COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES DEPARTMENT OF PUBLIC HEALTH

BUREAU OF HEALTH PROFESSIONS LICENSURE

**BOARD OF CERTIFICATION OF COMMUNITY HEALTH WORKERS**

239 CAUSEWAY STREET, SUITE 500

BOSTON, MA 02114

# 800-414-0168

617-973-0800

[.mass.gov/orgs/board-of-certification-of-community-health-](http://www.mass.gov/orgs/board-of-certification-of-community-health-workers)

**Community Health Worker Certification:**

**Reference Form**

 **INSTRUCTIONS TO APPLICANT**

An applicant for certification must be deemed competent in each of the 10 core competencies by at least three individuals with the following:

1. Direct knowledge of the applicant’s work experience as a community health worker.
2. At least one professional reference must be provided by an individual who is a current or former supervisor of the applicant while the applicant was working as a community health worker at a setting within the United States;

3. At least two professional references must be based on work experience in the United States; and

4. Professional references may not be provided by an individual who is a family member of the applicant or current or former client of the applicant in the applicant’s capacity as a community health worker.

## Instructions:

Print out three (3) copies of pages- of this reference packet for your references. Page 2 explains the form. Pages 4-5 must be filled out by each of your references.

Please review these next steps *carefully* to make sure this part of your application is complete:

* Give a copy of pages 3-5 to each of your three references.
* Write your name in the blank space at the top of page 3 for each of them.
* Each of the three Reference Forms should remain confidential. Each of your references must fill in the forms independently, put it in an envelope, seal the envelope and sign their name over the seal.
* Each of the three sealed and signed envelopes should be returned to you, for you to include in your application packet to the Board of Certification.

**REFERENCE FORM FOR COMMUNITY HEALTH WORKER CERTIFICATION**

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Dear Reference,

**REFERENCE FORM**

We are requesting you to provide reference information for , who is applying to become a Certified Community Health Worker in Massachusetts, under the provisions of Chapter 322 of the Acts of 2010 to ensure that the title “Certified Community Health Worker” is used only by those who are found qualified and suitable.

The Board requires information about the applicant’s range of ability in the 10 Core Competencies of Community Health Workers. You must rate the applicant in all of the ten (10) core competencies.

The competency descriptions provided on this form are only a summary of the core competencies. **For a full description of the Core Competencies please**

## see: [://www.mass.gov/eohhs/gov/departments/dph/programs/hcq/dhpl/community-health-workers/ma-](http://www.mass.gov/eohhs/gov/departments/dph/programs/hcq/dhpl/community-health-workers/ma-board-of-certification-of-community-health-workers.html)  [board-of-certification-of-community-health-workers.](http://www.mass.gov/eohhs/gov/departments/dph/programs/hcq/dhpl/community-health-workers/ma-board-of-certification-of-community-health-workers.html)

**You will be asked to rate each competency. Here is a score guide to assist you:**

**Not Applicable (N/A)**. Select this if you have not observed an applicant’s work or ability in this competency.

**Competent (C)**. Applicant usually and consistently completes tasks, demonstrates skills and exhibits values listed in the competency; has good understanding of when to ask for assistance.

**Not Competent (NC)**. Applicant rarely or never completes tasks, demonstrates skills or exhibits values listed in the competency and requires constant assistance in completing tasks.

## Please complete pages 4-6, place it in an envelope, seal the envelope, and sign your name across the envelope seal. Then return it to the applicant to be included with their final application packet. Thank you!

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**REFERENCE INFORMATION – PLEASE PRINT CLEARLY**

Last Name First Name

Reference Name (include professional credentials, if applicable)

Reference’s Occupation/Title and Current Organization

Number of years or months you worked with the applicant:

Relationship to applicant, include agency/organization name if relevant:

* Check here if you were the applicant’s supervisor. If so, how for long:

Overall, would you recommend this applicant for Community Health Worker Certification?

* + Yes □ No If no, please attach an explanation separately.

## I hereby certify that the information given above is correct to the best of my knowledge and belief, and opinions expressed above represent my best judgment. I hereby agree to provide further information to the Board if requested to do so.

Signature of Reference Date

Organization Name

Street Address City/State Zip Code

Preferred Phone Email

Please continue to next page to rate the applicant on the Community Health Worker Core Competencies.

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**CHW CORE COMPETENCY RATING**

The brief descriptions below are only a guide; please review the complete Core Competencies

( [://www.mass.gov/service-details/core-competencies-for-community-health-](https://www.mass.gov/service-details/core-competencies-for-community-health-workers) ) before proceeding. Please circle the appropriate answers for this applicant’s abilities.

 **CORE COMPETENCY #1: OUTREACH METHODS AND STRATEGIES**

Engages individuals and groups through a range of outreach methods that incorporate community and individual strengths, knowledge of resources, and sensitivity to personal and cultural dynamics; “meets people where they are;” develops trusting relationships with individuals, community organizations, and social networks; implements outreach plans in collaboration with others; attends to safety risks for self and others.

## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #2: CLIENT AND COMMUNITY ASSESSMENT**

Gathers and uses information on clients’ and communities’ needs and strengths; helps people identify their goals, barriers to accessing services, and unique problem solving skills; shares community assessment information with colleagues to inform planning and health improvement; continues assessment as an ongoing process.

## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #3: EFFECTIVE COMMUNICATION**

Listens carefully to promote mutual understanding; pays attention to expressive and non-verbal behavior; develops rapport with clients; speaks clearly, honestly and non-judgmentally; clarifies unclear concepts and mutual rights to clients and communities; effectively uses written and visual aids; confirms mutual understanding; works to prevent and address conflict in a safe and professional manner.

## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #4: CULTURAL RESPONSIVENESS AND MEDIATION**

Understands the impact of one’s own culture and experience on interactions with clients and colleagues; understands that health beliefs and practices vary across cultures; is responsive to, and interacts sensitively and with humility with to people from diverse cultures; advocates for cultural and linguistically responsive services and resources, as well as client self-determination and dignity.

## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #5: EDUCATION TO PROMOTE HEALTHY BEHAVIOR CHANGE**

Collaborates with clients and colleagues to build strengths-based health improvement plans; provides people with information, tools and encouragement to improve their health; helps clients address issues that limit opportunities for healthy behavior; motivates and supports behavior change to improve health; uses multiple techniques for helping people understand and address health risks, including on-going support and follow-up.

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## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #6: CARE COORDINATION AND SYSTEM NAVIGATION**

Helps people understand and use services with attention to client priorities; supports clients in adopting plans of care and helps coordinate care, including care transitions; assists clients in health system navigation; supports people to follow provider instructions or advice; provides referrals and follow-up to help clients access needed services; informs providers about challenges that limit the ability of clients to follow care plans.

## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #7: USE OF PUBLIC HEALTH CONCEPTS AND APPROACHES**

Understands key concepts of public health, including population health, health inequity, social determinants of health, social justice, and prevention; understands the role of CHWs as public health workers; understands how policies impact health; able to use formal and informal data for setting priorities and targets; knows and shares basic knowledge about specific relevant health topics.

## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #8: ADVOCACY AND COMMUNITY BUILDING CAPACITY**

Encourages clients to identify and prioritize needs and to use available resources; supports clients in their efforts to advocate for themselves; advocates for clients and communities; develops community leadership; builds networks with community partners; effectively uses strategies to build clients’ and communities’ capacity.

## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #9: DOCUMENTATION**

Organizes thoughts and writes at level necessary to communicate effectively with individual clients, community members, supervisors, and other colleagues; complies with required reporting and record-keeping; uses appropriate technology for work-based communication according to employer needs; recognizes the importance of documentation.

## N/A C NC

Not Applicable Competent Not Competent

 **CORE COMPETENCY #10: PROFESSIONAL SKILLS AND CONDUCT**

Maintains appropriate boundaries of CHW role in context of agency team, agency rules, and in professional and personal relationships; demonstrates respect for client privacy rights; acts accordingly in situations that are reportable under law or regulation, according to agency policy; seeks assistance from supervisors as necessary; establishes priorities and organizes one’s time and resources to meet them; utilizes opportunities for professional developments; practices in compliance with Massachusetts Code of Ethics for Community Health Workers.

## N/A C NC

Not Applicable Competent Not Competent

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