**Community Health Worker Observation Form**

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| **Community Health Worker: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Visit Type:**   * **Initial Visit 1** * **Home Visit 2** * **Home Visit 3** * **Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Reviewer:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Encounter Date: \_\_\_\_\_\_\_\_\_\_\_** |
| **Observation:**   * **In-person** * **Phone** |

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| **Scoring Instructions:**   * Check box if content/process is completed correctly. * Mark **N/A** if item is not applicable to visit. * Each check equals one point.   **POSSIBLE POINTS (circle) = 30 (Home) or 25 (Phone)**  **TOTAL SCORE = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Recommendations:**   * **Additional training** * **1 on 1 review** * **Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** * **None**   **Community Health Worker received feedback:**    **Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

| **CONTENT/PROCESS** | **COMMENTS** | **POSSIBLE PTS./ SCORE** |
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| **Introduction**   * Greets/introduces cordially; states purpose of visit * Reviews Introduction sheet (home visit 1) *or* provides review of previous visits. * Identifies/discusses potential health priorities on participant summary sheet (home visit 1) *or* asks what health areas participant wishes to discuss. * Discusses importance of each health area(s) identified. * Listens & interacts well. |  | **5 points**  **possible** |
| **Points Earned:** |
| **Education Topic Review (Home Visits Only)**   * Identifies new education topic based on participant summary sheet and/or participant interest. * Reviews related “Education Topic” section of training manual accurately. * Confirms participant’s understanding of information & corrects inaccuracies as needed. * Provides information/education clearly & at a level participant understands. * Asks open ended questions regarding material. |  | **5 points**  **possible** |
| **Points Earned:** |
| **N/A**  **(phone visit)** |

| **CONTENT/PROCESS** | **COMMENTS** | **POSSIBLE PTS./ SCORE** |
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| **Goal Setting/Barriers (Home & Phone Encounters)**   * Identifies * goal(s) set at previous encounter based on participant summary sheet  *or* N/A (home visit 1). * Discusses possible barriers for achieving goal(s). If goal was not achieved, help participant problem solve ways to overcome barriers. * Provides positive reinforcement for partial or complete goal achievement or attempted efforts. * Helps participant set new, realistic goal(s). * Reviews handouts related to new goal(s). * Asks about possible barriers to achieving goal. * Affirms ability to achieve goal & asks about rewards participant will give themselves for goal achievement. * Asks about confidence level to achieve goal. |  | **10 points**  **possible** |
| **Points Earned:** |
| **Visit Summary/Closure**   * Recaps key information from visit. * Reviews follow up as needed (i.e. PCP visits) *or* confirms participant has resources to meet their goals. * Confirms participant understanding of goals. * Schedules next phone call or home visit & summarizes what to expect. * Affirms progress participant made to manage health. |  | **5 points**  **possible** |
| **Points Earned:** |
| **Data Collection/Encounter Form**   * Clear & legible handwriting on encounter form. * Completes each question/area correctly. * Ensures all header items (Client ID; date; CHW initials) are recorded on each page. * Accurately records education topics & goals covered on participant summary sheet. |  | **5 points**  **possible** |
| **Points Earned:** |

**Other Comments:**

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