**Appendix A**

**COMMUNITY HEALTH WORKER**

**WORK PROCESS SCHEDULE**

**AND**

**RELATED INSTRUCTION OUTLINE**

**Appendix A**

**WORK PROCESS SCHEDULE**

COMMUNITY HEALTH WORKER

O\*NET-SOC CODE: 21-1094.00 RAPIDS CODE: 2002CB

This schedule is attached to and a part of these Standards for the above identified occupation.

# APPRENTICESHIP APPROACH

[ ]  Time-based [x]  Competency-based [ ]  Hybrid

# TERM OF APPRENTICESHIP

The term of the occupation is twelve (12) months through the demonstration and achievement of workplace competencies and supplemented by the required related instruction courses.

# RATIO OF APPRENTICES TO JOURNEYWORKERS

Consistent with proper supervision, training, safety, continuity of employment throughout the apprenticeship, the ratio of apprentices to journeyworker mentors will be: Two (2) apprentices may be employed at each clinical/job site for each regularly employed Community Health Worker, Community Health Technical or Clinical Staff, Facility Supervisor, or Program Manager.

Apprentices will be supervised in-person and via phone, internet webcam, text or email to ensure that a mentor is available to answer questions and monitor their progress throughout their apprenticeship under the Alaska Primary Care Association registered apprenticeship program.

# APPRENTICE WAGE SCHEDULE

Apprentices are paid a progressively increasing schedule of wages during their apprenticeship based on the acquisition of increased skill and competence on the job and in related instruction courses.

Apprentices shall be paid a progressively increasing schedule of wages based on either a percentage or a dollar amount of the current hourly Community Health Worker journeyworker wage rate, which is $18.37 per hour.

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| --- | --- | --- | --- | --- |
| **Period** | **Hourly Wage** | **OJL Duration** | **OJL Competencies** | **Related Instruction** |
| 1st | $11.94 | 6 months or 1,000 OJL hours | Demonstrated Skills | Satisfactory progress |
| 2nd | $15.61 | 6 months or 1,000 OJL hours | Demonstrated Skills | Satisfactory progress |
| End | $18.37 | Complete | Complete | Complete |

Before an apprentice is advanced to the next segment of training or to journeyworker completion status, the program sponsor will evaluate all progress to determine whether advancement has been earned by satisfactory performance in their on-the-job learning (OJL) and in related instruction courses.

The current base journeyworker completion wage rate may be adjusted by a participating employer if they pay a higher wage rate, and the adjusted base rate will apply equally to all apprentices who are hired by that employer. Such wages will become part of the approved Appendix-E Employer Acceptance Agreement.

# PROBATIONARY PERIOD

Every applicant selected for apprenticeship will serve a probationary period of three (3) months.

# SELECTION PROCEDURES

***Sponsors should familiarize themselves with the Apprenticeship EEO Introductory Video, Tools, and Resources at*** [***www.apprenticeship.gov/eeo***](http://www.apprenticeship.gov/eeo)**.**

**APPLICATION PROCEDURES**

1. Openings for applications for apprenticeship will be determined by the Sponsor. All applications will be identical in form and requirements.
2. Receipt of the properly completed application form, along with required supporting documents will constitute the completed application. Incomplete applications will not be considered.
3. All applicants who have met the minimum qualifications and have submitted a complete application will be notified of the date, time, and place to appear for interview (if applicable).

**SELECTION PROCEDURES**

1. The Sponsor will schedule the interview (if applicable) and evaluation session. All qualified applicants will be interviewed and evaluated for selection within 60 days of their application date.
2. The interviewer or evaluator will rate each applicant on each of the factors on the applicant rating form, taking into account the information on the application and required documents. The interviewer will record the questions asked and the general nature of the applicant’s answers.
3. After completing the interview and evaluation of the qualified applicants, the individual rating scores of the interviewer(s) will be added together and averaged to determine the applicant’s final rating.
4. Applicants will be placed on a “Ranking List” according to their scores at the evaluation session, with the applicant having the highest score being at the top of the list, and all applicants then listed in descending order based on score.
5. As openings for the registration of new apprentices occur, the highest ranked applicant will be notified of selection. It will be the responsibility of the applicant to keep the Sponsor informed of their current home mailing address, telephone number, and e-mail address. Selected applicants must respond to the notice of selection within forty-eight (48) hours of notice.
6. Incumbent Employees: Employees who are gainfully employed in the occupation and who have met the minimum qualifications for apprenticeship may qualify for immediate registration into the program upon approval by the program sponsor and employer. The sponsor will determine what additional training requirements are needed to ensure that the employee receives all necessary training for completion of the apprenticeship program.
7. Pre-Apprenticeship Preparatory Programs: An individual who has completed a structured pre-apprenticeship training program that meets the requirements outlined in Training and Employment Notice 13-12, Defining a Quality Pre-Apprenticeship Program and Related Tools and Resources, in any occupational area covered in these standards of apprenticeship and who meets the minimum qualifications of the apprenticeship program may be admitted directly into the program. The candidate shall provide official documentation confirming that he or she fulfilled the specific requirements of the pre-apprenticeship program, such as completion/graduation certificates, transcripts, notarized letters of confirmation, and sworn statements. The sponsor will evaluate the training received to grant appropriate credit on the term of apprenticeship.

**WORK PROCESS SCHEDULE**

COMMUNITY HEALTH WORKER

O\*NET-SOC CODE: 21-1094.00 RAPIDS CODE: 2002CB

Description: Promote health within a community by assisting individuals to adopt healthy behaviors. Serve as an advocate for the health needs of individuals by assisting community residents in effectively communicating with healthcare providers or social service agencies. Act as liaison or advocate and implement programs that promote, maintain, and improve individual and overall community health. May deliver health-related preventive services such as blood pressure, glaucoma, and hearing screenings. May collect data to help identify community health needs.

On-the-Job Learning (OJL)

1. During the Apprenticeship, the Apprentice shall receive work experience and job related education in all phases of the occupation, including safe work practices, necessary to develop the skill and proficiency of a skilled professional.
2. The program sponsor a must ensure Apprentices are rotated throughout the various work processes to ensure a well-rounded professional upon completion of the Apprenticeship, and identify what methodology will be used to track progression of experience on-the-job.
3. Such on-the-job training shall be carried on under the direction and guidance of a qualified professional.
4. The employer and skill mentor (where appropriate) shall review all of the work processes and adapt the appropriate competencies, which are appropriate for the Agency’s specific needs/requirements and to ensure the Apprentice is properly trained in all aspects of the occupation.

Each employer and/or program sponsor will determine the appropriate examples of each core competency in the below work process schedule. In the list below, each core competency should be completed depending on stated scope of practice and employer requirements.

Field Training (FT) - Mentor/Journeyworker has provided training and demonstrated task to the apprentice

Demonstrated Fundamentals (DF) - Apprentice can perform the task with some coaching

Proficient in Task (PIT) - Apprentice performs the task properly and consistently

Completion Date (CD) - Date apprentice completes final demonstration of competency

Initial and date in the box when complete

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| --- | --- | --- | --- | --- |
| **WORK PROCESSES****COMMUNITY HEALTH WORKER** | **FT** | **DF** | **PIT** | **CD** |
| 1. **Provide basic health care services.**
 |  |  |  |  |
| 1. Perform basic diagnostic procedures, such as blood pressure screening, breast cancer screening, or communicable disease screening.
 |  |  |  |  |
| 1. Administer immunizations or other basic preventive treatments.
 |  |  |  |  |
| 1. Provide basic health services, such as first aid.
 |  |  |  |  |

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| --- | --- | --- | --- | --- |
| 1. **Maintain client records.**
 |  |  |  |  |
| 1. Maintain updated client records with plans, notes, appropriate forms, or related information.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Advise clients or community groups on health issues.**
 |  |  |  |  |
| 1. Advise clients or community groups on issues related to improving general health, such as diet or exercise.
 |  |  |  |  |
| 1. Advise clients or community groups on issues related to diagnostic screenings, such as breast cancer screening, pap smears, glaucoma tests, or diabetes screenings.*)*
 |  |  |  |  |
| 1. Advise clients or community groups on issues related to risk or prevention of conditions, such as lead poisoning, human immunodeficiency virus (HIV), prenatal substance abuse, or domestic violence.
 |  |  |  |  |
| 1. Advise clients or community groups on issues related to self-care, such as diabetes management.
 |  |  |  |  |
| 1. Advise clients or community groups on issues related to sanitation or hygiene, such as flossing or hand washing.
 |  |  |  |  |
| 1. Advise clients or community groups to ensure parental understanding of the importance of childhood immunizations and how to access immunization services.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Assess individual or community needs for educational or social services.**
 |  |  |  |  |
| 1. Identify the particular health care needs of individuals in a community or target area.
 |  |  |  |  |
| 1. Identify or contact members of high-risk or otherwise targeted groups, such as members of minority populations, low-income populations, or pregnant women.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Visit individuals in their homes to provide support or information.**
 |  |  |  |  |
| 1. Conduct home visits for pregnant women, newborn infants, or other high-risk individuals to monitor their progress or assess their needs.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Transport clients to appointments.**
 |  |  |  |  |
| 1. Transport or accompany clients to scheduled health appointments or referral sites.
 |  |  |  |  |

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| --- | --- | --- | --- | --- |
| 1. **Provide educational materials to community members.**
 |  |  |  |  |
| 1. Distribute flyers, brochures, or other informational or educational documents to inform members of a targeted community.
 |  |  |  |  |
| 1. Teach classes or otherwise disseminate medical or dental health information to school groups, community groups, or targeted families or individuals, in a manner consistent with cultural norms.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Confer with clients to discuss treatment plans or progress.**
 |  |  |  |  |
| 1. Contact clients in person, by phone, or in writing to ensure they have completed required or recommended actions.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Monitor clients to evaluate treatment progress.**
 |  |  |  |  |
| 1. Contact clients in person, by phone, or in writing to ensure they have completed required or recommended actions.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Refer clients to community or social service programs.**
 |  |  |  |  |
| 1. Refer community members to needed health services.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Advocate for individual or community needs.**
 |  |  |  |  |
| 1. Advocate for individual or community health needs with government agencies or health service providers.
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|  |  |  |  |  |
| 1. **Recommend legal actions.**
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| 1. Report incidences of child or elder abuse, neglect, or threats of harm to authorities, as required.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Teach life skills or strategies to clients or their families.**
 |  |  |  |  |
| 1. Teach appropriate parenting behaviors to individuals or families.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Collect information about community health needs.**
 |  |  |  |  |
| 1. Collect information from individuals to compile vital statistics about the general health of community members.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Lead classes or community events.**
 |  |  |  |  |
| 1. Teach classes or otherwise disseminate medical or dental health information to school groups, community groups, or targeted families or individuals, in a manner consistent with cultural norms.
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| 1. **Advise others on social or educational issues.**
 |  |  |  |  |
| 1. Advise clients or community groups on issues related to social or intellectual development, such as education, childcare, or problem solving.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Help clients get needed services or resources.**
 |  |  |  |  |
| 1. Assist families to apply for social services, including Medicaid or Women, Infants, and Children (WIC).
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Develop working relationships with others to facilitate program activities.**
 |  |  |  |  |
| 1. Attend community meetings or health fairs to understand community issues or build relationships with community members.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Interpret cultural or religious information for others.**
 |  |  |  |  |
| 1. Interpret, translate, or provide cultural mediation related to health services or information for community members.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Monitor nutrition related activities of individuals or groups.**
 |  |  |  |  |
| 1. Monitor nutrition of children, elderly, or other high-risk groups.
 |  |  |  |  |
|  |  |  |  |  |
| 1. **Plan programs to address community health issues.**
 |  |  |  |  |
| 1. Develop plans or formal contracts for individuals, families, or community groups to improve overall health.
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**RELATED INSTRUCTION OUTLINE**

COMMUNITY HEALTH WORKER

O\*NET-SOC CODE: 21-1094.00 RAPIDS CODE: 2002CB

Related Instruction Provider: Alaska Primary Care Association

Method: Synchronous Online, Electronic Media, Self-study

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The related instruction outlines the courses that provide the technical ability that supplements the on-the-job training. It is through the combination of both the on-the-job training and the related technical instruction that the apprentice can reach the skilled level of the occupation. Under a registered apprenticeship, 144 hours of related instruction each year of the apprenticeship is recommended. The following is the course curriculum during the term of apprenticeship.

**Instructional References:**

* *Foundations for Community Health Workers, 2nd Edition*, Berthold, T., John Wiley & Sons, 2016.
* *Community Health Worker Certificate Program*, City College of San Francisco.

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| **Part 1: Introduction to Community Health Work: The Big Picture** |
| **Chapter 1 - The Role of Community Health Workers:** * + Roles, competencies and characteristics of CHWs
	+ Identifying characteristics of successful CHW’s
 | **8 Hours** |
| **Chapter 2 - The Evolution of the Community Health Worker*** + History of the Community Health Workers
	+ Value of Community Health Workers as advocates
	+ Community Health Worker’s scope of practice
 | **8 Hours** |
| **Chapter 3 - Introduction to Public Health** * + Define public health in the USA
	+ Identify public health inequalities and spectrum of prevention
 | **8 Hours** |
| **Chapter 4 - Health for all: Promoting Health Equality** * + Defining health inequalities (social/health)
	+ Using data analysis to promote health justice
	+ Prevention and the role of the CHW in overcoming health inequalities
 | **8 Hours** |
| **Part 2: Core Competencies for Providing Direct Services** |
| **Chapter 6 - Practicing Cultural Humility** * + Introduction to cultural humility
	+ Define cultural humility (aka cultural competence) and concepts of client-centered practice
	+ Discuss cultural health beliefs and practices, roles of culturally effective CHWs
 | **6 hours** |
| **Chapter 7 - Guiding Principles*** + Ethics and professional boundaries
	+ Scope of practice
	+ Working with a multidisciplinary team
	+ Providing client-centered practice
	+ Understanding behavior change
 | **12 Hours** |
| **Chapter 8 - Conducting Initial Client Interviews*** + Model types of client interviews
	+ Client confidentiality, informed consent for interview
	+ Building rapport with clients
	+ Secure client documentation
 | **10 Hours** |
| **Chapter 9 - Client-Centered Counseling for Behavior Change*** + Define and understand client-centered counseling concepts
	+ Facilitating motivational interviewing
	+ Understanding challenges to providing client-centered counseling
 | **17 Hours** |
| **Chapter 10 - Care Management*** + Care coordination and care management concepts
	+ Understanding gender identity concepts
	+ Develop client and team action plans
	+ Understand meaningful referrals to community resources
	+ Develop client and program documentation systems
 | **17 hours** |
| **Chapter 11 - Home Visiting*** + Preparing for and conduct home visits
	+ Home visit safety concerns
	+ Challenges with out of office visits
 | **6 Hours** |

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| **Part 3: Enhancing Professional Skills** |
| **Chapter 12 - Stress Management and self-care*** + Prevent stress and burn out, recognizing common stressors and stress responses, and prevention
 | **6 Hours** |
| **Chapter 13 - Conflict Resolution Skills*** + Define and understand conflict and conflict resolution
	+ Common stresses in the work place
	+ Understanding personal and cultural conflicts,
	+ Strategies for conflict resolution
 | **8 Hours** |
| **Part 4: Applying Core Competencies to Key Health Issues** |
| **Chapter 16 - Chronic Conditions Management*** + Common chronic conditions and limitations of traditional medical models for treatment of chronic conditions
	+ Team-based care, patient empowerment and self-management, action planning for chronic conditions management; HTN.
 | **22 Hours** |
| **Chapter 17 - Promoting Healthy Eating and Active Living** * + Guidelines for healthy eating, drinking, and exercise
	+ Develop concepts and skills for supporting clients to establish healthier patterns of eating and activity.
 | **8 Hours** |
| **Total** | **144 Hours** |