Core Competency #1: Outreach Methods and Strategies
Outreach is the process of contacting, engaging with, and helping people to learn about and use resources to improve their health and well-being. Outreach may be conducted with individuals, groups, organizations, and at the community level. In outreach, CHWs “meet people where they are,” building relationships based on listening, trust, and respect. This can take place in diverse settings, including where people live, work, learn, worship, socialize, play, exercise, and conduct business. There are a variety of outreach methods, such as phone calls, in-person conversations, group presentations, distribution of print and electronic information, and social media. Effective outreach is based on learning about community needs and strengths, knowledge about available resources, and sensitivity to personal and cultural dynamics that affect behavior and relationships.

Competency includes the ability to:
   a) Develop and implement outreach plans in collaboration with colleagues, based on individual, family, and community needs, strengths, and resources.
   b) Identify and share appropriate information, referrals, and other resources to help individuals, families, groups, and organizations meet their needs.
   c) Initiate and sustain trusting relationships with individuals, families, and social networks.
   d) Establish and maintain cooperative relationships with community-based organizations and other resources to promote client services, care, education, and advocacy.
   e) Conduct outreach with attention to possible safety risks for self, clients, and colleagues.
   f) Use a range of outreach methods to engage individuals and groups in diverse settings.

Core Competency #2: Individual and Community Assessment
Assessment is the collection, synthesis, and use of information to help understand the needs, strengths, and resources of the individuals and communities CHWs serve. CHWs share this information with clients, professional colleagues, and community partners to help plan and carry out effective programs, services, and advocacy based on shared priorities. They engage people in honest and often difficult discussions about health status and behavior. They also gain insights about needed resources and changes and share their understanding with
appropriate parties in order to help achieve desired outcomes. Assessment is an ongoing process that, when combined with regular evaluation of progress, helps assure effective, client and community-centered care.

Competency includes the ability to:
- Gather and combine information from different sources to better understand clients, their families and their communities.
- Assess barriers to accessing health care and other services.
- Help people to identify their goals, barriers to change, and supports for change, including personal strengths and problem-solving abilities.
- Share community assessment results with colleagues and community partners to inform planning and health improvement efforts.
- Continue assessment as an on-going process, taking into account changes in client circumstances and the CHW-client relationship.

Core Competency #3: Effective Communication

Effective and purposeful communication is listening carefully and communicating respectfully in ways that help build trust and rapport with clients, community members, colleagues, and other professionals. Effective communication includes a mix of listening, speaking, gathering and sharing information, and resolving conflict. CHWs are open about their roles, responsibilities, and limits. CHWs protect client privacy and confidentiality. They convey knowledge accurately, clearly, and in culturally aware and responsive ways. They are able to use language and behavior that is responsive to the diversity of cultures they encounter in their work, including with clients, community members, and other professionals.

Competency includes the ability to:
- Be respectful and culturally aware during interactions with clients.
- Practice careful listening, repeating back important information as necessary to confirm mutual understanding, continually working to improve communication and revisit past topics as trust develops with client.
- Pay attention to expressive (non-verbal) behavior.
- Ask neutral, open-ended questions to request relevant information.
- Speak clearly and honestly.
- Use language that conveys caring and is non-judgmental.
- Explain terms or concepts whose meanings may not be obvious to clients, community members, or professional colleagues.
h) Clarify mutual rights and obligations, as necessary, such as client confidentiality or CHW reporting responsibilities.

i) Use written and visual materials to convey information clearly and accurately.

j) Take care to prevent situations involving conflict. Address conflicts that may arise in a professional and safe manner.

Core Competency #4: Cultural Responsiveness and Mediation

CHWs act as cultural mediators. CHWs educate and support providers in working with clients from diverse cultures, and help clients and community members interact effectively with professionals working in different organizations to promote health, improve services, and reduce disparities. Culture is defined here as beliefs, values, customs, and social behavior shared by a group of people with common identity. Identity may be based on race, ethnicity, language, religion, sex, gender identity, sexual orientation, disability, health condition, education, income, place, profession, history, or other factors. Culture also includes organizational cultures, which are reflected in how organizations deliver services. CHWs encourage and help enable clients to participate in decisions that affect their lives, families, and communities.

Competency includes the ability to:

a) Explain how one’s own culture and life experience influence one’s work with clients, community members, and professional colleagues from diverse backgrounds.

b) Describe different aspects of community and culture and how these can influence peoples’ health beliefs and behavior.

c) Describe ways the organizational culture within provider agencies and institutions can affect access, quality, and client experience with services.

d) Employ techniques for interacting sensitively and effectively with people from cultures or communities that differ from one’s own.

e) Support the development of authentic, effective partnerships between clients and providers by helping each to better understand the other’s perspectives.

f) Make accommodations to address communication needs accurately and sensitively with people whose language(s) one cannot understand.

g) Advocate for and promote the use of culturally and linguistically appropriate services and resources within organizations and with diverse colleagues and community partners.

h) Advocate for client self-determination and dignity.
Core Competency #5: Education to Promote Healthy Behavior Change

Education for healthy behavior change means providing people with information, tools, and encouragement to help them improve their health and stay healthy over time. CHWs respect people’s experience and their abilities to learn, take advantage of resources, and set priorities for changing their own behavior. CHWs work with clients, family and community members, and providers to address issues that may limit opportunities for healthy behavior. The CHW acts as educator and coach, using a variety of techniques to motivate and support behavior change to improve health.

Competency includes the ability to:

a. Apply information from client and community assessments to health education strategies.

b. Develop health improvement plans in cooperation with clients and professional colleagues that recognize and build upon client goals, strengths, and current abilities to work on achieving their goals.

c. Apply multiple techniques for helping people understand and feel empowered to address health risks for themselves, their family members, or their communities. (Examples may include informal counseling, motivational interviewing, active listening, harm reduction, community-based participatory research, group work, policy change, and other strategies.)

d. Coordinate education and behavior change activities with the care that is provided by professional colleagues and team members.

e. Facilitate constructive discussion in informal and group settings with clients and their families.

f. Provide on-going support and follow-up as necessary to support healthy behavior change.

g. Communicate with providers and service organizations to help them understand community and individual conditions, culture, and behavior to improve the effectiveness of services they provide.

Core Competency #6: Care Coordination and System Navigation

Coordination of care and system navigation for individuals and families means that CHWs help people understand and use the services of health providers and other service organizations. They also help address practical problems that may interfere with people’s abilities to follow provider instructions and advice. CHWs help bridge cultural, linguistic, knowledge and literacy differences among individuals, families, communities and providers. They help improve communications involving community members and agency or institutional professionals.
CHWs understand and share information about available resources, and support planning and evaluation to improve health services.

Competency includes the ability to:

a) Obtain and share up-to-date eligibility requirements and other information about health insurance, public health programs, social services, and additional resources to protect and promote health.

b) Work collaboratively as part of a care team.

c) Assist in developing and implementing care plans, in cooperation with clients and professional colleagues. (Care plans should be based on needs and resource assessments. Plans should describe how each party involved will help meet the goals and priorities defined in collaboration with clients.)

d) Provide care coordination, which may include but not be limited to facilitating care transitions, supporting the completion of referrals, and providing or confirming appropriate follow-up.

e) Provide support for clients to use provider instructions or advice, and convey client challenges to providers.

f) Provide support for people to understand and use agency and institutional services.

g) Make referrals and connections to community resources to help individuals and families meet basic social needs.

h) Build clients’ ability to participate in making decisions about their care.

i) Inform care providers, to the extent authorized, about challenges that limit the ability of clients to follow care plans and navigate the health care system, including barriers outlined in the Americans with Disabilities Act.

Core Competency #7: Use of Public Health Concepts and Approaches

The knowledge base for CHW practice is strongly influenced by the field of public health. Public health is a science-based discipline that focuses on protecting and promoting population health, preventing illness and injury, eliminating health inequities, and working to improve the health of vulnerable communities and populations. CHWs, like other public health practitioners, understand that individual health is shaped by family, community, and wider “social determinants of health.” CHWs often use their knowledge of the larger contexts of clients’ lives to provide support for them to overcome barriers or improve conditions that affect their health.

Competency includes the ability to:
a) Use data and evidence-based practices in efforts to support clients in reaching their goals.
b) Gain and share information about specific health topics most relevant to the populations and communities being served.
c) Explain how plans for supporting individuals and families relate to wider social factors that influence health.
d) Explain the relationship between health and social justice.
e) Promote efforts to prevent injury and disease, including those that require policy changes, and support effective use of the health care system.
f) Promote health equity and efforts to reduce health disparities through engagement with clients, professional colleagues, and community partners.
g) Engage in systematic problem solving—including assessment, information gathering, goal setting, planning, implementation, evaluation, and revision of plans and methods, as necessary—to achieve shared objectives.

**Core Competency #8: Advocacy and Community Capacity Building**

Advocacy is working with or on behalf of people to exercise their rights and gain access to resources. Capacity building is helping people develop the confidence and ability to assume increasing control over decisions and resources that affect their health and well-being. Community capacity building involves promoting individual and collective empowerment through education, skill development, networking, organizing, and strategic partnerships. Capacity building requires planning, cooperation, and commitment, and it may involve working to change public awareness, organizational rules, institutional practices, or public policy. Advocacy and capacity building go hand-in-hand and can help create conditions and build relationships that lead to better health.

Competency includes the ability to:

a) Encourage clients to identify and prioritize their personal, family, and community needs.
b) Encourage clients to identify and use available resources to meet their needs and goals.
c) Provide information and support for people to advocate for themselves over time and to participate in the provision of improved services.
d) Advocate on behalf of clients and communities, as appropriate, to assist people to attain needed care or resources in a reasonable and timely fashion.
e) Apply principles and skills needed for identifying and developing community leadership.
f) Build and maintain networks, and collaborate with appropriate community partners in capacity building activities.
g) Use a variety of strategies, such as role-modeling, to support clients in meeting objectives, depending on challenges and changing conditions.

Core Competency #9: Documentation
CHWs help promote coordinated and effective services by documenting their work activities, including writing summaries of client and community assessments. They often present information to agency colleagues or community partners about their clients and issues they face. Generally in Massachusetts, CHWs use computer technology and communicate in English, but alternative arrangements may be made in order to utilize valuable linguistic capacities, cultural experience, and community relationships that individual CHWs may bring to their work.

Competency includes the ability to:
   a) Organize one’s thoughts and write at the level necessary for communicating effectively with clients, other community members, supervisors, and other professional colleagues.
   b) Comply with reporting, record keeping, and documentation requirements in one’s work.
   c) Use appropriate technology, such as computers, for work-based communication, according to employer requirements.
   d) Recognize the importance of documentation to program evaluation and sustainability and to helping clients achieve their goals.

Core Competency #10: Professional Skills and Conduct
Professional skills for CHWs include how to handle ethical challenges as they address legal and social challenges facing the clients and communities they serve. Client confidentiality and privacy rights must be protected in the context of employer and legal reporting requirements. Care for clients must be balanced with care for self. CHWs understand that it is necessary to be aware of one’s own emotional and behavioral responses to clients and community members and to manage personal feelings productively in order to maintain effectiveness. CHWs must be able to act decisively in complex circumstances but also to utilize supervision and professional collaboration. They must observe agency rules and the regulations governing public and private resources while exercising creativity in helping community members meet their individual and family needs.

Competency includes the ability to:
   a) Practice in compliance with the Massachusetts Code of Ethics for Community Health Workers.
b) Observe the scope and boundaries of the CHW role in the context of the agency team and agency policy.
c) Respect client rights under the Health Insurance Portability and Accountability Act (HIPAA) and applicable agency rules.
d) Understand issues related to abuse, neglect, and criminal activity that may be reportable under law and regulation according to agency policy.
e) Maintain appropriate boundaries that balance professional and personal relationships, recognizing dual roles as both CHW and community member.
f) Seek assistance from supervisors as necessary to address challenges related to work responsibilities.
g) Establish priorities and organize one’s time, resources, and activities to achieve them.
h) Utilize and advocate as necessary for supervision, training, continuing education, networking, and other resources for professional development and lifelong learning for self and colleagues.