

BACKGROUND: The goal of the Natural Helper/ Parent Interactive Therapy (NH/PCIT) Program is to *integrate the Natural Helpers/Community Health Worker (NH/CHWs) practice and with existing PCIT services, training and resources.* ConnectFamilias in partnership with University of Miami, Mailman Center seeks to provide an alternative pathway for professional development of NH/CCHWs as a means to achieve this goal. To this end, the NH/PCIT project was developed, through a collaborative process, and builds on the work of Community Voices Miami, ConnectFamilias, and the Center for Community Learning and MDC Community Health Works Curriculum which was originally developed in 2004 with funding from Allegany Franciscan Foundation, the Annie E. Casey Foundation, United Way of Miami-Dade, the Health Foundation of South Florida, The Miami Foundation and Women's Fund of Miami-Dade County to offer this training to Community Health Workers in Miami-Dade County.

Natural Helpers/ PCIT and Community Health Workers share similar features with regard to philosophy, preparation and training. However, there are some differences. While Community Health Workers focus on physical health and areas related to it, ConnectFamilias Natural Helpers/ PCIT workers focus on promoting protective factors of families with children with challenging behavior by working hand in hand with University of Miami PCIT Therapist. The NH/PCIT worker provides PCIT coaching at home and in the community based on their specialized training. In addition, NH/PCIT workers assist the families they serve to highlight their existing strengths and resources so that each family member can be linked to the resources and services that exist within the community. By combining these skills Natural Helpers/PCIT Workers are able to work as part of a holistic team to help to strengthen Parental Resilience, Social Connections, Parental knowledge of Child Development and Parenting Skills.

The Natural Helper/PCIT Worker must successfully complete and demonstrate basic competency at the completion of initial on the job training which will serve as the foundation for the work of NH/PCIT project. The training framework is based on core competencies for both Natural Helpers and PCIT trainings and allow trainees to enhance their skills, knowledge and abilities. Training topics include: Communication and Education, Community Resource Identification, Client Advocacy, Foundations of PCIT, and Professional Responsibility.

The training will take 40 hours of classroom time and 80 hours of field experience to complete. Those who successfully complete the training **and** field experience will receive a certificate from ConnectFamilias and University of Miami and may be contracted to continue as contractors to the project.

WHO SHOULD APPLY? If you live work or volunteer in Overtown or Homestead community and are experienced in community settings by helping others in your community access social and health services, you should take advantage of this free-lance opportunity. Specialized training is limited to applicants subcontracted to work as part of ConnectFamilias/University of Miami PCIT expansion in Overtown and Homestead at this time.

Pre-Requisites for Training:

The applicant must fulfill the all the following requirements:

- Background Check Clearance Level I and II (finger prints)
- Be able to legally work in the US (present legal documentation)
- Present the affidavit of good moral character
- Be literate in English or Spanish, and have working command of the English language
- Be volunteering or working as a Natural Helper, Community Leader or Community Health Worker
- Demonstrate competency skills through various modes including but not limited to written test, role playing activities, activity logs, written assignments and oral presentations.
- Agree to work with the partners of the project.
- Must be able to work flexible hours to meet families scheduling needs

Compensation:

This applicants selected will be contracted to provide services. Contracted NH-PCIT Workers are independent consultants and not employees of ConnectFamilias or University of Miami. NH-PCIT workers/Consultants can expect to work from 10 hours to 25 hours/week with an average of 20 hrs / wk, based on size of caseload and family need. Hourly Rate 13.74 not to exceed total of \$14,289.60 per contract. Contract period will from date of hire through July 31, 2018.

¹ *Community health workers, also known as natural helpers, promotores de salud, madrinas, padrinos, etc, are community representatives that work exclusively for the community to link clients and health providers with the purpose of promoting health access for those segments of the society that have faced problems in accessing these services.*

HOW TO APPLY: Applicants must fill out the following application form in order to apply. In addition, the applicants and their supervisor's must sign the attached learning agreement to participate in this training. If you do not have a supervisor, you need to provide a reference with the corresponding contact information.

**The application must be received via email at NH-PCIT@ConnectFamilias.org
For more information, please contact Juliet San Juan, Director of Programs at Juliet@ConnectFamilias.org**

**NATURAL HELPER /PCIT WORKER (CONSULTANT)
TRAINING APPLICATION**

Applicant: Please fill out the following form. If you can't fill in the information in some of the boxes, please leave them empty. However, it is important for you to answer the short questions on page 5. Most of this information is for evaluation purposes. Your application will be considered regardless of your education and employment background. Thanks for applying!

Solicitante: Por favor llene este formulario. Si no tiene información sobre sus estudios o empleos pasados, por favor deje los espacios vacíos. Lo más importante es que conteste las preguntas en la página 5. El resto de la información nos servirá para la evaluación del entrenamiento. Su solicitud será considerada aunque tenga casillas en blanco. ¡Gracias por su solicitud!

Please TYPE or PRINT CLEARLY. / Por favor escriba claro.				
FIRST NAME / NOMBRE				
LAST NAME / APELLIDO				
HOME ADDRESS/ DIRECCION de CASA				
Phone Number TELEFONO	HOME/CASA	()	WORK/TRABAJO	()
	CELLULAR	()	FAX	()
E-MAIL				
Demographic Information				
<input type="checkbox"/> African American		<input type="checkbox"/> Non-Hispanic White		<input type="checkbox"/> Hispanic
<input type="checkbox"/> Haitian	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian or Pacific Islander		<input type="checkbox"/> Other
DATE OF BIRTH / FECHA DE NACIMIENTO		___/___/___	GENDER /SEXO	
				<input type="checkbox"/> Female/Femenino <input type="checkbox"/> Male/Masculino

LANGUAGE IDIOMA	Preferred	Read	Write	Speak	Understand
ENGLISH					
ESPAÑOL					
Other _____					

(Check all that apply)

EDUCATION/EDUCACION			
LEVEL/NIVEL	NAME, CITY, AND STATE OF EDUCATIONAL INSTITUTION NOMBRE, CIUDAD Y PAIS DE LA INSTITUCION EDUCATIVA	GRADUATED GRADUADO	
		YES/ SI	NO
HIGH SCHOOL/ SECUNDARIA			
GED/OTHER GED/OTRO			
UNIVERSITY/ UNIVERSIDAD			
LICENSES/ CERTIFICATIONS LICENCIAS/ CERTIFICADOS			

**WORKSHOPS AND/OR TRAINING RELATED TO COMMUNITY WORK/
TALLERES Y/O ENTRENAMIENTOS RELACIONADOS A TRABAJO COMUNITARIO**

CERTIFICATE CERTIFICADO	INSTITUTION INSTITUCION	YEAR AÑO	HOURS HORAS

EMPLOYMENT OR VOLUNTEER HISTORY / HISTORIA DE EMPLEO O VOLUNTARIADO

Start with the most recent/ Empiece con el mas reciente

EMPLOYER or VOLUNTEER AGENCY/ TRABAJO O VOLUNTARIADO					
ADDRESS/ DIRECCION					
PHONE/TELEFONO		DATES EMPLOYED/ FECHA DE EMPLEO	FROM/ DESDE	TO/ HASTA	
FAX					
NAME OF SUPERVISOR/ NOMBRE DEL SUPERVISOR					
MAY WE CONTACT YOUR SUPERVISOR? PODEMOS CONTACTAR A SU		YES/ SI	NO	RATE OF PAY/ SALARIO	START/ INICIO
JOB TITLES/PUESTO DE TRABAJO					
JOB DUTIES/ DEBERES LABORALES					
REASON FOR LEAVING/ RAZON DEL ABANDONO					

EMPLOYER or VOLUNTEER AGENCY/ TRABAJO O VOLUNTARIADO					
ADDRESS/ DIRECCION					
PHONE/TELEFONO		DATES EMPLOYED/ FECHA DE EMPLEO	FROM/ DESDE	TO/ HASTA	
FAX					
NAME OF SUPERVISOR/ NOMBRE DEL SUPERVISOR					
MAY WE CONTACT YOUR SUPERVISOR? PODEMOS CONTACTAR A SU		YES/ SI	NO	RATE OF PAY/ SALARIO	START/ INICIO
SUPERVISOR?					
JOB TITLES/PUESTO DE TRABAJO					
JOB DUTIES/ DEBERES LABORALES					
REASON FOR LEAVING/ RAZON DEL ABANDONO					

EMPLOYER or VOLUNTEER AGENCY/ TRABAJO O VOLUNTARIADO					
ADDRESS/ DIRECCION					

PHONE/TELEFONO		DATES EMPLOYED/ FECHA DE EMPLEO		FROM/ DESDE	TO/ HASTA
FAX					
SUPERVISOR NAME/ NOMBRE DEL SUPERVISOR					
MAY WE CONTACT YOUR SUPERVISOR?	YES/SI	NO	RATE OF PAY/ SALARIO	START/ INICIO	LAST/ ULTIMO
PODEMOS CONTACTAR A SU SUPERVISOR?					
JOB TITLES/PUESTO DE TRABAJO					
JOB DUTIES/ DEBERES LABORALES					
REASON FOR LEAVING/ RAZON DEL ABANDONO					

**APPLICANT: PLEASE RESPOND TO THE FOLLOWING QUESTIONS IN THE SPACE PROVIDED.
SOLICITANTE: POR FAVOR CONTESTE LAS SIGUIENTES PREGUNTAS DENTRO DEL ESPACIO PREVISTO**

Please PRINT clearly. / Por favor escriba claro.

**Why do you want to train and work as a NH-PCIT specialist?
¿Por qué quieres entrenar y trabajar como un especialista de NH-PCIT?**

Please describe any community work (volunteer or paid) you are doing or have done in the past. Make sure to list current most recent work first including dates you participated and list your responsibilities the population you worked with.

Por favor describa un trabajo comunitario (voluntario o pago) que usted ha hecho o este haciendo.

What do you hope to gain from this training?/ ¿Qué espera usted de este entrenamiento?

LEARNING AGREEMENT / ACUERDO PARA EL APRENDIZAJE

**NAME OF ORGANIZATION YOU WORK OR VOLUNTEER FOR/
NOMBRE DE LA ORGANIZACION DONDE TRABAJA O ES VOLUNTARIO**

**STARTING DATE OF PRESENT EMPLOYMENT/ VOLUNTEER WORK /
FECHA COMIENZO DEL EMPLEO O VOLUNTARIADO ACTUAL**

POSITION

YES / SI

ARE YOU SPONSORED BY YOUR EMPLOYER?

NO

**NAME AND ADDRESS OF SPONSOR /
ESCRIBA EL NOMBRE Y LA DIRECCION DEL PATROCINADOR**

NAME/NOMBRE

**ADDRESS/
DIRECCION**

PHONES/TELEFONOS

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APPLICANT: I agree to participate by attending all sessions and to finish the training by completing:
Paper/Pencil Tests / Role Playing / Activity Logs /
Written Assignments / Oral Presentations

SOLICITANTE: Estoy de acuerdo en participar, asistiendo a todas las sesiones y terminar el entrenamiento completando:
Pruebas Escritas / Actuaciones/ Registro de Actividades/
Tareas Asignadas / Presentaciones Orales

By signing this document, I recognize that acceptance of my application depends upon the results of the background check, the affidavit of good moral character and the work permit to be able to legally work in the US

Firmando este documento reconozco que la aceptación de mi aplicación depende de los resultados del chequeo de los antecedentes penales, y de la declaración juramentada de “Buen Carácter Moral” –Reputación Moral y el de tener la documentación apropiada para poder trabajar en los EUA

SIGNATURE OF APPLICANT / FIRMA DEL SOLICITANTE

DATE / FECHA

SPONSOR: I support the applicant named above to participate in the of Natural Helper/PCIT Worker training

PATROCINADOR: Apoyo al solicitante nombrado arriba a participar en el entrenamiento de Natural Helper /PCIT Worker.

SIGNATURE OF SPONSOR / FIRMA DEL PATROCINADOR

DATE / FECHA