



**Kentucky Public Health**

Prevent. Promote. Protect.

Community Health Worker  
*Certification Manual*  
2023

**Commonwealth of Kentucky**

Cabinet for Health and Family Services

*Department for Public Health*

*Office of Community Health Workers*





# Table of Contents

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*Preface* ..... 3

*Certification Process, Standards and Requirements Overview*..... 4

*Application Eligibility and Options*..... 4

    Minimum Eligibility Requirements ..... 4

    Community Health Worker Certification – Training..... 4

        Mentorship ..... 5

    Community Health Worker Certification – Experience..... 5

        Reciprocity ..... 5

*Application Requirements and Procedures* ..... 5

    Application Submission ..... 5

    Application Approval..... 5

    Disapproved Applications..... 6

    Application Processing Timeline ..... 6

*Certification* ..... 6

    Certification Renewal ..... 7

    Change of Name and/or Address ..... 7

*Continuing Education Requirements*..... 7

    Required Trainings..... 8

    Acceptable Continuing Education ..... 8

    Reporting Continuing Education ..... 8

    Documentation..... 8

    KOCHW Approved Trainings ..... 8

    Independent Trainings..... 9

*Audits* ..... 9

*Extensions* ..... 9

*Expired Certification*..... 9

*Certificate Suspension and Revocation*..... 9

*Appendices* ..... 10

    APPENDIX A - Core Competencies ..... 10

    APPENDIX B - Code of Ethics ..... 10

    APPENDIX C - Violations, Complaints and Subsequent Actions ..... 10



## Preface

The Kentucky Department for Public Health Office of Community Health Workers (KOCHW) is pleased to offer a credential for Community Health Workers (CHWs) in Kentucky. The Commonwealth’s rich history of CHWs began in 1994 with Family Health Advisors at Kentucky Homeplace. In the decades since, many communities and organizations continue to utilize CHWs to address barriers, increase access to resources, improve access to physical and mental healthcare and meet the growing health needs of Kentuckians. To move forward with a standardized certification process for CHWs, the Kentucky Community Health Worker Advisory Workgroup formed in 2014. The Workgroup has provided substantial expertise, time, and support for the CHW certification process. Today, CHWs have become essential team members in health systems and various organizations across the state.

In 2016, the Kentucky Association of Community Health Workers (KYACHW) formed as the central networking, educational, advocacy, and communication hub for CHWs in Kentucky. KYACHW, a 501(c)(3) organization with a strong board and membership, views CHWs as the essential link between healthcare providers, community resources and clients. This link plays a key role in improving the health of our communities, and for that reason, KYACHW has been a major influence for the advancement of the profession in Kentucky and has provided input into the development of this certification process and manual.

In 2022 legislation was passed in Kentucky regarding CHW certification. Kentucky Revised Statute (KRS) [309.460](#), [309.462](#) and [309.464](#) outline the statutory requirements regarding CHW certification, continuing education, certification renewal and the duties of the Department for Public Health.

Kentucky Administrative Regulation (KAR) [902 KAR 21:040](#) authorizes the Department for Public Health to promulgate administrative regulations for the certification of community health workers. This administrative regulation establishes the certification requirements for a community health worker. The regulation details the CHW Core Competencies, application process, eligibility requirements, certification renewal, renewal extensions, continuing education requirements, scope of practice, complaint procedures, and denial, suspension and revocation of a CHW certification.

### American Public Health Association (APHA) Definition

**As defined by the American Public Health Association (APHA):**

A Community Health Worker (CHW) is a frontline public health worker who is a trusted member of and/or has a uniquely close understanding of the community served. This trusting relationship enables the CHW to serve as a liaison/link/intermediary between health/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 (APHA, 2018).

**For more information, visit the [APHA CHW website](#).**

## Certification Process, Standards and Requirements Overview

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The certification designation is awarded to individuals who demonstrate their competency in a given field. Competency is achieved through a combination of education and experience. To apply for the Certified Community Health Worker (CCHW) credential, an applicant must provide verifiable documentation that demonstrates he or she has the specified educational and/or experiential background.

This *Kentucky Community Health Worker Certification Manual* provides policy requirements and standardized forms designed to assist the applicant in gathering mandatory documentation. Some of the forms are to be completed by the applicant, while other forms are to be submitted to employers, supervisors and/or trainers for completion on behalf of the CCHW applicant. Each form indicates the type of individual who must complete the document.

**Please carefully read this manual PRIOR to applying for certification, as it contains essential information on the application process, requirements, policies, mandatory forms, and the renewal process.**

## Application Eligibility and Options

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### Minimum Eligibility Requirements

The following minimum eligibility requirements are for all individuals who intend to apply for CHW Certification in Kentucky:

- Currently live in and/or are employed as a CHW in Kentucky.
- A legal U.S. resident at least 18 years of age.
- Achievement of core competencies as outlined in this manual ([Appendix A](#)).
- Submission of a completed online application along with a color photo (format as specified by KOCHW).
- Payment of the certification fee to [KOCHW](#).
- Completion of Mental Health First Aid training.
- A high school diploma or GED certificate are preferred, however, individuals without a diploma or certificate may apply and the KOCHW will review on a case-by-case basis.

### Community Health Worker Certification – Training

Individuals shall complete and submit documentation from a KOCHW approved CHW training organization. Approved CHW training organizations must provide a minimum of 40 hours of competency based didactic instruction, not including Mental Health First Aid. Additionally, applicants must complete a minimum 40-hour verifiable mentorship. Approved training organizations are listed on the KOCHW webpage. Training and mentorship must have been completed within three (3) years from the date of application and must be verified by the approved training organization and mentorship supervisor. Applicants must provide copies of all certificates of completion and signed mentorship attestation for the application to be considered complete. The list of KOCHW approved CHW training organizations can be found on the [KOCHW webpage](#).



## Mentorship

Mentorship is essential for newly trained CHWs to demonstrate and refine the CHW Core Competencies learned in Tier 1 training. Mentorship is also an opportunity for newly trained CHWs to engage and reflection, ask questions, and provide feedback. Each CHW must complete a minimum of 40 hours of verifiable mentorship. Please see the KOCHW “Frequently Asked Questions” for additional details regarding mentorship activities and verification.

## Community Health Worker Certification – Experience

Individuals who have performed related CHW services within the past three (3) years prior to their date of application may apply and submit required documentation for certification based on their experience. KOCHW shall verify the applicants related experience of no less than 2,500 cumulative hours in the previous three (3) years, which must demonstrate achievement of a minimum standard of proficiency in the CHW Core Competencies ([Appendix A](#)).

Applicants may use more than one work experience to meet the 2,500-hour requirement, if it is within the three-year window and is in line with the CHW Core Competencies.

KOCHW will not accept any work experience that is older than three years from the date of application. KOCHW reserves the right to deny any work experience that does not comply with the approved CHW Core Competencies ([Appendix A](#)).

## Reciprocity

As of 2022, Kentucky does not have a reciprocity agreement with any other state certifying CHWs. This will be a consideration in the future and will be on a case-by-case basis with appropriate documentation.

# Application Requirements and Procedures

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## Application Submission

The application for CHW Certification is online. Applicants can find the link to the online form on the [KOCHW webpage](#). A hardcopy application is available upon request.

The fee for initial certification as a CCHW is fifty dollars (\$50), with subsequent renewal (annually) of twenty-five dollars (\$25). Payment must be made to the [KOCHW](#). These fees are non-refundable.

Applicants are encouraged to save a copy of their application and supporting documentation prior to submission for their own records. All applications and supporting documents will be maintained at KOCHW in an electronic database.

**Please Note:** A valid email address is required for submission of the application; further, all CCHWs must maintain a valid email address on file with KOCHW for communication purposes.

## Application Approval

Approval of applications is contingent upon meeting the standards set forth in this guide. Applications may be disapproved under the provisions of the next section.

## Disapproved Applications

KOCHW may disapprove the application if the applicant:

- has not met the eligibility and application requirements set out in this manual.
- has failed or refused to properly complete or submit any required information.
- has knowingly presented false or misleading information in the application process
- is on the [Medicaid provider exclusion list](#).
- has engaged in unethical conduct as defined in the CHW Code of Ethics ([Appendix B](#)).
- or
- has been convicted of a felony or misdemeanor directly related to the duties and responsibilities of a CHW, which will prevent the applicant from effectively working as a CHW.

If KOCHW determines that the application should not be approved, the applicant will receive written notice of the reason for the disapproval and of the opportunity for re-application or appeal.

## Application Processing Timeline

The following periods shall apply from the date of receipt of an application and payment until the date of issuance of a written notice that the application has been approved or disapproved

- Notice of approval for certification:
  - *No more than 60 days from receipt of full application*
- Notice of application disapproval:
  - *No more than 60 days from receipt of full application*

**Failure to provide all required materials including payment at the time of submission will result in a delay in application processing times beyond 60 days.**

## Certification

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Upon approval of the application, the KOCHW shall issue the CCHW certificate and certification number.

- Certificates shall have a certification date, a certification number, and signature by the Commissioner's Office of the KDPH.
- Certification numbers are unique to each CCHW and do not change.
- A CCHW shall only allow their certificate to be copied for the purpose of verification by employers, professional organizations, and third-party payers for credentialing and reimbursement purposes.
- Agencies or employers may contact the KOCHW via email at [chw.certification@ky.gov](mailto:chw.certification@ky.gov), in writing at the address listed above, or by phone at 502-564-7996 to verify certification status of any individual.
- No one shall make any alteration on any certificate issued by KOCHW.



## Certification Renewal

Each CCHW shall renew their certification **annually** (every year). Certificates expire October 31<sup>st</sup>, one year following application and approval. If a full year has not elapsed from the time of application or most recent recertification, renewal will be through the first full year of certification. Please refer to the table below regarding the renewal month that corresponds with the initial certification date.

Kentucky Community Health Worker Renewal Chart	
Initial Certification	Renewal Month
January – December 2023	October 2024
January – December 2024	October 2025
January – December 2025	October 2026

The renewal process is similar to the initial certification process and includes submission of a completed application, along with an updated photo, continuing education documents, and payment of the renewal fee.

It is the responsibility of the CCHW to renew their certification by the annual renewal date prior to expiration. The KOCHW will notify CCHWs of annual renewal date through email address submitted with application. Failure to receive or read notification from KOCHW prior to the expiration date will not excuse failure to apply for renewal.

## Change of Name and/or Address

Change of contact information (name, address, phone number, email, etc.) shall be submitted to KOCHW along with the appropriate documentation. Documentation may include a copy of a marriage certificate, divorce decree, or court decree evidencing such change, or a social security card reflecting the new name, or a Kentucky driver’s license or identification card reflecting the new name and/or address. Accurate spelling of the applicant or certificate holder’s name is also essential if an employer seeks to verify an individual’s certification status.

## Continuing Education Requirements

Continuing education requirements for renewal shall be fulfilled during each annual renewal period in which the certification was issued. A CCHW must complete **10 contact hours** of continuing education related to the core competencies each annual renewal period.

- At least five (5) hours shall be satisfied by participation in a KOCHW-approved training. Organizations approved to provide these hours will be posted on the [KOCHW webpage](#).
- Up to five (5) hours may be satisfied through independent self-study. Independent self-study can include participation in relevant trainings that have not been approved by the KOCHW.
- Credit for semester hours taken at a college or university, which are consistent with the CHW Core Competencies ([Appendix A](#)), will be approved at three (3) credits for each semester hour. If the course is not directly related to the competencies of a CHW, partial credit may be allowed at the discretion of KOCHW after review of the course.





Kentucky Department for Public Health  
**Community Health Worker Certification Manual**



- Credit for professional presentations by a CHW, related to the CHW profession and which are consistent with the CHW Core Competencies may be approved. Professional presentations may receive 2 CEUs for each hour instruction. CHWs must provide proof of presentation, including documentation which clearly shows the objectives, length of the presentation and context of presentation.
- Poster presentations may receive 1 CEU per poster where the CHW is listed as an author/presenter. CHWs must include a copy of the poster.

### Required Trainings

Beginning in 2023, all new CCHWs must complete the following one-time trainings to renew their certification:

- Oral Health
- Maternal and Child Health
- Geriatric Health

These trainings are provided by the KOCHW and made available online via the Kentucky TRAIN platform. CHWs must upload the certificates of completion when completing their application for renewal.

### Acceptable Continuing Education

Continuing education shall be acceptable if the experience or activity is at least 30 consecutive minutes in length.

- A contact hour is defined as 50 minutes of continuous participation.
- One-half contact hour is defined as 30 minutes of continuous participation during a 30-minute period.
- All continuing education activities should provide for the professional growth of the CHW and be related to the CHW Core Competencies ([Appendix A](#))

### Reporting Continuing Education

Each CCHW is responsible for submitting a completed KOCHW Continuing Education Tracking Form ([Appendix D](#)) when submitting for renewal. The form must provide the applicant's name, certification number, training provider, title, date, hours, and core competency (ies) covered for each activity for which credit is claimed.

### Documentation

It is the responsibility of the Certified Community Health Worker (CCHW) to maintain sufficient documentation for all Continuing Education. Failure to provide sufficient documentation may result in revocation of CEUs or Certification status. The KOCHW recommends that CCHWs keep documentation for at least seven (7) years for auditing purposes.

### KOCHW Approved Trainings

Documentation for KOCHW approved trainings includes a certificate of completion which includes: name of training organization, title of training, date and length of training and name of participant.





Additionally, KOCHW approved trainings include the following statement: “This program has been approved by the Kentucky Department for Public Health Office of Community Health Workers to provide X hours of continuing education credit.”

### Independent Trainings

For independent trainings, a certificate of completion may be sufficient, provided it includes the following: name of the training organization, the title of the training, the date of the training, CCHW name, and the number of hours. If no certificate of completion was provided an email or letter from the training conductor which includes the information above will be accepted.

If using a college course for CEU credit, a course syllabus and final grade is required. If using a professional presentation or poster presentation for CEU credit, a copy of the presentation or poster is required.

### Audits

The Kentucky Office of Community Health Workers reserves the right to audit any application and request additional documentation and proof of attendance at any time. Failure to provide appropriate documentation may result in revocation of CEUs or certification status.

### Extensions

A CCHW may request one extension per certification period if needed to complete the continuing education requirement. The extension must be received in writing to the [CHW.certification@ky.gov](mailto:CHW.certification@ky.gov) by October 31<sup>st</sup> to be considered.

The length of extension will be determined by the Office of Community Health Workers on a case-by-case basis and shall not exceed 60 days. Certification will not be renewed until the requirement is met.

A CCHW who has not corrected the deficiency by the expiration date of the extension shall be considered as noncompliant with the renewal requirements, and their certification will not be renewed.

### Expired Certification

If CCHW has not recertified or requested an extension by October 31<sup>st</sup> their certification will expire on December 31<sup>st</sup> of that year. KOCHW will send an official letter stating that certification has expired. Once expiration date has passed a new application, including all requirements for initial certification, must be submitted to earn certified status again.

If a CCHW fails to meet the minimum requirements outlined for renewal, the KOCHW reserves the right to deny applications for renewal.

### Certificate Suspension and Revocation

If audit findings show a CCHW has violated the requirements of the program or a CCHW is found to be in violation of the Code of Ethics ([Appendix B](#)), it could result in a temporary suspension or revocation of certification status which is outlined in [Appendix C](#).

## Appendices

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### APPENDIX A - Core Competencies

This section establishes the core competencies for CCHWs in Kentucky. Core competencies are gained and developed through education and experience and must be verified by training providers and/or supervisors.

### APPENDIX B - Code of Ethics

This section establishes the standards of professional and ethical conduct required of CCHWs in Kentucky. Acknowledgement of review and acceptance of the Code of Ethics on the application is required for certification.

### APPENDIX C - Violations, Complaints and Subsequent Actions

This section establishes the standards and processes relating to violations, complaints, and subsequent actions for CCHWs in Kentucky. This includes offenses or criminal convictions; methods to address violations resulting in disciplinary actions; procedures for filing complaints alleging violations and prohibited actions; and investigation of complaints.

### APPENDIX D - Application and Renewal Materials

This section (available upon request) provides the application forms, additional documentation forms, and continuing education forms, as well as the instructions for completion and submission for initial certification and renewal of certification.

## APPENDIX A - CORE COMPETENCIES

### 1. Communication

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Effective and purposeful communication involves listening carefully and communicating respectfully in ways that build trust and rapport with clients, community members, colleagues, and other professionals. Effective communication includes a mix of listening, speaking, gathering, sharing information, and resolving conflict.

*Competency includes the ability to:*

- a. Define cultural humility and explain the role and importance of cultural humility in meeting the needs of all populations in the CHW's area.
- b. Identify the CHW's role in addressing cultural humility.
- c. Demonstrate active listening and appropriate use of open-ended questions vs. closed questions.
- d. Speak clearly and honestly using language that conveys caring and non-judgmental attitudes.
- e. Describe the importance of non-verbal communication, including body language, tone of voice and other visual cues for both the CHW and the client.
- f. Effectively use the "teach back" method.
- g. Effectively utilize motivational interviewing techniques.
- h. Explain general literacy, health literacy, and how the CHW can be an advocate for clients with low literacy.
- i. Understand alternative communication options and where to access them within the community (closed captioning, braille, etc.).
- j. Demonstrate the appropriate use of the three (3) main types of adult learning styles (visual, auditory, and tactile).
- k. Model appropriate methodology used for conflict management and anger de-escalation.
- l. Identify and seek supervisory assistance as necessary to address language barriers, personal relationships, or other challenges.

### 2. Use of Public Health Concepts and Approaches

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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.

*Competency includes the ability to:*

- a. Define similarities and differences between public health and health care.



- b. Accurately convey public health’s emphasis on prevention, the role of policy change in preventing injury and disease, and the CHW’s role in prevention strategies and reduction of health inequities.
- c. Identify and describe Social Determinants of Health and protective factors and how they shape or influence a person’s health and perspective.
- d. Describe the relationships between public health inequities and race, ethnicity, socioeconomic status, ability level, and language; and explain how inequities drive social injustice and health disparities.
- e. Describe the CHW’s role as an advocate for policy changes to benefit their population and community.
- f. Identify the role the CHW can have on a local, state, or national level as both an advocate for their community and the professional role of the Community Health Worker.
- g. Describe the similarities and differences between preventive health care and management of chronic conditions.
- h. Convey the importance of the following public health concepts and approaches:
  - a. maternal and child health,
  - b. prevention of injuries/falls risk,
  - c. infectious diseases,
  - d. chronic diseases,
  - e. mental and behavioral health,
  - f. racial and health equity
  - g. trauma-informed/responsive approaches
- i. Describe the roles of formal and informal data in setting program priorities and targets.

### **3. Organizational and Community Outreach**

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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. Effective outreach is based on learning 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. Establish and maintain cooperative relationships with community-based organizations and other resources to promote client services, care, education, and advocacy.
- b. Conduct outreach with attention to possible safety risks for self, clients, colleagues, and

- others.
- c. Convey how education and outreach plans are based on individual and community strengths, needs, and resources and developed in collaboration with others, using culturally appropriate and trauma-informed practices, in order to accomplish assigned goals and objectives for the clients and/or community.
  - d. Identify and share appropriate information, referrals, and other resources to help individuals, families, groups, clients, and organizations meet their needs.
  - e. Describe the importance and methods of communicating effectively with diverse populations in a variety of community and service provider settings.
  - f. Adapt and employ effective, culturally responsive strategies to address identified issues and behaviors.
  - g. Initiate and sustain trusting relationships with individuals, families, and social networks.
  - h. Work effectively with a variety of populations, which may include but not be limited to:
    - a. People who are non-English speaking;
    - b. People who are immigrants or refugees;
    - c. People with intellectual or other developmental disabilities (I/DD);
    - d. People with visual and/or hearing impairments;
    - e. People with mobility limitations;
    - f. People with mental health diagnoses;
    - g. People with serious mental illness (SMI);
    - h. People with serious emotional disabilities (SED);
    - i. People with substance abuse diagnosis;
    - j. People with dual diagnosis (i.e., I/DD and mental health; mental health/substance abuse).
  - i. Recognize the need to seek supervisory assistance per agency protocol.

## 4. Advocacy and Community Capacity Building

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Advocacy is working with or on behalf of people to understand their rights and gain access to resources. Capacity building is empowering people to 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.

Advocacy and capacity building go hand-in-hand and can help create conditions and build relationships that lead to better health. Capacity building requires planning, cooperation, commitment, and may involve working to change public awareness, organizational rules, institutional practices, or public policy.

***Competency includes the ability to:***

- a. Encourage clients to identify and prioritize their personal, family, and community needs and encourage the use of available resources to meet those needs and goals.
- b. Describe the importance of advocacy and when and how to advocate on behalf of clients and communities.
- c. Demonstrate principles and skills needed to recognize, elevate, and empower voices of individual and community leaders.
- d. Implement a variety of strategies (i.e., role modeling) and their appropriate application in supporting clients to meet objectives, depending on challenges and changing conditions.
- e. Describe the importance of an environment that promotes and allows for independent living and the CHW's role in assisting the client to attain/maintain their goal(s) of independent living.
- f. Enhance the capacity of people with disabilities to access and meaningfully participate in community activities.
- g. Network and collaborate with community partners in capacity building activities.
- h. Provide information and support to empower people to advocate for themselves over time and to participate in the provision of improved services.
- i. Recognize the need to seek supervisory assistance per agency protocol.

## **5. Care Coordination and System Navigation**

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Coordination of care and system navigation for individuals and families means that CHWs help people understand and use the services of health and service provider 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 health literacy differences and improve communications involving community members and agency or institutional professionals. They understand and share information about available resources and support planning and evaluation to improve health services.

***Competency includes the ability to:***

- a. Demonstrate knowledge of health insurance eligibility and enrollment processes to direct clients as appropriate.
- b. Provide referrals and necessary follow-up to help clients access needed services (e.g., social services, public health programs, other institutional services).
- c. Provide care coordination, including basic care planning with client(s) and families (includes client's desire for or against caregiver involvement, needs assessment, and facilitation of care changes).
- d. Demonstrate health care etiquette for Community Health Workers and in the CHW's communication with providers, community members, clients, family members, and organizations.

- e. Demonstrate ability to deliver services in a trauma-informed/trauma-responsive manner
- f. Provide support for people to follow provider and/or caregiver instructions and advice.
- g. Inform care providers about challenges that limit the ability of clients to follow care plans and navigate the health care system, including barriers as outlined in the current version of the Americans with Disabilities Act.
- h. Recognize the need to seek supervisory assistance as needed to support intervention, manage impact of the work and as required per agency protocol.

## 6. Health Coaching

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Health coaching promotes education for healthy behavior change by providing people with information, tools, and encouragement to empower them to improve their health and stay healthy over time. CHWs “meet people where they are,” respecting their experience and learning modalities, take advantage of resources and set priorities and goals for changing their own behavior. CHWs work with clients, families, community members, and providers to identify strategies and solutions to increase opportunities for healthy behavior. The CHW acts as a health 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 promote strategies for improving health.
- b. Develop individual health improvement plans in cooperation with clients, providers and other partners that recognize and build upon client goals and strengths to promote self- efficacy.
- c. Develop and encourage the use of SMARTIE (Specific, Measurable, Attainable, Relevant, Time-bound, Inclusive and Equitable) objectives to identify problem areas and possible solutions.
- d. Identify and seek removal of barriers to improved health care and positive behavior changes.
- e. Measure client self-efficacy across the time span of program involvement.
- f. Apply different techniques for helping people to understand and address health risks for themselves, their family members, and/or their communities.

Techniques include but are not limited to:

- a. SMARTIE objective development,
- b. informal counseling,
- c. motivational interviewing,
- d. active listening,
- e. harm reduction;
- f. community-based participatory research,
- g. group work,



- h. trauma-informed care
- g. Access, assess, and utilize technology in health care accessibility and assist clients to improve personal health by utilizing appropriate technology (e.g., apps/websites).
- h. Access, assess, and convey accurate information utilizing agency-approved methods/materials for diverse cultural/linguistic/literacy populations that support health behavior change efforts.
- i. Provide continued coaching and support for health behavior change.
- j. Identify and seek resolution to barriers, utilizing a variety of techniques with providers and community-based organizations, in order to improve effectiveness of services.
- k. Implement client/person-centered care coordination inclusive of education and behavioral change activities across the health care team.
- l. Recognize the need to seek supervisory assistance per agency protocol.

## 7. Documentation, Reporting and Outcome Management

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CHWs help to promote coordinated and effective services by documenting their work activities and/or writing summaries of client and community assessments. CHWs often present data outcomes and other relevant information about their clients and the issues they face to their agency, community partners, local, state, and federal stakeholders about their clients and issues they face. CHWs may use computer technology and communicate in English; however, 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. Comply with the agency's reporting, record keeping, and documentation standards and requirements.
- b. Convey the importance of maintaining objective and accurate documentation per agency protocol.
- c. Describe the CHW's role in timely reporting of outcomes and facilitation of ongoing agency and community planning, program evaluation and quality improvement measures.
- d. Organize thoughts and communicate effectively with clients, community members, supervisors, and other professional colleagues both orally and in writing.

## 8. Legal, Ethical and Professional Conduct

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Legal, ethical, and professional conduct for CHWs include methods 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 must be able to act decisively in complex circumstances while also utilizing supervision and professional collaboration. They must observe agency rules and the regulations governing public and private resources while helping community members to meet their individual and family needs.

***Competency includes the ability to:***

- a. Practice in compliance with the Kentucky Code of Ethics for Community Health Workers ([Appendix B](#)).
- b. Observe the scope and boundaries of the CHW role in the context of the workplace team and employer policy.
- c. Respect client rights under the Health Insurance Portability and Accountability Act (HIPAA) and applicable employer rules, including legal ramifications of violating privacy policies.
- d. Convey knowledge and understanding of issues related to abuse, neglect, and criminal activities (exploitation) and the CHW's responsibility to file a mandated report of suspected child abuse, elder abuse, domestic abuse, or human trafficking.
- e. Maintain appropriate boundaries that balance professional and personal relationships and recognize the CHW's dual roles as both CHW and community member.
- f. Establish priorities and organize time, resources, and activities in ways that achieve optimal effectiveness.
- g. Recognize the value of routine supervision to understanding and maintaining ethical practice.
- h. As necessary, utilize and advocate for supervision, training, continuing education, networking and other resources for professional development and lifelong learning for oneself and one's colleagues.

(Adapted from the Massachusetts Board of Certification of Community Health Workers, 2014)

## APPENDIX B - CODE OF ETHICS

### Introduction

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A CHW is a frontline public health worker who is a trusted member of and/or has a uniquely close understanding of the community served. This relationship enables the CHW to serve as a liaison/intermediary between health and social services and the community and helps them 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, including outreach, community education, informal counseling, social support and advocacy.

#### **Purpose of this Code**

The CHW Code of Ethics is adapted from and supported by the American Association of Community Health Workers. The Code provides a framework for CHWs, their supervisors and employers; all CHWs should strive for excellence by providing quality service and the most accurate information available to the clients and communities served.

The Code of Ethics is based upon commonly understood principles that all health and social service professionals are subject to (e.g., promotion of social justice, positive health, and dignity). Not all ethical issues facing CHWs are addressed; however, the absence of a rule does not imply that there is no ethical obligation present. As professionals, CHWs are encouraged to reflect on the ethical obligations they have to the communities they serve, and to share these reflections with others.

#### **Article 1. Responsibilities in the Delivery of Care**

CHWs build trust and community capacity by improving the health and social welfare of the clients they serve. When conflict arises among individuals, groups, agencies, or institutions, CHWs should consider all issues and give priority to those that promote the wellness and quality of living for the client. The following promote professional integrity of the CHW:

##### **1.1 Honesty**

CHWs are professionals who work to ensure the best health outcomes for the clients and communities they serve. They communicate the potential benefits and consequences of available services, including the programs under which they are employed.

##### **1.2 Confidentiality**

CHWs respect the confidentiality, privacy, and trust of the individuals, families, and communities they serve.

### **1.3 Scope of Ability and Training**

CHWs are truthful about their qualifications, competencies, and limitations to render services and should not misrepresent those qualifications or competencies at any time.

### **1.4 Quality of Care**

CHWs strive to provide high quality service to individuals, families, and communities through continued education, training, and an obligation to ensure the information provided is up to date and accurate.

### **1.5 Legal Obligations**

CHWs have an obligation to report actual or potential harm to others within the community to the appropriate authorities. Additionally, CHWs have a responsibility to follow legal regulations set forth by the state and/or their employing organization.

Responsibility to the larger society or specific legal obligation may supersede the loyalty owed to individual community members.

## **Article 2. Promotion of Equitable Relationships**

CHWs focus their efforts on the well-being of the whole community and value and respect the expertise and knowledge that each community member possesses. In turn, CHWs work to create equitable partnerships with communities to address all issues of health and well-being.

### **2.1 Cultural Humility**

CHWs possess expertise in the communities in which they serve. They maintain a high degree of humility and respect for the cultural diversity within each community. As advocates for their communities, CHWs have an obligation to inform employers and others when policies and procedures will offend or harm or are ineffective in the communities they serve.

### **2.2 Maintaining the Trust of the Community**

CHWs are often members of their communities and their effectiveness in providing services derives from the trust placed in them by members of these communities.

### **2.3 Respect for Human Rights**

CHWs respect the human rights of those they serve, respect the principle of self-determination, and promote equitable relationships with all communities.

### **2.4 Anti-Discrimination**

CHWs do not discriminate against any person or group based on race, ethnicity, gender, sexual orientation, age, culture, religion, social status, disability, or immigration status.

### **Article 3: Interactions with Other Service Providers**

CHWs maintain professional partnerships with other service providers to serve the community effectively.

#### **3.1 Cooperation**

CHWs value the well-being of those they serve above personal disagreements and work cooperatively with any other person or organization dedicated to helping provide care to those in need.

#### **3.2 Conduct**

CHWs promote integrity in the delivery of health and social services. They respect the right, dignity, and worth of all people and have an ethical obligation to report any inappropriate behavior (e.g., sexual harassment, racial discrimination, etc.) to the proper authority.

#### **3.3 Self-Presentation**

CHWs are truthful and forthright in presenting their background and training with other service providers.

### **Article 4. Professional Rights and Responsibilities**

The CHW profession is dedicated to excellence in the practice of promoting well-being in the communities served. Guided by common values, CHWs have the responsibility to uphold the principles and integrity of the profession while assisting clients to make decisions that impact their well-being. CHWs embrace individual, family and community strengths and build upon them to increase community capacity.

#### **4.1 Continuing Education**

CHWs should remain up to date on any developments which substantially affect their ability to competently render service. They strive to expand their competencies and professional knowledge base through education and participation in professional organizations.

#### **4.2 Advocacy for Change in Law and Policy**

CHWs are advocates for change. They work on impacting policies that promote social justice and they hold systems accountable to be responsive to communities. Improved policies that promote better public health and well-being will enable them to provide better care for the communities they serve.

#### **4.3 Wellness and Safety**

CHWs are sensitive to their own personal well-being (physical, mental, and spiritual health) and they work to maintain a safe environment for themselves and the communities they serve.



Kentucky Department for Public Health  
**Community Health Worker Certification Manual**



**4.4 Loyalty to the Profession**

CHWs are loyal to the cause of advancing the work performed by other CHWs worldwide. They avoid denigrating the profession and they address any professional problems first with other CHWs.

**4.5 Advocacy for the Profession**

CHWs are advocates for the profession. They are members, leaders, and active participants in local and state professional organizations.

**4.6 Recognition of Others**

CHWs give recognition to others for their professional contributions and achievements.

(American Association of Community Health Workers, 2008)

## APPENDIX C - VIOLATIONS, COMPLAINTS AND SUBSEQUENT ACTIONS

### Violations

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This section establishes standards relating to offenses or criminal convictions; violations that result in disciplinary actions; procedures for filing complaints alleging violations and prohibited actions; and KOCHW's investigation of complaints. The following elements will be considered:

1. Criminal convictions that directly relate to the CHW profession.
  - a. KOCHW may suspend or revoke any existing certification or disqualify a person from receiving certification due to conviction of a felony or misdemeanor.
  - b. In considering whether a criminal conviction directly relates to the CHW occupation, KOCHW shall consider:
    - i. the nature and seriousness of the crime and
    - ii. the relationship of the crime to the duties and responsibilities of a CHW.
2. Certain criminal offenses which indicate an inability to perform the duties and responsibilities of a CHW.
3. The extent to which any certification might offer an opportunity to engage in further criminal activity of the same type as that in which the person previously had been involved.
4. The relationship of the offense or violation to the ability, capacity, or fitness required to perform the duties and discharge the responsibilities of a CHW.
5. KOCHW may consider other violations in order to promote the intent of this section.

#### Examples of Violations:

- A person intentionally or knowingly represents oneself as a CCHW without a valid certificate issued by KOCHW;
- A person obtains or attempts to obtain a certificate issued by bribery or fraud;
- A person engages in unprofessional conduct, including the violation of the Code of Ethics for Community Health Workers;
- A person fails to report to appropriate authorities a violation or any allegations of sexual abuse by another person;
- A person has a certificate revoked, suspended, or otherwise subjected to adverse action and continues to use the term Certified Community Health Worker to identify themselves.





6. **Procedures for revoking, suspending, or denying a certificate to persons with criminal backgrounds.** Written notice shall be given to the person that KOCHW intends to deny, suspend, or revoke the certification after a hearing with the CHW Advisory Committee.

If KOCHW denies, suspends, or revokes a certification under these sections after a hearing, KOCHW shall give the person written notice of the reasons for the decision.

7. **Filing of complaints.** Anyone may file a complaint to the KOCHW alleging that a CCHW has committed an offense or action prohibited under state law or that a certificate holder has violated Kentucky Administrative Regulation per [902 KAR 21:040](#).

A person can notify KOCHW of an alleged violation by the following means:

**Mail**

Kentucky Department for Public Health  
 Office of Community Health Workers  
 275 E. Main Street, HS2W-E  
 Frankfort, Kentucky 40621

**Email**

[CHW.Certification@ky.gov](mailto:CHW.Certification@ky.gov)  
Subject Line: “Community Health Worker Complaint”

The complaint should contain:

- A statement that the CCHW has violated the requirements of Kentucky Administrative Regulation per [902 KAR 21:040](#) or the CHW code of ethics;
- The facts on which the complaint is based; and
- The signature and contact information for the complainant.

Upon receipt of a complaint, KOCHW shall provide notice to the CCHW named in the complaint that a complaint has been filed and provide the CCHW an opportunity to respond to the complaint, including a proposal to resolve the complaint. Anonymous complaints will not be investigated.

If the information received addresses a concern that is outside the scope of the Kentucky Office of Community Health Workers Certification Standards or Code of Ethics, KOCHW will not consider the concern a complaint. KOCHW will inform the individual or organization with the concern via certified letter that the concern is outside the scope and will not be investigated by KOCHW.

8. **Investigation of complaints.** Within sixty (60) calendar days after a complaint is filed, KOCHW will carry out an independent investigation if determined necessary. During this time the complainant will be given the opportunity to submit additional information, either orally or in writing, about the allegation in the complaint. This may also include contacting the person or organization named in the complaint and others who may be able to provide information. KOCHW will review all relevant information and decide as to whether the CCHW has violated the requirements of this manual, the administrative

regulation, or the code of ethics. Whenever KOCHW dismisses a complaint or closes a complaint file, KOCHW shall issue a written decision to the complainant that addresses each allegation in the complaint and contains the reasons for the program's final decision.

9. **Disciplinary action.** KOCHW may take disciplinary action if it determines that a person who holds a certificate is in violation of the CHW Code of Ethics or if audit findings show the CCHW has violated the requirements of the program.
10. **Final action.** KOCHW may determine that a CHW has violated the Kentucky Administrative Regulation per [902 KAR 21:040](#) standards or Code of Ethics and may take disciplinary action.

Disciplinary action may include:

- Reprimand
  - Action regarding certification which may include:
    - Denial of an application for certification or renewal
    - An audit of a CCHW
    - Revocation
    - Non-renewal
    - Suspension
- **Suspension and Revocation.** Written notice of a suspension with the right to appeal shall be provided if KOCHW suspends a certificate, and the suspension remains in effect until KOCHW determines that the reasons for suspension no longer exist. A request to appeal the suspension shall be submitted to KOCHW within ten (10) days of the notice and include evidence that the reason for the suspension has been corrected. A CHW whose certificate has been suspended is responsible for securing and providing to KOCHW such evidence, as may be required by KOCHW, that the reason for the suspension no longer exists. Failure to submit a request to appeal the suspension within this ten (10) day period will result in continued suspension of the certificate. A certificate that has been suspended for one (1) year shall be considered revoked.
- During the time of suspension, the former certificate holder shall not use the certificate and identification card(s) and shall not engage in the practice of community health work until the suspension is lifted or further disciplinary action is taken. If a suspension overlaps a certificate renewal period, the former certificate holder shall comply with the normal renewal procedures in these sections; however, KOCHW may not renew the certificate until KOCHW determines that the reasons for suspension have been removed. A certificate shall be revoked for repeated violations of the requirements of this manual, the administrative regulation, or the CHW code of ethics. Written notice of the revocation shall be provided to the CHW and include the right to request a hearing in accordance with KRS chapter 13B.

11. **Denial.** Written notice of a denial of an application for certification or renewal shall be



Kentucky Department for Public Health  
**Community Health Worker Certification Manual**



provided to the applicant and will include the applicant's opportunity to reapply or the right to appeal. The request to appeal the denial of a certificate shall be submitted to the department within ten (10) days from the date listed on the notice and provide evidence that the denial was in error. The department will then re-evaluate the evidence and issue a final notice to the applicant within ten (10) days. An applicant whose application is denied, or certificate is revoked, as a result of disciplinary action, is ineligible for a minimum of one (1) year from the date of the denial or revocation.

KOCHW will give a summary of the final action to the Community Health Worker and the complainant if deemed appropriate.

- 12. Fair hearing.** The fair hearing shall be conducted according to established guidelines. Prior to making an adverse action regarding certification, KOCHW shall give the certificate holder written notice of an opportunity for a hearing on the proposed action. The certificate holder has twenty (20) business days after receiving the notice to request a hearing on the proposed action. A request for a hearing shall be made in writing, through certified mail, email ([CHW.Certification@ky.gov](mailto:CHW.Certification@ky.gov)) or hand delivered to KOCHW, unless the notice letter specifies an alternative method. If a person who is offered the opportunity for a hearing does not request a hearing within the prescribed time for making such a request, the person is deemed to have waived the right to a hearing and the action may be taken.

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