This project will deploy community health workers (CHWs) as a strategic intervention to assist at-risk communities in the response and recovery from COVID-19. The project will also develop and test innovative financing strategies to support the long-term sustainability of CHWs and community resource providers.

**BACKGROUND**

CHWs enable a range of social services to improve health-related social needs. In turn, these improved outcomes benefit a range of downstream stakeholders including health insurers, hospitals, clinics, local governments, employers, and Virginia.

**AWARD**

Centers for Disease Control and Prevention (CDC) awarded more than $4.3 million to IPHI on behalf of Virginia Department of Health (VDH) and its collaborating partners to scale up CHW actions to support COVID-19 response and recovery efforts.

CHWs for a Healthy VA is a three-year project funded by the CDC in partnership with VDH.

**CHW Implementation Partner Sites**

**Southwest**
- Ballad Health
- Healing Hands Health Center
- Mount Rogers Health District

**Norfolk/Portsmouth**
- Capital Center of VA (CCVA) – Urban Baby Beginnings (UBB)
- Minority AIDS Support Services, Inc. (MASS)
- Sentara Healthcare

**Pittsylvania/Danville**
- Piedmont Access to Health Services (PATHS)
- Sovah Health (LifePoint)

**Richmond/Petersburg**
- Richmond Henrico Health District (RHHD)
- Central VA Health Services (CVHS)
- Capital Center of VA (CCVA) – Urban Baby Beginnings (UBB)
- Crossover Health Center
- Health Brigade
- Sacred Heart
- Virginia Commonwealth University (VCU)
The goal of CHWs for a Healthy VA is to deploy CHWs as a strategic intervention to assist at-risk communities in the response and recovery from COVID-19. The project will also develop and test innovative financing strategies to support the long-term sustainability of CHWs and community resource providers.

**STRATEGIES**

CHWs will work across multiple settings to staff direct pandemic response, create more effective, integrated health services, and address health-related social needs among priority populations (see Figure 1).

Each local intervention will be tailored to the communities in which it operates, current resources, ability to augment existing COVID-19 mitigation efforts, and cultural considerations.

Project partners will also develop/refine, implement, and evaluate CHW models and activities to achieve integrated systems of referrals. The partners will follow up across clinical and community settings to improve access to medical care and community resources (i.e. behavioral health, oral health, housing, legal, food, employment, childcare, legal, safety, and government assistance). Several standardized CHW model components (training program, standards for CHW financial assistance and integration, common intervention elements, technology platform, QI, and evaluation activities) will bond the project.

Unite Us shared screening and referral technology platform will enable clinical and community partners to send and receive electronic referrals and facilitate two-way care coordination, address people’s social needs, and improve health across communities. The project team will work with local partners to integrate Unite Us into CHW and care team activities.

**INNOVATIVE FINANCING**

The project will test and implement long-term, sustainable, CHW financing. IPHI, in partnership with a team of healthcare financing consultants, and a finance advisory committee is developing a framework to identify, pilot, and evaluate CHW and community resource financing models.

The models will demonstrate the return on investment, health, and social benefits of the interventions. The focus of this financing pilot will be in the Southwest Virginia and Richmond areas.

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