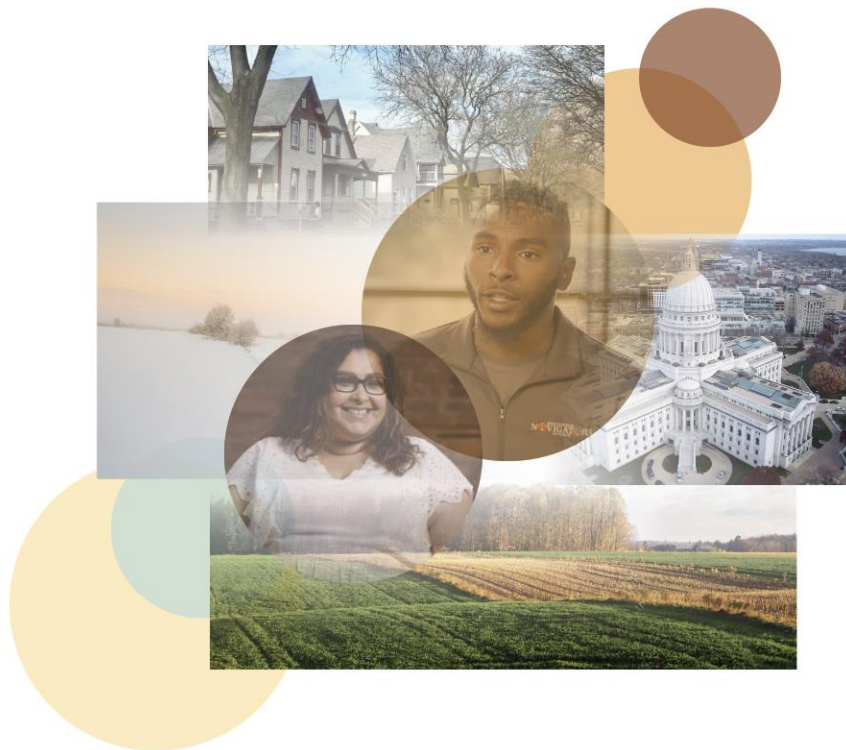


Designing a Comprehensive Community Health Worker (CHW) Program



CHW Integration Toolkit for Local and Tribal
Health Departments in Wisconsin



WISCONSIN DEPARTMENT
of HEALTH SERVICES

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Introduction

Whether your organization is in the early stages of planning, maintaining, or seeking additional support for a Community Health Worker (CHW) program, this toolkit provides practical strategies, tools, and resources for program planning, implementation, and evaluation.

The Wisconsin Department of Health Services (DHS) has identified a need for resources, structured guidance, and best practices for local and Tribal health departments (LTHDs) in Wisconsin that are preparing to, or actively working on, effectively integrating CHWs into their organizations. The Wisconsin CHW Empowerment Collaborative (CHW-EC) has adopted the American Public Health Association (APHA) CHW Section's [definition of a CHW](#) as:

“A frontline public health worker who is a trusted member of and or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison or link or intermediary between health or social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. A CHW also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support, and advocacy.”

This definition was developed by national CHWs and CHW ally subject matter experts with a consensus building process and is widely adopted by the national CHW workforce. The definition focuses on CHW lived experience rather than formal education.

According to the National Association of CHWs (NACHW) [6 Pillars of CHWs](#), CHWs are a proven, yet precarious, workforce. CHW programs face a myriad of challenges with regards to funding and structural support even though there is sufficient evidence proving the vital impacts of CHW interventions. However, sustainability for CHW programs is possible when local, state and national strategies are aligned.



CHW work has been ongoing in Wisconsin for years. However, due to funding and institutional structures, CHW initiatives have often been siloed, with limited focus on supporting the overall workforce. After seeing the invaluable role CHWs played during the COVID-19 pandemic, LTHDs see the need to ensure that the CHW workforce infrastructure is supported within a variety of funding structures, projects, and organizations.

The objectives of the toolkit are:

- Introduce the CHW workforce.
- Support organizational readiness for CHW integration.
- Facilitate CHW program development by providing practical tools for planning and implementing CHW programs, including guidance on hiring, onboarding, and creating career pathways.
- Highlight CHW leadership and impact; elevate the role of CHW allies to uplift CHW leadership and voice.
- Strengthen workforce sustainability by addressing structural challenges for CHW programs and provide best practices and recommendations to address those challenges.

Financial sustainability is an additional consideration not covered in this toolkit. For further considerations of CHW workforce financial sustainability, please consult the [financial sustainability toolkit](#) developed by **envision**.

Collaborative process

The authors of this toolkit collaborated with LTHD staff and CHWs throughout the state of Wisconsin to hear their unique perspectives on the successes and challenges of CHW integration. Collaboration methods included one-on-one conversations, group discussions during the Wisconsin CHW Integration Community of Practice, and focus groups with CHWs to ensure that the toolkit reflects the voices and leadership of CHWs in Wisconsin.



Where do CHWs work?

Wisconsin-specific data about CHWs can be accessed and downloaded through the Occupational Employment and Wage Statistics (OEWS) program. As of May 2023, OEWS estimates that there are 59,030 CHWs employed nationwide, with 560 of them based in Wisconsin (Bureau of Labor Statistics, 2024). The OEWS program also provides insights into the industries where CHWs are most commonly employed. See below for a nationwide overview (Bureau of Labor Statistics, 2024).

Industries with the highest numbers of employment of CHWs

Industry	Employment	Percentage of industry employment	Hourly mean wage	Annual mean wage
Local Government, excluding Schools and Hospitals (OEWS Designation)	10,320	0.19	\$26.23	\$54,550
Individual and Family Services	10,140	0.34	\$22.69	\$47,200
General Medical and Surgical Hospitals	5,660	0.10	\$28.43	\$59,130
Outpatient Care Centers	5,230	0.49	\$23.10	\$48,040
Offices of Physicians	4,510	0.16	\$23.11	\$48,080

Source: [Bureau of Labor Statistics, 2024](#)

It is important to note that OEWS data has limitations: it excludes self-employed individuals, owners and partners in unincorporated firms, household workers, and unpaid family workers. The estimates are based on a sample of approximately 1.1 million establishments collected over a three-year period, drawn from businesses reporting to state unemployment insurance programs. For further details on data collection methods, review [additional resources on OEWS estimates](#) (Bureau of Labor Statistics, 2025).



DHS has created an interactive [CHW locator map](#) for Wisconsin showing where CHWs are working across the state (Wisconsin Department of Health Services, 2025). This information is gathered from a running [CHW Organization Locator Survey](#). Complete the survey to ensure your organization is included in future updates.

Organizational assessment

The following assessment was developed in collaboration with CHWs in Wisconsin. Reflect on where your organization currently stands in key areas such as CHW leadership and organizational readiness. Everyone brings something to the table—this is about recognizing your starting point and building from there. If your goal is to strengthen or expand your CHW program, understanding what is already in place can help you make thoughtful decisions about where to focus your time, energy, and resources. This exercise is designed to help you identify your organization’s priorities, existing strengths, and opportunities for growth. This toolkit offers proven strategies and best practices to guide and support you along the way.

The following assessment was adapted from the [Community Health Representative \(CHR\) Integration Tool No. 2](#) developed by Northern Arizona University in Flagstaff, Arizona (Northern Arizona University, Center for Community Health and Engaged Research, n.d.). Changes were informed by CHWs in Wisconsin.

CHW leadership		Notes
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are CHWs represented in the leadership team with a decision-making role?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have CHW program roles and activities been developed in collaboration with the CHWs?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have roles and activities been clearly described to CHWs and other staff members?	



<input type="checkbox"/> Yes <input type="checkbox"/> No	Have CHWs been involved in decision making about their roles?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Do CHW program leadership champion the role of CHWs as part of the public health workforce?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have leaders communicated to community members and partners about CHW roles and responsibilities in emergency preparedness and response efforts?	
Training and onboarding		Notes
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have CHWs received training and materials to address cultural and linguistic barriers or concerns related to their work in the program or community?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have CHWs completed any additional agency-specific trainings? For example: CPR, basic first aid, Narcan, lactation consultant. Are CHWs trained in the Health Insurance Portability and Accountability Act (HIPAA) to ensure protection of private information?	



Emergency preparedness, response, and safety		Notes
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are emergency response and other important health information materials available to post in CHW program office spaces for quick and easy access? In preferred languages?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the CHW program have access to necessary personal protective equipment (PPE), and up-to-date training materials for PPE usage and related safety procedures based on emergency type and work setting? Settings include in-person, in-office, virtual, and or in a vehicle used for client transportation or home visits.	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have CHWs been trained in protocols for what to do if they, a co-worker and or client tests positive for an infectious disease or has contact with an actual or perceived positive individual?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are there transportation policies in place to protect CHWs when transporting clients? For example: does your organization require background or driving record checks?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are policies and procedures in place for CHWs to say “no” or refrain from providing services if they determine a situation or environment is unsafe?	



<input type="checkbox"/> Yes <input type="checkbox"/> No	Are appropriate mental health and self-care resources and supports available for CHWs?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have CHWs completed relevant courses from the National Incident Management System (NIMS)?	
Roles and competencies		Notes
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have the CHW program roles and responsibilities been communicated to leadership, community members, and partnering programs?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is CHW in-depth knowledge about the community considered in program work (for example: cultural and traditional Knowledge and practices, language, literacy, high-risk populations)?	
Supervision and professional development		Notes
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are the communications and check-ins between the CHW and the CHW Supervisor appropriate for different learning and communication styles?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are supervisory sessions offered at intervals appropriate to the CHW's capacity and needs? Consider flexibility around varying work circumstances. Also realize that CHWs may need more support in the early stages of their employment within the local health department.	



<input type="checkbox"/> Yes <input type="checkbox"/> No	Are CHWs supported by peer mentors?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are supervisors available outside of supervisory sessions to offer additional support? For example: open door policy for case conferencing.	
Compensation		Notes
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are CHWs guaranteed a thriving wage, sick time, time off, and hazard pay?	



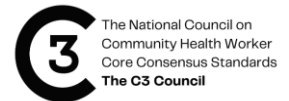
Section 1: CHW qualities, skills, and roles

CHWs are known by various names and titles. Many CHWs have been doing CHW work without an official title or pay before coming into the profession. To ensure CHWs are well-supported and able to perform their roles effectively, it is essential for the workforce to establish a shared understanding and consensus on the qualities and skills required to fulfill their diverse roles and responsibilities.

The National Council on CHW Core Consensus Standards (The National C3 Council) is an organization dedicated to defining comprehensive CHW roles, skills, and qualities, building national consensus, and offering guidance to enhance CHW practice and policy. The National C3 Council has developed a current, CHW-informed guide outlining CHW roles and competencies to support and sustain CHWs across various settings. In addition to roles, which define a CHW's Scope of Work, The National C3 Council has identified skills that CHWs acquire through experience or training. Explore the full list of CHW roles and skills on the [C3 Council website](#) (Rosenthal et al., 2024).

See the list of C3 roles and competencies and learn more about the organization on the [C3 website](#).

The next section includes definitions and examples of the **qualities, skills, and roles** of CHWs informed by the National C3 Council roles and competencies. Additional feedback and language were provided by CHWs working in Wisconsin.



CHW qualities

CHWs have unique qualities that support their work and ability to improve the overall health of the people CHWs serve. **CHW qualities** are attributes that hiring managers identify and make note of during job interviews. CHW qualities support CHWs to connect with individuals through shared lived experience, build and foster trust, bridge gaps between community members and services, and address many factors that affect overall health.

CHW qualities include:

- Caring.
- Understanding.
- Able to speak the language of communities served.
- Member of the community.
- Have lived experience.
- Respectful.
- Have cultural humility.
- Organized.
- Compassionate.
- Flexible.
- Non-judgmental.
- Good listener.
- Empathetic.
- Goal oriented.
- Persistent.
- Have healthy boundaries.

These are a combination of qualities identified by the National C3 Council (Rosenthal et al., 2024) and organizations and CHWs in Wisconsin.

CHW qualities come from personal experiences and strong connection to the communities CHWs serve. These qualities make CHWs unique and valuable because qualities are not something you can teach—they come naturally and are learned by living and growing in their community. CHW qualities cannot be measured quantitatively.



CHW skills

CHWs exhibit, or can learn, invaluable skills to fill a diverse set of roles within LTHDs in Wisconsin. We define **CHW skills** as behaviors or abilities that CHWs learn during core competency or other training. In other words, they are the things CHWs learn to do. A simple way to determine if something is a skill is to ask whether it can be measured. For example, if a CHW completed three referrals as part of their service coordination and navigation duties, this measurable action indicates the use of a skill, rather than a quality.

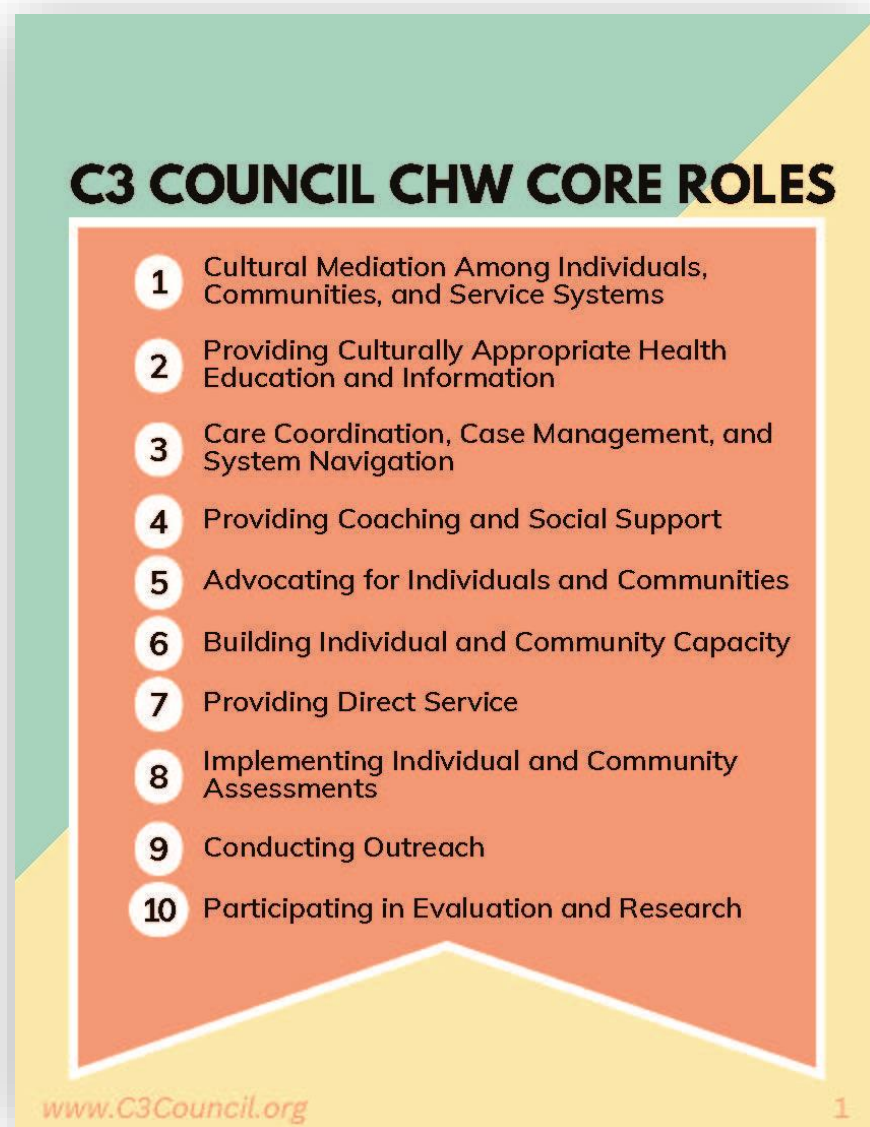
CHW skills identified by the National C3 Council:

- Communication with clients
- Build interpersonal relationships
- Service coordination and navigation
- Advocacy
- Build individual and community capacity
- Conduct individual and community assessments
- Conduct outreach
- Train and coach on professional skills and conduct
- Lead and participate in program evaluation and data collection



CHW roles

Understanding the unique roles that CHWs can play within a LTHD is an important key to successful integration. **CHW roles**, as defined by the National C3 Council, are what organizations refer to when writing CHW scope of practice and job descriptions. While many of the roles that CHWs perform can be applicable to other professions, the lived experiences of CHWs truly differentiate their impact and effectiveness.



Section 1 review

Use this guide to review and reflect on key concepts from this section:

Terms

CHW qualities are attributes that hiring managers identify and make note of during job interviews. CHW qualities come from personal experiences and strong connection to the communities CHWs serve; they are not something you can teach and cannot be measured quantitatively

CHW skills are behaviors or abilities that CHWs learn during core competency or other training. In other words, it is what CHWs do (for example: outreach, advocacy). CHW skills can be measured

CHW roles are functions that CHW serve in communities and the health care system; what organizations refer to when writing CHW scope of practice and job descriptions

Concepts

- **Utilizing C3 Standards:** To uplift the lived experience of CHWs and ensure their success, organizations should use the established standards created by and for CHWs as a guide. These standards outline the unique roles, qualifications, and skills required, and it's crucial that the entire team understands them to ensure the right people are hired and effectively supported.
- **The difference between CHW qualities, skills, and roles:** "Skills" refers to specific abilities CHWs need to possess or should be trained on to succeed in their jobs (for example: communication or outreach), while "qualities" describe a CHW's innate personal attributes (for example: empathy and cultural sensitivity), and "roles" encompass the broader responsibilities they do within their job as a CHW (for example: health education, care navigation, and community advocacy).
 - CHW roles are used for creating job descriptions.
 - CHW skills are used to design trainings.
 - CHW qualities are assessed for hiring and recruitment.
 - CHW qualities + CHW skills = CHW Core Competencies!

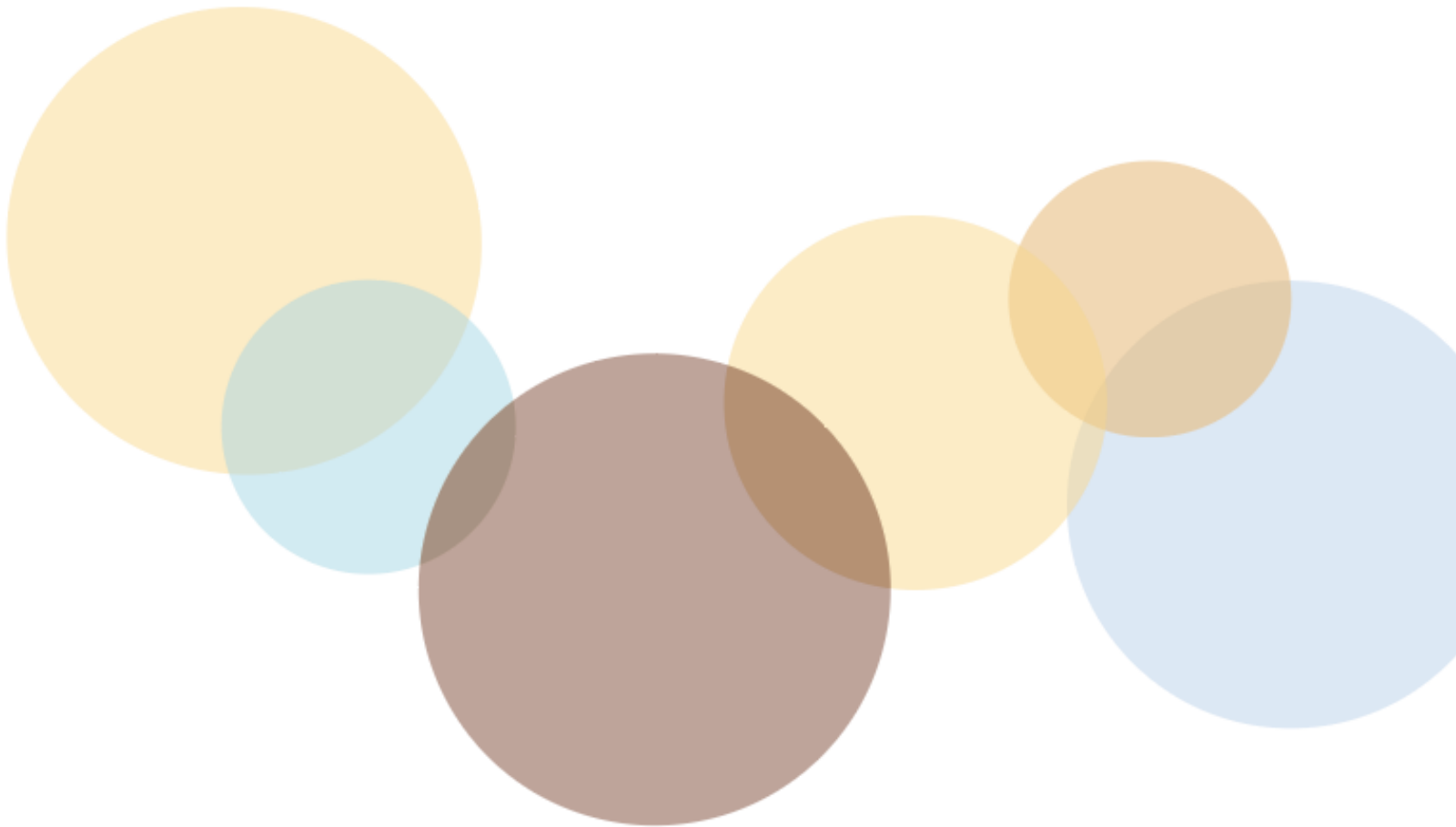


Suggested action items

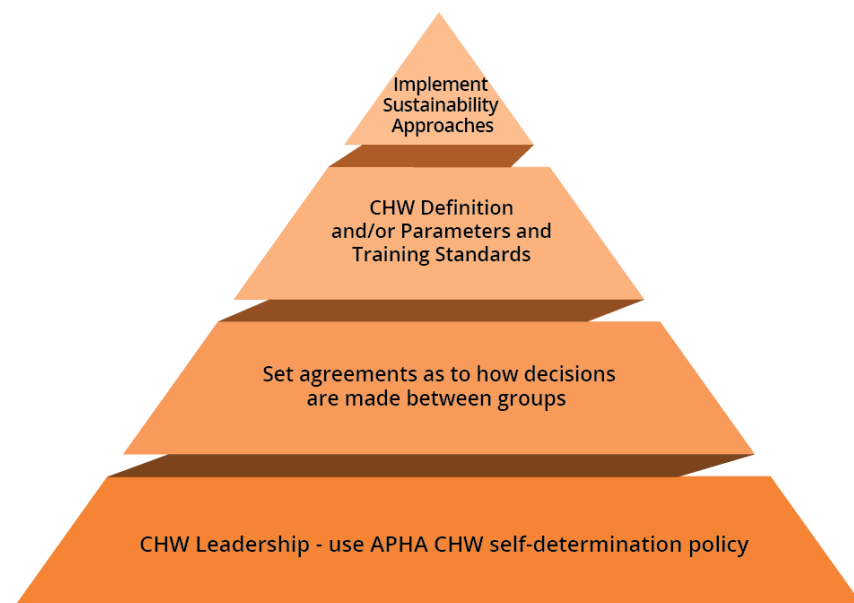
- Watch and share the following video with others on your team: [What do CHWs do? The C3 Roles and Competencies Explained](#).
- Download and review the [C3 Core Roles and Competencies Reference Deck](#).

Reflection question

How are you using C3 CHW Core Roles and Competencies to ensure your organization has a shared understanding of who CHWs are and the work they do?



Section 2: CHW leadership: What is needed for successful integration



Both CHWs and CHW allies play critical roles in advancing sustainability goals, but CHW leadership is essential to making the CHW workforce truly sustainable. In some cases, decisions about the workforce have been made without involving CHWs, which can hinder sustainability efforts. To address this issue, the APHA CHW Section created a policy on CHW self-determination, which states that at least half of any group making decisions about CHWs are CHWs (American Public Health Association [APHA], 2014). This policy serves as the foundational building block of this model, which illustrates principles for partnerships between CHWs and CHW allies. With CHW leadership and representation, collaborative partners can establish agreements on decision-making processes confidently. Having CHW leadership ensures that critical issues related to CHW sustainability, such as CHW definition, training standards, and other professional parameters, are made by and for CHWs. By centering CHW voices, we pave the way for the effective implementation of sustainability approaches (at the top of the triangle) that are inclusive and reflective of the unique contributions and impact that CHWs have on community health.



CHW leadership and ally partnerships are strengthened and expanded through relationships, growing the reach and influence of CHW leaders and ally partners while building the CHW workforce sustainability movement. As these relationships deepen and grow, they serve as a catalyst for collective action, amplifying the impact of CHWs and CHW allies in advancing sustainability goals ([envision CHW Sustainability Summit Participant Guide and Reflection Journal](#)) (Aftahi et al., 2024).

CHW leadership

CHW leadership is the foundation of strong and sustainable CHW programs. Elevating CHW voice and leadership in all aspects of decision making and programming within an organization is critical to sustainability and ensures that programs match the values and identity of the CHW workforce. By prioritizing growing CHW power and leadership, programs truly represent the wants and needs of the CHW workforce and the communities they serve.

How CHW programs can support CHW leadership:

- Encourage CHWs to lead presentations at local, state, and national conferences and meetings.
- Provide professional development opportunities while encouraging CHWs to pursue leadership roles within an organization.
- Identify champions and CHW allies within your organization to work alongside CHWs in all aspects of program development and implementation.
- Support the creation and growth of local and regional CHW networks or coalitions for peer-to-peer learning and leadership development.
- Empower CHWs to join regional, state, and national associations during work hours.
 - Include participation in job descriptions so that CHWs can be compensated for their time in these groups.
 - Budget for CHW membership in professional associations.



CHW allyship

A CHW ally can be defined as an individual or organization that supports the CHW workforce but does not meet the definition of a CHW themselves. CHW leaders and allies increase their power and become more effective by building strong relationships with one another. These connections help reach more people, resulting in a bigger impact on communities, and increased capacity to advance sustainability goals.

CHW allyship is defined by the actions, behaviors, and practices that one intentionally takes to support, amplify, and advocate with CHWs towards the sustainability of the CHW workforce (Center for Creative Leadership, 2024). Note that we say “advocate with” rather than “advocate for” because advocacy is done in partnership. In this context, advocacy means educate and bring awareness to. Another example of supportive language is to avoid the phrase “using” or “utilizing CHWs” and instead use terms such as “collaborate with” or “employ.”

Allyship is about centering CHW voice and prioritizing the principle that has guided the CHW movement, **“nothing about us without us.”** This phrase was born from disability and other social movements and is now utilized to center and elevate the voices of CHWs. It’s a great reminder for allies to involve CHWs from the start when making decisions about the workforce and beyond. It invites a moment of reflection to ensure CHWs voices are represented and leading conversations and decisions about the workforce.



Examples of CHW allyship:

- Invest time in building relationships with CHWs by listening to understand and having one-on-one conversations.
- Educate yourself on your power and privilege and how they impact others. (Learn more about power and privilege from the [Grassroots Policy Project](#) [Healy & Hinson, n.d.]).
- Accept and ask for feedback.
- Ensure CHWs lead and receive credit for their contributions.
- Educate decision makers alongside CHWs.
- Write CHW strategies into work plans.
- Share funding with CHW association or networks.
- Write professional development opportunities into CHW job descriptions and scope of practice.
- Partner on policy work; have CHWs participate in and lead writing and endorsing policies.
- Support CHW leadership from the start of a project or program; ensure CHWs have a leadership role in fiscal and strategic decisions.
- Join a national or state association like NACHW or the APHA CHW Section to strengthen your commitment to CHW allyship and learning from CHW leaders.
- Utilize CHW vetted resources from organizations like [NACHW](#) (NACHW, n.d.b) and [envision](#) (envision, n.d.a) to support your allyship efforts and learn about best practices for CHW integration and leadership.

Supervisors have a unique role as CHW allies. Read the Supervision Best Practices section of the toolkit for best practices and recommendations for CHW supervisors.



Growing CHW and ally leadership in Wisconsin

CHWs in Wisconsin are collaborating to share best practices and create peer networks. There are multiple working groups such as a financial sustainability group, CHW supervisor group, and CHW ally group that are actively creating charters that include CHW integration work. To connect to these working groups and join the growing collective movement of CHWs and allies supporting statewide workforce development for CHWs, contact

DHSCommunityHealthWorkers@dhs.wisconsin.gov.

- Encourage CHWs to join the Wisconsin CHW Empowerment Collaborative (CHW-EC). The CHW-EC is a place to network and share resources and opportunities. It is also a place for mentoring and peer support, and growing CHW leadership skills and voice. A key aspect of the CHW-EC is to authentically engage CHWs in spaces where decisions are being made. A [brief overview](#) is available to learn more (Wisconsin Department of Health Services, 2024).
- Empower CHWs to participate in the Wisconsin Public Health Association (WPHA) CHW section during paid work hours. The purpose of the CHW section is to advocate with CHWs about their roles as an integral part of the Public Health workforce, stay current regarding the breadth of work assignments other CHWs are undertaking, and connect CHWs across the State of Wisconsin.



Section 2 review

Use this guide to review and reflect on key concepts from this section:

Terms

- **CHW leadership** is the active involvement of CHWs in decision-making and program design and policy development, empowering them to shape health initiatives that reflect the needs and values of both the workforce and the communities they serve.
- **CHW ally** is defined as an individual or organization that supports the CHW workforce but does not meet the definition of a CHW themselves.
- **CHW allyship** is the actions, behaviors, and practices that one intentionally takes to support, amplify, and advocate with CHWs towards the sustainability of the CHW workforce.
- **CHW advocacy** means educating and raising awareness in partnership with CHWs, emphasizing collaboration rather than speaking on behalf of. It's important to use terms like "collaborate with" or "employ" CHWs, rather than "use" or "utilize."
- **"Nothing about us without us"** is a phrase originally born from the disability and other social movements and is used as a guiding principle for the CHW movement. It is a reminder to center and elevate the voices of CHWs: any conversations or decisions being made for or about CHWs or the workforce should be led **by CHWs**.

Concepts

- **Supporting CHW leadership** means elevating CHWs' voice in decision-making ensures programs align with their values and community needs, supporting long-term sustainability. Prioritizing CHW leadership helps better meet the needs of both CHWs and the communities they serve.
- **CHW allyship in practice** involves actively supporting and empowering CHWs through relationship-building, education, and collaboration.
- **Growing CHW leadership or allyship in Wisconsin** through topic-focused working groups, such as financial sustainability, CHW supervisors, CHW allyship, and CHW Medicare reimbursement. If you are interested in joining any of these groups to support CHW workforce development, contact DHSCCommunityHealthWorkers@dhs.wisconsin.gov.



Suggested action items

- Share Wisconsin specific CHW leadership and allyship development opportunities with your team.
- Watch the **envision** webinar on CHW leadership: [CHW Council Charter's Impact on Elevating CHWs.](#)
- Watch the **envision** webinar on CHW allyship: [Strengthening CHW Allyship.](#)

Reflection questions

- Do the CHWs in your organization have opportunities (meaning the time and resources allotted) for professional development such as training or participation in regional or state or national CHW associations and or conferences?
- Are CHWs represented in the leadership team with a decision-making role?
- Have CHW program roles and activities been developed in collaboration with the CHWs?



Section 3: Preparing to implement a new CHW program or initiative

Preparing to implement a new CHW program or initiative requires thoughtful planning, strategic alignment, and a commitment to building a sustainable framework. This includes assessing community needs, defining clear objectives for the program, and ensuring that infrastructure is in place to provide CHWs with the necessary resources, training, and support to succeed. CHW programs are not a “one size fits all” model, and integration takes dedicated time and effort to ensure both CHWs and communities thrive. Regardless of where an organization is in the integration process, it’s important to start with clear goals and continue working toward an inclusive and impactful program. Crucially, gaining early buy-in from leadership and identifying internal champions who can advocate for and elevate the CHW voice in decision-making is key to long-term success.

Writing a job description and defining the CHW scope of practice for the project(s)

CHWs may serve in many different roles and perform a range of tasks and services that are tailored to meet the needs of communities and individuals. CHW roles and responsibilities within a local or tribal health department can vary greatly depending on the job description and scope of practice. Job descriptions and scopes of practice for CHWs are related but distinctly different—both are critical for the success of CHW integration in a health department.

A **CHW job description** is a broad overview of the CHW’s position within the organization, including roles, responsibilities, and qualifications. The Association for State and Territorial Health Officials (ASTHO) collaborated with NACHW to write a [playbook](#) on CHW-informed hiring practices (ASTHO, 2020). The playbook provides examples of the differences of hiring and recruitment between CHWs and other positions. The playbook recommends the first step in creating a job description is to establish criteria to determine what skills, competencies, experience, and roles are necessary for the candidate to have to be successful in their role. While organizations might include the National C3 Council’s Core Competencies, supervisors may assess where additional specificity within the job description meets the needs of the community.



A best practice includes collaboration with CHWs and CHW associations to create an advisory board that is representative of the community to identify and recommend additional criteria for job descriptions that go beyond the baseline identified through the National C3 Council.

Example job descriptions:

- [Sheboygan County](#) (2021) for a bilingual CHW
- [Wood County](#) (2024a) for a CHW
- [Mississippi County, Missouri](#) (n.d.) for a CHW Program Coordinator. This job description informed CHW job descriptions for health departments in Wisconsin.

A [CHW scope of practice](#) (NACHW, n.d.c) is a detailed document outlining the specific tasks, goals, and expectations for a CHW in a particular program or project. It includes the roles and sub-roles a CHW will fill in the program. Defining the scope of practice for a program or project is important because CHW workloads can become heavy. Clearly defined roles and responsibilities help to avoid burnout and potential blurred boundaries between overlapping roles or programs in a health department.

A CHW job description plays a crucial role in defining the scope of practice for a CHW, as it outlines the key responsibilities, duties, and expectations associated with the role. By clearly detailing the tasks and areas of focus—community outreach, health education, patient advocacy, and case management—the job description helps to establish boundaries and guide the day-to-day activities of the CHW. This, in turn, informs the scope of practice by specifying what is expected of CHWs within the organization.

Conversely, the scope of practice can shape the CHW job description by highlighting the broader goals and objectives that the CHW position is intended to achieve. For



example, if an organization aims to improve health outcomes in a specific community or address particular health disparities, the scope of practice will reflect these priorities, and the job description will be tailored to ensure the CHW's role aligns with these objectives. By ensuring that the job description and scope of practice are aligned, organizations can ensure that CHWs are equipped to carry out their responsibilities effectively and are working toward the organization's larger health goals. [An example scope of practice](#) is available from Sheboygan County (Sheboygan County, 2024).

Educate the entire organization about CHW roles

Successful integration of CHWs requires that internal staff have a comprehensive understanding of the CHW role. For example, CHWs often spend the majority of their time in the community meeting with clients and sometimes work outside the typical 9 a.m. to 5 p.m. workday. It is essential for other staff members to recognize that CHWs will frequently be out of the office and plan meetings or collaborative activities accordingly. Additionally, identifying organizational champions and key stakeholders who understand the value of CHWs early in the development process is critical. These individuals can advocate for CHWs, support internal education, and help strengthen the overall understanding of the CHW role, the work they do, and the support needed to help them thrive and grow professionally.

Best practices for educating staff about CHWs include:

- Involve the team and hired CHWs in decisions about how CHWs will be integrated into the organization's workflows.
- Incorporate shadowing opportunities as part of the onboarding process to familiarize both CHWs and internal staff with each other's roles.
- Inform the team that much of a CHW's work will take place outside the office and adjust expectations for meetings and collaboration accordingly.
- Provide ongoing training and resources to internal staff about the unique contributions of CHWs, fostering a supportive and collaborative work environment.

These practices ensure that CHWs are effectively integrated into the organization, with a clear understanding and appreciation of their role by all team members.



Designing your CHW program with evaluation in mind

Designing a program with clear goals and anticipated outcomes enhances the evaluation process throughout its lifecycle. CHW programs are most effective when their goals and values align with the needs of the communities they serve. For this reason, it is crucial to involve CHWs in the evaluation design process, as they offer unique insights into the needs and cultural nuances of the communities they support.

Data sources such as community assessments can provide valuable insights into where CHW efforts should be focused, as well as the resources, strengths, and challenges unique to each community. Once CHW program priorities are established, a process for documenting CHW activities should be developed. Ideally, CHW services and activities should be tracked consistently throughout the program's lifecycle.

Various systems can be used to store and track data related to CHW services, including Microsoft® Excel®, care management systems, and electronic health records. It is essential to choose tools that ensure confidentiality and privacy or implement systems that protect identifying information in compliance with privacy laws restricting release of medical information that may also be referred to as HIPAA standards.

The CHW Center for Research and Evaluation (CHW-CRE) is a group of CHWs and allies who collaborated in 2015 to identify and promote the use of common indicators for CHW practice with a focus on building and modeling CHW leadership in research and evaluation (CHW-CRE, n.d.). In 2019, Wisconsin was selected as one of four states to pilot various evaluation indicators at the community and state level, which informed the list of evaluation indicators that are included in the CHW-CRE today. Learn more about CHW-CRE and find CHW program evaluation resources on the [CHW-CRE website](#) (CHW-CRE, 2025).

The CHW Center for Research and Evaluation (CHW-CRE) is a group of CHWs and long-time allies who came together to identify and promote the use of common indicators for CHW practice with a focus on building and modeling CHW leadership in research and evaluation. Learn more about CHW-CRE and find CHW program evaluation resources on the [CHW-CRE website](#).



CHW supervision

To effectively support CHWs, it is important for organizations to understand and respect the unique ways CHWs approach their roles. A central aspect of CHW work is maintaining strong connections within the community, which often requires activities beyond the confines of an office or clinic. This dynamic can sometimes lead to misunderstandings, such as supervisors expressing concerns about CHWs frequently being out in the field. To address this, organizations should establish regular, structured communication between CHWs and their supervisors.

Scheduled meetings, such as weekly check-ins, provide an opportunity for CHWs to share updates on their activities, detail how their time has been spent, and report on their engagement with individuals and communities. These meetings promote accountability while fostering mutual understanding and support for CHWs' critical community-based work.

Selecting supervisors who understand and advocate for CHW core roles and competencies is vital to CHW program success. Supportive supervision that emphasizes mentoring and skill development further enhances CHWs' contributions to the care team. Additionally, it is important for organizations to provide training for supervisors and staff working closely with CHWs to deepen their understanding of CHW roles and identify strategies for effective support.

By implementing these practices, organizations can ensure that CHWs are valued, supported, and well-equipped to advance community health and achieve long-term success.



Best practices for supervising CHWs:

- Supervisors should plan and support opportunities for CHWs to advance in their careers through professional development and growth initiatives. Having experienced CHWs serve as supervisors can also help create clear career pathways.
- Supervisors should meet regularly (for example, weekly) with CHWs to discuss progress, challenges, and support needs. Regular mentoring and feedback, such as quarterly or annual performance assessments, can strengthen CHW skills and enhance their effectiveness.
- Supervisors and team members should recognize that CHWs often operate outside traditional office settings and hours. Their work may include visiting client homes, conducting outreach, or meeting with community members in the evenings or on weekends. It is important to manage expectations about their physical presence in the office during standard work hours.
- Supervisors and colleagues should attend training to understand CHW roles, competencies, and the unique challenges they face. This can help clarify the support CHWs need to thrive
- Supervisors should proactively address the needs of CHWs, advocating for resources, tools, and policies that enable their success and emphasizing their integral role within the care team.

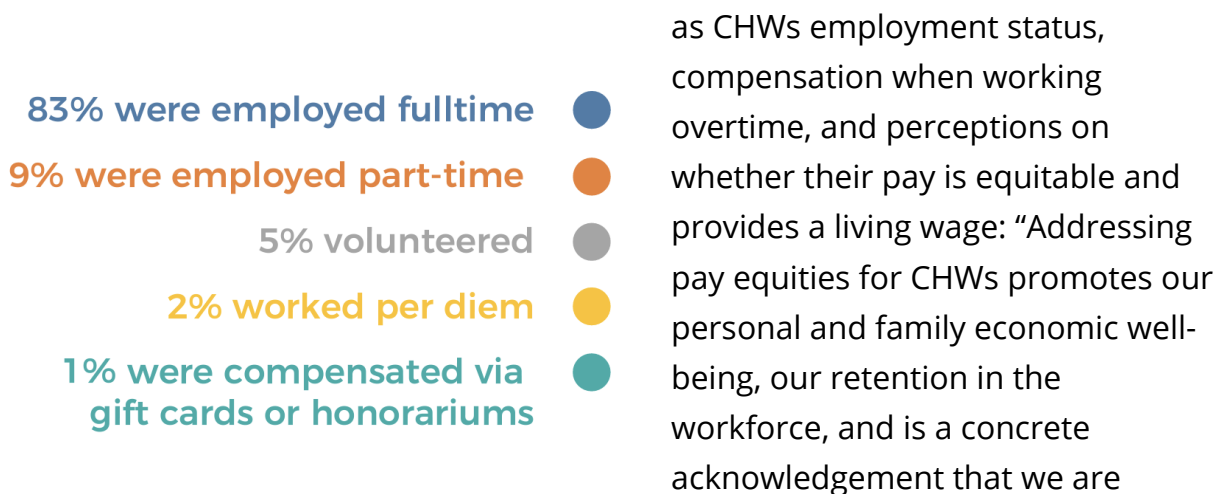
The CHW Supervisor Peer Group (CHW SPG) was formed by the Chronic Disease Prevention Program (CDPP) at the Wisconsin Department of Health Services (DHS). The CHW SPG originally formed with the support of a CDC grant: CHWs for COVID Response and Resilient Communities (CCR). Through the work of the grant, it became clear that for CHWs to be successfully integrated into communities and organizations, there must be a clear understanding of the CHW role and appropriate CHW supervision. To better support successful CHW integration, the CDPP convened new and experienced CHW supervisors to learn from each other and share successes and challenges regarding CHW supervision in a peer-to-peer



setting. The CHW SPG has expanded to include organizations from across Wisconsin and is open for attendees regardless of their funding or affiliation with DHS. For more information on how to join the group please email DHSCommunityHealthWorkers@dhs.wisconsin.gov and read an [overview](#) of the group (Wisconsin Department of Health Services, n.d.).

Compensation

CHWs are valued members of the public health workforce yet have historically not been paid a thriving wage that reflects the true value of the work they do within their communities. CHWs frequently face the same challenges as those they serve, yet they are often expected to volunteer their time rather than receiving fair compensation. In 2010, NACHW conducted a [survey](#) (2022) to assess metrics such



respected as professionals within the communities where we live and the organizations where we serve.” (NACHW, 2022)

A [livable wage](#) refers to the minimum income required to meet basic needs, including housing, food, healthcare, and transportation, without relying on public assistance or going into debt (Living Wage, n.d.). A **thriving wage** goes beyond a livable wage and provides enough income to not only meet basic needs but also afford savings, recreation, and overall financial security, allowing for a balanced and fulfilling life (Living Wage, n.d.).



Human resources (HR) professionals often base job requirements and salaries on formal education levels, which can present challenges when hiring CHWs, as their qualifications are often rooted in lived experience rather than formal or higher education. It is important for organizations to collaborate with their HR personnel to ensure hiring policies do not create an inadvertent barrier to recruiting for and hiring the appropriate candidate for the CHW position—centering their lived experience and the unique community perspective they bring to their role.

In 2024, Stanford University collaborated with CHWs in California on a [study](#), *Exploring Individual identity, belonging, and collective organizing of Community Health Workers in California* (2024). According to the findings, lived experience with community members is an important employable asset, and comes with financial and social costs that can be formally recognized and compensated (Murtagh et al., 2024).

“When I sit next to my coworkers who have their master's and doctorates, they rely on me because you cannot read lived experience.”

“You can't always really test for lived experience... There are some things that are just understood, and the rapport you've built with your community. You can't put that into a test.”

“Just having the knowledge of the culture, I mean, you paid a price for that culture. Your family paid a price, right?”

CHWs in California reflections on lived experience (Murtagh et al., 2024).

Integrating CHWs into local health departments is one way we can ensure CHWs are paid not only a livable wage, but a thriving wage. South Dakota, with a Medicaid reimbursement rate of \$67 per hour, provides an example of what movement towards a thriving wage for CHWs looks like. See South Dakota's [Medicaid CHW Services Fee Schedule](#) (South Dakota Department of Social Services, 2024) and read the [one pager](#) (South Dakota Department of Social Services, 2022) from South Dakota Medicaid Provider News to learn more about South Dakota's current CHW Medicaid reimbursement structure. Although the state of Wisconsin does not currently include CHWs as a provider type in the State Medicaid Plan and therefore, CHW services are not currently available for Medicaid reimbursement, this example illustrates how local health departments could utilize Medicaid reimbursement structures for CHW services in the future.



Best practices to promote thriving wages for CHWs in Wisconsin:

- Compensate CHWs with additional qualifications—such as fluency in multiple languages—with higher wages, reflecting the added value they bring to their role.
- Provide health insurance, retirement benefits, and paid leave. This demonstrates organizational commitment to CHWs' well-being and professional longevity.
- Shift from a reliance on grants to a more stable, long-term funding model by including CHWs in operating budgets. This helps ensure financial sustainability and growth of CHW programs.
- Collect qualitative and quantitative data to directly measure CHWs' financial impact. Personal stories, community testimonials, and other impact data all highlight the “community value” that CHWs provide. This helps demonstrate the return on investment and advocate for increased funding and compensation.
- Address compensation gaps and adjust wages in response to the increasing recognition of CHWs' value can help close pay gaps and support fair compensation.

Community partnerships

Community partnerships are essential for promoting collaborative efforts aimed at supporting the health and well-being of the community. CHWs, while critical, cannot address these challenges alone. It is only through collective action and partnership that they can effectively address health issues in their communities.

Community-based organizations, health systems, academic institutions, faith-based organizations, and community service providers are just a few key examples of partners that CHWs can collaborate with to improve health outcomes. CHWs spend considerable time building and maintaining relationships with community partners as they are crucial in helping CHWs to connect clients and provide them with the resources to address their needs.



CHW partnerships not only have an impact on individual health, but the collective community health as well. For example, CHWs have the ability to advance local health department requirements such as Community Health Assessment or Community Health Improvement Plan (CHA or CHIP) processes by engaging community partners and ensuring CHA or CHIP data collection and planning represents the goals and vision of its community members. The data and survey responses gathered through this collaboration can help local health departments determine whether they need to establish new relationships with community partners or strengthen existing ones to work towards community health initiatives.

Organizations should assess existing community partnerships as they prepare to integrate a CHW because part of a CHW role will be to maintain those partnerships. Include time building relationships with community partners in the onboarding checklist for CHWs.



Section 3 review

Use this guide to review and reflect on key concepts from this section:

Terms

- **CHW job description** provides a broad overview of the CHW's position within the organization, including role, responsibilities, and qualifications.
- **CHW scope of practice** is a detailed document outlining the specific tasks, goals, and expectations for a CHW in a particular program or project. It includes the roles and sub-roles a CHW will fill in the program.
- **CHW Center for Research and Evaluation (CHW-CRE)** is a group of CHWs and allies who came together in 2015 to identify and promote the use of common indicators for CHW practice with a focus on building and modeling CHW leadership in research and evaluation. Learn more about [CHW-CRE](#) and explore their library of [CHW program evaluation resources](#).

Concepts

- **CHW job description and scope of practice** outlines a CHW's key responsibilities (like outreach, health education, and case management) guiding their daily work. The scope of practice, which reflects the broader goals of the organization, can shape the job description to focus on specific health priorities. When both are aligned, CHWs are better equipped to meet their responsibilities and support the organization's health goals.
- **Organizational understanding of the CHW model** supports successful integration of CHWs. Other staff members need to understand the CHW role, as CHWs often work outside normal hours and spend most of their time out in the community. It's important to have supporters in the organization who can help explain the value of CHWs to partners and encourage their growth. Best practices include involving the team in decisions, offering shadowing opportunities with CHWs on the team, and providing ongoing training to ensure everyone works well together as a cohesive team.
- **Best practices for CHW supervision** ensure that CHW supervisors should understand the unique, community-based work of CHWs and hold regular check-ins to ensure support and accountability. They should provide mentorship, skill development, and create career growth opportunities, including clear career ladders. CHW Supervisors must also adjust



expectations for CHWs' non-traditional work hours and advocate for the resources and policies they need to succeed.

- **CHWs should earn a thriving wage.** Many CHWs are currently paid a livable wage vs. the thriving wage they deserve. A livable wage covers basic needs like housing, food, and healthcare without relying on public assistance or debt, while a thriving wage goes beyond that, offering financial security, savings, recreation, and a fulfilling life. The organization should collaborate with HR personnel to ensure hiring policies (for example: education minimums and background checks) do not create a barrier for hiring a CHW position based on lived experience.
- **CHW evaluation** is a key part of designing a successful CHW program. It involves setting clear goals and expected outcomes from the start. Including CHWs in the design process is key, as they understand the local community's needs and culture and can ensure the program matches community needs. For more suggestions and best practices on improving CHW practices and leadership in research and evaluation, visit the [CHW-CRE website](#).
- **Community partnerships** are essential. CHWs cannot solve health issues alone, so they work with organizations like health systems, pharmacies, schools, faith groups, community-based organizations, and private clinics. These partnerships help CHWs connect people with the resources they need. By working together, CHWs and community partners can also improve data collection for local health department Community Health Assessments or Community Health Improvement Plans. Before adding a CHW to a team, organizations should assess current partnerships and ensure there's time for CHWs to build and maintain these important relationships as part of their job.

Suggested action items

- Download and review the National C3 Council's [Community Health Worker Assessment Toolkit](#).
 - Is your organization implementing these best practices?
 - If not, what needs to change?
- Download and review The National C3 Council's [CHW Roles and Competencies and Review Checklist](#).



- Do the CHW job descriptions for your organization align with the roles and sub-roles listed in the checklist?
 - If not, what needs to change?
- Review [Hiring Practices that Support State Integration of Community Health Workers](#). This playbook was written in collaboration between the Association for State and Territorial Health Officials (ASTHO) and NACHW.
- Encourage CHW supervisors to join [The CHW Supervisor Peer Group](#) (CHW SPG), formed by the Chronic Disease Prevention Program (CDPP) at the Wisconsin Department of Health Services (DHS) by reaching out to DHSCommunityHealthWorkers@dhs.wisconsin.gov.
- Review Wisconsin examples of CHW job descriptions and scopes of practice:
 - [Bilingual CHW Job description](#) (Sheboygan County)
 - [CHW scope of practice](#) (Sheboygan County)
 - [CHW Job description](#) (Wood County)

Reflection questions

- How are CHW supervisors supporting CHWs in your organization?
 - How often are supervisory sessions or check-ins?
 - How often are supervisors communicating directly with CHWs?
 - Is the level of support offered appropriate for the caseloads and roles of the CHWs?
 - Are supervisors available outside of supervisory sessions to offer additional support?
- How are CHWs being supported by other team members within your organization?
 - Does the entire team have a clear understanding of unique roles and responsibilities of CHWs on your team?
 - Are CHWs supported by peer mentors? Provided opportunities to shadow?
 - Do team members introduce CHWs on the team to community partners?
- Have the CHW program roles and responsibilities been communicated to leadership, community members, and partnering programs?
- Are CHWs guaranteed a thriving wage, including sick time off and hazard pay?



Section 4: Programmatic planning: Recruitment, hiring, onboarding, training, and career ladders

After a strong organizational foundation has been created, steps can be taken to integrate CHWs in your organization! Effective programmatic planning for CHWs includes thoughtful approaches to hiring, onboarding, and career pathway development. Each step ensures that CHWs are not only prepared for their roles but are supported in growing within the organization. The following section explores best practices and recommendations for these key components, emphasizing the importance of integrating CHWs into the organization's culture, providing appropriate training, and creating career advancement opportunities that align with their unique skill sets and lived experiences. This holistic approach helps to ensure the long-term success and sustainability of CHW programs within LTHDs.

Recruitment

The recruitment and hiring process for CHW positions is distinctive, reflecting the unique nature of the CHW workforce. At the heart of this process is the need to identify individuals who not only possess the necessary qualifications but also share a deep connection with the communities they will serve. This connection is essential for fostering trust, cultural understanding, and effective communication—hallmarks of successful CHW programs. By prioritizing **targeted outreach**, organizations can attract diverse candidates with the **lived experiences** and commitment needed to advance community health and well-being.

Recruitment can be conducted through targeted outreach within the community to encourage applications from individuals who are not only qualified but also deeply connected to the populations being served. This approach helps ensure that the CHWs hired are equipped with the skills, cultural understanding, and lived experiences needed to succeed in their roles. Additionally, tailoring recruitment efforts to reach the right candidates—whether through community networks, local organizations, or specific outreach initiatives—can help attract individuals who are committed to the health and well-being of their community.



Best practices for CHW recruitment:

- Clearly establish the qualities, skills, and experience desired in the potential CHW in partnership with the community.
- Contract with CHW associations and community leaders to help facilitate connections to best identify individuals from the community to apply for applicable CHW positions.
- Consider focusing recruitment efforts at community events and conducting group hiring events.
- Take ample time to identify and recruit CHWs; this can take 3-6 months but allows for a compatible match to be made and assists in reducing turnover.
- Hold recruitment efforts at community events or conduct organizational group hiring events.
- Involve the community throughout the candidate selection process in formal or informal methods. This can include letters of recommendation, personal recommendations, or community debriefs.

Additional resources to learn about comprehensive recruitment strategies for CHWs:

- [Recruiting and Selecting CHWs: Strategies for Success](#) (Palazuelos, 2016)
- [Considerations for Recruiting, Hiring Community Health Workers | TechTarget](#) (Heath, 2022)
- [Tips for Recruiting and Hiring Community Health Workers as Employees](#) (MHP Salud, n.d.)
- [Rural Health CHWs: Recruiting, Hiring, and Employment Considerations](#) (Rural Health Information Hub, n.d.)



Interview process

Once candidates have been recruited, the interview and hiring process can begin. An effective approach to CHW interviews prioritizes lived experience, cultural competence, and community connections over formal education credentials. It is important for the interview team to listen for CHW qualities and skills. This recognizes the unique value CHWs bring through their deep understanding of the communities they serve.

To evaluate candidates effectively, organizations may incorporate role-playing exercises or case study scenarios into the interview process. These activities allow candidates to demonstrate their problem-solving abilities, interpersonal skills, and approach to addressing real-world client situations. For example, a role-play scenario might involve a candidate responding to a client in crisis, helping a family navigate community resources, or providing culturally sensitive health education. Such exercises not only reveal candidates' practical skills but also provide insights into their empathy, adaptability, and communication style.

It is highly recommended that CHWs play a central role in the interview process alongside other staff members. Involving CHWs ensures that the evaluation criteria reflect the realities of the role and the needs of the community. CHWs' lived experience and understanding of the job allow them to assess whether candidates possess the qualities necessary to succeed, such as trustworthiness, cultural humility, and a deep commitment to community health.

Additionally, organizations can adopt structured interview formats to minimize biases and ensure consistency. For instance, using standardized questions or evaluation rubrics that focus on core competencies such as advocacy, relationship-building, and resource navigation can help level the playing field for all candidates.

By centering lived experience, incorporating practical scenarios, and involving current CHWs in the hiring process, organizations can identify candidates who are best equipped to advance the mission of improving health outcomes and fostering community well-being.

If your organization is hiring a CHW for the first time, engage a CHW from a partnering organization to be on the interview panel.



Examples of CHW interview questions:

- Interview questions from [Sheboygan County](#) (n.d.b.) for a bilingual CHW
- A [behavior-based interview process](#) from Minnesota (University of Minnesota School of Public Health., 2024) for CHWs that provides a more in-depth understanding of a candidate's capabilities and supports health departments to make more informed decisions during the hiring process. These interview questions center CHW lived experience and seek to understand how CHW candidates have previously demonstrated certain skills, competencies, or behaviors in real-life situations.

Hiring

Supervisors play a critical role in ensuring the success of the hiring process for CHWs. By using the job description and well-defined scopes of practice as benchmarks, supervisors can align hiring decisions with the program's mission and the community's needs. The job description serves as a roadmap, helping supervisors evaluate candidates' unique qualities and skills in the context of the program's goals. The scope of practice further clarifies the role by outlining the specific tasks CHWs will perform and the populations they will support. This framework ensures that candidates not only have the necessary competencies but also demonstrate the cultural understanding and lived experiences that are central to the CHW role.

To strengthen the hiring process, it is highly recommended that CHWs themselves participate as part of the hiring team. CHWs bring firsthand knowledge of the role, the community, and the challenges of the work, making them invaluable contributors to evaluating candidates. This collaborative approach not only encourages CHW leadership development, it also fosters a more inclusive and effective hiring process, reinforcing the value of CHWs' insights in shaping their own workforce.



Best practices and key considerations for hiring CHWs:

- The CHW you hire should have an in-depth understanding of the community they will serve and possess the skills and qualities essential to the organization and the goals of the CHW program. Hiring CHWs with direct ties to the community—such as shared cultural or lived experiences—fosters trust and improves engagement.
- If the program targets a particular population, hire a CHW from that population to strengthen relationships, improve understanding, and enhance care delivery. It is not just about speaking the language; CHWs also bring nuanced knowledge of the culture, values, and unique challenges of the communities they serve.
- Hiring rubrics should emphasize essential CHW qualities such as empathy, advocacy, and adaptability, alongside lived experience. These attributes are often more critical to the role than formal education or traditional work experience.
- Develop standardized hiring rubrics that evaluate core CHW competencies, such as cultural humility, relationship-building, and advocacy, while placing significant weight on lived experiences and community connections.
- Ensure CHWs are active participants in the interview and evaluation process, offering their perspectives on candidates' suitability based on real-world expectations and needs.

Examples of tailored CHW hiring:

- **Perinatal CHWs:** For a program addressing high rates of infant mortality, an organization might seek a CHW from the neighborhood with these challenges, who shares the race or ethnicity of the majority of residents and has experience supporting mothers and babies.



- **Re-entry CHWs:** If a CHW will work with individuals re-entering society after incarceration, the organization may prioritize hiring someone of the same gender identity who has personal experience with the re-entry process and understands the barriers these individuals face.
- **Substance use disorder recovery CHWs:** For a program supporting individuals in recovery, a CHW in recovery themselves, with a lived understanding of the recovery journey and its specific challenges, is an ideal candidate.

By integrating these practices, organizations can make informed, equitable hiring decisions that not only support program success but also uphold the values of community representation and cultural competency that are at the heart of CHW work.

Onboarding and training

Once CHWs have been hired, the next step is to ensure that CHWs are effectively integrated into the culture and practices of the organization through a thoughtful and comprehensive onboarding process.

Effective onboarding helps CHWs feel valued, prepared, and empowered to contribute meaningfully to their roles. It acknowledges and addresses their unique experiences and needs, facilitating a smooth transition into their teams. Clear communication, mentorship, and ongoing support are foundational elements of an equitable onboarding process, ensuring that CHWs are equipped to succeed and positioned as trusted community partners and key contributors to public health initiatives.

Because so much of a CHW's work happens outside of the office, it may be difficult for CHWs to feel like a connected part of the team. It is important for organizations to be proactive in ensuring CHWs are included in team activities, decision-making, and organizational communication. This intentional inclusion can help CHWs feel more connected, supported, and valued within the larger team. Onboarding can foster an inclusive environment for CHWs.



Additionally, it is the CHW supervisor's responsibility to help the CHW understand the overall structure of the organization. All too often, CHWs are hired and onboarded onto new teams without understanding the full picture of the organization, the various programs it facilitates, and the goals or intended outcomes of specific projects. Although CHWs are adaptable in new situations, part of CHW integration is ensuring that CHWs understand how their job roles fit into the broader mission of the organization.



Best practices for CHW onboarding:

- Invite newly onboarded CHWs to all regular team meetings and trainings to ensure adequate internal capacity building.
- Train CHWs to navigate and utilize internal systems and processes, such as using an electronic health record system (if applicable), documenting patient or client interactions, and communicating the outcomes or results of interactions with the full team.
- Ensure CHWs are familiar with community resources.
- Support CHWs to identify opportunities for professional development and to build relationships with partner organizations in the community such as community coalitions, social services, and health and human service agencies.
- Support CHWs to pursue additional CHW Core Competency training, and other trainings and continuing education opportunities to grow skills during paid work hours.
- Support CHWs to join and participate in local, regional, statewide, and national CHW networks or associations.
- Support CHWs to build relationships with different community partners. A best practice is to include time for this within the onboarding tasks and have a list of key community partners and contacts ready for the CHW. CHWs can schedule meetings with partners in-person and build relationships over the course of their onboarding and initial training process.
- Ensure CHWs are at all team meetings; schedule meetings when CHWs are not out in the field.
- Invite CHWs to join strategic planning groups and advisory boards.
- Intentionally have CHWs at the table when decisions about the program are being made, especially when assessing community needs.



St. Louis has developed CHW and CHW supervisor onboarding checklists that outline tasks over four weeks. To read the full checklist, visit [page 32 of the supervisor onboarding checklists](#) (St. Louis Community Health Worker Coalition, 2024, p 32).

☐ **Share Training Schedule:**

Incorporate e-learning modules that engage CHWs through interactive scenarios and quizzes.

☐ **Peer Introduction Program:**

Arrange for new CHWs to connect with their peers through a “buddy system” for informal guidance and social integration.

Week 1 Orientation:

☐ **Interactive Team Introductions:**

Host an in-person or virtual meet-and-greet with team members, allowing for informal Q&A and relationship-building.

☐ **Role Immersion:**

Organize a “Day in the Life” experience where new CHWs shadow different roles within the organization to understand various functions and perspectives.

☐ **System Training:**

Tailor system training based on individual learning styles and roles, offering multiple formats such as video tutorials, live webinars, and hands-on practice.

☐ **Scenario-Based Training:**

Use simulations to practice real-life scenarios.

Weeks 2-4 Orientation

☐ **Role-Specific Training:**

Incorporate role-play exercises to practice client interactions and health interventions, enhancing practical skills and confidence.

☐ **Mentorship and Shadowing:**

Use video conferencing for continued, regular mentorship meetups, allowing for flexible scheduling and ongoing support.

☐ **Evaluation and Feedback:**

Implement a truncated, 360-degree feedback process where the new CHW receives feedback from peers, clients, and supervisors.

☐ **Success Celebration:**

Host a small celebration or recognition event to acknowledge the completion of the onboarding process and



Available training programs in Wisconsin

CHW Core Competency training improves a CHW's capacity to fulfill their roles within an organization. However, because many CHWs face financial or other barriers to participating in training, it should not be a prerequisite or expectation for hire. Employers can support CHWs to take Core Competency training by paying for it after hiring a CHW. In many cases, grant funding can support CHW training and professional development. Be sure to include these opportunities as line items within grant or organizational budgets.

Wisconsin has three CHW training sites. To read an overview of each of them, please refer to page 35.

- [Milwaukee Area Health Education Center \(AHEC\)](#) (MILAHEC, n.d.)
- [Great Rivers United Way](#) (United Way of Wisconsin, n.d.a)
- [NewCAP](#) (NEWCAP, Inc., n.d.)

In addition to Core Competency training, organizations can support CHWs to take supplemental training that will expand a CHW's skillset and strengthen their expertise to meet the specific needs of their community. For example, CHWs may take the [CHW Diabetes Education Program](#) (American Diabetes Association, 2023) through the American Diabetes Association to provide diabetes prevention and management education to clients. A database of CHW-vetted supplemental training available on the [envision website](#) (envision, n.d.b.).

Career pathways

With a strong foundation established through effective recruitment, hiring, onboarding, and training, the next step in supporting CHWs is to focus on building clear and sustainable career pathways that foster increased retention, long-term growth, and professional development within the broader public health workforce. The role of CHWs extends beyond “boots on the ground” work. CHWs have the potential to take on broader responsibilities within organizations, including advocacy, education, outreach, and research. To maximize this potential, organizations are encouraged to invest in the professional development of CHWs and implement best practices to expand and enhance their programs, ensuring CHWs can thrive in diverse and impactful roles.



NACHW outlines the [following recommendations](#) (NACHW, 2022) for organizations to further develop career pathways for CHWs:

- Retain the CHW title in work promotions.
- Eliminate short-term grants and restricted reimbursement for CHW roles.
- Adopt APHA policies to ensure [CHW self-determination](#) (APHA 2014) and 50% or more CHW participation in all workforce decision-making processes.
- Ensure that CHW training and certification programs include community advocacy, health, racial equity, and social determinants of health focus.
- Conduct research that further explores barriers training and professional development. Barriers could include lack of training availability in the region, lack of language accessibility and interpretation, lack of transportation, criminal background checks, and out-of-pocket costs for training expenses.
- Increase cultural fluency to include LGBTQ+, race, ethnicity, language preference, socioeconomic status, belief systems, and citizenship status—regardless of background history—at the policy level and practice levels.

It is important that organizational narratives and operationalized processes for hiring, onboarding, and training CHWs should reflect that a CHW position is **not** just an entry-level position.

Victoria Adewumi and Noelle Wiggins, co-principal investigators of CHW CRE, wrote an article highlighting some of the challenges with systemic support for CHWs to achieve their full potential (Adewumi & Wiggins, 2024):

“Unfortunately, not all CHW programs prioritize hiring or training from communities served. During the recent season of funding abundance, the idea that anyone who takes a CHW training can call themselves a CHW has proliferated. We hear of individuals in clinical roles like EMTs and pharmacy technicians taking one CHW training course and then billing federal payers under codes originally designated for the CHW workforce.”

Victoria Adewumi and Noelle Wiggins, co-principal investigators
of CHW-CRE



To address these challenges, organizations can adopt intentional strategies that go beyond viewing CHW positions as entry-level roles. By recognizing the value of CHWs and fostering environments where they can thrive, organizations can ensure systemic support that empowers CHWs to achieve their full potential. Read the [full article](#) (Adewumi & Wiggins, 2024) for a list of best practices.

Other innovative solutions to develop career pathways for CHWs include:

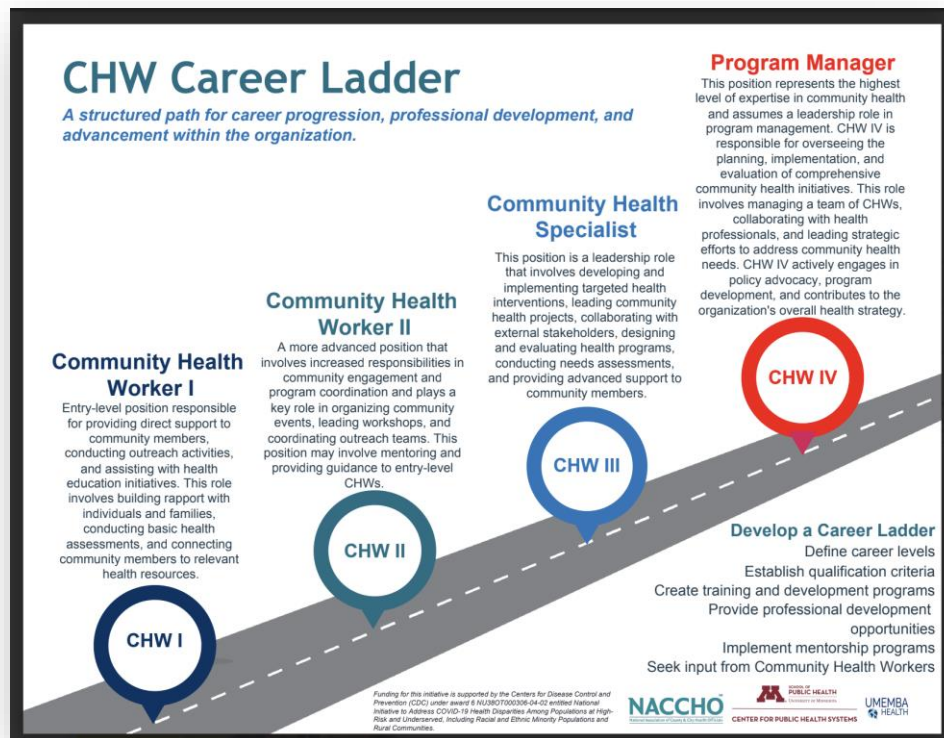
- Job rotation opportunities
- Recognition programs
- Professional development funds
- Mentorship programs
- Career pathway planning
- Performance metrics

Counter-productive practices that harm the CHW workforce may include cross-training individuals from other professionals (like emergency medical technicians and nurses) to be CHWs or sending internal staff who do not match the identities and qualities of a CHW (for example, lived experience) to take CHW Core Competency training and do the work of CHWs within the organization if they do not possess the qualities of or work in the role of a CHW (as defined by the National C3 Council). Some communities, like rural communities, may require cross-training to meet the needs of the community and the CHWs that work in them. Each organization works in the context of their community, which is why we want to reiterate that there is no one size fits all solution for community health programs.



Examples of CHW career ladders

The [University of Minnesota's CHW Toolkit](#) (University of Minnesota School of Public Health., 2024) provides an example of what a CHW career ladder within an organization could look like.



St. Louis developed a well-defined career ladder that is crucial for the growth and professional development of CHWs. It provides a structured path for career advancement. Each segment of the ladder has clearly defined roles and responsibilities and includes CHW as part of the title. Read St. Louis's [full toolkit and recommendations](#) (St. Louis Community Health Worker Coalition, 2024).



Career Ladder Details

Community Health Worker (CHW)

Responsibilities: Provide direct health education, support community outreach, assist in navigating healthcare services.

Pay Range: \$35,000 - \$45,000 annually.

Potential Risks: High turnover due to burnout or low job satisfaction.

Mitigation: Implement regular check-ins and provide professional development opportunities.

Certified CHW (CHW-C)

Responsibilities: Perform advanced health education and outreach with specialty in specific areas (e.g., maternal health, housing, chronic disease management), supported through CEUs.

Pay Range: \$40,000 - \$50,000 annually.

Potential Risks: Certification requirements may become outdated or irrelevant.

Mitigation: Regularly review and update certification standards to reflect current best practices.

CHW Team Lead / CHW Supervisor / Lead CHW

Responsibilities: Lead a team of CHWs, provide mentorship, ensure quality of outreach efforts, support new CHWs.

Pay Range: \$50,000 - \$65,000 annually.

Potential Risks: Overburdening the role with administrative tasks may detract from team development responsibilities.

Mitigation: Teach delegation for administrative tasks and provide leadership training.

CHW Leadership & Development

Specialist /

CHW Project Manager

Responsibilities: Set vision and strategy for CHW programs, manage projects, develop and implement training programs, support scaling of CHW services.

Pay Range: \$60,000 - \$70,000 annually.

Potential Risks: Difficulty in scaling programs without sufficient resources.

Mitigation: Use data-driven metrics to guide program expansion and secure funding.

Community Health Director/ Director of CHW Leadership & Development / CHW Data Specialist

Responsibilities: Oversee the entire CHW program, ensure sustainability, advocate for CHW needs, manage data and evaluation efforts, drive strategic initiatives.

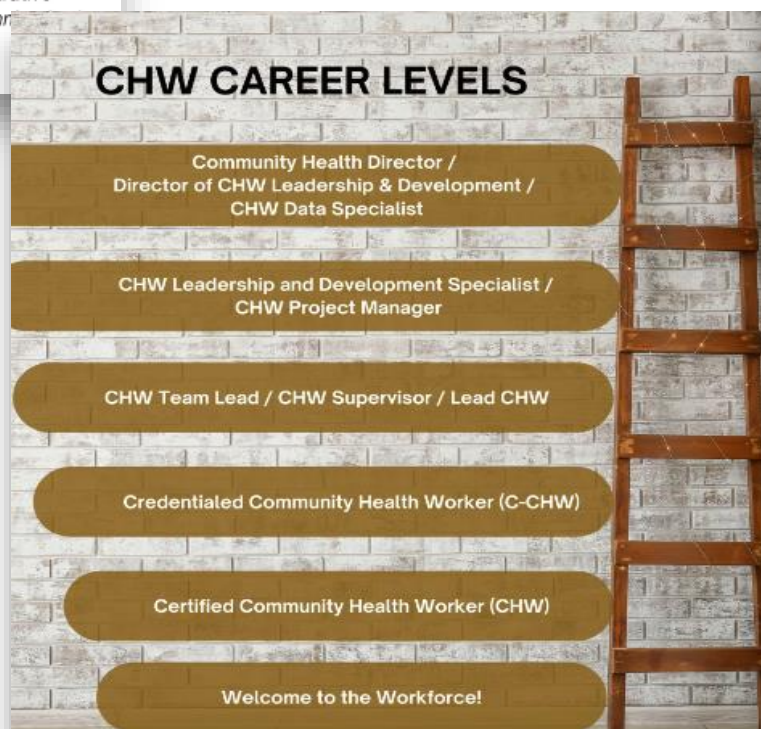
Pay Range: \$75,000+ annually.

Potential Risks: High responsibility may lead to stress and potential for oversight.

Mitigation: Develop a robust support system, including administrative support and strategic planning.

This is an example from St. Louis and is based on the cost of living in Missouri. A thriving wage will vary by state.

Training and technical assistance can support organizations to better understand what appropriate measures can be taken to ensure that there are adequate career development opportunities for CHWs while meeting the needs of the program. **envision** is available to offer customized coaching to support long-term CHW programs. Please contact **envision** at hello@envisionCHWs.org.



Section 4 review

Use this guide to review and reflect on key concepts from this section:

Terms

- **Diverse CHW candidates** include people from different backgrounds, cultures, and life experiences who are being considered for CHW roles. This includes differences in race, ethnicity, language, and other personal experiences that help the CHW team connect with and support the community.
- **CHW career pathway** provides a clear plan that shows how a CHW can grow and advance in their job. It outlines different roles and responsibilities CHWs can take on as they gain more experience and skills. This pathway helps CHWs see the steps they can take to move up in their career, from entry-level positions to more advanced roles with greater responsibilities.
- **Targeted CHW recruitment and outreach** ensures recruiting people with the right skills and a strong connection to the community they serve. This includes outside the box thinking and often involves working with community leaders, partnering with CHW groups, and attending community events or hiring fairs to meet and recruit the best candidates.

Concepts

- **CHW recruitment** successfully identifies CHWs who are qualified and have a strong connection to the community they will serve. Best practices for recruitment include working with the community to decide what skills and qualities are needed, partnering with CHW groups and community leaders, and reaching out at community events or group hiring fairs. It's important to give enough time—around 3-6 months—to find the right fit and reduce turnover. Personal recommendations and community feedback during the hiring process can help identify strong candidates.
- **Interviewing CHWs** focuses on lived experience, cultural competence, and community connections rather than just formal education. Interview teams should look for key qualities like trustworthiness and cultural understanding. Using interactive methods like role-playing or case studies allows candidates to demonstrate problem-solving and communication skills. It's



recommended that CHWs be part of the interview team to lend their unique perspective to the hiring process.

Structured interviews, like those used in Sheboygan County for bilingual CHWs or the behavior-based approach in Minnesota, can reduce bias and focus on real-life examples of skills.

- **Hiring CHWs** are effective when led by using the job description and scope of practice to align hiring decisions with the program's mission and community needs. Including CHWs in the hiring team ensures the process reflects the realities of CHWs who are working in the field. It's crucial to prioritize candidates who understand the community, share similar lived experiences, and can build strong relationships with community members. It is important to weigh qualities like empathy, advocacy, and adaptability more than formal education.
- **Onboarding and training CHWs** requires a thoughtful onboarding process to help CHWs feel valued and prepared. The process includes clear communication, mentorship, and support. Integration into team activities, training on internal systems, and familiarization with community resources are key components of a successful onboarding process. Internal education of CHW roles can help support staff to understand CHW roles better. Supporting professional development and involving CHWs in programmatic planning are essential. CHW Core Competency Training should be financially supported by the organization during work hours
- **CHW career pathways** support CHWs long-term. It is important for organizations to create clear career pathways that allow for growth and professional development, offering roles beyond direct service, like advocacy and research. Investing in CHW training beyond core competency training and providing promotional opportunities are essential. Best practices include job rotations, mentorship, and professional development funds. Involving CHWs in decision-making and having career ladders with defined roles support CHWs to grow in their roles. Policies should focus on recognizing CHWs' full potential within their roles rather than focusing on cross-training CHWs to move onto other job titles.



Suggested action items

- Review the self-assessment you completed on page 4 of this toolkit. Reflect on your answers to the 'CHW Supervision and Professional Development' and 'Training and Onboarding' sections.
 - How do your answers align with best practices shared in this section?
 - If your answers do not currently align with best practices for the CHW workforce, what are the first steps you can take to change that?
- Review the CHW and CHW supervisor onboarding checklists developed by the county of St. Louis, Missouri that outline a [checklist for CHW onboarding tasks](#).
 - Does your organization have a supportive onboarding process for CHWs?
 - Were CHWs a part of the design of the onboarding process?
- Review your organization's current hiring process for CHWs.
 - How do your current hiring practices consider the community's needs and cultural knowledge?
 - Are you using a hiring checklist that includes important skills like cultural understanding, relationship-building, and lived experience?
 - What steps can you take to make sure CHWs are involved in the hiring process to help choose the best candidates?
- Review [NACHW's recommendations](#) and [CHW-CRE's recommendations](#) on how to develop career pathways for CHWs.
 - How many of these recommendations does your organization have in place to support CHWs?
 - What kind of support do you need to implement these in your organization?



In summary

No matter what stage your organization is at in strengthening your engagement with Community Health Workers, this toolkit will help you do so in a way that builds sustainable programs and practices from the very start.

The following section, **Resources, getting connected, and additional learning**, provides a “one-stop-shop” for information, documents, and tools you can use and engage with to prepare your organization for effective CHW integration strategies and to develop your program with sustainability in mind.

We know that the CHW landscape is ever-evolving, especially as there are shifts at the local, state, and national levels. As more resources become available, the Wisconsin CHW Integration Toolkit will be updated to reflect those changes so that your program can be as successful as possible.

We are here to connect and discuss any questions, feedback, or success stories you may have. Please reach out to us at DHSCommunityHealthWorkers@dhs.wisconsin.gov.



Resources, getting connected, and additional learning

This section outlines additional resources to support CHW integration into health departments. These are resources that public health departments may access to learn more about best practices for CHW integration.

Wisconsin resources

[Wisconsin Public Health Association: CHW Section](#) (Wisconsin Public Health Association, n.d.)

The purpose of the Community Health Worker section is to advocate for, educate about and connect to CHW's across the state of Wisconsin. Advocating for the workforce is an integral part of Public Health.

Wisconsin DHS supported collaborative spaces

CHW Empowerment Collaborative

The CHW Empowerment Collaborative (CHW-EC) was founded in 2022. The Chronic Disease Prevention Program (CDPP) at the Wisconsin Department of Health Services (DHS) worked to start the CHW-EC. CDPP established the group with the support of a grant. The CDC grant is Community Health Workers for COVID Response and Resilient Communities, often called the “2109 grant”. The CHW-EC began as a space for CHWs on the 2109 grant to come together. The group offered space for CHWs by CHWs. The CHW-EC is a place to network and share resources and opportunities. It is also a place for mentoring and peer support, and growing CHW leadership skills and voice. A key aspect of the CHW-EC is to authentically engage CHWs in spaces where decisions are being made. The CHW-EC has expanded beyond the 2109 grant and invites all CHWs to join.

CHW Supervisor Peer Group

The CHW Supervisor Peer Group (CHW PSG) was formed by the CDPP at the Wisconsin DHS. CDPP established the group with the support of the Community Health Workers for COVID Response and Resilient Communities grant. Through the work of the grant, it became evident that for CHWs to be successfully integrated into communities and organizations, there must be a clear understanding of the CHW role and CHW supervision. This called for CHW Supervisor training and



support and the CHW PSG was formed in response to this. The group has now expanded statewide and is open for attendees regardless of their funding or affiliation with DHS.

CHW Financial Sustainability Group

The Financial Sustainability Group, previously known as the CHW Medicare Group, was formed from an idea that came out of the CHW Supervisor Peer Group in March of 2024. The supervisor requested the group in response to the new Medicare ruling that supports reimbursement for CHWs. The group consists of CHWs and CHW partners, supervisors, and allies. The reason for the change in name is that Medicare reimbursement cannot be discussed without also talking about braided funding as Medicare reimbursement alone cannot sustain a CHW role.

Find out more information about these groups:

DHSCCommunityHealthWorkers@dhs.wisconsin.gov

Regional

Dane County Collective erika.anna@fammed.wisc.edu,
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Dane County Collective consists of CHW organizations located in Dane County that have a collective vision to promote wellness through education. The Collective provides support to empower CHWs by training and learning from each other.

Coulee Region CHW Network afair@gruw.org, akuntu@blacklax.org,
anewberry@gruw.org

The Coulee Region CHW Network is a CHW-led collaborative serving western Wisconsin. This regional network brings together CHWs to strengthen their professional capacity and impact. The network focuses on supporting CHWs through education, networking, and advocacy; fostering collaboration to improve community health outcomes; and providing a platform where CHWs can connect, share resources, and grow professionally. Through quarterly meetings and ongoing communication, members build relationships, exchange knowledge, and advance the CHW profession in our region.



CHW Core Competency Training Sites

[Milwaukee AHEC](#) (MILAHEC, n.d.)

Milwaukee AHEC is an established provider of CHW training. Recognizing that there is a need for community health workers to serve as a “bridge” between community members and the health care delivery system, Milwaukee AHEC launched the Community Health Worker Training Program in 2010.

[Great Rivers United Way](#) (United Way of Wisconsin, n.d.a)

Great Rivers United Way is a system to bridge the gap between health care delivery and the social service sector for cost savings, improved population health outcomes, and increased client experience and engagement. Great Rivers United Way’s work bridges the gap between clinical health and social determinants of health for individuals to improve their health and well-being. This holistic framework leverages CHWs, who bring a culturally competent, person-first approach to addressing health inequity. Additionally, Great Rivers United Way provides quality assurance, regularly shares de-identified data with the community, and offers a layer of additional support to the partnering CHWs. Great Rivers United Way is one of just three validated Core Competency training sites in Wisconsin. All CHWs connected to Great Rivers United Way receive C3 Core Competency training, Pathways Community HUB model training, and training for documenting in the HUB’s database, Care Coordination Systems (CCS).

[NewCAP](#) (NewCAP, n.d.)

NewCAP is a Community Action Agency serving the needs of low- and moderate-income people in Northern or Northeastern Wisconsin that covers over 10 counties. NewCAP hosts CHW training which consists of classroom experience twice a week for 16 weeks (80 hours), one-on-one mentoring with an experienced CHW weekly for one hour for 16 weeks, and 80 hours of independent field experience in the eight core competencies. The classroom experience is designed to be traditional learning or discussion once a week and presentations and Q&A from experts in the field and or hands-on learning once a week. The curriculum includes Body Systems taught by a seasoned RN and core responsibilities of a CHW. Monthly advanced training or support group for CHWs who have completed the training will be added.



[United Way Wisconsin](#) (United Way of Wisconsin, n.d.b.)

United Way Wisconsin is supporting CHW workforce development through their CHW registered apprenticeship program. [Registered apprenticeship](#) (RA) provides opportunities for individuals to gain hands-on experience with mentorship and guidance from seasoned professionals. CHWs can enhance their skills, expand their knowledge, improve their ability to address the diverse health needs of their community, and deepen their understanding of systems and resources. By engaging in RA, CHWs can sharpen their skills, build confidence in their abilities, and ultimately enhance the quality of care they provide to the communities they serve. RA can play a vital role in the growth and successes of CHWs, empowering them to make a meaningful difference in the health and well-being of their communities. The United Way of Wisconsin is partnering with the Wisconsin Department of Workforce Development (DWD) and Milwaukee Area Technical College (MATC) to provide assistance to eligible apprentices.

Newsletters

[DHS CHW webpage](#) (Wisconsin Department of Health, 2025)

The Chronic Disease Prevention Program collaborates with partners to advance the sustainability and integration of the CHW workforce to promote equity and positive health outcomes for people in Wisconsin. A CHW webpage has been developed to share CHW resources and information with organizations. Do not hesitate to sign up for the CHW newsletter to learn more about the work of Wisconsin CHWs.

Other resources

- [CDC Job Aid: Increasing Capacity to Engage and Sustain Community Health Workers in Diabetes Management and Type 2 Diabetes Prevention](#) (Centers for Disease Control and Prevention, 2021)
- [NACHW Pay Equity Toolkit](#) (NACHW, 2021)
- [Community Health Representative Integration: Public Health Emergency Preparedness and Response. Northern Arizona University, Center for Health Equity Research \(2023\). CHR Integration Tools Series](#) (Northern Arizona University, Center for Community Health and Engaged Research, n.d.)
- [Community-Based Workforce Alliance: Advancing CHW Engagement in COVID19 Response Strategies. A Playbook for Local Health Departments Strategies in the United States](#) (Community-Based Workforce Alliance, 2021)





envision resources

envision is a CHW-led, multi-state partnership providing training and technical assistance to CHW programs, health departments, including Island Nations and Tribal health departments, across the United States. Designed by CHWs for CHWs, **envision** focuses on capacity building and sustaining a strong, capable CHW workforce. Guided by the principle “nothing about us without us,” the team supports CHW organizations through customized training, needs assessments, and facilitating gatherings that foster collaboration and dialogue. **envision** empowers CHWs to excel in their critical roles, ensuring lasting impact in the communities they serve.

- [envision website](#)
- [Resources from **envision** and national partners](#)
- [envision CHW Financial Sustainability resources](#)
- [CHW Sustainability Summit Participant Guide and Reflection Journal \(English\)](#)
- [CHW Sustainability Summit Participant Guide and Reflection Journal \(Spanish\)](#)
- [CHW Sustainability Summit Keynotes and Plenaries](#)
- [envision Resource Database](#)
- [envision Other Trainings Database](#)
- [myenvision community platform](#)

Key webinars

- [CHW Leadership](#) (envision, 2024)
CHW leadership is fundamental to achieving CHW Workforce Sustainability. This webinar focuses on how the development of a CHW leadership body (for example, a CHW Council) can help elevate CHW voices and enhance their leadership capabilities. **envision's** CHW Council Charter (a tool adapted from coalition building trainings in Wisconsin) serves as a compelling example of how to empower CHWs and ensure that their contributions are recognized and valued.

“**envision** training and webinars are very convenient for my organization Meadowood Health Partnership”. CHWs can keep up with the latest training and webinars on their time. We also educate the community by using the webinars to engage in conversations at our table talks.”

Sheray Wallace, Meadowood Health Partnership



- [CHW onboarding](#) (Community Health Alignment, 2021)
Promotes the [CCHA CHW Program Best Practices Tool Kit](#) (Community Health Alignment, 2021b) section “Designing an Effective CHW Program”.
- [CHW allyship](#) (envision, 2021)
CHWs are actively supporting their communities to ensure equitable access to health, while elevating the importance of the CHW workforce. CHW voices and actions have led to many achievements and CHW Allies are important support. CHW Allies have walked alongside fellow CHWs by using their voices to speak in collaboration with CHWs.



Get Connected. Stay Connected.

Sign up for [myenvision](#) community platform!

myenvision is intended as a real time resource sharing database and peer-to-peer connection space. Within **myenvision** there are population specific communities, including a Wisconsin community. The community was designed as a space for partners across the state of Wisconsin to engage in meaningful conversations around developing a statewide association.

Within **myenvision**, there is a [Wisconsin-specific community](#) where the CHW workforce in the state of Wisconsin can engage in conversations around CHW sustainability, integration into health departments, and the future of a state association.



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