

The CHES Bulletin

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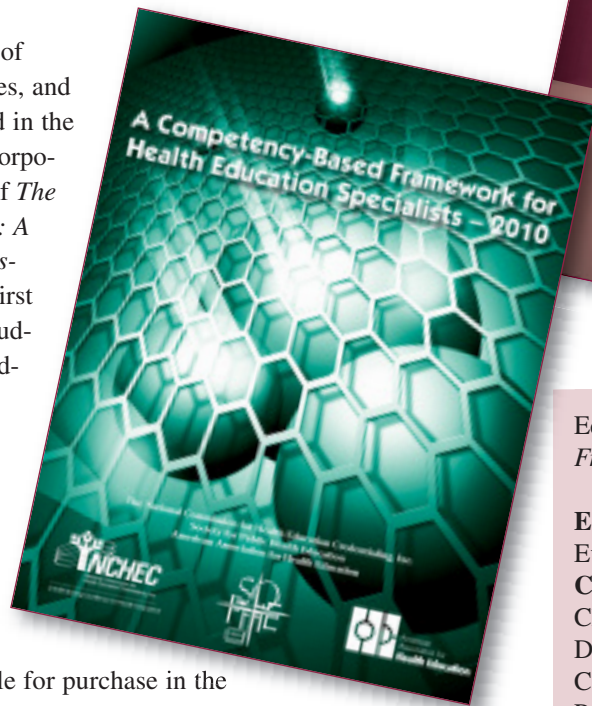
Fall 2010

NCHEC Releases Two Revised Publications Based on the HEJA Study

A Competency Based Framework for Health Education Specialists – 2010 is jointly copyrighted by NCHEC, the Society for Public Health Education, (SOPHE), and the American Association for Health Education (AAHE). The revised framework is based on the Health Educator Job Analysis-2010, an 18-month project to update, refine and validate the model of health education practice. The updated model comprises 223 Sub-competencies, organized into 34 Competencies within Seven major Areas of Responsibility. Of the Sub-competencies, 61 were validated as advanced-level only. The HEJA-2010 study expanded upon the previous Competency Update Project (CUP) which first provided a model of three levels of practice.

The resultant revised Areas of Responsibility, Competencies, and Sub-competencies identified in the HEJA project have been incorporated into the sixth edition of *The Health Education Specialist: A Companion Guide for Professional Excellence*. For the first time, this publication is including both entry- and advanced-level Competencies and Sub-competencies. This publication will be used to assist health education specialists to study for the 2011 April CHES exam and the inaugural October 2011 MCHES exam. Both publications will be available for purchase in the fall of 2010 at www.nchec.org.

NCHEC would like to extend sincere gratitude and appreciation to the following editors, co-editors, contributing authors, reviewers, and copy-editors for both publications.



Purchase your copy at www.nchec.org

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CONFERENCE SCHEDULE

Mark your calendars for opportunities to earn continuing education contact hours. For more information on the conferences, visit the organizations' Web site.

Organization	Details	Dates	Location
ASHA 84th Annual Meeting	www.ashaweb.org	Oct. 13-16, 2010	Kansas City Missouri
SOPHE 61th Annual Meeting	www.sophe.org	Nov. 5-7, 2010	Denver Colorado
APHA 138th Annual Meeting and Exposition	www.apha.org	Nov. 5-10, 2010	Denver Colorado

Next Exam Dates

APRIL 2011						
Sun	Mon	Tues	Wed	Thu	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

OCTOBER 2011						
Sun	Mon	Tues	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Tell a colleague or student that the next CHES exam dates are **April 16, 2011** and **October 15, 2011**. For more information, visit the Web site at www.nchec.org or contact the exam coordinator at 888-624-3248, ext 12.



For the 2011 Election, NCHEC is using an online system for CHES to vote for the voluntary positions on our Board of Commissioners and Division Boards. Please vote online by:

September 30, 2010



- Go to www.nchec.org
- Click on: **CHES Login**
- Login using Username and Password

When logged in, CHES can:

- Click on the 2011 Election ballot
- Read bios of candidates
- Vote

Any questions
 Contact the NCHEC office at: 888-624-3248

Need CHES Credits?

Visit the NCHEC Web site www.nchec.org to find Continuing Education Credit Activities.

Go to the **CE Credit Activities** Quick Link and search for Upcoming Events and Self-Studies.



BOC Chair's Report: An Excerpt from the NCHEC Board of Commissioners Annual May 2010 Meeting

W. William Chen, Ph.D., CHES, Chair, Board of Commissioners



It is an honor and pleasure to serve as the Chair of the Board of Commissioners (BOC) for NCHEC this year. Based on my own observation and thinking, this report will highlight some of the important issues, major accomplishments, and challenges for NCHEC.

Credentialing Serves as a Major Strategy for the Sustainable Development of Health Education: Credentialing is a process whereby an individual

or a professional preparation program meets the specific standards established by the credentialing body and is recognized for having completed the standards. Credentialing includes both individuals and academic programs. NCHEC plays an important role for professional *quality control* to fulfill the credentialing process for individual health education specialists. The certification process helps to elevate the *public confidence* in health education specialists and therefore it is critical for the *sustainable development* of the health education profession. NCHEC's mission meets the needs of sustainable development in health education by improving the practice of health education and by serving the public and profession through (1) certifying health education specialists, (2) promoting professional development, and (3) strengthening professional preparation and practice. We have come a long way since the establishment of NCHEC in 1988. The CHES certification was accredited by the National Commission for Certifying Agencies (NCCA) in 2008. Furthermore, credentialing has gained momentum both nationally and internationally and the importance of credentialing has further expanded to the overall public health profession. As a profession, we must attend to the trends and issues related to credentialing for the purpose of sustainable development in health education. NCHEC will continue to assist the profession by conducting a job analysis and sustain the professional development by implementing an advanced-level credential, known as the Master Certified Health Education Specialist (MCHES).

Increased Global Interests in Certification: The work of NCHEC has been very well received by the health education profession both nationally and internationally. There has been an increased global interest in certification of health education professionals. Recognizing that developing a shared vision for workforce capacity-building and standards is a critical foundation for subsequent strategic plans of action is important for the sustainable development in global health education and health promotion, the Galway consensus conference was held in 2008 to identify the domains of core competency necessary to assure quality in practice, education, and training. The Galway conference was considered the initial step to explore a global credentialing process to verify the identified competencies for the sustainable development in health education. Recently, some Asian countries including China, Korea, Hong Kong, and Taiwan have expressed interest in learning more about our system of credentialing. What is

our position on global certification? It could be difficult to export our credentialing system to other countries because of political, economic, and cultural differences. Perhaps the best approach might be to assist these countries in developing their own system of credentialing that will meet the local country needs and their political system. But this would be an important issue for NCHEC to consider.

Direct Third-Party Reimbursement of Health Education Services: The direct third-party reimbursement (DTPR) of health education services has been explored and discussed by health education professionals before and perhaps now is the time to seriously consider the issue. The importance of achieving DTPR includes: (1) it helps the health education profession to increase recognition, (2) it aids health education growth through professional accountability and quality assurance, (3) it is essential for health education professional needs to generate revenue and maintain visibility, (4) it provides the health education profession with greater control over professional practice and decision-making power, and (5) it helps to increase job opportunities. DTPR could be an important strategy to sustain the continuous development of health education in the future. A study of CHES about their opinions showed that certified health education professionals had positive attitudes toward seeking DTPR. Because of the importance of DTPR, NCHEC should take a position to participate in the discussion and facilitate the development of DTPR if it is feasible.

Major Accomplishments: Major accomplishments included passing of the Policy Statement regarding advanced-level certification MCHES by the BOC in May, 2009. For the past several years, NCHEC had been in communication with the health education profession regarding the advanced-level certification. After seeking input from health education professionals and careful deliberation and discussion, the BOC voted to implement the MCHES beginning in 2010. Another major accomplishment is completion of the Health Educator Job Analysis (HEJA) project. The project was undertaken to meet standards from the National Commission for Certifying Agencies (NCCA) for periodic analysis. Experts from the professional Examination Services (PES) helped to guide this project and NCHEC partnered with leaders from the American Association for Health Education (AAHE) and the Society for Public Health Education (SOPHE) to complete the project.

Future Challenges: (1) The launch of the MCHES certification including item writing for the MCHES examination, development and implementation of the Experience Documentation Opportunity (EDO) and development of MCHES continuing education opportunities will consume a significant level of our energy for the coming year. (2) To sustain the development of NCHEC and other credentialing-related businesses, we need to seek opportunities to expand our financial bases and continue to do a good job in managing our finances. (3) We also need to continue providing quality services to our customers, the CHES, MCHES and other stakeholders, particularly potential employers, in order to sustain the growth and development of NCHEC.

Health Educator Job Analysis Again Validates Seven Areas of Responsibility

Linda Lysoby, MS, CHES, CAE, Executive Director, NCHEC
 Eva Doyle, PhD, MEd, CHES, HEJA and Task Force Chair



Linda Lysoby



Eva Doyle

Source: *A Competency-Based Framework for Health Education Specialists-2010*. Adapted from *Overview of the National Health Educator Competencies Updated Project, 1998-2004* by Gilmore, Olsen, Taub, and Connell (2005).

Comparison of Health Education Areas of Responsibility (1985 – 2010)

Entry-Level Framework (1985)	Graduate-Level Framework (1999)	CUP Model (2006)	HEJA Model (2010)
I. Assessing individual and community needs for health education	I. Assessing individual and community needs for health education	I. Assess individual and community needs for health education	I. Assess needs, assets, and capacity for health education
II. Planning effective health education programs	II. Planning effective health education programs	II. Plan health education strategies, interventions, and programs	II. Plan health education
III. Implementing health education programs	III. Implementing health education programs	III. Implement health education strategies, interventions, and programs	III. Implement health education
IV. Evaluating effectiveness of health education programs	IV. Evaluating effectiveness of health education programs	IV. Conduct evaluation and research related to health education	IV. Conduct evaluation and research related to health education
V. Coordinating provision of health education services	V. Coordinating provision of health education services	V. Administer health education strategies, interventions, and programs	V. Administer and manage health education
VI. Acting as a resource person in health education	VI. Acting as a resource person in health education	VI. Serve as a health education resource person	VI. Serve as a health education resource person
VII. Communicating health and health education needs, concerns, and resources	VII. Communicating health and health education needs, concerns, and resources	VII. Communicate and advocate for health and health education	VII. Communicate and advocate for health and health education
	VIII. Applying appropriate research principles and techniques in health education		
	IX. Administering health education programs		
	X. Advancing the profession of health education		

The Health Education Profession has a long history with role delineation and competency development. It has been 25 years since the role of entry-level health education specialists and their related scope of practice were first established within Seven Areas of Responsibility. The profession began with Seven Areas of Responsibility in 1985, added three graduate-level areas (Areas VIII-X) in 1999, and then combined the original seven from 1985 and three graduate-level areas from 1999 into an updated seven areas in 2006.

The three-tiered hierarchical framework of entry- and advanced-level practice that emerged in the CUP Model was also validated in the Health Educator Job Analysis results released in 2010.

Outcomes of the HEJA 2010 study, a multi-phase national study to examine the contemporary practice of health educators in the United States validated the continued use of the seven areas with some minor revisions made to the wording of the Areas of Responsibility. Despite some changes in wording, the first four Areas of Responsibility have retained their primary foci: *Assess, Plan, Implement, and Evaluate*. Part of the work of the HEJA

2010 study used the analysis opportunity to empirically determine whether “research” and “evaluation” components of Area IV should be separated. Study results concluded that the two should remain within the same area with some research-specific Sub-competencies designated as “advanced-level.” In Area V, the words *and Manage* were added to the original word *Administer* to more closely reflect some subtle distinctions between the two concepts. The wording for Areas VI and VII were retained from the CUP Model.

The HEJA -2010 resulted in:

7 Areas of Responsibility

34 Competencies

223 Sub-competencies:

162 Entry-level

61 Advanced-level

The complete information is available in the new publication *A Competency-Based Framework for Health Education Specialist-2010*, available for purchase at www.nchec.org

Source: *A Competency-Based Framework for Health Education Specialists-2010*, NCHEC, SOPHIE, AAHE (2010)

BIG Changes for DBCHEs

Written by Beverly Saxton Mahoney, RN, MS, PhD, CHES, DBCHEs Director

The Division Board for Certification of Health Education Specialists (DBCHEs) is undergoing major changes in more ways than one. DBCHEs “assures a periodic review and evaluation of certification and examination processes; recommends policies and procedures for administering the CHES examination; participates in item-writing workshops; and ensures that NCHEC’s competency testing meets acceptable standards.” (<http://www.nchech.org/about-nchech/mission/>)

The major focus of DBCHEs is the creation of the entry-and advance-level examinations. In order to meet the need for two credentialing examinations, CHES and the new MCHES, the number of directors of DBCHEs grew from seven to thirteen following the 2009 elections and BOC appointments, and new directors were welcomed in January, 2010. Shortly thereafter, we also received the final report from the National Health Educator Job Analysis (HEJA) 2010. The new HEJA model, consisting of Seven Areas of Responsibility, 34 Competencies, and 223 Sub-competencies at the entry-level, represents an increase of 25% over the previous 163 Sub-competencies. In addition, 61 Sub-competencies were validated as advanced-level only and will be used, along with the 162 Sub-competencies identified as entry-level, as a basis for items on the MCHES exam. The inaugural MCHES exam will be administered in October 2011.

Of all the above-noted responsibilities for DBCHEs, the most time consuming and vital is that of writing items (questions) for the examinations. The item-writing process has traditionally been accomplished through minimal pre-meeting item construction, followed by intensive item-writing and review during a DBCHEs face-to-face meeting at the NCHEC headquarters. All items are banked according to a rubric indicating the Area of Responsibility, Competency, and Sub-competency they address. Each item is also based on current best practices and must be associated with a specific reference citation. NCHEC works with Professional Examination Service (PES) to assure all phases of testing, from initial item writing through rubricing, test construction, and scoring, meet rigorous standards.

Prior to spring 2010, pre-meeting writing was accomplished via email, and items were sent to PES. PES recently created and launched a new software program called Remote Item Writing (RIW) in order to facilitate and enhance the item construction process. Between January and March of 2010, DBCHEs directors attended two Webinar-style electronic workshops during which they were oriented to the RIW process. Also directors were provided with multiple resources and tutorials to assist them in writing items to be submitted for review.

All information related to the item-writing process is kept on a secure server, and each director has password access to an individual item-writing account. To date, selected directors also serve as reviewers and have individual item reviewing accounts. Each reviewer can access written items, provide comments and suggestions for the writer, and then return items to the writer for revision. This process can be repeated as often as necessary for any item until that specific item is deemed ready for final review at the face-to-face meeting. At that point, the item goes into the PES item bank where it will be prepared for review during the face-to-face meeting. PES can organize proposed items by their location within the rubric. This allows directors to see, at the start of the face-to-face meeting, not only the individual items, but also the ‘big picture’ of which Areas, Competencies, and Sub-competencies might need more items to be written and which have sufficient items. Because pre-writing allows for early review, DBCHEs directors anticipate RIW will facilitate our having more items completed and ‘item-bank-ready’ at the start of our meeting, thereby permitting DBCHEs to make optimal use of our meeting time at NCHEC headquarters. The final step for item construction is that each item must be reviewed and approved by a minimum of three directors.

DBCHEs directors are learning the nuances of the RIW program, and expect it to increase our efficiency and enhance our ability to construct highly valid and reliable items for both existing and new Competencies and Sub-competencies at both entry- and advanced-levels.

Employers: Do you want even more exposure to Health Education Specialists? HPCareer.net has been a career service resource for professionals and students in the health education field in finding jobs and internships.



CHES LOOKING FOR A JOB???

Check out the NCHEC, HpCareer.net and the CNHEO Web sites for links to open jobs.

DISTINGUISHED CHES • Michele Spino Bolles, CHES

NCHEC would like to recognize Michele Spino Bolles for her 20 year commitment to the health education profession and her work at the American Heart Association (AHA). NCHEC asked Michele to reflect on her CHES certification and why she decided to become certified and the benefits of obtaining and maintaining the credential.

How has the CHES credential benefited your current position?

In my current role as the Vice President of Quality Improvement at AHA, my primary focus is to assist healthcare facilities in collecting the appropriate data on their patients and evaluating delivery of care, specifically around secondary prevention, risk reduction interventions, and patient education. In working with the hospitals in Delaware, Pennsylvania, Kentucky, West Virginia and Ohio, I have an opportunity to improve patient care and impact a large population of patients and caregivers. CHES has served me well and the certification enhanced my role within the AHA. It has helped me be more effective in helping drive the AHA's mission to build healthier lives, free of cardiovascular diseases and stroke.

Why did you decide to become CHES certified?

I am proud to say that I have been CHES certified since 1990, I took the exam to become certified in its inaugural year. As an undergraduate in the Public Health Program at West Chester University one of my professors, Dorothy Nowack, who was a strong proponent of our profession, was always talking about this "new"



credential that was going to be available and that we should all consider sitting for the exam. I graduated with a B.S. in Public Health in May of 1990 and just a few weeks later I took the CHES exam.

How have you benefited from being CHES certified?

I have maintained my certification over the last 20 years and feel it has given me great value on a professional level. There have been innumerable opportunities for me to collaborate with other CHES on publications, projects and presentations. When my CHES Bulletin arrives in the mail I always look forward to hearing what exciting things are going on within our profession and, inevitably, someone I know is represented in the latest issue. The CE requirements have encouraged me to stay current with journals and the latest

research in our field. In working in the non-profit world for the past 20 years, it is sometimes challenging and being certified has been a great resource. Additionally, I have a network of well respected colleagues that I interact with as a result of our commonalities of being CHES.

The certification has always helped me to validate my profession, although my biggest challenge is that, 20 years later, I still find myself having to educate people on what CHES means. We have grown tremendously in the past 20 years and I know with the leadership at NCHEC we will grow exponentially over the next 20 years! In May 2010 I celebrated my 20 year anniversary working for the American Heart Association, as well as my 20 year anniversary of being CHES certified. I am proud to have been able to maintain this certification through the years and find the number of CE offerings has become plentiful and varied. With the MCHES application being available later this year I am excited that we are taking CHES professionals to the next level and creating a higher standard for seasoned professionals. I think this is great opportunity and it is my hope that I will earn this level of achievement.

Do you know someone like Michele who does an outstanding job of advancing the credential and the health education profession? If so, please contact the NCHEC office at www.nchec.org.



U.S. Health Education Represented at International Conference

"Developing a Sustainable System of Quality Assurance for Professional Preparation and Practice of Health Education Specialist in the U.S." was presented at the 20th World Conference on Health Promotion, held July 11 to 15, 2010 in Geneva, Switzerland. Topics covered including certification, accreditation, competency consensus-building efforts and job analysis procedures in the United States.

Presenters included (l-r): Collins Airhihenbuwa, John Allegrante, Linda Lysoby, Elaine Auld and Randy Cottrell.



BECOME A MASTER CERTIFIED HEALTH EDUCATION SPECIALIST

MCHES Experience Documentation Opportunity

Don't Miss Out on this One Time Opportunity

(Read more to see if you are eligible)

TOP 5 REASONS TO BECOME MCHES

- 1) Endorsement of your advanced professional experience, knowledge, and skills
- 2) Commitment to the health education profession
- 3) Opportunity for advanced professional development
- 4) Demonstrated excellence in the field of health education
- 5) Greater recognition from health education peers

From October 15, 2010 through April 16, 2011, current CHES who have been active for the last five continuous years may submit documentation of advanced-level practice in health education to qualify for the MCHES designation.

To complete this application process CHES will need to assemble the following documents:

- 2010 MCHES Experience Documentation Opportunity Application
- Experience Self-Appraisal and Testament of Practice Assessment Form (2 copies)
(2 recommenders must complete as well)
- Activity Documentation
- Resume or Curriculum Vitae

Below are some FAQs regarding the EDO process

Who is eligible for the EDO period?

- An active CHES that has been certified for five consecutive years before October 1, 2005 and remains active and has been practicing at the advanced-level in health education for the past five years
- Retired status is a permanent status and therefore not eligible

What are the dates for the EDO period?

- The EDO period will open on October 15, 2010 and close on April 16, 2011. The first MCHES designation will be awarded in April 2011

What types of documentation to support advanced-level activities are acceptable?

(3 page max on all supporting documents)

- ✓ Project/Program summary with purpose, goals, objectives, and means to achieve results
- ✓ Course syllabus
- ✓ Grant notification letter and statement of work
- ✓ Professional conference speaker confirmation letter (include program insert that shows learner objectives)
- ✓ First page of authored textbook, book chapter, or peer-reviewed journal article (at least third author)

Application Fees and Deadlines:

Type of Applicant	12/1/10	1/15/11	3/1/11	4/16/11
MCHES Experience Documentation Opportunity	\$200	\$210	\$240	\$290

- ✓ Letter of completion of advanced-level activity from a current or past supervisor/manager; describe objectives, brief history, and outcome measure and results
- ✓ Page of annual report indicating administrative responsibility/role
- ✓ Organization letterhead/newsletter showing leadership position/role

What types of documentation to support advanced-level activities is NOT acceptable?

- ✓ Budgets from organizations or grants
- ✓ Full annual reports
- ✓ Meeting minutes
- ✓ Full text books or publications
- ✓ Confidential information

Who can be a recommender?

(The recommender does not need to be CHES)

**Give advance notice to the recommender of the EDO process and their expectations*

- ✓ A colleague
- ✓ Current or Past supervisor/manager

Advanced-level Sub-competencies with the Areas of Responsibility that will be used to fill out the experience self-appraisal and testament of practice form for the EDO process

AREA I: Assess needs, assets and capacity for health education

- Competency 1.1: Plan assessment process
- 1.1.2. Identify stakeholders to participate in the assessment process
 - 1.1.5. Engage stakeholders to participate in the assessment process
- Competency 1.5: Examine factors that influence the learning process
- 1.5.2. Analyze factors that foster or hinder the learning process
 - 1.5.5. Identify factors that foster or hinder skill building
 - 1.5.6. Analyze factors that foster or hinder skill building
- Competency 1.7: Infer needs for health education based on assessment findings
- 1.7.2. Synthesize assessment findings

AREA II: Plan health education

- Competency 2.2: Develop goals and objectives
- 2.2.1. Use assessment results to inform the planning process
 - 2.2.3. Select planning model(s) for health education
 - 2.2.4. Develop goal statements
 - 2.2.5. Formulate specific, measurable, attainable, realistic, and time-sensitive objectives
- Competency 2.3: Select or design strategies and interventions
- 2.3.1. Assess efficacy of various strategies to ensure consistency with objectives
 - 2.3.3. Select a variety of strategies and interventions to achieve stated objectives
- Competency 2.4: Develop a scope and sequence for the delivery of health education
- 2.4.4. Organize health education into a logical sequence
 - 2.4.5. Develop a timeline for the delivery of health education

AREA III: Implement health education

- Competency 3.3: Train individuals involved in implementation of health education
- 3.3.2. Identify training needs
 - 3.3.3. Develop training objectives
 - 3.3.4. Create training using best practices
 - 3.3.7. Evaluate training
 - 3.3.8. Use evaluation findings to plan future training

AREA IV: Conduct evaluation and research related to health education

- Competency 4.1: Develop evaluation/research plan
- 4.1.1. Create purpose statement
 - 4.1.2. Develop evaluation/research questions
 - 4.1.7. Assess the merits and limitations of qualitative and quantitative data collection for research
 - 4.1.10. Critique existing data collection instruments for research
 - 4.1.11. Create logic model to guide the evaluation process
 - 4.1.13. Develop data analysis plan for research
- Competency 4.2: Design instruments to collect evaluation/research data
- 4.2.3. Write new items to be used in data collection for research
- Competency 4.5: Apply findings from evaluation/research
- 4.5.2. Evaluate feasibility of implementing recommendations from evaluation

- 4.5.4. Disseminate research findings through professional conference presentations

AREA V: Administer and manage health education

- Competency 5.1: Managing fiscal resources
- 5.1.1. Identify fiscal and other resources
 - 5.1.2. Prepare requests/proposals to obtain fiscal resources
 - 5.1.3. Develop budgets to support health education efforts
 - 5.1.4. Manage program budgets
 - 5.1.5. Prepare budget reports
 - 5.1.6. Demonstrate ethical behavior in managing fiscal resources
- Competency 5.2: Obtain acceptance and support for program
- 5.2.1. Use communication strategies to obtain program support
 - 5.2.2. Facilitate cooperation among stakeholders responsible for health education
 - 5.2.3. Prepare reports to obtain and/or maintain program support
 - 5.2.4. Synthesize data for purposes of reporting
- Competency 5.3: Demonstrate leadership
- 5.3.3. Promote collaboration among stakeholders
- Competency 5.4: Manage human resources
- 5.4.6. Employ conflict resolution strategies
 - 5.4.9. Develop strategies to enhance staff and volunteers' career development
 - 5.4.10. Implement strategies to enhance staff and volunteers' career development
- Competency 5.5: Facilitate partnerships in support of health education
- 5.5.1. Identify potential partner(s)
 - 5.5.2. Assess capacity of potential partner(s) to meet program goals
 - 5.5.4. Elicit feedback from partner(s)
 - 5.5.5. Evaluate feasibility of continuing partnership

AREA VI: Serve as a health education resource person

- Competency 6.2: Provide training
- 6.2.1. Analyze requests for training
 - 6.2.2. Prioritize requests for training
 - 6.2.4. Assess needs for training
 - 6.2.5. Identify existing resources that meet training needs
 - 6.2.6. Use learning theory to develop or adapt training programs
 - 6.2.7. Develop training plan
 - 6.2.8. Implement training sessions and programs
 - 6.2.9. Use a variety of resources and strategies
 - 6.2.10. Evaluate impact of training programs
- Competency 6.3: Serve as a health education consultant
- 6.3.5. Provide expert assistance
 - 6.3.7. Evaluate the effectiveness of the expert assistance provided

AREA VII: Communicate and advocate for health and health education

- Competency 7.4: Engage in health education advocacy
- 7.4.9. Lead advocacy initiatives
 - 7.4.10. Evaluate advocacy efforts
- Competency 7.5: Influence policy to promote health
- 7.5.1. Use evaluation and research findings in policy analysis
 - 7.5.4. Use evidence-based research to develop policies to promote health

Applicant's name: **JANE DOE**

CHES #: **12345**

Advanced Activity #1 **SAMPLE**

Name of Advanced Activity: Present an oral presentation at the 2008 APHA conference		Year advanced activity completed: (within the past 5 years) 2008
Area of Responsibility: IV: Conduct evaluation and research related to health education	Advanced-level Sub-competency: 4.5.4 Disseminate research findings through professional conference presentations	
Name of Documentation: Professional conference speaker confirmation letter		
Description of applicants' role in advanced activity (no more than 100 words): At the 2008 APHA national conference I presented an oral presentation regarding the state-wide Diabetes program entitled, "A summary of XYZ State-wide Diabetes Prevention Program: A success story". Throughout the presentation I provided the evaluation results of several diabetes prevention programs throughout the state.		
Mark type of documentation (please submit documentation, of no more than 3 pages, for each advanced-level activity): <input type="checkbox"/> Project/Program summary with purpose, goals, objectives, and means to achieve results <input type="checkbox"/> Course syllabus (Include documentation that identifies provider and type of credit awarded.) <input type="checkbox"/> Grant notification letter and statement of work <input type="checkbox"/> Professional conference speaker confirmation letter (include program insert that shows learning objectives) <input type="checkbox"/> First page of an authored textbook, book chapter, or peer-reviewed journal article (at least third author) <input type="checkbox"/> Letter of completion of an advanced activity from a current or past supervisor/manager; describe objectives, brief history, and outcome measure and results. <input type="checkbox"/> Page of annual report indicating administrative responsibility/role <input type="checkbox"/> Organization letterhead/newsletter showing leadership position/role <input type="checkbox"/> Other (name type) _____		

To be completed by the recommender.

Question	Yes	No	Comments
1. Is this experience an appropriate match to the advanced-level Sub-competency identified by the applicant? If "No" complete the comments section and DO NOT answer the remaining questions.	X		Yes this activity is an appropriate match. As Jane's colleague, I attended the conference and saw her present.
2. Is the activity of sufficient quality to qualify as an advanced-level health education activity?	X		Presenting an oral presentation at a national conference is a sufficient activity.
3. Is the documentation appropriate to determine advanced-level of practice?	X		The letter confirms acceptance at the APHA convention.
4. Is the documentation adequate to determine advanced-level of practice?	X		As Jane's colleague I can attest that her work is commendable.

Advanced Activity #2 SAMPLE

Name of Advanced Activity: Name of Advanced Activity: Co-chair of the state-wide Stroke Rehabilitation Work Group	Year advanced activity completed: <i>(within the past 5 years)</i> 2009
Area of Responsibility: Area I: Asses Needs, Assets, and Capacity for Health Education	Advanced-level Sub-competency: 1.1.5 Engage stakeholders to participate in the assessment process
Name of Documentation: Purpose, goals, objectives, and means to achieve results for the Stroke Rehabilitation Working Group	
Description of applicants' role in advanced activity (no more than 100 words): Served as co-chair of the state-wide Stroke Rehabilitation Working Group that consisted of professionals from a variety of work settings that are responsible for providing social and rehabilitation services to people who have suffered a stroke. Stakeholders included professionals from such settings as long-term care, public health, community health centers, non-profit organizations, health insurance, schools, social services, advocacy, community organizations, etc. This group met regularly to assess the specific needs of post-stroke patients and went on to develop state wide goals and objectives for a comprehensive plan for stroke prevention and care that would ensure that the continuum of care would be maintained after a person has received acute care in an inpatient setting. New health eduction prevention programs resulted from the work of this group.	
Mark type of documentation (please submit documentation, of no more than 3 pages, for each advanced-level activity):	
<input checked="" type="checkbox"/> Project/Program summary with purpose, goals, objectives, and means to achieve results <input type="checkbox"/> Course syllabus (Include documentation that identifies provider and type of credit awarded.) <input type="checkbox"/> Grant notification letter and statement of work <input type="checkbox"/> Professional conference speaker confirmation letter (include program insert that shows learning objectives) <input type="checkbox"/> First page of an authored textbook, book chapter, or peer-reviewed journal article (at least third author) <input type="checkbox"/> Letter of completion of an advanced activity from a current or past supervisor/manager; describe objectives, brief history, and outcome measure and results. <input type="checkbox"/> Page of annual report indicating administrative responsibility/role <input type="checkbox"/> Organization letterhead/newsletter showing leadership position/role	

To be completed by the recommender.

Question	Yes	No	Comments
1. Is this experience an appropriate match to the advanced-level Sub-competency identified by the applicant? If "No" complete the comments section and DO NOT answer the remaining questions.	X		Serving as a co-chair of a working group of this nature is an appropriate example of advance-level practice.
2. Is the activity of sufficient quality to qualify as an advanced-level health education activity?	X		I can attest that Jane's work as co-chair was high quality.
3. Is the documentation appropriate to determine advanced-level of practice?	X		Yes, the documentation gives a summary of the work of this group that Jane was the co-chair.
4. Is the documentation adequate to determine advanced-level of practice?	X		As Jane's supervisor I am knowledgable of her diligent work as co-chair.

NCHEC WELCOMES NEW CHES SPRING 2010



The following is a list of those who earned the distinct title of Certified Health Education Specialist (CHES) in the spring 2010 examination. NCHEC welcomes them to a class of more than 9,000 active CHES. Those who opted not to be published are excluded from this listing

Sara E Abdollahian
Lindsey B Absher
Rodney L Absher
Ayesha H Ahmad
Latoya Alexander
Brandi Alford
Bertha L Allen
Mattie R Allen
Erin T Alley
Diana Al Sayed Hassan
Keyla M Alvarez
Lori Andersen
Alexandra Anderson
Kristy L Anderson
Lindsee L Anderson
Chantelle Archer
Jennifer K Armstrong-Bettini
Kristen M Artes
Louvenia H Askew
Elizabeth A Austin
Walaa H Awad
Diana M Baldassari
Laura H Ball
Stuart T Bapties
Deborah Barr
Jamila L Batts
Erin R Baum
Brent W Baxley
Jacqlyn R Baylis
Anna R Benbrook
Kristen A Bennett
Nicole R Benson
Courtney L Bestul
Wendy A Bezilla
Alanna Biblow
Rebekah Billingsley
Charity Bishop
Mare-Kay A Blakney
Kadi R Bliss
Francisco J Borboa
Liberty Bost
Nikita Boston
Marian O Botchway
Kerri L Boyd
Brittany A Brands

Lauren A Brayer
Sarah E Brockman
Lisa R Brockmeyer
Julia E Bromberg
Erin Brossia
Christye Y Brown
Shawnte Z Brown
Aaron R Brueseke
Shunika S Bryant
Kimberly A Buck
Siobhan U Budine
Martha N Buko
Kasey R Burg
Jesse F Burk
Julie M Burke
Maureen T Burns-Hooker
Sequoia Y Butcher
Julia Canas
Barbara N Carbonell
Reina P Carioti
Christy Carlson
Sarah M Carlson
Brooke E Carlyle
Christina M Carmona
Kristen D Carollo
Michelle L Carvalho
Myriam Casseus
Raksme A Castleman
Kinsey E Cave
Nathalie Ceballos
Danielle Center
Delvin R Champagne
Emily B Chandler
Marjorie A Chandler
Carlos N Chapman II
Kimberley N Chapman
Christine J Charles
Enmanuel A Chavarria
Deniece Chevannes
Jennice S Chewlin
Megan Christianson
Richard A Christman
Carla A Chromik
Lauren A Clark
Cynthia E Clemons
Kelsey L Cler
Teresa D Cline
Maddie M Coffman
Monica L Cohen

Laura L Colbert
Helen V Cole
Devvon M Coleman
Chelsea E Collum
Amber D Colston
Kimberly C Comeau
Kaitlin M Conron
Brittany M Cooper
Margaret L Corgill
Shannon J Cox
Megan C Coy
Diane Crankson
Amy K Crompton
Atha M Cutler
Jeanne K Cutler
Alicia K Czachowski
Tiffany C Dale
Steven W Day
Alison DeCaro
Abba Kris Maria B Dela Cruz
Rena M DeVolder
Allison L DeWert
Ilana K Dickman
Krystal K Diehl
Hayley A Dittus
Jenna M Dodge
Marissa R Domantay
Kaitlyn S Donaldson
Katherine E Dorsch
Andrea L Dotson
Pamela L Downey
Alyssa N Driscoll
Sara E Drum
Kari Duma-White
Diana C Duque
Tara L Dzingleski
Colleen E Early
Elizabeth R Eckman
Linneth B Edwards
Katherine Egglefield
Erin M Elfeldt
Tabatha J Elsberry
Sarah E Engler
Sarah O Eppes
Tanesha J Espey
Marissa Esser
Emily C Evers
Ifeoma O Ezeabogu

Ashley A Farmer
Jennifer R Ferguson
Jeannette Ferrelli
Laurel Feuz
Sarah B Fewell
Sara K Fink
Bridgette A Fischer
Lynn S Fitzgerald
Kellie J Flannery
Megan M Folkert
Stephanie Forbes
Kristen S Force
Kari N Ford
Seirra Fowler
Christine M Freaney
Samantha E Freels
Rachel V Freeman
Talya Frelick
Debbie P Frezell
Rebecca D Frieders
Katelyn M Galloway
Abigail Gamble
Carolyn A Garby
Giselle Garcia
Felice A Gardner
Juliet E Gardner
Ellie J Garrett
Genevieve C Garrett
Melissa K Garrett
Natalie D Gatewood
Anthony J Gentile
Lauren J Giardino
Rajvinder Gill
Kenneth D Gillette
Theresa F Glatstein
Christian T Gloria
Maralie Godemann
Jaclyn L Goff
Wallace B Goldman
Michael J Gooch
Sharlene A Gozaliens
Heather L Green
Colecia S Griffin
Amanda R Grimes
Alicia S Groom
Cassandra R Grubbe
Ashley M Gustafson

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Dawn L Hager	Chelsea C Hurst	Angela Y Lin	Allison F Mutchler
Wendy J Hague	Wendy M Hyde	Ramon P Llamas	Donna J Myers
Alisha A Hahn	Lynn M Iler	Deneen N Long-White	Gaya C Myers
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Matthew R Herington	Helen W Karanja	Laura A McCune	Kelly C Ostrem
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Taylor M Hoth	Kristin Kuber M Kuber	Sadie L Miller	Audrey L Petit
Tracy L Housley	Jamila R LaFleur	Jena L Mitchell	Dawna D Phillips
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Rochelle E Howell	Elizabeth LaPointe	Carson J Monroe	Darian E Pletcher
Erin M Hoysa	Sheri L Latta	William A Moore	Brittany L Pollard
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Rachel E Hull	Cynthia C Lee	Daniel M Morgan	Bethany M Porter
Christine Hunkele	Melinda Lehtinen	Crystal L Morris	Jessica M Potrepka
India D Hunt	Deighton Lewis	Julie A Munoz-Choudhury	
Sherri N Hunter	Catherine A Lewis	Maya S Musick	

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 Elizabeth G Radcliff
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 Ryan A Ramsdell
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 Elizabeth A Reader
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 Makeva M Rhoden
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 Yan Zhao



*Lynn Marie Iler, MPH, CHES
 Spring 2010 CHES
 Exam High Scorer*

Lynn Marie Iler, MPH, CHES *High Scorer on the Spring 2010 Exam*

Lynn completed both her Bachelor of Science and Master of Public Health degrees at the University of North Carolina-Chapel Hill in the Health Behavior and Education Department. She was a James M. Johnston scholar and is a member of Delta Omega. In the 1980's and 90's, she worked as a Health Educator at the University of Texas M. D. Anderson Comprehensive Cancer Center and the State of Hawaii Department of Health assessing needs, planning, implementing and evaluating a wide range of programs. When her family moved to the Washington, DC area, she took some time off to raise her children. During this time she taught English for Speakers of Other Language to recent immigrants, worked on a team to assist community development efforts in the Guatemala Highlands, and compiled and managed a scholarship library to assist college-bound high school students. She is always excited about how her background in health education facilitates her volunteer work. Lynn is now looking for a job as a health educator in the Washington, DC metro area and realized that as a CHES she would be more competitive in the job market. "Studying for the exam, reviewing the seven Areas of Responsibility and their corresponding Competencies, and learning about new resources available to health educators, was the best thing I could do to prepare myself for the job search. The chances for continuing education will not only keep me current in the field, but will give me opportunities to network."



MARK YOUR CALENDAR FOR MCHES LIVE: THE WEBINAR SERIES

Written by: Beth Chaney, PhD, CHES



MCHES Live: The Webinar Series

FREE WEBINARS AVAILABLE

The Impact of MCHES on Academia
Topics: the importance of MCHES, curriculum alignment, student learning outcomes for assessment
Audience: university and college faculty, staff, and administrators
Date/Time: September 17, 2010 @ 11:00 a.m. EDT
MCHES and the Health Education Profession
Topics: MCHES eligibility, experience documentation opportunity (EDO) process, MCHES exam, professional development
Audience: anyone interested in MCHES
Date/Time: September 17, 2010 @ 12:00 p.m. EDT
The Impact of MCHES on Designated Providers and Employers
Topics: process for providers, importance for employers
Audience: designated providers, employers of health education specialists
Date/Time: September 17, 2010 @ 1:00 p.m. EDT

MASTER CERTIFIED HEALTH EDUCATION SPECIALIST (MCHES)

PURPOSE:
To provide appropriate target audiences the information needed to be prepared for the implementation of the advanced credential MCHES.

CONTINUING EDUCATION CONTACT HOURS (CECH):
Participants can obtain 4 CECH per webinar. Register for the webinar(s) and for the free CECHs at the NCHEC website homepage (<http://www.ncheec.org>).

WEBINAR ARCHIVE:
The live webinars will be recorded and archived on the NCHEC website for CHES to download and use for informational/educational purposes.

HOSTED BY:
College of Health and Human Performance
University of Florida

INVITED PANELISTS:
Beth H. Chaney, Ph.D., CHES
University of Florida
William Chen, Ph.D., CHES
University of Florida
Dixie L. Dennis, Ph.D., CHES
Rutgers State University
Linda Lysoby, M.S., CHES, CAE
National Commission for Health Educator Credentialing, Inc.
James F. McKenzie, Ph.D., MPH, CHES
Texas State University
Melissa Rehrig, MPH, CHES
National Commission for Health Educator Credentialing, Inc.
Alyce Stewart, MPH, CHES
Rutgers State University
Kelly L. Wilson, Ph.D., CHES
Texas State University

To register, visit the NCHEC homepage at <http://www.ncheec.org>





specific to each audience. In addition, participants will have the opportunity to engage in dialogue/discussion with the panelists regarding any questions or concerns about MCHES, the Experience Documentation Process (EDO), Continuing Education Contact Hours (CECH), etc. Invited panelists include: Dixie Dennis, Ph.D., CHES (Immediate Past Chair of NCHEC Board of Commissioners (BOC)), William Chen, Ph.D., CHES (Chair, BOC), James F. McKenzie, Ph.D., CHES (Coordinator, Division Board for Certification of Health Education Specialists), Kelly Wilson, Ph.D., CHES (Division Board for Professional Preparation and Practice), Alyce Stewart, MPH, CHES (Coordinator, Division Board for Professional Development), Beth Chaney, Ph.D., CHES (Vice-Chair, BOC, Chair, Marketing Committee), Kelly Wilson, Ph.D., CHES (Immediate Past Chair, Marketing Committee), and Linda Lysoby, MS, CHES, CAE (Executive Director, NCHEC).

The first webinar (11:00am – 11:50am ET) will focus on how MCHES will impact university faculty and administrators in terms of professional preparation, curriculum alignment, student learning outcomes, and educating students on both the entry-level CHES and advanced-level MCHES credentials. The second webinar (12:00pm – 12:50pm ET) will provide information to current CHES and non-CHES who may be interested in pursuing the advanced credential on the following: MCHES eligibility, the Experience Documentation Opportunity (EDO), MCHES exam, and MCHES CECH opportunities. The final Webinar in the series (1:00pm – 1:50pm ET), will provide important information on how MCHES will impact the CECH activities provided by single-event and multiple-event designated providers, and employer information on hiring CHES and MCHES.

Please mark your calendars for this landmark event, *MCHES Live: The Webinar Series*, September 17, 2010, 11:00pm-2:00pm ET. Registration information will be provided on NCHEC's Web site closer to the Webinar date, so please, stay tuned!

As the official launch of the new, advanced-level credential, MCHES, is quickly approaching, NCHEC has teamed-up with the University of Florida's College of Health and Human Performance (HHP) to host a MCHES Webinar series, titled *MCHES Live: The Webinar Series*. The purpose of the Webinar series is to provide appropriate target audiences with the information needed to prepare for the implementation of the MCHES. Specifically, the series consists of three Webinars for the following target audiences: university faculty and administrators, current CHES and non-CHES interested in pursuing the advanced credential,

and designated providers and employers. The NCHEC Marketing Committee, which consists of Melissa Rehrig (NCHEC's Communication Director), Beth Chaney (Assistant Professor, University of Florida), Amy Jennings (Health Management Consultant, The Health & Wellness Institute), Audrey Shively (Manager, Research and Professional Education, National Osteoporosis Foundation), and Kelly Wilson (Assistant Professor, Texas State University), invited panelists from across the country to convene at the University of Florida on September 17, 2010, 11am-2pm ET, for three live, 50 minute webinars, to provide information



The 2010 NCHEC Board of Commissioners met for a face-to-face meeting in May 2010 at the Whitehall, Pennsylvania office to finalize MCHES policies and procedures. Seated (l-r): Suzette McClellan, William Chen (chair), Deborah Fortune. Standing: James McKenzie, Alyce Stewart, Lori Elmore (secretary), Rick Shulze (treasurer), Elizabeth Chaney (vice chair), Dixie Dennis (immediate past chair), Jacquie Rainey, Stephen Gambescia, Martha Kelsey.

MCHES Exam

The inaugural Master Certified Health Education Specialist Exam (MCHES) is anticipated to be administered by NCHEC in October of 2011. NCHEC conducted the Competency Update Project in 2006 and the

National Health Educator Job Analysis in 2010 of which both projects revealed that there was advanced-level practice by health education specialists.

This exam will measure the knowledge of the advanced-level Sub-competencies of the Seven Areas of Responsibility. The publication *The Health Education Specialist: A Companion Guide for Professional Excellence* can assist in preparation for the MCHES examination. The publication, along with practice questions, will be available for purchase in the fall of 2010.

Please see the list on the right: 10 Reasons to take the MCHES exam developed by Paula Miller, MPH, CTR, CHES.

1. The MCHES Certification serves as an endorsement of your advanced-level professional experience, knowledge, and skills
2. When you earn the MCHES Certification, you show your commitment to the health profession
3. This certification connects you to a network of advanced professionals in the health education profession
4. The MCHES credential professional distinguishes you publicly as an individual who has attained an advanced-level certification
5. Certification provides opportunities for advanced-level professional development
6. It prepares you for higher-level job responsibilities in the health field
7. Certification allows for greater recognition from peers for taking an advanced step in preparation and practice and professional development
8. Career opportunities and advancement can be achieved
9. It builds self confidence while gaining personal satisfaction
10. This certification shows that you have demonstrated excellence in the field of health education by meeting advanced-level standards and passing an examination



The CHES Bulletin



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Attention CHES – Does your current employer use CHES as a requisite when hiring? If yes, please contact the NCHEC office. Email Melissa Rehrig, Communications Director at mrehrig@nchec.org.

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Communication Director

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Continuing Education Coordinator

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Recertification / Change of Status Inquiries
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