell us about the Partners Community Health Worker Collaborative. What are the short-term goals for the Collaborative? What do you hope to achieve in the longer term?

Sarah Oo: In anticipation of the hiring of more CHWs across the system, as well as the need for more standardized best practices, **Dr. Eric Weil** from Population Health Management asked me and **Rose Kokoza, MD**, primary care physician at Brigham and Women's Hospital, to lead a Partners-wide CHW Collaborative. The group also includes frontline managers from across the system.

The Collaborative's vision is twofold:

- To create a central Community Health Worker Collaborative to support the development of CHWs and their supervisors in an efficient, consistent way through trainings, manuals, policy development, creation of a referral criteria as well as a patient identification algorithm and creation of supportive consistent systems such as ways to document CHW work in the electronic medical record. Essentially, we are developing a model based on the success we have had in Chelsea that may be replicable elsewhere.
- The CHW Collaborative will support the ongoing professional development of CHWs and their supervisors to uniquely work with vulnerable patients and address all the barriers they face, thereby improving the health and wellbeing of our patients and building their resiliency, with the added goal of reducing total medical expenditures for our most vulnerable.

The Collaborative is unique in that it not only brings together Mass General and Brigham and Women's, but will provide CHW and supervisor teaching and trainings for other Regional Service Organizations (RSOs) throughout the Partners HealthCare system.

Can you give us one short example of a community health worker in action?

Sarah Oo: At the MGH Chelsea HealthCenter, we have 45 community health workers from 25 countries who speak 21 different languages. These amazing people are helping patients every day in so many ways to reach their goals and achieve independence.

We have one community health worker, a teacher from Eritrea who spent time in a refugee camp in Ethiopia before being approved to come to the US. His name is Tenshin Samuel, and he speaks three languages—Amharic, Tigrinya and Kunama. Tenshin empathizes with people coming from a similar background and struggling to be connected to healthcare services. His patients have escaped war-torn countries and are now facing many other challenges, such as dealing with the trauma of what they left behind and finding their way in a new, unfamiliar environment.

Many of Tenshin's patients are severely depressed and have difficulty maintaining employment, taking their medications regularly and even getting up and ready to attend a much-anticipated citizenship interview, for example. But, Tenshin understands the situation. He goes on home visits and helps his patients prepare and be on time, reinforces health education messages and uses motivational interviewing to help his patients engage in their own health goals in conjunction with their doctor's goals for their care. Tenshin comes from a non-judgmental place of creative problem solving. His patients feel encouraged and supported. Once one milestone—no matter how big or small—is reached, there is hope that the patient will find the strength to pick up the pieces and go on with their everyday life.

Thanks to our community health workers, many of our families are now thriving in the community and in their new country.