

Guidelines for Documenting Work Experience for the  
Community Health Internship Deficiency

Department of Health Sciences  
Western Illinois University

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## Background Information

This option was developed for individuals who are presently working, or have worked within the last five years, in a community health education position. Keep in mind that the activities documented should be related to community health education, not clinical/medical experiences. The student MUST submit a proposal to the internship coordinator prior to actually documenting the work experiences. This must include the following information:

1. The agency name
2. The student's job title
3. A description of job responsibilities
4. A list of the projects/programs intended for documentation

The proposal is reviewed by the internship coordinator (and other graduate faculty as necessary). If approval is provided, the student may progress with the actual documentation of the community health education experiences.

## Style Format

The finished product must:

1. Be typed (using only one style of type throughout the paper)
2. Be double spaced
3. Have one-inch margins
4. Be thorough and well organized
5. Be grammatically sound and free of typographical errors
6. Be submitted either in a 3-ring binder or comb bound

Preparing a quality, professionally written paper will, in most cases, minimize the chances that faculty reviewers will mandate major revisions. HINT: It is suggested the paper be typed and stored on a computer disk to minimize the time involved in re-typing the entire paper when revisions are mandated.

## Sequential Order of the Paper

### *Title Page*

An example of proper format for the title page is provided on page 4.

### *Table of Contents*

An example of proper format for the table of contents is provided on page 5. Everything appearing in the table of contents should also appear in the body of the paper, properly separated and underlined.

### *Introduction*

This should include a historical review of the agency/organization followed by a current overview. This should also include a brief description of the student's history with the agency/organization.

### *Structure and Functions of the Agency/Organization*

This should be a detailed discussion of the organizational structure and functions of each of the operating units/departments within the agency/organization. Discuss how the agency is organized, as well as the roles, responsibilities, and programs provided by each operating unit/department. Include an organizational chart in the appendices.

### *Description of Experiences and Activities*

This shall consist of a thorough, in-depth discussion of the various experiences and activities that the intern was involved in during the time period discussed. A detailed explanation of several projects/programs should be provided. Each description should also include a discussion of the graduate-level responsibilities utilized in completing the projects/programs. A copy of Certified Health Education Specialist Responsibilities and Competencies is provided in the example Appendix A on page 11. In addition, a matrix indicating the responsibilities utilized should be provided for each task completed. Example matrices are found in the example Appendix B on page 19. Students must document a minimum of 150 work hours.

### *Appendices*

Include copies of materials developed or utilized for the projects/programs. Some helpful hints include:

1. All appendices included must be discussed in the body of the paper and include a page reference (e.g., Appendix A, p. 23).
2. Appendices are arranged according to the order in which they are discussed in the paper (i.e., the first appendix discussed should be Appendix A, the second should be Appendix B, and so on).
3. Make certain the pages in the appendices are properly numbered. The page number provided in the Table of Contents and cited in the main body of the paper should be consistent. The appendices section should begin pagination where the Description of Experiences and Activities section ended (see the Table of Contents provided in this document as an example).
4. If an appendix is more than one page, a cover sheet should be supplied (see Appendices B and C in this document as examples). A cover sheet is not needed for appendices which are one page in length.
5. Titles of tables, graphs, etc. should be on the right margin.

*Additional Requirements*

Each student must provide references who can verify the documented experiences actually were completed. This information should include:

- Supervisor's Name and Title
- Agency Name
- Agency Address
- Agency Telephone Number

**EXAMPLE TITLE PAGE**

Professional Work Experience Documentation

Completed at McDonough County Health Department  
Macomb, IL

By

Joe Student

Submitted in partial fulfillment of the Department of Health Sciences  
Community Health Internship Requirement  
Western Illinois University  
January 2009

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## **EXAMPLE COVER SHEETS FOR CHAPTERS**

### CHAPTER I INTRODUCTION

(Counted as a page, but not numbered)

CHAPTER II  
STRUCTURE AND FUNCTIONS OF McDONOUGH COUNTY HEALTH DEPARTMENT

(Counted as a page, but not numbered)

CHAPTER III  
DESCRIPTION OF EXPERIENCES AND ACTIVITIES

(Counted as a page, but not numbered)

**EXAMPLE APPENDICES**

APPENDICES

(Counted as a page, but not numbered)

APPENDIX A

CHES Responsibilities and Competencies

(Counted as a page, but not numbered)



## National Commission for Health Education Credentialing, Inc.

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*The Seven Areas of Responsibility are a comprehensive set of Competencies and Sub-competencies defining the role of an entry-level health educator. These Responsibilities were verified through the Competencies Update Project (CUP), conducted from 1998 to 2004, and serve as the basis of the Certified Health Education Specialist (CHES) exam.*

### Area I: Assess Individual and Community Needs for Health Education

Competency A: Access existing health-related data

Sub-competencies:

1. Identify diverse health-related databases
2. Use computerized sources of health-related information
3. Determine the compatibility of data from different data sources
4. Select valid sources of information about health needs and interests

Competency B: Collect health-related data

Sub-competencies:

1. Use appropriate data-gathering instruments
2. Apply survey techniques to acquire health data
3. Conduct health-related needs assessments
4. Implement appropriate measures to assess capacity for improving health status

Competency C: Distinguish between behaviors that foster and hinder well-being

Sub-competencies:

1. Identify diverse factors that influence health behaviors
2. Identify behaviors that tend to promote or comprise health

Competency D: Determine factors that influence learning

*This Competency is not addressed in the study guide, because the Sub-competencies are related to an advanced level of practice.*

Competency E: Identify factors that foster or hinder the process of health education

Sub-competencies:

1. Determine the extent of available health education services
2. Identify gaps and overlaps in the provision of collaborative health services

Competency F: Infer needs for health education from obtained data

Sub-competencies:

1. Analyze needs assessment data

## Area II: Plan Health Education Strategies, Interventions, and Programs

Competency A: Involve people and organizations in program planning

Sub-competencies:

1. Identify populations for health education programs
2. Elicit input from those who will affect or be affected by the program
3. Obtain commitments from individuals who will be involved
4. Develop plans for promoting collaborative efforts among health agencies and organizations with mutual interests

Competency B: Incorporate data analysis and principles of community organization

Sub-competencies:

1. Use research results when planning programs
2. Apply principles of community organization when planning programs
3. Suggest approaches for integrating health education within existing health programs
4. Communicate need for the program to those who will be involved

Competency C: Formulate appropriate and measurable program objectives

Sub-competencies:

1. Design developmentally appropriate interventions

Competency D: Develop a logical scope and sequence plan for health education practice

Sub-competencies:

1. Determine the range of health information necessary for a given program of instruction
2. Select references relevant to health education issues or programs

Competency E: Design strategies, interventions, and programs consistent with specified objectives

*This Competency is not addressed in the study guide, because the Sub-competencies are related to an advanced level of practice.*

Competency F: Select appropriate strategies to meet objectives

Sub-competencies:

1. Analyze technologies, methods and media for their acceptability to diverse groups
2. Match health education services to proposed program activities

Competency G: Assess factors that affect implementation

Sub-competencies:

1. Determine the availability of information and resources needed to implement health education programs for a given audience
2. Identify barriers to the implementation of health education programs

### **Area III: Implement Health Education Strategies, Interventions, and Programs**

Competency A: Initiate a plan of action

Sub-competencies:

1. Use community organization principles to facilitate change conducive to health
2. Pretest learners to determine baseline data relative to proposed program objectives
3. Deliver educational technology effectively
4. Facilitate groups

Competency B: Demonstrate a variety of skills in delivering strategies, interventions, and programs

Sub-competencies:

1. Use instructional technology effectively
2. Apply implementation strategies

Competency C: Use a variety of methods to implement strategies, interventions, and programs

Sub-competencies:

1. Use the Code of Ethics in professional practice
2. Apply theoretical and conceptual models from health education and related disciplines to improve program delivery
3. Demonstrate skills needed to develop capacity for improving health status
4. Incorporate demographically and culturally sensitive techniques when promoting programs
5. Implement intervention strategies to facilitate health-related change

Competency D: Conduct training programs

*This Competency is not addressed in the study guide, because the Sub-competencies are related to an advanced level of practice.*

**Area IV: Conduct Evaluation and Research Related to Health Education**

Competency A: Develop plans for evaluation and research

Sub-competencies:

1. Synthesize information presented in the literature
2. Evaluate research designs, methods and findings presented in the literature

Competency B: Review research and evaluation procedures

Sub-competencies:

1. Evaluate data-gathering instruments and processes
2. Develop methods to evaluate factors that influence shifts in health status

Competency C: Design data collection instruments

Sub-competencies:

1. Develop valid and reliable evaluation instruments
2. Develop appropriate data-gathering instruments

Competency D: Carry out evaluation and research plans

Sub-competencies:

1. Use appropriate research methods and designs in health education practice
2. Use data collection methods appropriate for measuring stated objectives
3. Implement appropriate qualitative and quantitative evaluation techniques
4. Implement methods to evaluate factors that influence shifts in health status

Competency E: Interpret results from evaluation and research

Sub-competencies:

1. Analyze evaluation data
2. Analyze research data
3. Compare evaluation results to other findings
4. Report effectiveness of programs in achieving proposed objectives

Competency F: Infer implications from findings for future health-related activities

*This Competency is not addressed in the study guide, because the Sub-competencies are related to an advanced level of practice.*

**Area V: Administer Health Education Strategies, Interventions, and Programs**

Competency A: Exercise organizational leadership

Sub-competencies:

1. Conduct strategic planning
2. Analyze the organization's culture in relationship to program goals
3. Promote cooperation and feedback among personnel related to the program

Competency B: Secure fiscal resources

*This competency is not addressed in the study guide, because the Sub-competencies are related to an advanced level of practice.*

Competency C: Manage human resources

Sub-competencies:

1. Develop volunteer opportunities

Competency D: Obtain acceptance and support for programs

*This Competency is not addressed in the study guide, because the Sub-competencies are related to an advanced level of practice.*

**Area VI: Serve as a Health Education Resource Person****Competency A: Use health-related information resources****Sub-competencies:**

1. Match information needs with the appropriate retrieval systems
2. Select a data system commensurate with program needs
3. Determine the relevance of various computerized health information resources
4. Access health information resources
5. Employ electronic technology for retrieving references

**Competency B: Respond to requests for health information****Sub-competencies:**

1. Identify information sources needed to satisfy a request
2. Refer requesters to valid sources of health information

**Competency C: Select resource materials for dissemination****Sub-competencies:**

1. Evaluate applicability of resource materials for given audience
2. Apply various processes to acquire resource materials
3. Assemble educational material of value to the health of individuals and community groups

**Competency D: Establish consultative relationships****Sub-Competencies:**

1. Analyze parameters of effective consultative relationships
2. Analyze the role of the health educator as a liaison between program staff and outside groups and organizations
3. Act as a liaison among consumer groups, individuals and health care providers
4. Apply networking skills to develop and maintain consultative relationships
5. Facilitate collaborative training efforts among health agencies and organizations

**Area VII: Communicate and Advocate for Health and Health Education**

Competency A: Analyze and respond to current and future needs in health education

Sub-competencies:

1. Analyze factors (e.g., social, cultural, demographic, political) that influence decision-makers

Competency B: Apply a variety of communication methods and techniques

Sub-competencies:

1. Assess the appropriateness of language in health education messages
2. Compare different methods of distributing educational materials
3. Respond to public input regarding health education information
4. Use culturally sensitive communication methods and techniques
5. Use appropriate techniques for communicating health education information
6. Use oral, electronic and written techniques for communicating health education information
7. Demonstrate proficiency in communicating health information and health education needs

Competency C: Promote the health education profession individually and collectively

Sub-competencies:

1. Develop a personal plan for professional development

Competency D: Influence health policy to promote health

Sub-competencies:

1. Identify the significance and implications of health care providers' messages to consumers

APPENDIX B

Example Matrix

(Counted as a page, but not numbered)

## Contraception Presentation

Tasks	Responsibilities						
	I	II	III	IV	V	VI	VII
Talk to R.A. about intended audience	X						
Determine areas of focus and concentration	X						
Ask R.A. to post notices of program in residence hall		X					
Arrange to have TV/VCR available for video		X					
Ask R.A. for any ideas/opinions she has about the program		X					
Write objectives		X					
Distribute handouts			X				
Show video			X				
Present prepared lecture			X				
Be prepared to alter lecture as it occurs			X				
Tell audience what I expect them to know or be able to do at the completion of the program				X			
Call R.A. after the program for feedback				X			
Keep records regarding the effectiveness of different program strategies				X			
Discuss residence hall programs with other health center personnel who provide programs					X		
Conduct in-service training programs on new contraceptive technology					X		
Analyze the organization's culture in relationship to this program's goals					X		
Let R.A. know that I am available to her if she has problems or concerns with students on her floor						X	
Contact coordinator of health education after each program to share information with him about the program						X	
Gather educational material pertinent to the program						X	
Assess the appropriateness of language in the health education messages							X
Respond to the public's input regarding the program's health education information							X
Use culturally sensitive communication methods and techniques							X