



South Carolina Community Health Worker Credentialing Council

Training Program Application

Applications for training program credentialing can be submitted online or by mail. A decision will be delivered within 90 days. A denial requires greater than 60% of the Credentialing Council to vote in opposition. Additional details on submission, including method of payment, will also be available on the SCCHWA.org. If a submission is not approved by the Council, an organization has two opportunities to re-submit without an additional payment.

Section I. Organizational Contact Information

Name of Organization/Agency				
Work Address (Street Address)	(City)	(State)	(Zip Code)	(County)
Type of Business (Check one)				
<input type="checkbox"/> Community-Based Organization	<input type="checkbox"/> College/University/School	<input type="checkbox"/> Non-Profit Organization		
<input type="checkbox"/> Clinic/Hospital	<input type="checkbox"/> Faith-Based Organization	<input type="checkbox"/> Local Health Department		
	<input type="checkbox"/> State Agency	<input type="checkbox"/> Other (specify):		
Work Telephone			E-mail Address	

Section II. Program Point of Contact Personal Information (Please Print or Type all information)

Last Name	First Name	Middle Name/Initial
Mailing (if different from residence) (Street Address/P.O. Box)		
	(City)	(State) (Zip Code) (County)
Phone	E-Mail Address	

Section III. Application Signature

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED	
<ul style="list-style-type: none"> I certify that all the information provided by me in connection with this application, whether on this document or not, is true and complete. I understand that providing false or misleading information, which is material in determining my qualifications may result in the voiding of the application and failure to be granted any credential or the revocation of any credential issued. Programs are audited annually. I agree to abide by the rules regarding the training and certification of community health workers 	
THIS APPLICATION MUST BE SIGNED AND DATED	
Signature	Date

Section IV. Basic Program Components

We have included in our application (applications not meeting these criteria will be rejected):

- | | |
|--|---|
| <input type="checkbox"/> Complete SCCHWCC Training Program Application | <input type="checkbox"/> A CHW in a leadership role for training |
| <input type="checkbox"/> Documentation of how core competencies link to curricula | <input type="checkbox"/> A method for ensuring an 80% attendance rate for those who graduate from the program |
| <input type="checkbox"/> Documentation of how we use participatory learning | <input type="checkbox"/> Position Descriptions for Trainers and Preceptors |
| <input type="checkbox"/> Documentation of 80 hours of coursework (min of 60 hrs in-person) and 80 hours of field placement | <input type="checkbox"/> \$700 payment for application processing to SCCHWA |
| <input type="checkbox"/> Documentation of application process for CHW candidates | |

Section V. Training Program Details

Submitted materials must provide/demonstrate the following:

A completed application form.

A curriculum with a minimum of 80 hours of facilitated learning time and 80 hours of Field Placement that provides relevant, accurate, and the curriculum and field placement must adequately cover all the SC CHW core competencies.

An index that connects the SC Community Health Worker core competencies to the different components of the training program.

An application process that helps determine if the applicant meets the core qualities of a Community Health Worker and the CHW career is a good fit.

A Participatory or Experiential Learning component is required for all approved curricula, and within each module addressing the SC Community Health Worker core competencies. In general, participatory training actively involves and motivates learners by drawing upon their own experience and skills in solving problems, using examples and situations of interest to them in their daily lives, and using a variety of new, enjoyable, and often visual teaching methods. (Bradley, S. (1995). Participatory learning. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/12319520>)

A Field Placement component is required for all SC Community Health Worker core competencies. Training programs are expected to submit a plan and assessment process for the Field Placement. Training programs are responsible for ensuring successful field placement completion for students.

Approved training programs must demonstrate **qualifications of Trainers/Faculty**. Trainers must have educational and experiential qualifications to perform their assigned duties, must be knowledgeable in course content, and effective in teaching assigned subjects. Principal faculty must be sufficient in number to meet the needs of enrolled students. In addition to the principal faculty, there must be sufficient instructional faculty to provide students with the necessary attention, instruction, and supervised field placement experiences to acquire



the knowledge and competence required for entry into the profession. Instructors that are CHWs must have 2 years working in a CHW position. If instructors are not CHWs, they must have experience working in community health and co-teach with a CHW.

Approved training programs must demonstrate **qualifications of Preceptor**. Preceptors have to have at least two years of working in the scope of a Community Health Worker for two years.

After completing an approved training program, students are eligible to take the SC CHW exam to become certified as a Community Health Worker.

Application and associated materials may be mailed to:

**SCCHWA
POB 7422
Columbia, SC 29202**

**Or hand-delivered to:
Call for an appointment
803.960.2686**

**SCCHWA
Arnold School of Public Health
UofSC
915 Greene Street
Columbia, SC 29201**

Or emailed to: credential.council@scchwa.org