

TIPS FROM THE FIELD

1. The first Rule is “KISS IT.” Keep it simple and salient from the start. Begin with an entry-level core competency-based basic certificate curriculum, which is CHW informed and employer validated.
2. Avoid unrealistic and unnecessary academic admissions barriers for a basic entry-level program; avoid unnecessary pre-requisites.
3. Take it to the students...to the community. Try to make it student-centered not campus-centered.
4. Build it from the Outside In not from the Inside Out. Build the curriculum from the perspective of community-based CHW practice sites. Consider a curriculum constructed from the perspective of where CHWs work and serve in their communities.
5. Exercise Academic Humility. Invite seasoned and active CHWs and employers to inform and validate the curriculum and instruction which the college offers. Engage CHWs as program advisors, as teachers, as teacher aides, as guest lecturers, as fieldwork site leaders, supervisors, and preceptors (to help validate the competence of students), as mentors and advisors for students (offering help for CHWs as students to navigate the college). In other words, fully engage the leadership of experienced, seasoned and successful CHWs to support the college’s development and delivery of a CHW responsive program.
6. Make sure it meets a 4 As Test:
 - Is it Appropriate? Is it entry-level, welcoming to adult learners, liberating, language-sensitive, competency-based, and culturally appropriate?
 - Is it Acceptable? Is it at a content level of acceptability? For example, don’t require pharmacology, anatomy and physiology, or even full blown medical terminology courses, when this is truly not needed. Do the training in the context of the unique character and need of the community (ies) being served.
 - Is it Accessible? Avoid barriers to matriculation, like academic screenings which make non-traditional learners feel fearful. Offer the instruction where students live and work in the college’s service region. Consider student transportation issues and options (for example, student car pools and public transportation options); can childcare alternatives be explored to assist these adult students as parents?
 - Is it Adaptable? Is it “community evidence-based?” Is it tailored to unique population and neighborhood needs? Can instruction be scheduled in blocks of time, like over weekends? Can distance learning technology reach students in multiple sites...is this technology user friendly...will resource-poor communities and disadvantaged students have access to the college’s distance learning technologies?