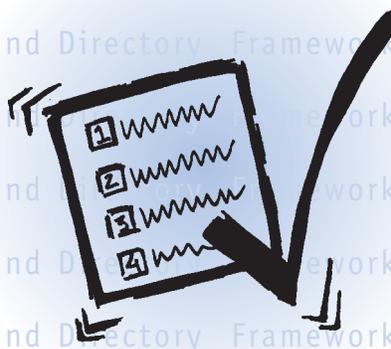


Level IV Community/Systems

*The Community Health
Worker Evaluation Tool Kit*

A Project of The University of Arizona
Rural Health Office and
College of Public Health



"Building Community and Improving Systems"
- CHW

Sponsored by
The Annie E. Casey Foundation

Level IV

Community/Systems

Tools under each level of the framework are listed in alphabetical order by agency. A double asterisk (**) indicates the tool is included in Level IV of the Tool Kit. An asterisk (*) indicates the tool is included in a different section within the same level or in an alternate level of the Tool Kit. Please refer to indices of Levels I, II and III.

1.0 Outcomes

1.1 Skill building and training activities available to community members

Nine Core Elements and Four Broad Outcomes of Local Community Voices Models*	W.K. Kellogg Foundation, Community Voices Initiative
--	--

1.2 Capacity building among program partners or stakeholders

Nine Core Elements and Four Broad Outcomes of Local Community Voices Models*	W.K. Kellogg Foundation, Community Voices Initiative
--	--

1.3 Collaborative activities among program partners/stakeholders

Douglas Area Network Survey**	Southwest Center for Community Health Promotion
Nine Core Elements and Four Broad Outcomes of Local Community Voices Models*	W.K. Kellogg Foundation, Community Voices Initiative

1.4 Coalition(s) expansion

Douglas Area Network Survey*	Southwest Center for Community Health Promotion
Nine Core Elements and Four Broad Outcomes of Local Community Voices Models*	W.K. Kellogg Foundation, Community Voices Initiative

2.0 Impacts

2.1 Access/leverage to resources by the community

Community Health Survey	East Side Health Worker Partnership
Nine Core Elements and Four Broad Outcomes of Local Community Voices Models*	W.K. Kellogg Foundation, Community Voices Initiative

2.2 Range of health services/availability of services in the community

Nine Core Elements and Four Broad Outcomes of Local Community Voices Models*	W.K. Kellogg Foundation, Community Voices Initiative
--	--

2.3 Policy development across organizations or for the entire community

A Policy Agenda to Support Community Health Workers Programs	Center for Policy Alternatives, CHWs: A Leadership Brief on Preventive Health Program
--	---

Tools
Level IV

Community/Systems



Southwest Center for Community Health Promotion
University of Arizona

IV.1.3

Douglas Area Network Survey

Your organization: _____ Your position or job title: _____

1. Please describe what you believe is the primary mission or goal of your organization:

2. Many organizations provide at least some services to assist those with chronic disease, even though such services and activities may only be a small part of the organization's mission. We would like to know the extent to which you view your organization's involvement in chronic disease programs (prevention, education, treatment, etc.) as critical, or important, for accomplishing the overall mission of your program. Please circle the number below that best matches your response.

My organization's involvement with chronic disease programs is:

1= not at all important/critical for accomplishing my organization's mission

2=not very important/critical for accomplishing its mission

3= neither important not unimportant for accomplishing its mission

4= important/critical for accomplishing its mission

5= extremely important/critical for accomplishing my organization's mission

3. Please indicate the **approximate** percent of your organization's total resources that are devoted to chronic disease (diabetes, cancer, substance abuse, etc.) services of any type (prevention, treatment, support, etc.) _____%
4. Please indicate the **approximate** percent of your organization's total resources that are devoted to any type of health and health care services at all (i.e. not just chronic diseases) _____ %
5. The following is a list of specific chronic diseases or conditions that typically require various prevention, treatment and/or support services. Please indicate the extent to which your organization addresses each of these diseases/conditions in any way. To do this, write the number 1, 2, 3, or 4 in the space to the left of each using the following scale:

1= major emphasis 2= moderate emphasis 3= little emphasis 4= not addressed at all

_____ Cancer

_____ Diabetes

_____ Substance Abuse

_____ Mental Illness

_____ Asthma

_____ Heart Disease

Other chronic disease/conditions
(please list and rate):

Tools
Level IV

Community/
Systems



6. The following is a list of services that are typically provided by organizations serving clients who have or who might have chronic diseases/conditions. Please indicate which of these services your organization provides. Once again, write the number 1, 2, 3, or 4 in the space to the left of each using the following scale: 1= major emphasis 2= moderate emphasis 3= little emphasis 4= not addressed at all

<input type="text"/> Education	<input type="text"/> Counseling
<input type="text"/> Prevention	<input type="text"/> Advocacy
<input type="text"/> Screening	<input type="text"/> Outreach/Follow-up
<input type="text"/> Referral	<input type="text"/> Non-clinical support services (transpiration, providing equipment, financial assistance, legal, recreation, etc.)
<input type="text"/> Treatment	

7. What was your organization's total budget in each of the past three fiscal years (i.e. for programs and services in all areas)?

1997 _____ 1998 _____ 1999 _____

Tools Level IV

Community/Systems

Involvement with Organizations/Agencies in the Douglas Area

8. Listed below are the organizations in the Douglas area that we believe are involved in some way in the provision of health and support services for chronic diseases. We would like to know the extent to which your organization is involved with, or linked to, the others on the list providing a full range of education, prevention, screening, treatment, and support services to patients/clients who have or might have a chronic disease like diabetes, cancer, heart disease, asthma, mental illness, or substance abuse.

We have listed four types of involvement your organization might have with these other agencies. These include links through exchange of information, through shared resources (joint funding, shared equipment or personnel, shared facilities, etc.), or through patient/client referrals (either sent or received or both) that occur with some regularity between your organization and the agency listed (i.e. not just an occasional referral).

Please go through the list below and indicate the agencies your organization has been involved with for provision of chronic disease prevention, screening, treatment, and support services. Simply place a checkmark in the box that applies, to the right of that agency's name. Please indicate your involvement for each of the four types of relationships listed. If you have no regular involvement with an agency regarding shared information, shared resources, or patient referrals for any type of chronic disease services, simply leave the row blank for that agency.

In the last column, we would like you to rate the overall quality of the working relationship you have with each agency you have checked. For instance, can you trust the other agency to keep its word, to do a good job, and to respond to your organization's needs and those of its clients? To do this, please circle the number that best reflects relationship quality using the following scale:



9. In the spaces below, please list up to five (5) agencies/organizations (from the list on the previous page) that you believe to be most critical for ensuring that your organization and others are able to do the best job possible providing chronic disease prevention, treatment, and related services within the Douglas community. These may or may not be agencies with which you are currently involved.

Critical Agencies re: Chronic Disease Services

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

10. Next, we would like to know which individuals (not organizations) you believe are most important for ensuring that chronic disease prevention, treatment, and related services are provided effectively in the Douglas community. These individuals may be community leaders, the heads of health care programs, etc. who have been especially helpful in getting agencies to work together and for enhancing the effectiveness of services. Please list up to five (5) such key individuals along with the organizations or groups with which they are affiliated.

Critical Individuals re: Chronic Disease Services

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

11. We would now like to know if there are certain organizations that you view as barriers to working together with other organizations and groups in the Douglas community for the effective provision of chronic disease prevention, treatment, and related services. These organizations may make service provision more difficult than it should be and may present significant challenges to organizations like yours and its clients. Please list up to five (5) such agencies.

"Barrier" Agencies re: Chronic Disease Services

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

12. Finally, we would like to know what the benefits and drawbacks have been cooperating and collaborating with other agencies in the provision of chronic disease services. For each possible benefit or drawback listed, please indicate, by placing a check in the appropriate box, whether your organization, through its involvement with other agencies, has already experienced benefit/drawback, expects to experience it, or does not expect to experience it. Check only one box for each item

	Already Occurred	Expect to Occur	Do Not Expect to Occur
Benefits:			
a. Enhanced ability to serve my clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Enhanced ability to serve the community as a whole	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Acquisition of new knowledge or skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Acquisition of additional funding or other resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Increased utilization of my organization's services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Development of new, valuable relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Heightened public profile of my organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Enhanced influence in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Increased ability to shift resources to needed areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Other benefits (please list other major benefits):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drawbacks:			
k. Diversion of time and resources from other activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Loss of control/autonomy over decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Strained relations within my organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Frustration or aggravation in dealing with partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Insufficient credit given to what my organization does	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Other drawbacks (please list other major drawbacks):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Tools Level IV

Community/Systems

THANK YOU VERY MUCH FOR YOUR COOPERATION.
Please be assured that your answers will only be used for research purposes.



Tool Kit Program Directory

*The Community Health
Worker Evaluation Tool Kit*

A Project of The University of Arizona
Rural Health Office and
College of Public Health



Sponsored by
The Annie E. Casey Foundation



Tool Kit Program Directory

The Community Health Worker Evaluation Tool Kit would like to acknowledge all the programs and agencies listed below. The tools section of this Tool Kit was made possible thanks to the collaboration of these programs. Programs whose tools are included in the Tool Kit are designated by an asterisk (*).

*Border Vision Fronteriza Initiative**
University of Arizona, Rural Health Office
2501 E. Elm St.
Tucson, AZ 85716
(520) 626-7946
(520) 326-6429 fax
aeng@ahsc.arizona.edu

*Centro Comunitario Juan Diego**
8851 S. Escanaba Ave.
Chicago, IL 60617
(773) 731-0109
(773) 731-0119 fax

*Community Action Organization**
Opening Doors Oregon
19945 SW Boones Ferry Rd.
Tualatin, OR 97062
(503) 691-8552
(503) 691-8457 fax
tualatinod@caowash.org

*Community Health Advisor Network**
A Program of the Center for Sustainable Health Outreach
Southern Station Box 10015
Hattiesburg, MS 39406-0015
(601) 266-6261
(601) 266-6262 fax
chan@usm.edu

*Community Health Advocates**
Center for Healthy Communities
140 E. Monument Ave.
Dayton, OH 45402
(937) 512-2040
(937) 512-4040 fax
mrodney@sinclair.edu



Community Health Workers Evaluation Project*
 Opening Doors New Mexico
 University of New Mexico
 Department of Family and Community Medicine
 2400 Tucker NE
 Albuquerque, NM 87131
 (505) 272-9555
 (505) 272-4494 fax
ktollestrup@salud.unm.edu

Community Health Workers Leadership Brief
 Harrison Institute for Public Law at the
 Georgetown University Law Center and
 the Center for Policy Alternatives
 1875 Connecticut Ave. NW
 Washington, DC 20009
 (800) 935-0699
 (202) 387-6030
info@cfpa.org

Community Health Representative Program*
 Indian Health Service
 40 N. Central Ave. Ste. 600
 Phoenix, AZ 85004
 (602) 364-5191
 (602) 364-5025
dena.trangsrud@mail.his.gov

Department of Health Policy and Management*
 The Johns Hopkins University School of Hygiene and Public Health
 624 N. Broadway, Room 661
 Baltimore, MD 21205
 (443) 463-6831
 (410) 955-0470
kfaaron@jhsph.edu

East Side Health Worker Partnership
 University of Michigan School of Public Health USMSPH II
 1420 Washington Heights
 Ann Arbor, MI 48109
 (734) 764-5171
 (734) 763-7379 fax
rojomcg@umich.edu

El Paso Community Voices Initiative*
 W.K. Kellogg Foundation
 110 N. Stanton Ste. 701
 El Paso, TX 79902
 (915) 545-4810
 (915) 585-2159 fax
cvoices@elp.rr.com



The Health Assessment Lab*
750 Washington St.
Boston, MA 02111
(800) 572-9394
(617) 636-8098
(617) 636-8077 fax
www.sf-36.com

Health Care and Aging Studies Branch*
Division of Adult and Community Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control and Prevention
4770 Buford Hwy NE
Atlanta, GA 30341
(770) 488-5455
(770) 488-5964 fax
dgm1@cdc.gov

Health Start Program*
Arizona Department of Health Services
411 N. 24th St.
Phoenix, AZ 85008
(602) 220-6550
(602) 220-6540 fax
mmcbriid@hs.state.az.us

Healthier Communities Department*
Spectrum Health
44 Lafayette Ave. NE
Grand Rapids, MI 49503
(616) 391-2627
(616) 391-3250 fax
www.spectrum-health.org

*Juntos Contra el Cancer**
Minority Cancer Prevention Program
University of Arizona, Rural Health Office
2501 E. Elm St.
Tucson, AZ 85716
(520) 626-7946
(520) 326-6429 fax
dezapien@u.arizona.edu
jmeister@u.arizona.edu

Latino Health Access*
1717 N. Broadway
Santa Ana, CA 92706
(714) 542-7792
(714) 542-4853 fax
gbalcazar@aol.com



Migrant Health Promotion*
 224 W. Michigan Ave.
 Saline, MI 48176
 (734) 944-0244
 (734) 944-1405 fax
migranthealth@voyager.net

Project Jump Start*
 University of Arizona, Rural Health Office
 2501 E. Elm St.
 Tucson, AZ 85716
 (520) 626-7946
 (520) 326-6429 fax
aproulx@ahsc.arizona.edu

Project Reach Out*
 Redwood Community Health Coalition
 Sonoma County Department of Health Services
 3033 Cleveland Ave. Ste. 108
 Santa Rosa, CA 95403
 (707) 547-4119
 (707) 547-4117fax
lg@monitor.net

*Promotores Comunitarios**
 Planned Parenthood of Los Angeles
 1920 Marengo St.
 Los Angeles, CA 90033
 (323) 223-4462
 (323) 225-5844 fax
www.plannedparenthood.org

*Promoviendo Vidas Saludables**
 Migrant Health Promotion
 Relampago School
 P.O. Box 337
 Progreso, TX 78579
 (956) 565-0002
 (956) 565-0136 fax
murilloruiz@earthlink.net

Quality Metric, Inc.*
 640 George Washington Highway Ste. 201
 Lincoln, RI 02865
 (401) 334-8800
 (401) 334-8801 fax
info@qmetric.com
license@qmetric.com



Rio Colorado Border Volunteer Project*
Western Arizona Area Health Education Center
202 S. First Ave. Ste. 102
Yuma, AZ 85364
(520) 726-0306
(520) 344-4731 fax
hetc@altavista.com

School of Public Administration and Policy*
University of Arizona
McClelland Hall
Tucson, AZ 85721
(520) 621-1950
(520) 626-5549 fax
kprovan@bpa.arizona.edu

Southwest Center for Community Health Promotion
College of Public Health
University of Arizona
1145 N. Campbell Ave.
P.O. Box 210028
Tucson, AZ 85721-0028
PH: (520) 318-7270
Fax: (520) 326-0435
jmeister@u.arizona.edu

**A database with detailed information for each program
is available at our office.
Please feel free to contact us at:**

University of Arizona, Rural Health Office
El Paso Satellite
1218 Yandell Dr. Ste. 205
El Paso, TX 79902
(915) 315-9099
(915) 315-9098 fax
toolkit@elp.rr.com

