# Tool Kit

Developing a Consumer Health Resource Information Service Program:



A Guide for Faith-based Organizations and Communities

CONSUMER HEALTH RESOURCE INFORMATION SERVICE



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Reviewed June 2011

All materials should display the CHRIS logo and the following statement:

The CHRIS program was developed by the Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee. The pilot demonstration project was funded by the National Library of Medicine/National Institutes of Health. Printed with permission.

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## **Program Management Resources**

#### Section = Contains:

**Funding Resources** 

**Proposal Writing Resources** 

Selected Web Resources for Community Assessment and Planning

Selected Web Resources for Program Development and Evaluation

**Training Resources** 

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## **Funding Resources**

#### **General Funding Resources**

#### **Center for the Advancement of Health**

http://www.cfah.org

This is a directory of research funding resources in the health-related behavioral and social sciences. It lists funding opportunities from private and government sources, including those designated for fellowships, travel, or other discrete uses, links to background information on grantseeking, and resources for further research.

#### **Community of Science (COS) Funding Opportunities**

http://fundingopps.cos.com

COS Funding Opportunities is a comprehensive source of grant information with more than 15,000 grant sources, including federal and regional governments, foundations, professional societies, associations, and corporations.

#### **Council on Foundations**

http://www.cof.org

The Council on Foundations is a nonprofit membership association of grantmaking foundations and corporations. Membership seeks to serve the public good by promoting and enhancing responsible and effective philanthropy.

#### **The Foundation Center**

http://www.fdncenter.org/funders

The Foundation Center is a nonprofit management resource information center. It contains a wealth of information for grantseekers and grantmaker services and provides access to searching private, community, and corporate foundations. Click on Foundation Finder for address information. Other resources include training and seminars in grantwriting and nonprofit organization management. A subscription fee is required to search for grants.

#### **Society of Research Administrators (SRA)**

http://www.srainternational.org

The SRA is a nonprofit association serving as a grant notification site and management information system. The SRA Web site stores a myriad of current information ranging from general resources to government policies and regulations.

#### **Government Funding**

#### Catalog of Federal Domestic Assistance (CFDA)

http://www.cfda.gov

The CFDA is a catalog of federal programs, projects, services, and activities providing assistance or benefits to the American public. Resources include *Types of Assistance*, *Applying for Assistance*, and *Writing Grant Proposals*.

## The Center for Faith-Based and Community Initiatives, Department of Health and Human Services <a href="http://www.hhs.gov/fbci">http://www.hhs.gov/fbci</a>

This division of DHHS provides a wide range of information on the agency's opportunities for faith-based and community-based involvement in its programs.

#### **Computer Retrieval of Information of Scientific Projects (CRISP)**

http://crisp.cit.nih.gov

This biomedical database system contains information on research projects and programs supported by the Department of Health and Human Services.

Contact Information: 2005 Market St., Suite 1700, Philadelphia PA 19103

Tel: 215/575-9050 Fax: 215/575-4939

#### The Federal Register

http://www.gpoaccess.gov/fr/index.html

The Federal Register contains information on federal legislation and appropriations, including grant notification from federal agencies and organizations. It is produced by the Office of the Federal Register, via the General Printing Office and published every federal working day.

#### **Foundations**

#### **Abell-Hanger Foundation**

http://www.abell-hanger.org

Grants are awarded only in Texas. Health is one of several areas of focus.

Contact Information: P.O. Box 430, Midland TX 79702

Tel: 432/684-6655 Fax: 432/684-4474

#### **Aetna Foundation**

http://www.aetna.com/foundation

Aetna's Regional Community Health Grants seek to improve the quality of health by reducing racial and ethnic health disparities.

Contact Information: 151 Farmington Ave., Hartford CT 06156

Tel: 860/273-0123

Fax: na

#### **Alcoa Foundation**

http://www.alcoa.com/global/en/community/info page/foundation.asp

Alcoa Foundation focuses its giving in local communities where Alcoa plants or offices are located. Areas of focus are Conservation and Sustainability, Safe and Healthy Children and Families, Global Education and Workplace Skills, and Business and Community Partnerships.

Contact Information: Alcoa Corporate Center

201 Isabella Street, Pittsburgh PA 15212-5858

Tel: 412/553-2348 (Foundation line)

Fax: 412/553-4498

#### **Annie E. Casey Foundation**

http://www.aecf.org

Emphasis is on disadvantaged children and families.

Contact Information: 701 St. Paul St., Baltimore MD 21202

Tel: 410/547-6600 Fax: 410/547-6624

#### **Bill and Melissa Gates Foundation**

http://www.gatesfoundation.org

A broad range of programs include HIV prevention.

Contact Information: P.O. Box 23350, Seattle WA 98102

Tel: 206/709-3140 (grant inquiries) E-mail: info@gatesfoundation.org

#### **Bristol Myers Squibb Foundation**

http://www.bms.com

Bristol Myers Squibb Foundation has a significant small grants program in community health.

Contact Information: 345 Park Avenue, New York NY 10154-0037

Tel: 212/546-4000 Fax: none listed

#### Charles M. and Mary D. Grant Foundation

http://www.fdncenter.org/grantmaker/grant

Focus is on issues in the southeast, including health.

Contact Information: c/o JPMorgan Private Bank, Philanthropic Services

NY1-N040, 345 Park Avenue, 4th Floor, New York NY 10154

Tel: none listed Fax: none listed

#### **Child Health Foundation**

http://www.childhealthfoundation.org

Has a small grants program of \$5,000 or less and has funded HIV-related projects.

Contact Information: 10630 Little Patuxent Parkway, Suite 126, Columbia MD 21044

Tel: 410/992-5512 Fax: 410/992-5641

#### **Commonwealth Fund**

http://www.cmwf.org

Various health programs include a program focusing on quality of care for underserved populations.

Contact Information: 1 East 75<sup>th</sup> St., New York NY 10021

Tel: 212/606-3800 Fax: 212/606-3500 E-mail: cmwf@cmwf.org

#### E. Rhodes and Leona B. Carpenter Foundation

[No Web site could be found]

Grant focus includes health care.

Contact Information: 1701 Market St., Philadelphia PA 19103

Tel: 215/963-5212

Fax: na

#### **Elton John Foundation**

http://www.ejaf.org

The Elton John Foundation funds programs targeting HIV/AIDS prevention and/or the elimination of discrimination against people living with or who may be at risk for AIDS.

Contact Information: ATTN: Program Officer, National AIDS Fund,

1030 15<sup>th</sup> St. NW, Suite 860, Washington DC 20005

Tel: 202/408-4848 Fax: 202/408-1818

#### **Fannie E. Rippel Foundation**

http://www.fdncenter.org/grantmaker/rippel

Health areas with emphasis on cancer and heart disease.

Contact Information: 180 Mount Airy Rd., Suite 200, Basking Ridge NJ 07920-2021

Tel: 908/766-0404 Fax: 908/766-0527

E-mail: rippel@attglobal.net

#### **Ford Foundation**

http://www.fordfound.org

Areas of focus are community development, social justice, religion, and education.

Contact Information: Secretary, The Ford Foundation,

320 East 43<sup>rd</sup> St., New York NY 10017

Tel: 212/573-5000 Fax: 212/315-3677

E-mail: office-secretary@fordfound.org

#### Henry J. Kaiser Family Foundation

http://kff.org

The Henry J. Kaiser Family Foundation has a strong focus on major global health issues through communications and research. Specific areas of interest are health policy, media public education, and health and development in South Africa.

Contact Information: 2400 Sand Hill Road, Menlo Park CA 94025

Tel: 650/854-9400 Fax: 650/854-4800

#### J. Bulow Campbell Foundation

http://www.jbcf.org

Areas of focus are community, education, and religious concerns in the southeast.

Contact Information: Betsy Verner, Associate Director

50 Hurt Plaza, Suite 850, Atlanta GA 30303

Tel: 404/658-9066 Fax: none listed

#### **Magic Johnson Foundation**

http://www.magicjohnson.org

The Magic Johnson Foundation funds grassroots initiatives in the southeast.

Contact Information: 9100 Wilshire Blvd., Suite 700 East, Beverly Hills CA 90212

Tel: 310/246-4400 Fax: 310/246-1106

E-mail: contact@magicjohnson.org

#### **Mary Reynolds Babcock Foundation**

http://www.mrbf.org

The Mary Reynolds Babcock Foundation funds grassroots initiatives in the southeast.

Contact Information: 2920 Reynolda Rd., Winston-Salem NC 27106

Tel: 336/748-9222 Fax: 336/777-0095

#### **Pew Charitable Trusts**

http://www.pewtrusts.com

Large funder of public health projects.

Contact Information: 2005 Market St., Suite 1700, Philadelphia PA 19103-7077

Tel: 215/575-9050 Fax: 215/575-4939

E-mail: info@pewtrusts.org

#### **Public Welfare Foundation**

http://www.publicwelfare.org

Broad range of programs, including primary care for the underserved.

Contact Information: 1200 U St. NW, Washington DC 20009-4443

Tel: 202/965-1800 Fax: 202/265-8851

E-mail: reviewcommittee@publicwelfare.org

#### **Richard and Helen Devos Foundation**

[No Web site could be found]

Fund projects in Western Michigan and Central Florida, including health.

Contact Information: P.O. Box 230257, Grand Rapids MI 49532

Tel: 616/643-4700 Fax: 616/774-0116

#### Robert J. and Helen C. Kleberg Foundation

[No Web site could be found]

Focus areas include medical research, community services, education, and health services.

Contact Information: 700 N. Saint Mary's St., Suite 1200, San Antonio TX 78205

Tel: 210/271-3691 Fax: none listed

#### **Robert Wood Johnson Foundation**

http://www.rwjf.org

All programs are health-related.

Contact Information: P.O. Box 2316, College Rd. East and Route 1, Princeton NJ 08543

Tel: 888/631-9989 Fax: none listed

E-mail: Use Contact Us page on Web site

#### **Wal-Mart Foundation**

http://www.walmartfoundation.org

Has a community-matching program.

Contact Information: 702 W. 8<sup>th</sup> St., Bentonville AR 72716-8611

Tel: 800/530-9925 Fax: none listed

#### **William Randolph Hearst Foundations**

http://www.hearstfdn.org

Areas of focus are education, health, social service, and culture.

Contact Information: 888 Seventh Avenue, 45<sup>th</sup> Floor, New York NY 10106

Tel: 212/586-5404 Fax: 212/586-1917

## W. K. Kellogg Foundation <a href="http://www.wkkf.org">http://www.wkkf.org</a>

Health is one of several areas of focus.

One Michigan Avenue East, Battle Creek MI 49017-4012 Contact Information:

Tel: 269/968-1611 Fax: 269/968-0413



## **Proposal Writing Resources**

#### **Online Resources**

#### **Council on Foundations – Grant Research & Writing Resources**

http://www.cof.org/index.cfm?containerID=76&menuContainerName=&navID=0&orglink=3

Links to resources include Grantproposal.com, Grantwriting Tips, and Proposal Writing Short Course.

#### **EPA Grant-Writing Tutorial**

http://www.epa.gov/seahome/grants disclaim.html

NOTE: Due to EPA policy changes, this program is no longer available from EPA or the EPA Web site. The material was prepared by Purdue University in collaboration with EPA, and Purdue continues to make the program available on its Envirosoft Web site: <a href="http://www.purdue.edu/dp/envirosoft/grants/src/title.htm">http://www.purdue.edu/dp/envirosoft/grants/src/title.htm</a>.

An online tutorial containing suggestions for enhancing a proposal and completing forms. Includes a mock grant writing activity, a glossary of technical terms, and a resource list of grant funding sources.

#### **GrantProposal.com**

http://www.grantproposal.com

This Web site was developed for both advanced grantwriting consultants and inexperienced nonprofit staff. It includes step by step guidelines for every aspect of the grant writing process as well as a list of other resources.

#### **Grantsandfunding.com**

http://www.grantsandfunding.com/grantsandfunding/reports/writingproposals.html

Grantsandfunding.com has posted the article, *Tips on Writing Successful Proposals*, on their Web site.

#### **Grantseeker's Checklist**

http://www.montana.edu/wwwvr/checklist.html http://www.cdpublications.com/freeresources/freechecklist.php

This is an excellent checklist of 20 key points for submitting a strong grant application from the editors at CD Publications. Normally, the checklist sells for \$5.00, but it may be offered free for a limited time on the Web site.

#### GrantsNet

http://www.hhs.gov/grantsnet

An online tutorial containing suggestions for enhancing a proposal and completing forms. Includes a mock grant writing activity, a glossary of technical terms, and a resource list of grant funding sources.

#### Online Resources for Faith-Based and Community Organizations

http://www.hhs.gov/fbci/features/resources.html

The U.S. Department of Health and Human Services has provided this online list of Web sites for those seeking funding resources, preliminary information on prospect research, and grant writing.

#### The Program Development Puzzle

http://www.nmac.org/PDFDownloads/program\_development\_puzzle.pdf

A service product of the National Minority AIDS Council, *The Program Development Puzzle* is a technical assistance resource manual that includes a proposal writing section. Designed specifically for community-based organizations, a specific focus is placed on public funding sources such as local or state health departments, and federal agencies such as the Centers for Disease Control and Prevention and the Office of Minority Health.

#### **Proposal Writing Short Course**

http://fdncenter.org/getstarted/tutorials/shortcourse/index.html

From the Foundation Center, this excellent resource is geared toward nonprofit organizations and discusses every aspect of the proposal writing process, from gathering background information to developing a budget to what happens after your proposal is submitted.

## **Toolkit: National Library of Medicine Internet Connections Grant Application** <a href="http://phpartners.org/toolkit.html">http://phpartners.org/toolkit.html</a>

Partners in Health Information Access has developed this tool kit for writing NLM Internet connection grants.

#### **United States Conference of Mayors HIV/AIDS Program**

http://www.usmayors.org/hivprevention/proposal.pdf

Writing Proposals for HIV/AIDS Prevention Grants. This resource is designed to provide technical assistance on proposal writing to community-based organizations.

### University of Washington Research Funding Service – Grant Writing

http://healthlinks.washington.edu/rfs/gw

The University of Washington (UW) developed its Research Funding Service Web site to assist its health sciences faculty, fellows, and staff with grantsmanship skills. Although many of the links on this site are UW-specific, there are many valuable resources relevant to anyone seeking a grant. Especially helpful are the links in the Fundamentals section: Fundamentals of Grantsmanship, The Art of Grantsmanship (direct link: <a href="http://www.hfsp.org/how/ArtOfGrants.htm">http://www.hfsp.org/how/ArtOfGrants.htm</a>), A Guide to Proposal Planning and Writing, and Proposal Writing (direct link:

<u>http://www.washington.edu/research/osp/writing.html</u>). See also *Proposal Writing Short Course* under Nonfederal Grants.

#### **Print Resources**

Bowden, VM. *National Library of Medicine Resource Grants: Application and Review*. Bull Med Libr Assoc 80 (2):157-68 (April 1992).

Buscher, Leo F. *National Cancer Institute Grants Process and Administration*. Bethesda: US Department of Health and Human Services, 1998.

Carlson, Mim. Winning Grants Step by Step: Support Centers of America's Complete Workbook for Planning, Developing, and Writing Successful Proposals. Jossey-Bass Publishers, 1995.

Directory of Research Grants. 24th ed. Phoenix: Oryx Press, 1999.

National Guide to Funding in Health. 6th ed. New York: Foundation Center, 1999.

Rural Health Services Funding: A Resource Guide. Beltsville: National Agriculture Library, 1998.

Source: The National Library of Medicine's National Network of Libraries of Medicine



# **Selected Web Resources for Community Assessment and Planning**

#### **Health Statistics Resources**

**National Center for Health Statistics (NCHS)** 

http://www.cdc.gov/nchs

The NCHS, a division of the Centers for Disease Control and Prevention is the nation's principal health statistics agency. NCHS compiles statistical information to guide actions and policies to improve the health of the nation. Areas of focus include identification of health disparities, trends in health status, and data collection and access.

Contact Information: 3311 Toledo Road, Hyattsville MD 20782

Tel: 301/458-4636 E-mail: nchsquery@cdc.gov

National Information Center on Health Services Research and Health Care Technology (NICHSR) <a href="http://www.nlm.nih.gov/nichsr/usestats/index.htm">http://www.nlm.nih.gov/nichsr/usestats/index.htm</a>

Assessing a community's health prevention needs requires information drawn from statistical data. Many individuals working with non-profit groups have limited experience with statistical data. To help develop this skill NICHSR offers *Finding and Using Health Statistics: A Self-Study Course*. This course seeks to assist users in locating and understanding statistics. Although designed for librarians, this self-study course is a useful tool for health educators, community planning group members, and novice users of health statistics.

Contact Information: 8600 Rockville Pike, Bldg. 38A, Rm 4S-410, Bethesda MD 20894

Tel: 301/496-0176

E-mail: nichsr@nlm.nih.gov

#### **State Health Facts Online**

http://www.statehealthfacts.kff.org/cgi-bin/healthfacts.cgi

This resource, from the Henry J. Kaiser Family Foundation, provides a comprehensive profile of each state's overall health status using a variety of health indicators. This Web site has detailed information on minority health. Individual state profiles can be compared to the United States overall.

Contact Information: 2400 Sand Hill Road, Menlo Park CA 94025

Tel: 650/854-9400 or 800/656-4KFF (publication request line)

E-mail: xxx

#### U.S. Census Bureau

http://www.census.gov

The U.S. Census Bureau site provides the latest data on racial and ethnic populations in the United States. The Census Bureau furnishes a wide variety of information on social and economic characteristics of racial and ethnic populations, such as household composition, ethnicity, and income. The Bureau prepares in-depth reports on important social, economic, and demographic issues. The information available at this site is essential for the work of community planning and assessment groups.

Contact Information: 4700 Silver Hill Rd., Washington DC 20233-0001

Tel: 301/763-INFO E-mail: pop@census.gov

#### **Minority Health Resources**

#### Centers for Disease Control and Prevention Office of Minority Health

http://www.cdc.gov/omh

The mission of the CDC's Office of Minority Health provides many valuable resources for racial and ethnic minority populations.

Contact Information: Office of Minority Health, Centers for Disease Control & Prevention

Mailstop E-67, 1600 Clifton Road NE, Atlanta GA 30333

Tel: 404/498-2320 E-mail: omh@cdc.gov

#### Department of Health and Human Services - Closing the Health Gap

http://www.omhrc.gov/healthgap/index.htm

Closing the Health Gap is a national campaign designed to help improve the health of racial and ethnic minority populations who are adversely affected by serious diseases and health conditions.

Contact Information: OMHRC Resource Center, P.O. Box 37337, Washington DC 20013-7337.

Tel: 800/444-6472

E-mail: info@omhrc.gov (to join mailing list)

#### Department of Health and Human Services Office of Minority Health

http://www.omhrc.gov

The main focus of the DHHS Office of Minority Health is to eliminate health disparities.

Contact Information: P.O. Box 37337, Washington DC 20013-7337

Tel: 800/444-6472

E-mail: info@omhrc.gov (to join mailing list)

#### **MedlinePlus – Special Population Groups**

http://www.nlm.nih.gov/medlineplus/populationgroups.html

MedlinePlus, the National Library of Medicine's premier consumer health database, includes this special section of topics related to special population groups, including racial/ethnic, age-related, and gender-related topics. Click the "Contact Us" link on any MedlinePlus page to use the online form to submit questions and comments.

#### **National Center for Minority Health and Health Disparities (NCMHD)**

http://ncmhd.nih.gov

The NCMHD promotes minority health and supports efforts to eliminate health disparities. They also publish an annual report on Health Disparities.

Contact Information: 6707 Democracy Blvd, Suite 800, Bethesda MD 20892-5465

Tel: 301/402-1366

E-mail: ncmhdinfo@od.nih.gov (questions/information requests)

#### National Library of Medicine – Special Populations

http://www.sis.nlm.nih.gov/outreach.html

The National Library of Medicine's Specialized Information Services Division provides Web sites for and about specific population groups, including Arctic Health, American Indian Health, and Asian American Health. Additional Web sites are under development.

Contact Information: SIS/NLM/NIH, 2 Democracy Plaza, Suite 510, Bethesda MD 20892-5467

Tel: 888/FINDNLM

E-mail: tehip@teh.nlm.nih.gov

#### **Online Resources for Faith-based and Community Organizations**

http://www.hhs.gov/fbci/features/resources.html

The Department of Health and Human Services provides this Web site, which lists resources for funding, foundation information, corporation information, prospect research, grant proposals, and nonprofit management and voluntarism.

Contact Information: USDHHS, 200 Independence Ave SW, Washington DC 20201

Tel: 202/619-0257 or 877/696-6775

#### **Community Health and Health Disparities Intevention Resources**

#### **America's Children and the Environment**

http://www.epa.gov/envirohealth/children

This report from the U.S. Environmental Protection Agency, brings together information from a variety of sources on trends in contaminant levels, concentrations of contaminants measured in mothers and children, and childhood diseases that may be influenced by environmental factors. The report is downloadable from the Web site or it can be ordered in hard copy.

Contact Information: Use the online contact form.

#### **Association for Community Health Improvement (ACHI) Resources**

http://www.communityhlth.org/communityhlth/resources/accesscoverage.html

ACHI provides a comprehensive list of resources in the areas of coverage and affordability, cultural and linguistic barriers, health literacy, geography and transportation, mental health care, oral health care, pharmaceutical affordability, and racial/ethnic disparities.

#### Centers for Disease Control and Prevention Divisions of HIV/AIDS Prevention

http://www.cdc.gov/hiv/dhap.htm; http://www.npin.org

CDC's Divisions of HIV/AIDS Prevention exists to prevent HIV infection and reduce the incidence of HIV-related illness and death. They accomplish this mission in collaboration with community, state, national, and international partners. For reference, referral, and publication distribution services for information on HIV/AIDS, sexually transmitted diseases, and tuberculosis—or need technical assistance regarding organizations, funding, educational materials, or conferences, contact the CDC National Prevention Information Network (NPIN).

Contact Information: Tel: 800/458-5231 (information/technical assistance)

E-mail: info@cdcnpin.org

#### **Healthy People 2010**

http://healthypeople.gov

Healthy People 2010 challenges individuals, communities, and professionals alike to take specific steps to ensure that good health and long life are enjoyed by all. The Web site contains information and resources on making health choices, leading health indicators, and publications.

#### National Cancer Institute (NCI) Center to Reduce Cancer Health Disparities http://crchd.nci.nih.gov

Click the link for "Patient, Family and Caregiver Information" for information on screening and detection, what to do when diagnosed, treatment options, and more.

Contact Information: 6116 Executive Blvd, Suite 602 MSC 8341, Rockville MD 20852

Tel: 301/496-8589

E-mail: <a href="mailto:crchd@mail.nih.nci.gov">crchd@mail.nih.nci.gov</a>

#### **National Diabetes Education Program (NDEP)**

http://www.ndep.nih.gov

The NDEP is a federally funded program that works with federal, state, and local partners to reduce the morbidity and mortality associated with diabetes.

Contact Information: Once Diabetes Way, Bethesda MD 20814-9692

Tel: 301/496-3583 (Office of Communication/Public Liaison)

E-mail: ndep@info.nih.gov

#### National Health, Lung and Blood Institute (NHLBI) Health Information Resources http://www.nhlbi.nih.gov/health/indexpro.htm#info

Resources include publications, Web sites, and Web applications on cardiovascular, lung, and blood disease as well as sleep disorders, resources for selected audiences, education campaigns, and more. Many publications are available only in print.

Contact Information: NHLBI Health Information Center, P.O. Box 30105, Bethesda MD

20824-0105

Tel: 301/592-8573 (trained information specialist)

E-mail: nhlbiinfo@nhlbi.nih.gov

#### National Library of Medicine (NLM) – HIV/AIDS Links

http://www.sis.nlm.nih.gov/hiv.html

The NLM's Specialized Information Services Division maintains this Web site of HIV/AIDS information resources, which include treatment and drug information, clinical trials, consumer health information, diagnosis and testing, nutrition and exercise, prevention, related medical conditions, special populations, substance abuse, and targeted resources for specific populations.

Contact Information: SIS/NLM/NIH, 2 Democracy Plaza, Suite 510, Bethesda MD 20892-5467

Tel: 888/FINDNLM

E-m ail: tehip@teh.nlm.nih.gov

#### Partners in Information Access for the Public Health Workforce

http://phpartners.org

Partners in Information Access for the Public Health Workforce is a collaboration of U.S. government agencies, public health organizations, and health sciences libraries working to help the public workforce find and use information effectively to improve and protect the public's health. Resources include health promotion and health education, literature and guidelines, health data tools and statistics, grants and funding, education and training, and discussion and e-mail lists.

#### Pocket Guide to Good Health for Children

http://www.ahrq.gov/ppip/childguide

This guide was developed by the Agency for Healthcare Research and Quality of the U.S. Department of Health and Human Services. It is available online and can also be ordered in hard copy.

Contact Information: Tel: 800/358-9295 (AHRQ Publications Clearinghouse)

E-m ail: <u>ahrqpubs@ahrq.gov</u> (AHRQ Publications Clearinghouse)





# **Selected Web Resources for Program Development and Evaluation**

#### **Program Development Resources**

Centers for Disease Control and Prevention: Engaging Faith Communities as Partners in Improving Community Health

http://www.phppo.cdc.gov/publications.asp

This 21-page resource provides an overview of an educational forum held at the CDC. The information presented is intended to expand the understanding and collaboration between faith organizations and health organizations. Discussions include separation of church and state, science supporting work with faith communities, and examples of public health and faith community partnerships. The publication is available online.

Contact Information: Michael Hatcher, Public Health Practice Program Office

CDC Division of Public Health Systems 4770 Buford Highway NE, Atlanta GA 30341

Tel: 770/488-2530 E-mail: mhatcher@cc.gov

## Centers for Disease Control and Prevention: *Principles of Community Engagement* http://www.phppo.cdc.gov/publications.asp

This resource, designed for community leaders, provides information about the organizing concepts associated with community engagement and public participation. Nine principles are described that provide a framework for planning and conducting a community engagement effort. Eight case examples are provided to highlight practical usage of the community engagement principles.

Contact Information: Michael Hatcher, Public Health Practice Program Office

CDC Division of Public Health Systems 4770 Buford Highway NE, Atlanta GA 30341

Tel: 770/488-2530 E-mail: mhatcher@cc.gov

## National Minority AIDS Council (NMAC) Technical Assistance Office http://www.nmac.org/publications

The NMAC is a national organization dedicated to developing leadership within communities of color to address the challenge of HIV/AIDS. Although NMAC's focus is on HIV/AIDS, they have many publications useful for community-based organizations in general, which are available online as PDF documents – just click the link for the Online Publication Download Library. See the Older Technical Assistance Publications and Organizational Effectiveness Series (OES) Publications.

Contact Information: 1624 U Street NW, Washington DC 20009-4432

Tel: 202/234-5120 E-mail: info@nmac.org

#### Public Health Foundation: Healthy People Toolkit

http://www.health.gov/healthypeople/state/toolkit

The Health People Toolkit contains guidance, technical tools, and resources for developing and promoting Healthy People 2010 plans. The guide includes practical tools, national and state examples, and checklists. Also included are tips and resources for getting started, engaging partners, setting priorities and objectives, managing and sustaining the initiative, publishing and promoting the plan, and measuring progress.

Contact Information: Public Health Foundation, 1220 L Street NW Suite 350,

Washington DC 20005 Tel: 202/898-5600

E-mail: xxx

## Task Force on Community Preventive Services: Guide to Community Preventive Services http://www.thecommunityguide.org

This guide contains recommendations on what works in public health. Topics include tobacco produce use prevention and control, nutrition, physical activity, changing health risk behaviors, addressing specific health conditions, and addressing the environment.

Contact Information: Community Guide Branch NCHM

Centers for Disease Control and Prevention

1600 Clifton Road NE Mailstop K-95, Atlanta GA 30333

Tel: 770/488-8590

E-mail: <a href="mailto:communityguide@cdc.gov">communityguide@cdc.gov</a>

#### **Program Evaluation Resources**

#### **National Minority AIDS Council**

http://www.nmac.org

The NMAC is a national organization dedicated to developing leadership within communities of color to address the challenge of HIV/AIDS. Although NMAC's focus is on HIV/AIDS, they have many publications useful for community-based organizations in general, which are available online as PDF documents – just click the link for the Online Publication Download Library. See the Older Technical Assistance Publications and Organizational Effectiveness Series (OES) Publications.

Contact Information: 1624 U Street NW, Washington DC 20009-4432

Tel: 202/234-5120 E-mail: info@nmac.org

National Network of Libraries of Medicine: Measuring the Difference: Guide to Planning and Evaluating Health Information Outreach

http://nnlm.gov/evaluation/guide

This guide, developed by the National Library of Medicine and the Pacific Northwest Regional Medical Library in collaboration with a multidisciplinary expert advisory committee, presents a comprehensive, easy-to-follow process for planning and evaluating outreach programs. The overarching principle of the guide is that evaluation is an integral part of program development. To receive one free copy send an e-mail request for "Evaluation Guide" to <a href="mailto:nnlm@u.washington.edu">nnlm@u.washington.edu</a>. Include your name and mailing address.



## **Training Resources**

#### **Using the National Library of Medicine's Online Resources**

The NLM has a wealth of consumer health information available free on the Internet. The following resources are recommended for use in the CHRIS program. You may also click the Help link from any NLM database home page for assistance, call toll free 888-FINDNLM (346-3656), or e-mail custsery@nlm.nih.gov.

#### **AIDSinfo Tools**

http://aidsinfo.nih.gov/AidsInfoTools

AIDSinfo is a U.S. Department of Health and Human Services (DHHS) project that offers the latest federally approved information on HIV/AIDS clinical research, treatment and prevention, and medical practice guidelines for people living with HIV/AIDS, their families and friends, health care providers, scientists, and researchers.

#### **DIRLINE Help**

http://dirline.nlm.nih.gov/help/DirlineHelp.htm

DIRLINE is a directory of organizations offering information and referral for many diseases and conditions. DIRLINE contains over 8,000 health-related organizations.

#### HazMap Help

http://hazmap.nlm.nih.gov/hazhelp.html

Haz-Map is an occupational health database designed for health and safety professionals and for consumers seeking information about the health effects of exposure to chemicals and biologicals at work. Haz-Map links jobs and hazardous tasks with occupational diseases and their symptoms.

#### **Household Products Database Help**

http://hpd.nlm.nih.gov/help.htm

The Household Products Database is a consumer guide that provides information on the potential health effects of chemicals contained in more than 6,000 common household products used inside and around the home. This resource helps scientists and consumers learn about ingredients in brand-name products.

#### **MedlinePlus Tour**

http://www.nlm.nih.gov/medlineplus/tour/tour.html

MedlinePlus has extensive information from the National Institutes of Health and other trusted sources on over 700 diseases and conditions. There are also lists of hospitals and physicians, a medical encyclopedia and a medical dictionary, health information in Spanish, extensive information on prescription and nonprescription drugs, health information from the media, and links to thousands of clinical trials.

#### **National Network of Libraries of Medicine**

http://nnlm.gov

The National Network of Libraries of Medicine is a network of health sciences libraries across the nation divided into eight regions. Visit the NN/LM Web site or call 800/338-7657 to find an NN/LM library near you and what services they can offer you.

#### **NLM Training Manuals and Resources**

http://www.nlm.nih.gov/pubs/web based.html

Online Links to the training resources used in conjunction with the classes offered by the National Training Center and Clearinghouse. Includes NLM Gateway and ClinicalTrials.gov.

#### **PubMed Online Training**

http://www.nlm.nih.gov/bsd/disted/pubmed.html

PubMed lets you search more than 15 million bibliographic citations and abstracts in the fields of medicine, nursing, dentistry, veterinary medicine, the health care system, and preclinical sciences. It provides access to MEDLINE® and to articles in selected life sciences journals not included in MEDLINE.

#### **Tox Town Help**

http://toxtown.nlm.nih.gov/help.php

Tox Town is an interactive guide to toxic chemicals and environmental health issues in everyday locations. It is a companion to the extensive information in the TOXNET collection of databases. Tox Town also offers some resources in Spanish (http://toxtown.nlm.nih.gov/espanol).

#### **TOXMAP Frequently Asked Questions**

http://toxmap.nlm.nih.gov/toxmap/help/faq.jsp

TOXMAP is an interactive Web site that shows the amount and location of reported toxic chemicals released into the environment on maps of the United States. TOXMAP allows users to visually explore information about releases of toxic chemicals by industrial facilities around the United States as reported annually to the Environmental Protection Agency (EPA, <a href="http://www.epa.gov/tri/">http://www.epa.gov/tri/</a>). It also integrates the map display with access to relevant bibliographic references and other data on these chemicals, providing a map-based portal to these resources.

#### **Internet Skills Training Resources**

#### MedlinePlus Guide to Healthy Web Surfing

http://www.nlm.nih.gov/medlineplus/healthywebsurfing.html

A guide to what you should look for when evaluating the quality of health information on Web sites.

Navigating the World Wide Web for Health Information: Tools for Success http://www.orau.gov/meo/materials/WebTools.mht

A PowerPoint Slide presentation from the Oak Ridge Institute for Science and Education, developed specifically for the CHRIS Program. Located in Oak Ridge, Tennessee, ORISE provides training and outreach support to the National Library of Medicine.

#### **Parish Nursing Resources**

#### Health Ministries Association, Inc.

http://www.hmassoc.org

The Health Ministries Association is an international membership organization that encourages, supports, and develops leaders in emerging practices that integrate faith and health.

#### **International Parish Nurse Resource Center**

http://ipnrc.parishnurses.org/index.phtml

The International Parish Nurse Resource Center serves as a reference center for people seeking information on the philosophy and activities of nurses in congregations across the county, convenes annual educational programs where nurses can meet to learn about current developments in parish nursing, provides consultation to institutions, agencies, and churches that organize parish nurse programs, and promotes an understanding of the role of parish nurse professionals in promoting health and wellness within the church community.





## **Media Materials**

#### **Section II Contains:**

**CHRIS Logos** 

**Press Release – Launching the Program** 

**CHRIS Kickoff Ceremony Program** 

**Health Fair Registration Brochure** 

**CHRIS Program Brochure** 

All materials should display the CHRIS logo and the following statement:

The CHRIS program was developed by the Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee. The pilot demonstration project was funded by the National Library of Medicine/National Institutes of Health. Printed with permission.



## **CHRIS Logos**

The CHRIS logos identify the CHRIS Program. They are pictured here with links to several graphic file formats so that you may size them to fit your needs.

#### **CHRIS Logo Complete**

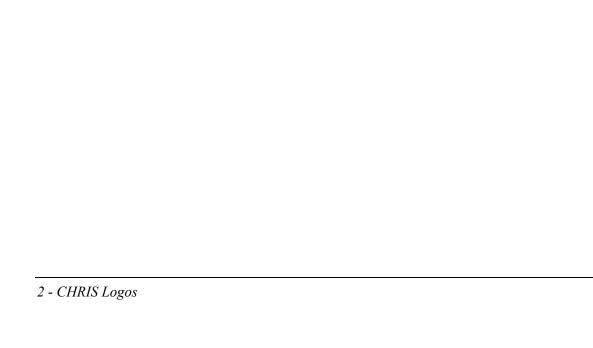


#### **CHRIS Heart Logo**



At least one of these logos as well as the following statement should be displayed on all materials:

The CHRIS program was developed by the Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee. The pilot demonstration project was funded by the National Library of Medicine/National Institutes of Health. Printed with permission.



# C ONSUMER H EALTH R ESOURCE I NFORMATION S ERVICE

## PRESS RELEASE

Contact: Name, Phone

Date:

## Local Organizations Announce Project to Implement Bush's Faith-Based Initiative in # Inner-City Churches

**CITY, State**—"We want more and more faith-based charities to become partners in our efforts, our efforts to change America one heart, one conscience, one soul at a time," said President Bush in December 2002 while launching his Faith-Based Initiative aimed at opening doors for faith-based groups to work with the federal government in addressing the needs of Americans.

Locally, a new collaborative partnership among [participating organizations] has formed to work with faith-based communities to bring health information to minorities in the community who might otherwise not have equal access to resources.

Called Consumer Health Resource Information Service (CHRIS), the program is a faith-based initiative. The goal is to disseminate consumer health information that addresses health disparities throughout [places of worship] with predominantly [minority] congregations.

The [places of worship] engaged in the program are: [list participating organizations].

Health disparities arise because minorities are more affected by certain health conditions than are other populations. They experience higher rates of cancer, cardiovascular disease, diabetes, HIV infection/AIDS, and infant mortality, and have less access to immunization.

"[Quote from Lead Partner]," said [Name], [Organization].

"It is our profound hope that through this collaborative partnership, many positive health benefits will be gained from this project," says Gale Dutcher of the National Library of Medicine's Division of Specialized Information Services. The National Library of Medicine funded the pilot demonstration project of the CHRIS program.

Under President Bush's Faith-Based and Community Initiative, Centers for Faith-Based and Community Initiatives have been created in five cabinet departments – the United States Departments of Justice, Labor, Health and Human Services, Housing and Urban Development, and Education.

Addressing health disparities is also a national priority. The goal of Healthy People 2010, laid out by the Department of Health and Human Services, is to increase both the quality and years of healthy life while eliminating health disparities by 2010 through educating and raising awareness of resources and health tests.

The CHRIS program was developed by the Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee. The pilot demonstration project was funded by the National Library of Medicine, a part of the National Institutes of Health.

###





#### **CHRIS Project Goals:**

To address minority health disparities among African-Americans through information dissemination and health education.

This goal is consistent with the goals of the Healthy People 2010 initiative, which are: (1) Increase quality and years of healthy life, and (2) Eliminate health disparities.

#### **Three Core Services**

Health Education Health Screenings Health Services

**CHRIS Project Partners** 

Oak Ridge Institute for Science and Education
Baptist Health System of East Tennessee's Parish Nurse Program
Knox County Health Department
Tennessee Department of Health's Office of Minority Health
Knoxville Minority Health Coalition
Chi Eta Phi Nursing Sorority, Inc., Upsilon Chi Chapter

**CHRIS Churches** 

Clinton Chapel AME Zion
First Calvary Baptist
Greater Warner Tabernacle AME Zion
Lennon-Seney United Methodist
Payne Avenue Baptist
Rogers Memorial Baptist

Invocation

Rev. Dan Hix, Chaplin Baptist Health System

Comments

Dale Collins, CEO Baptist Health System Master of Ceremonies

Ronald D. Townsend, Director Oak Ridge Institute for Science and Education

Nicole Dancy Outreach and Special Populations National Library of Medicine

C ONSUMER
H EALTH
R ESOURCE
I NFORMATION
S ERVICE

Jack Sharp, Vice Mayor City of Knoxville

Mike Ragsdale Knox County Executive

Joe Armstrong State Representative, 15th District

Pastor George Lyons First Calvary Baptist

#### **Refreshments and Exhibits**

# FRIDAY, AUGUST 1, 2003

I would like to register for the Inner City Conference, held on Friday, August 1, 2003

	State: Zip:		ession.)	3:45 p.m.  Elder Care  Breast/Prostate Cancer  Immunizations  NLM Consumer Health Information
Organization or affiliation:	.y.		he following Workshops: (Workshops occur concurrently. Choose one Workshop per Session.)	Afternoon Session–1:30 p.m.–3:45 p.m. STD/HIV/AIDS Elder C Breast/ Breast/ Parish Nursing Immuni ation Cardiovascular Disease NLM C.
ùO	City:	Email:	Workshops: (Workshops occur cond	.m.–12:00 p.m.  Elder Care Breast/Prostate Cancer Immunizations  NLM Consumer Health Information
Name:	Address:	Telephone:	I would like to register for the following	Morning Session –10:45 a.m.–12:00 p.m.  STD/HIV/AIDS Elder Car Diabetes Parish Nursing Cardiovascular Disease NLM Cor

registration card to (865) 241-3851 or call information above to Lisa Carroll at information the You can also fax the may also E-mail the nenvelope, and mail this card to the address on the reverse side. Durham at (865) 576-6256 or Melissa Carroll at (865) 576-8647. You place in an registration to Rose in your registration to carrollm@orau.gov.

Focus Group and Conference

#### **WORKSHOPS**

Continuing Education Units (CEUs) will be provided through the Chi Eta Phi Nursing Sorority. All workshops will be held once in each session. Morning sessions are from 10:45 a.m. to 12:00 p.m., and afternoon sessions are from 1:30 p.m. to 3:45 p.m. A wrap-up focus group session will be held 3:45 p.m. to 4:30 p.m., at which door prizes will be awarded.

- STD/HIV/AIDS - Breast/Prostate
- Diabetes Cancer
- Parish Nursing - Immunizations
- Cardiovascular Disease - NLM Consumer
- Elder Care Health Information

#### SUCCESS BY SIX COMMUNITY HEALTH FAIR

SATURDAY, AUGUST 2, 2003

LOCATION: SAM E. HILL SCHOOL GROUNDS,

LONSDALE COMMUNITY

**Time:** 10:30 am-3:00 p.m.

**Purpose:** To provide outreach services at the annual Lonsdale Homecoming event. The parish nurses will help Daru Kirksey of the United Way and other health care providers offer health screenings, health education, and information.

The CHRIS Project was developed by the Medical Education and Outreach (MEO) Group of the Oak Ridge Institute for Science and Education. MEO has formed a partnership with several community-based health agencies and other organizations in facilitating the CHRIS Project:

Oak Ridge Institute for Science and Education
Chi Eta Phi Sorority
Baptist Health System Parish Nursing Program
Knox County Health Department
Tennessee Department of Health, Office of Minority Health
Knoxville Minority Health Coalition

Health Disparities Being Addressed by the CHRIS Project:
Cancer HIV/AIDS
Cardiovascular Disease Immunizations
Diabetes Infant Mortality



Funded by the National Library of Medicine of the National Institutes of Health.

The theme of the 8th Annual Minority Health Summit "Our Health Is In Our Hands" is used by permission obtained from the Tennessee Office of Minority Health. The Summit is scheduled for August 27-29, 2003, in Nashville, Tennessee.



# INNER-CITY HEALTH CONFERENCE

FRIDAY, AUGUST 1, 2003 8 A.M.-3:45 P.M.

Payne Avenue Baptist Church 2714 Martin Luther King Avenue Knoxville, TN 37914

# SUCCESS BY SIX COMMUNITY HEALTH FAIR

SATURDAY, AUGUST 2, 2003 10:30 A.M.-3:00 P.M.

> Sam E. Hill School Grounds Londsdale Community

# INNER-CITY HEALTH CONFERENCE AND SUCCESS BY SIX COMMUNITY HEALTH FAIR



The Inner-City Health Conference and Success by Six Fair is a major activity of the Consumer Health Resource Information Services (CHRIS) Project, a collaborative, faith-based, pilot program funded by the National Library of Medicine of the National Institutes of Health. There are six inner-city churches that are serving as host sites for the CHRIS Project:

First Calvary Baptist Church Clinton Chapel A.M.E. Zion Rogers Memorial Baptist Church Payne Avenue Baptist Church Greater Warner A.M.E. Zion Lennon-Seney United Methodist Church

The six parish nurses of the participating churches, five of whom are Chi Eta Phi nurses, are coordinating the conference/fair, which is a prelude to the **Minority Health Summit** in Nashville on August 27–29, 2003. Borrowing from the Minority Health Summit's theme, "Our Health is in Our Hands," the parish nurses are promoting the conference/fair for inner-city residents and health care providers.

The mission of these two events is twofold: 1) To empower the minority community with health education and resources that will promote healthy lifestyles; and 2) To provide health care providers with an opportunity to network and discuss available resources and services.

### INNER-CITY HEALTH CONFERENCE

FRIDAY, AUGUST 1, 2003 LOCATION: PAYNE AVENUE BAPTIST CHURCH

8:00 a.m. – 9:00 a.m. Continental Breakfast and

Onsite Registration

9:00 a.m. – 9:30 a.m. General Assembly

9:30 a.m. – 10:45 a.m. Keynote Address

11:00 a.m. – 12:00 p.m. Workshop Breakout

Sessions

12:15 p.m. – 1:30 p.m. Heart Healthy Lunch

1:45 p.m. – 3:00 p.m. Workshop Breakout

Sessions

3:10 p.m. – 3:45 p.m. Wrap-up Focus Group/

Conference Evaluations\*

#### **GENERAL ASSEMBLY PROGRAM**

Invocation:

Reverend Brown, Payne Avenue Baptist Church

Welcome/Introduction:

Lisa Faulkner, President, Chi Eta Phi Sorority

Comments/Special Introduction of Partners:

Rose Foster, MEO Group Manager

Introduction of Speaker:

Lois Dave, Vice-President, Chi Eta Phi Sorority

Keynote Address:

Dr. Jennie Ward-Robinson, Director, Alzheimer's Association

General Assembly Adjournment:

Lisa Faulkner, President, Chi Eta Phi Sorority





Oak Ridge Institute for Science and Education Medical Education and Outreach Group P.O. Box 117, MS LAB-ENV-37 Oak Ridge, TN 37831-0117

<sup>\*</sup> Door Prizes will be given after this session.

#### WHAT ARE HEALTH DISPARITIES?

Health disparities are defined as diseases, disorders, and conditions that disproportionately affect members of minority or other specific population groups when compared to the general population.

Churches and other faith-based organizations can play an effective role in eliminating or reducing minority health disparities because of their unique positions in the community.

#### Some Minority Health Concerns in the U.S.

#### **Asthma**

African Americans are 3 times more likely than whites to be hospitalized for related complications.

#### Cancer

African Americans are 30% more likely to die of cancer than whites. The incidence of certain cancers is also higher in Asian, Hispanic, and Hawaiian populations than in the white population.

#### **Cardiovascular Disease**

Heart disease is the leading cause of death for all racial and minority groups.

#### **Diabetes**

The prevalence of diabetes is 2.3 times higher in Native Americans, 2 times higher in African Americans, and 1.5 times higher in Hispanics than in whites.

#### **HIV/AIDS**

The incidence of HIV/AIDS is 24 times higher in African American females than in white females.

Source: The Centers for Disease Control and Prevention, Department of Health and Human Services

"...Although the CHRIS Project only requires bimonthly health topics, Reverend Price asked if they could be done monthly. The rewards come after each presentation when members come to me with lots of questions and comments. Several members have told their own personal experiences regarding health treatments and situations. This has encouraged other members to get regular check-ups and health screenings."

--Lisa Faulkner, RN, CNN, Parish Nurse

The CHRIS pilot demonstration project was funded by the Office of Outreach and Special Populations, Division of Specialized Information Services, National Library of Medicine, which is a part of the National Institutes of Health. NLM's invaluable support of this project and their ongoing support in its replication have made it possible for implementation of CHRIS programs in other communities across the nation.

For more information about the CHRIS faith-based approach to addressing minority health disparities in your community, please contact:

Rose Marie Womble CHRIS Program Manager Oak Ridge Institute for Science and Education P.O. Box 117, MS-37 Oak Ridge, TN 37831-0117

E-mail: wombler@orau.gov Telephone: 865.576.6256 Fax: 865.241.3851

The Oak Ridge Institute for Science and Education (ORISE) is a U.S. Department of Energy institute focusing on scientific initiatives to research health risks from occupational hazards, assess environmental cleanup, respond to radiation medical emergencies, support national security and emergency preparedness, and educate the next generation of scientists.

ORISE is managed by Oak Ridge Associated Universities.



# A Faith-based Approach to Addressing Health Disparities

Sponsored by:
The Division of Specialized Information Services
National Library of Medicine
National Institutes of Health
Department of Health and Human Services

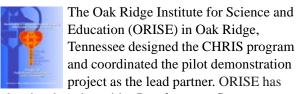






#### PROGRAM DESCRIPTION

The CHRIS program is a faith-based initiative designed to support the U.S. Department of Health and Human Services' Healthy People 2010 goals of increasing quality and years of life and eliminating health disparities. Sponsored by the National Library of Medicine, the program addresses these goals primarily by improving health information access to address identified health issues that disproportionately affect minorities, such as HIV/AIDS, cardiovascular disease, diabetes, immunization, cancer, and infant mortality.



also developed a guide, *Developing a Consumer Health Resource Information Service Program: A Guide for Faith-based Organizations and Communities*, for those who would like to initiate a CHRIS program in their community or worship center. The guide will be available soon on the ORISE Web site, at http://www.orau.gov/MEO.



#### IMPLEMENTING A CHRIS PROGRAM IN YOUR COMMUNITY

#### PRIMARY SERVICE COMPONENTS

The framework for a CHRIS program consists of three core service areas: **health education**, **health screenings**, and **health services**.

Specific objectives will depend upon the size of the community and its demographics, the kinds of resources available, and the specific health disparities to be addressed within the community.



#### **PROGRAM ACTIVITIES**

Program activities revolve around health information access. These may include:

- Community health assessment
- Health awareness topics (during services)
- Fact sheet distribution
- Health fair/conference
- Individual health/prevention counseling
- Health services resource directory
- Facilitation of access to reliable health information on the Internet, such as the National Library of Medicine's MedlinePlus®



#### **APPROACHES**

#### Collaborative approach

The CHRIS pilot demonstration was a large-scale project using the collaborative approach, in which multiple churches served as host sites for service delivery. This approach is best for a group of organizations working together to implement the program in multiple locations.

#### Single-entity approach

The program design can be modified to fit the capacity of a single entity, large or small, to implement the program within its own organization. It can be incorporated into an existing health ministry or implemented as a new program.

Whatever the approach, the core components and services of the program are the same and can be facilitated according to the skill levels and resources available. A program coordinator will provide primary leadership. This person can be a parish nurse, a health educator, or a lay person with the appropriate background and level of training.



#### **Assessment Instruments**

The tools in this section are designed for the collaborative approach, which involves recruiting (inviting) and selecting worship communities to participate as host sites in a large-scale CHRIS program.

#### **Section III Contains:**

#### **Computer Skills Assessment Form**

Use this form to assess the computer skills of the program coordinators to determine training needs.

#### **Community Health Assessment Form**

Use this form to assess the health needs of your target community.

All materials should display the CHRIS logo and the following statement:

The CHRIS program was developed by the Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee. The pilot demonstration project was funded by the National Library of Medicine/National Institutes of Health. Printed with permission.



Church	Name:				
Name: _		Te	elephone: _		
	il: The computer I use is a: PC			PC Mae	
	ndicate your skill level with the following c	computer-relat	ed tasks by	y placing a che	ck mark
Comp	uter Experience	Excellent	Good	Borderline	Poor
•	Use mouse (including right-clicking)				
•	Maximize/minimize windows				
•	Move/size windows				
•	Switch between windows (e.g., "toggle")				
•	Scroll up and down				
•	Rename a file				
•	Move and copy files				
•	Copy a file to and from a floppy disk				
•	Delete a file				
•	Find a file using the <b>Find</b> function				
•	Create/use shortcuts				
•	Create a folder				
•	Navigate folder hierarchies				
•	Distinguish local and network drives				
Interne	et Applications: E-mail	Excellent	Good	Borderline	Poor
•	Open e-mail application				
•	Read messages				
•	Compose and send a message				
•	Attach a file to a message				
•	Reply to a message				
•	Forward a message				
•	Delete a message				
Interne	et Applications: Browser	Excellent	Good	Borderline	Poor
•	Display specific Web pages				
•	Select a link				
•	Use main navigational buttons				
•	Create and use bookmarks/favorites				
•	Change home page				
•	Search Web using a search engine				



The CHRIS program was developed by the Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee with funding from the National Library of Medicine, National Institutes of Health. Printed with permission.

# Consumer Health Resource Information Service (CHRIS) Program

#### **Community Health Assessment Form**



This health assessment instrument was prepared by:

Tennessee Office of Minority Health Cordell Hull Bldg., 3<sup>rd</sup> Floor 425 5<sup>th</sup> Ave N Nashville TN 37243-0135

Medical Education and Outreach Group Oak Ridge Institute for Science & Education PO Box 117 MS-37 Oak Ridge TN 37831-0117

The CHRIS program was developed by the Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee with funding from the National Library of Medicine, National Institutes of Health. Printed with permission.



#### **Instructions**

#### Please do not begin until instructed to do so.

This health assessment asks for your views about your physical health. For the purpose of this study, "health care provider" refers to a doctor, nurse practitioner, or physician assistant.

Your participation in this study is confidential (private) and completely voluntary. You do not have to participate.

Please do not write your name anywhere on this form. All answers will be collected as a group and in no way can you be personally identified.

\_\_\_\_\_\_

The anticipated timeframe for completing this assessment is approximately 20 minutes or less and should be done in the following manner:

- Step 1: Enter today's date and the name of the place of worship at which you are taking the assessment.
- Step 2: Beginning with Section I, complete the assessment, answering all questions that apply to you. **Do not respond to any question that makes you feel uncomfortable**.

If at any time you need assistance, please raise your hand and someone will assist you.

- Step 3: Place the completed assessment in the attached envelope and seal it.
- Step 4: Place the sealed envelope and your pencil on the table near the front of the room and leave the area quietly.

We appreciate your time and assistance in completing this health assessment.

You may now begin.





	Т	'oday's Date:			
	Location:				
	In each section, please answer each question that applies to you by filling in the blank(s), choosing the single best answer, or checking all answers that apply if indicated.				
Secti	ion I. Demographic/Socioeconomic	Information			
1)	Age: years Birth date	e:/			
2)	Race: a. Black b. W	hite c. Hispanic d. Other			
3)	Gender: a. Male b. Fe	emale			
4)	Marital Status:  a. Never Ma  b. Married  c. Separated  d. Widowed	rried /Divorced			
5)	Which of the following categories best from <u>all</u> people currently living in the p	describes your total annual <u>combined</u> income blace you reside? (Check one box.)			
	a. Less than \$5,000	f. \$30,000 to \$39,999			
	b. \$5,000 to \$9,999	g. \$40,000 to \$49,999			
	c. = \$10,000 to \$14,999	h. \$50,000 to \$59,999			
	d. \$15,000 to \$19,999	i. \$60,000 to \$69,999			
	e. \$20,000 to \$29,999	j. \$70,000 or over			
6)	Where do you live nine or more month	s of the year? (Check one box.)			
	a. Your home, apartment, or con	do			
	b. Senior citizen apartment or co	ndo			
	c. Home of a relative or friend				
	d. Retirement home				
	e. Adult foster care				
	f. Nursing home				
	g. Other				



7)	What is	s the highest grade or year of school you have completed?
	a.	Never attended school or only attended kindergarten
	b.	Grades 1 through 8 (Elementary)
	c.	Grades 9 through 11 (Some high school)
	d.	Grade 12 or GED (High school graduate)
	e.	College 1-3 years (Some college or technical school)
	f.	College 4 years or more (College graduate)
	g.	Graduate school/graduates studies
8)	Which	of the following best describes your current employment status? (Check one box.)
	a.	Working full time, 35 hours or more per week
	b.	Working part time, less than 35 hours per week
	c.	Unemployed or laid off and looking for work
	d.	Unemployed or laid off and not looking for work
	e.	Homemaker
	f.	In school full time
	g.	Retired
	h.	Disabled, not able to work
	i.	Other (Please specify):
9)		ould you describe the health insurance plan(s) you have had in the past 12 (Check all that apply.)
	a.	An individual plan (the member pays)
	b.	A group plan through an employer, union, etc.— the employer pays all or part
	c.	U.S. Governmental Health Plan (e.g., Military, CHAMPUS, VA)
	d.	Medicaid
	e.	Medicare
	f.	I have not had an insurance plan in the past 12 months
	g.	State-sponsored plan



#### Section II. General Health Information

10)	In general, would you say your health is (check one box):
	a. Excellent
	b. Very Good
	c. Good
	d. Fair
	e. Poor
11)	About how long has it been since you last visited a doctor for a routine check-up (e.g., annual examination)?
	a. Within the past year
	b. 1-2 years ago
	c. 2-5 years ago
	d. 5 or more years ago
	e. Never
	f. Don't know
12)	About how many doctor visits have you had within the past 12 months?
13)	Was there a time within the past 12 months that you needed to see a doctor but could not because of cost?
	a. Yes
	b. No
	c. Don't know
14)	About how long has it been since you had your blood pressure taken by a doctor, nurse, or other health professional?
	a. Within the past 6 months
	b. 6 months – 1 year ago
	c. 1-2 years ago
	d. 2-5 years ago
	e. Never
	f. Don't know



#### Section III. Lifestyle Information

15)	Are you currently trying to lose weight?
	a. Yes
	b. No
	c. Don't know
16)	Has your health care provider or nurse ever told you to follow an exercise program?
	a. Yes
	b. No
	c. Don't know
17)	Have you ever been told by a doctor or health care provider that you need to lose weight?
	a. Yes
	b. No
	c. Don't know
18)	How often do you do physical activities or movement for at least 20 minutes that cause heavy sweating or large increases in breathing or heart rate?
	a. 3-4 times per week
	b. 1-2 times per week
	c. Every two months
	d. Never
	e. Other:
19)	Are you doing any physical activity or exercise to lose weight?
	a. Yes
	b. No
	c. Don't know
20)	How many cigarettes or other tobacco products do you smoke per day?
	a. I do not smoke
	b. Less than a half a pack per day ( <i>Please skip to question 22.</i> )
	c. Between half a pack to one pack per day ( <i>Please skip to question 22.</i> )
	d. More than one pack per day ( <i>Please skip to question 22.</i> )
	e. I used to smoke, but I do not smoke any more ( <i>Please skip to question 22.</i> )



If you are a non-smoker, are you exposed to tobacco smoke in your home or workplace?
a. Yes
b. No
Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff?
a. Yes, chewing tobacco
b. Yes, snuff
c. Yes, both
c. No, neither
d. Don't know
Do you currently use any smokeless tobacco products such as chewing tobacco or snuff?
a. Yes, chewing tobacco
b. Yes, snuff
c. Yes, both
d. No, neither
e. Don't know
Within the past month, how many days per week or per month did you drink any alcohol?
a. Days per week
b. Days per month
c. Don't know
Are you aware of the risks of eating foods that are high in saturated fats or sugars?
a. Yes
b. No



#### Section IV. Specific Health Concerns

A. Im	munizations (Adult Vaccination	as)
26)	Are your immunizations up to da	ate?
	a. Yes	
	b. No	
	c. Don't know	
27)	Have you had any of the followi	ng vaccinations? If so, when? (Check all that apply.)
	a. Flu/Influenza	Date:
	b. Pneumonia	Date:
	c. Chickenpox/Varicella	Date:
	d. Hepatitis B	Date:
B. Inf	fant Mortality (Infant Deaths)	
28)	Have any of your children died b	pefore their first birthday? If yes, how many?
	a. Yes	How many?
	b. No (Please skip to ques	stion 30.)
29)		on 28, please check any of the following conditions that ed with your child's death. (Check all that apply.)
	a. Lack of prenatal care	
	b. Prematurity (early birth	)
	c. Bronchitis	
	d. Respiratory Distress Sy	endrome (life-threatening lung disorder)
	e. Sudden Infant Death Sy	vndrome
	f. Heart diseases, all form	S
	g. Diarrhea	
	h. Septicemia (blood poise	oning)
	i. Other	



#### C. Respiratory Illnesses

30)	Have you experienced problems with, or been diagnosed with, any of the following respiratory illnesses? (Check all that apply.)
	a. Asthma
	b. Emphysema
	c. Bronchitis
	d. Chronic Obstructive Pulmonary Disease (COPD) – (lung disease)
	e. Other:
D. Ca	ardiovascular Disease
31)	Have you ever been told by a doctor or other health care provider that you had or have (check all that apply):
	a. Coronary heart disease
	b. Angina (chest pain)
	c. Heart attack (also called a myocardial infarction)
	d. Any kind of heart condition or disease
	e. Stroke
	g. Hypertension/High blood pressure
	h. Poor circulation in your legs
	i. Irregular heartbeats or palpitations
	j. Congestive heart failure
32)	Have you ever been told by a doctor or other health care provider that you had or have (check all that apply):
	a. High cholesterol
33)	About how long has it been since you last had your blood cholesterol checked?
	a. Within the past 12 months
	b. 1-2 years ago
	c. 2-5 years ago
	d. 5 or more years ago
	e. Never
	f. Don't know



E. Ca	ncer: History
34)	Have you had any kind of screening for cancer in the past 12 months? (Check one box.)
	a. No
	b. Yes
	If not, is one planned?
35)	Does anyone in your immediate family have cancer? (Check one box.)
	a. No
	b. Yes
	If yes, who?
36)	Have you ever been told by a doctor or other health professional that you had or have cancer or a malignancy? <b>If so, please check the type(s) from the following list</b> (check all that apply):
	a. Bladder
	b. Bone
	c. Brain
	d. Breast
	e. Cervix
	f. Leukemia
	g. Liver
	h. Lung
	i. Lymphoma (cancerous tumor of the skin or lymph nodes)
	j. Melanoma (cancerous tumor of the skin and other organs)
	k. Mouth/tongue/lip
	1. Skin
	m. Stomach
	n. Testicular (male reproductive glands)
	o. Throat
	p. Thyroid
	q. Colon
	r. Esophagus
	s. Gallbladder
	t. Kidney
	u. Ovary



	v. Pancreas
	w. Prostate
	x. Rectum
	y. Uterus
	z. Other:
	z oner
F. Can	ncer Management/Screenings: MALE
NOTE	: If you are female, please skip to question 39.
37)	Have you ever been screened (examined) for Prostate Cancer?
	a. Yes
	b. No (Please skip to question 45.)
38)	If you answered Yes to question 36, how long ago did you have your most recent screening (examination) for prostate cancer?
	a. Within the past 12 months
	b. 1-2 years ago
	c. 2-3 years ago
	d. 3-5 years ago
	e. More than 5 years ago
	f. Don't know
39)	If you answered Yes to question 36, did you have this test (check one box):
	a. As a part of a routine physical exam or screening test
	b. Because of a specific problem
	c. As a follow-up to an earlier test or screening exam
	d. Don't know
G. Car	ncer Management/Screenings: FEMALE
NOTE	: If you are male, please skip to question 45.
40)	Have you ever had a mammogram (x-ray for breast cancer)?
	a. Yes
	b. No (Please skip to question 42.)
41)	If you answered Yes to question 39, how long ago did you have your most recent mammogram?



	a. Within the past 12 months
	b. 1-2 years ago
	c. 2-3 years ago
	d. 3-5 years ago
	e. More than 5 years ago
	f. Don't know
42)	If you answered Yes to question 39, did you have a mammogram (check one box):
	a. As a part of a routine physical exam or screening test
	b. Because of a specific problem
	c. As a follow-up to an earlier test or screening exam
	d. Don't know
43)	Have you ever had a PAP smear (test for cervical cancer)?
	a. Yes
	b. No (Please skip to question 45.)
	c. Don't know (Please skip to question 45.)
44)	If you answered Yes to question 42, how long ago did you have your most recent PAP smear?
	a. Within the past 12 months
	b. 1-2 years ago
	c. 2-3 years ago
	d. 3-5 years ago
	e. More than 5 years ago
	f. Don't know
45)	If you answered Yes to question 42, did you have this test:
	a. As a part of a routine physical exam or screening test
	b. Because of a specific problem
	c. As a follow-up to an earlier test or screening exam
	d. Don't know



#### H. HIV/AIDS

b.	The proper way to use condoms  What to discuss with their partner(s) about sexual activities
c.	What to discuss with their partner(s) about sexual activities
d.	r (*)
e.	What to discuss with their children about AIDS prevention
f	Testing for HIV
g.	Where to go if you are exposed to HIV
47) Do you materials seminars  a b c  48) Have you contracti  a b c d e f g	The risk of sharing needles or works
materials seminars  a b c  48) Have you contracti  a b c d e f g	Other:
b.	know of the HIV testing options and the HIV/AIDS educational programs and that are available to you? (Confidential, anonymous home test kits; educational; etc.)
c	Yes
48) Have you contracti  a b c d e f g	No
contracti  a b c d e f g	Don't know
b c d e f g	ever engaged in any of the following activities that may have put you at risk for ng HIV? (Check all that apply.)
c d e f g	Blood transfusion before 1990
d e f g	Unprotected sex or other unprotected sexual activities
e f g	IV drug abuse
f g	Substance abuse
g	Received a tattoo
<u> С</u>	Sex for drugs/money
49) Have you	Other:
	ever been tested for HIV?
a.	Yes (Please skip to question 50.)
b	No.
c	No



50)	If you have not been tested, which of the following reasons is have not been tested?	is the	main	reaso	on wh	y you
	a. It's unlikely I've been exposed to HIV					
	b. I am afraid to find out if I am HIV positive (that I ha	ıve H	IV)			
	c. I don't want to think about HIV or being HIV positive	ve				
	d. I am worried my name will be reported to the positive	gover	nmen	t if I	am	tested
	e. I don't know where to get tested					
	f. I don't like needles					
	g. I am afraid of losing my job, insurance, housing, frie I am positive for HIV infection	ends,	family	y, if p	eople	knew
	h. I don't have any symptoms					
	i. Don't know					
	j. Other:					
<b>I. Dia</b> 51)	hbetes (Sugar)  How do you rate your understanding of the following? (Please	e circ	le you	r ans	wer.)	
	For this question, use the following scale: 1=Poor 2=Fair 3=Goo	d 4=	=Very	Good	5=Ex	cellent
				_		_
	Overall diabetes	1	2	3	4	5
	Coping with stress	1	2	3	4	5
	Diet for blood sugar control	1	2	3	4	5
	The role of exercise in diabetes care	1	2	3	4	5
	Medications you are taking	1	2	3	4	5
	How to use the results of blood sugar monitoring	1	2	3	4	5
	How diet, exercise, and medicines affect blood sugar levels	1	2	3	4	5
	Prevention and treatment of low blood sugar	1	2	3	4	5
	Prevention of long-term complications of diabetes	1	2	3	4	5
	Foot care	1	2	3	4	5
	Benefits of improving blood sugar control	1	2	3	4	5
	Pregnancy and diabetes	1	2	3	4	5



52)	Have you ever been diagnosed with diabetes by a health care provider?
	a. Yes
	b. No (Please skip to question 54.)
53)	If you answered Yes to question 51, do you take insulin?
	a. Yes
	b. No
	c. Don't know
54)	If you answered Yes to question 51, do you take oral medication or have you been advised to alter your lifestyle as a treatment for diabetes?
	a. Yes
	b. No (Please skip to question 54.)
	c. Don't know (Please skip to question 54.)
55)	Mark the response to this statement that best applies to you <i>(check one box)</i> :
	"Having diabetes makes my life difficult."
	a. Strongly agree
	b. Agree
	c. Neutral
	d. Disagree
	e. Strongly disagree
	f. I do not have diabetes
J. En	notional Well-Being
56)	Have you had two (2) years or more in your life when you felt sad most days, even if you felt okay sometimes?
	a. Yes
	b. No
	c. Not sure
57)	Have you suffered a personal loss or misfortune in the past year? (Examples: job loss, disability, divorce, separation, jail term, or death of someone close to you.)
	a. Yes, two or more serious losses
	b. Yes, one serious loss
	c. No



58)	In the past 12 months, how much effect has stress had on your health?
	a. A lot
	b. Some
	c. Barely any or none
	d. Not sure what stress is
59)	Within the past year, have you had a serious problem for two weeks or more during which you felt sad, blue or depressed; or when you lost all interest or pleasure in things that you usually cared about or enjoyed?
	a. Yes
	b. No
	c. Not sure
60)	Have you ever been in a relationship in which you were hit, kicked, punched, threatened, hurt or made to feel afraid in any way? (If you are currently in this situation, there is help through your doctor or health care provider. Call the hotline 1-800-799-SAFE.)
	a. Yes
	b. No
	c. Not sure
61)	Has a doctor or healthcare provider ever told you that you had any of the following mental health conditions? (Check all that apply.)
	a. Alzheimer's
	b. Depression
	c. Anxiety
	d. Dementia
	e. Nervousness
	f. Anger and frustration
	g. Bipolar disorder (related to mood disorders and depression)
	h. Eating disorder(s)
	i. Other



62)	Has a doctor or healthcare provider ever told anyone in your immediate family that they had any of the above mental health conditions?
	a. Yes
	b. No
	c. Don't know
	d. If known, which one(s)?
K. O	ther Health Concerns
63)	Do you have any trouble seeing, even when wearing glasses or contact lenses?
	a. Yes
	b. No
64)	Have you ever been told by a doctor or health professional that you have <i>(check all tha apply)</i> :
	a. Diabetic retinopathy (disease of the eye caused by sugar)
	b. Cataracts
	c. Glaucoma
	d. Macular degeneration
65)	Have you ever been diagnosed with any of the following disorders? (Check all that apply.)
	a. Rheumatoid arthritis
	b. Scleroderma (hardening of the skin)
	c. Psoriasis (skin disorder)
	d. Myasthenia Gravis (brain disease)
	e. Lupus
	f. Other:
66)	Please check all of the following health promotion programs that you are interested in.
	a. Stress management
	b. HIV/AIDS education
	c. Weight control
	d. Smoking cessation (stop smoking)
	e. Exercise
	f. Other:



#### Section V. Access to Care

67)	Is there a place that you usually go when you are sick or need advice about your health?
/	a. Yes
	b. No (Please skip to question 68.)
68)	If you answered Yes to question 66, what kind of place is it? (Check all that apply.)
	a. Clinic or health center
	b. Doctor's office or HMO
	c. Hospital emergency room
	d. Hospital outpatient department
	e. Parish nurse at church
	f. Some other place
	g. Don't go to one place most often
	h. Don't know
69)	What kind of place do you usually go to when you need routine <u>preventive</u> care, such as a physical examination or check-up? (Check all that apply.)
	a. Clinic or health center
	b. Doctor's office or HMO
	c. Hospital emergency room
	d. Hospital outpatient department
	e. Some other place
	f. Don't go to one place most often
	g. Don't receive preventive care
	h. Don't know
70)	Which of the following reasons might stop you from seeking health care? (Check all that apply.)
	a. Waiting too long to see a doctor
	b. Hours of operation are not convenient
	c. Do not have anyone to watch the children
	d. The doctor does not explain what is wrong with me
	e. Do not have time
	f. Cannot afford to see a doctor
	g. Not satisfied with the quality of health services available in my area
	<del></del>



h.	Uncomfortable or afraid of doctors
i.	Have trouble getting through on the telephone
j.	Have trouble getting an appointment soon enough
k.	No transportation
1.	No insurance
m.	Procrastination (avoidance, putting it off)
n.	Not enough Caucasian health care providers
0.	Not enough minority health care providers
p.	Other (specify):

Thank you for taking the time to complete this health assessment! Your responses will help us better meet the needs of people within your community.





# Site Selection Guidelines and Templates

The tools in this section are designed for the collaborative approach, which involves recruiting (inviting) and selecting worship communities to participate as host sites in a large-scale CHRIS program.

#### **Section IV Contains:**

Site Selection Process (Recruitment, Visitation and Nomination, and Selection Criteria)

**Application for Participation (template)** 

**Recruitment Letter (template)** 

**Selection Letter (template)** 

**Non-selection Letter (template)** 

All materials should display the CHRIS logo and the following statement:

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#### **Site Selection Process**

Funding limitations may necessitate selection of churches or other faith-based organizations (hereinafter referred to as "places of worship") from among many who are interested in participating in a CHRIS program. Therefore, a selection process must be utilized. This process consists of two elements:

- 1) Recruiting interested places of worship within a defined community and
- 2) Screening them to select those that are best suited to the program.

#### **Recruitment**

Recruitment can be implemented in various ways, depending upon the size and demographics of the community. In many communities, places of worship already have coalitions formed to facilitate their health ministries in high-risk areas or other areas of need, particularly in the inner city. Grassroots organizations as well as local government agencies often track the outreach activities of places of worship and can make recommendations for recruitment. Another way to recruit is to mail out letters of invitation based on a set of demographic and geographic criteria. Then, the interested places of worship can be further screened to select those that are most suitable for participation.

#### **Visitation and Nomination**

To facilitate the selection process, visiting each site to inspect the facilities and interview the ministers/leaders for project participation is very important. A profile of each site can be developed based on information obtained during the site visit and minister/leader interview. In this way, the most appropriate places of worship can be selected for the best outcome of the program.

#### **Selection Criteria**

The development of specific criteria for site selection ensures that the initial program in a community will be successful and serve as a model for possible further involvement of other places of worship once the program has been established. The selection process should be developed based on consideration of the following general criteria:

- Geographical considerations
- ❖ Size of the place of worship's active congregation
- ❖ Level of present involvement of active health ministry (e.g., health fairs, health screenings, HIV/AIDS outreach services)
- ❖ Availability of an active or retired nurse as part of the membership

- Availability of adequate and secured space for complete computer workstation unit
- ❖ Ability of church to commit to some level of monetary support to the program
- Leadership commitment to sustain the project

It may be helpful to use the selection criteria that were used for the CHRIS demonstration pilot project as a guide. This list can be adapted to meet the needs of your community.

#### Consumer Health Resource Information Service (CHRIS) Pilot Demonstration Project

#### **Church Selection Criteria**

Six churches were selected to participate in the original CHRIS pilot demonstration project, based on the following criteria:

- 1. Predominantly African American places of worship in the inner city of Knoxville, Tennessee.
- 2. Selected sites will participate in the Baptist Health System of East Tennessee's Parish Nursing Program.
- 3. Selected sites must have an active membership total of at least 100.
- 4. Selected sites must have adequate space for computer equipment and operation.
- 5. Selected sites must have security measures for protection of computer equipment.
- 6. Selected sites must be willing to support parish nurses in efforts of project service delivery (e.g., allow the nurse to have primary access to the project's computer equipment and provide access to the building in which the project's computer is located outside of normal operating hours when needed).
- 7. Selected sites must be willing to provide at least 10 minutes prior to delivery of the sermon for delivery of a health topic relating to health disparities once every other month.
- 8. Selected sites must have an existing health ministry (e.g., health screenings, participation in health fairs, outreach, etc.) and a parish nurse or an active nurse as a current member.
- 9. Selected sites must be willing to adapt a plan to continue the project when the funding cycle ends.
- 10. Selected sites must be in agreement to participate fully in prescribed services outlined in the CHRIS Project (e.g. designate adequate and appropriate time for bi-monthly delivery of health topics and agree to health screenings and other related activities as prescribed in project format).

# Consumer Health Resource Information Service (CHRIS) Program Application for Participation



#### DEADLINE FOR SUBMISSION: \_\_\_\_

This application contains questions that wil	l assist with the se	election of	places of worship for parti	icipation in a CF	HRIS
Program, a faith-based program to address	minority health dis	sparities, sponso	ored in our community by	. Please com	plete
this application in full and return it to	by FAX to	or by mail to '.	If you have any questions, ple	ease contact	at

Faith Community Name:			Faith Leader's Name:			
Addres						
City			State	Zip		
Phone .		Fax	E-mail			
YES	NO	Please check the appropriate box for each sta	tement.			
(fill in	blank)	Our faith-based organization has an active men	mbership of approxi	mately		
		We have an existing parish nurse program and nurse.	or at least one mem	ber who is an active or retired		
		We do not have an existing parish nurse programetired nurse. However, we do have a health exthe program.				
		We have an existing health ministry (e.g., heal etc.).	th screenings, health	n fair participation, outreach,		
		We will implement the CHRIS Program as a part of our health and wellness ministry for a 12-month period.				
		We will set aside at least 10 minutes during a smonth for the delivery of a health topic related				
		The selected program coordinator will submit implementation and one final report upon com				
		The selected program coordinator will commu Manager to provide feedback on the implement	_	pasis with the CHRIS Project		
		We agree to participate in media publicity annufor our implementation of the CHRIS Program		ling the use of the mini-grant		
		The minister and the selected program coording for .	ator will attend the	orientation meeting scheduled		
		We will adapt a plan, including obtaining fund 12-month funding period.	ling, to continue the	CHRIS Program beyond the		

#### Please answer the following questions, using additional sheets as needed.

Please describe any existing health and wellness ministry you may have, or your vision for a health and wellness ministry that you would like to implement.
Please provide some comments on what the CHRIS Program would mean to your membership.
Please describe the methods you will use to evaluate the implementation process.
Please provide some suggestions on what you will do to continue the CHRIS Program beyond the 12-month funding period.

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[Date]

[Addressee] [Address]

Dear [Addressee],

As a faith leader in your community, you are respectfully requested to consider these important questions:

- Do you have concerns about the health of those who worship with you, the health of the community, or even your health?
- Are you interested in your congregation learning about common health disorders and how to prevent them?
- Do you agree that faith leaders have the ability to strongly influence the health practices of their members?

If the answer is **YES** to any of these questions, then we hope you will be delighted to learn that you can join the holistic movement of hundreds of inner-city places of worship all across America that are attending to the health needs of their congregations. These worship centers are not only addressing the spiritual needs of their membership, but the physical needs as well, and have joined forces with community health agencies and outreach organizations to assist national efforts with addressing health disparities among minorities, such as *infant mortality*, *cancer screening/management*, *cardiovascular disease*, *diabetes*, *HIV infection/AIDS*, *and immunizations*.

Your place of worship could have the opportunity to help bring the movement to this area by participating in the Consumer Health Resource Information Service (CHRIS) Program. The primary goal of this [#]-month program is to address minority health disparities through education and information dissemination. Developed by the Medical Education and Outreach Group of the Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee, the CHRIS Program was first funded by the National Library of Medicine as a pilot project in the inner city of Knoxville, Tennessee. The program is being managed in our community by [name of lead agency] with funding from [name of funding agency(ies)].

Approximately [#] [places of worship] will be selected to serve as host sites for this endeavor. A portion of the funds received will be allocated toward the purchase of complete computer workstations, related supplies, one year of Internet services, and parish nurse services. Each site will be expected to adapt a plan to continue the program when the funding cycle ends. All equipment will remain at the end of the program. Program activities have been carefully designed so they will not compromise the sanctity of worship services. A parish nurse or an active nurse member at each selected site will coordinate the program at their site. These nurses will participate in a basic 4- to 6-day parish nurse training that will be provided by [name of agency providing parish nurse training]. The only monetary investment required of each host site is to pay a one-time fee of [cost of parish nurse training] for this training.

The criteria for site selection are as follows:



- 1. Predominantly [population group] places of worship in [location].
- 2. Selected sites will participate in the [name of agency providing parish nurse training].
- 3. Selected sites must have an active membership total of at least 100.
- 4. Selected sites must have adequate space for computer equipment and operation.
- 5. Selected sites must have security measures for protection of computer equipment.
- 6. Selected sites must be willing to support selected parish nurses in efforts of project service delivery (allow the nurse to have primary access to the program's computer equipment and provide access to the building in which the computer is located outside of normal operating hours when needed).
- 7. Selected sites must be willing to provide at least 10 minutes prior to the worship service for delivery of a health topic relating to health disparities once every other month.
- 8. Selected sites must have an existing health ministry (e.g., health screenings, participation in health fairs, outreach, etc.) and a parish nurse or an active nurse as a current member.
- 9. Selected sites must be willing to adapt a plan to continue the project when the funding cycle ends.
- 10. Selected sites must be in agreement to participate fully in the prescribed services outlined in the CHRIS Program (e.g. designate adequate and appropriate time for bi-monthly delivery of health topics and agree to health screenings and other related activities as prescribed in the project format).

Effectively addressing minority health disparities requires creative partnerships that involve [places of worship], the hallmark of the [population group] community. We hope you will want to join us in this important endeavor to change the lives of [population group] in our country's inner cities.

Applications for participation are now being accepted for consideration and should be completed and returned to [lead agency] by[date].

Sincer	ely,
CHRI	S Program Lead
Enc:	Application for Participation

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[Date]

[Addressee] [Address]

#### **SUBJECT:** Consumer Health Resource Information Service (CHRIS) Program

#### Congratulations!

[Place of Worship] is one of [#][inner-city][places of worship] that have been selected to participate in the Consumer Health Resource Information Service (CHRIS) Program, sponsored and funded by [funding angency(ies)]. We are pleased that you will be joining us in this exciting initiative to improve the health of our community.

You and the nurse who will participate in the CHRIS Program are invited to attend an orientation meeting on [day], [date] from [time] a.m. to [time] p.m. in the [location] located at [address]. Please have the nurse complete the enclosed Computer Skills Assessment Form and bring it to the meeting.

The meeting is being held for the following purposes:

- To provide an overview of the CHRIS Program
- To review the roles and responsibilities of the participating sites
- To answer your questions about the CHRIS Program
- To discuss the ministry of parish nursing (orientation to Parish Nurse Curriculum)

If you are unable to attend this meeting, please select a representative to attend in your place who will be working closely with the nurse in the program at your [place of worship]. Lunch will be provided.

If you have any questions or need additional information, please contact [name of program coordinator], program manager, at [phone number]. Again, congratulations on being selected to participate in the CHRIS Program.

We look forward to seeing you on [date of meeting].
Sincerely,
[Name], Program Coordinator

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[Date]

[Addressee] [Address]

#### **SUBJECT:** Consumer Health Resource Information Service (CHRIS) Program

Dear [Addressee],

Thank you for applying for participation in the Consumer Health Resource Information Service (CHRIS) Program, the faith-based initiative addressing minority health disparities in our community. Regrettably, we must inform you that your [place of worship] was not selected to serve as a host site for the program. Due to budget restrictions, we regrettably could select only [#] sites for full participation. However, we would be happy to share information about the program with you and, if you are interested, you may attend the NLM databases training that is being provided as a part of the program free of charge.

If you have any questions or need additional information, please contact [name], program manager, at [phone number].

We hope to see you on [date of meeting].
Sincerely,
[Name], Program Coordinator

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## Documentation and Reporting Guidelines and Forms

The tools in this section are designed for the collaborative approach, which involves recruiting (inviting) and selecting worship communities to participate as host sites in a large-scale CHRIS program.

### **Section V Contains:**

**Sample Timeline** 

**Program Coordinator Reporting Guidelines** 

**Program Coordinator Activity Reporting Form** 

**Program Activities Monthly Statistics Form** 

**Partnership Quarterly Reporting Form** 

All materials should display the CHRIS logo and the following statement:



## **Sample Timeline**

Note: This sample timeline assumes that if a group of organizations is conducting the program together, the partners have already been established. It also assumes funding sources have been identified and funding for the program has been secured.

Prior to implementing the program in your community, a parish nurse training provider should be located and contacted to determine what parish nurse training options are available and how this aspect of the program will be accomplished.

## **Phase I:** Months 1-3 (Preparatory)

#### Month 1

- Hold organizational planning meeting.
  - o Establish responsibilities of partners and/or program committee members.
  - o Determine number of host sites to be selected based on funding available.
  - o Identify a comprehensive list of possible sites.
  - o Review and modify site selection criteria based on the specific needs of your community.
  - Discuss and select program activities.
  - o Plan and schedule orientation meeting in month 2.
  - o Schedule parish nurse training dates in month 3.
  - o Review training materials and schedule dates for NLM online health database training during month 3.
- Prepare and send recruitment letters. [see template]
- Initiate media contact for coverage of program start-up activities.
- Submit monthly report to funding agency(ies).

- Hold monthly planning meeting.
  - o Review and select host sites from applications received.
  - o Select the six health topics to be presented bi-monthly. Establish how each topic will be researched and what materials will be provided for the presentations.
  - o Schedule date/location of press conference in month 4.
- Prepare and send selection letters and non-selection letters. Enclose computer skills assessment form for site representatives to complete and return at orientation meeting. [see templates]
- Hold orientation meeting with selected site faith leaders and representatives. Discuss responsibilities of host sites and provide guidance on presentation of health topics during

services. Faith leaders should have input. Discuss and provide guidance for monthly reporting of activities. [see "Parish Nurse Activity Reporting Guidelines" in toolkit]

- Visit selected host sites to further assess facilities for computer space, security, and storage of materials.
- Purchase computers and related office supplies for selected host sites to be delivered and installed by end of month 3.
- Coordinate Internet connections to be established by end of month 3.
- Prepare for training classes (parish nursing, computer/Internet skills, and NLM online health database classes).
- Prepare media materials for press conference announcing program start-up.
- Submit monthly report to funding agency(ies).

#### Month 3

- Hold monthly planning meeting.
  - o Coordinate media coverage of training classes and program start-up activities.
  - o Schedule dates for baseline health assessments in host sites' congregations.
  - o Discuss preparations for training classes.
- Hold first quarterly meeting with collaborative partners for program assessment.
- Hold Parish Nurse training classes for site representatives (including satellite sites that choose to participate).
- Hold Internet skills and NLM online health databases training classes for site representatives (including satellite sites that choose to participate).
- Meet with host site representatives to discuss program activities, review host site representative responsibilities including monthly reporting requirements, and answer questions.
- Submit monthly report to funding agency(ies).

### Phase II: Months 4-6

- Hold monthly planning/update meeting.
  - o Discuss framework for health fair/conference and set tentative date in month 8.
  - o Identify potential sites for health fair/conference.
- Hold press conference announcing program start-up, goals, etc.
- Schedule and begin baseline health assessments in host sites' congregations.
- First bi-monthly health topic presentations at host sites.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

#### Month 5

- Hold monthly planning/update meeting.
- Meet with faith leaders for feedback.
- Conduct a host site visit.
- Continue planning health fair/conference. Confirm date. Secure facility and plan agenda/activities.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

#### Month 6

- Hold monthly planning/update meeting.
  - o Continue planning health fair/conference. Develop materials.
- Hold second quarterly meeting with collaborative partners for program assessment.
- Second bi-monthly health topic presentations at host sites.
- Provide the Train-the-Trainer workshop on AIDS testing and screening for participating nurses.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

### Phase III: Months 7-11

#### Month 7

- Hold monthly planning/update meeting.
  - o Begin plans for media coverage of the health fair/conference.
- Meet/contact faith leaders for feedback.
- Conduct a host site visit.
- Collect health screening information (e.g., numbers, screening type) from host sites.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

- Hold monthly planning/update meeting.
- Third bi-monthly health topic presentations at host sites.
- Complete evaluation of baseline health assessments.
- Hold health fair/conference. Document attendance. List participants.
- Collect and evaluate monthly activity sheets from site representatives.

• Submit monthly report to funding agency(ies).

#### Month 9

- Hold monthly planning/update meeting.
- Hold third quarterly meeting with collaborative partners for program assessment.
- Meet/contact faith leaders for feedback.
- Conduct a host site visit.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

#### Month 10

- Hold monthly planning/update meeting.
- Fourth bi-monthly health topic presentations at host sites.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

#### Month 11

- Hold monthly planning/update meeting.
  - o Begin plans for second health assessment screenings to take place in month \_\_\_\_.
- Meet/contact faith leaders for feedback.
- Conduct a host site visit.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

### Phase IV: Months 12-16

- Hold monthly planning/update meeting.
- Fifth bi-monthly health topic presentations at host sites.
- Hold fourth quarterly meeting with collaborative partners for program assessment.
  - Each collaborative partner participating in the health conference will provide input (written summary on activities, tasks, observations) for the summary report to funding agency(ies).
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

#### Month 13

- Hold monthly planning/update meeting.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

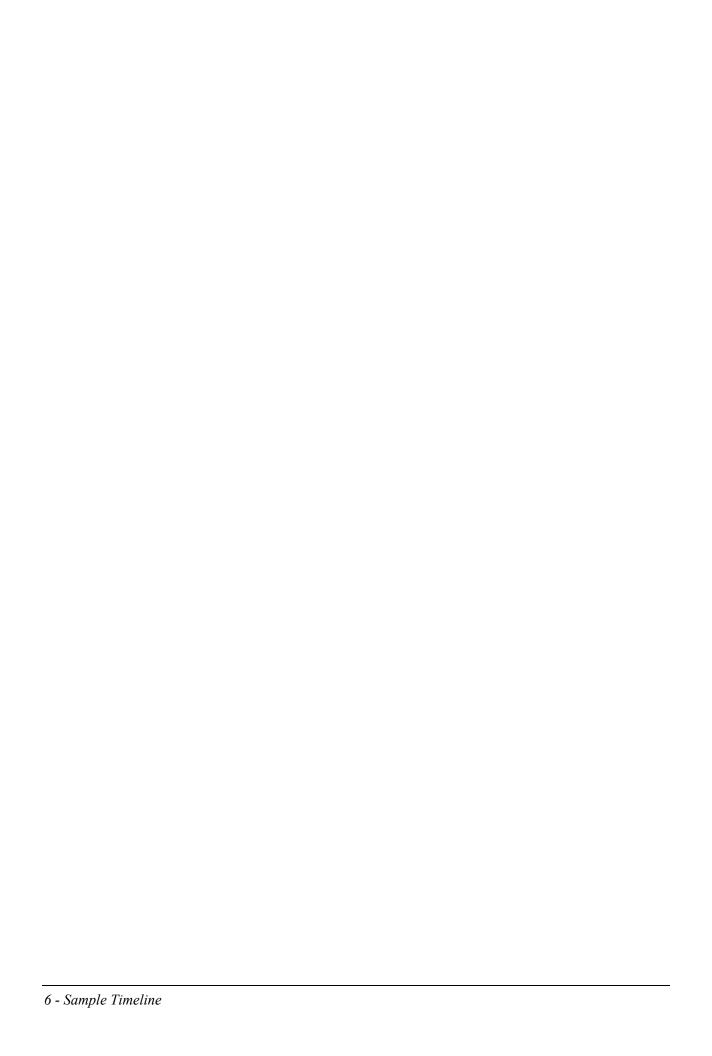
#### Month 14

- Hold monthly planning/update meeting.
- Sixth bi-monthly health topic presentations at host sites.
- Meet/contact faith leaders for feedback and will conduct survey.
- Begin program phase-out.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

#### Month 15

- Hold monthly planning/update meeting.
- Hold final quarterly meeting with collaborative partners for program assessment.
- Conduct close-out interviews with collaborative partners, host site faith leaders, and host site representatives.
- Collect and evaluate monthly activity sheets from site representatives.
- Submit monthly report to funding agency(ies).

- Hold monthly planning/update meeting.
- Begin outcome evaluation of CHRIS program.





# **Program Coordinator Reporting Guidelines**

### **Activity Reporting Form**

The Program Coordinator Activity Reporting form is used to document program activities up to a total of 40 hours per month based on the sample budget provided. The documentation of activities and services is used by the project manager for the purpose of quality assurance. Information submitted allows for monitoring of activities on a regular basis and any timely adjustment of activities deemed necessary. **It should always be submitted with the nurse's timesheet**.

Only 40 hours of activities per month should be recorded on this form. Any additional activities can be recorded on the Parish Nurse Monthly Statistics form. You should stress to the nurses that they not document any extra activities on the Activity Reporting Form.

### **Monthly Statistics Form**

The Parish Nurse Monthly Statistics form is used to document **cumulative** monthly information regarding activities and services. It is necessary and useful for capturing the full picture of collective monthly activities, as well as allowing the nurses to document further any qualitative information. This form is also to be used to document any health screenings, meetings, NLM database and other Internet searches, research on educational topics, and the outcomes of these activities.

## **Interview/Tally Form**

The Interview/Tally Form is used by the nurses to document **individual** information, activities, and services. It is also used to document any anecdotal comments, observations, and additional information that will be useful to the assessment of CHRIS Program activities and services.

Helpful Tip: Frequent documentation will make it easier to transfer the information to the monthly reports. Activities should be recorded daily or weekly.

Note: Please document the number of activities and services (e.g., 3x phone calls, 10x blood pressure checks). Also, please try to document activities on the computer by using the computerized forms.



# Consumer Health Resource Information Service (CHRIS) Program Program Coordinator WEEKLY Activity Report



resources sea	of this form is to document program coordinate arched and events being planned. For events tha ument the number of people participating, resou	t took place during the week (such	as weekly blood p	
Complete thi	is form electronically and e-mail it to:	(E-mail:	– Tel:	).
	ogram coordinators are expected to spend a min			
	<u> </u>			
Host Site:				
Program Co	oordinator:	Date:		
Date	Description of Activity			



<b>Host Site:</b>	

## **Program Coordinator Monthly Reporting Form**

Ionth:	Year
lame:	

The purpose of this form is to document cumulative program activities and services and to capture qualitative information. Use this form to record individual consultations, health concerns, referrals, health screenings, meetings, Internet searches for health information, health education topics presented during worship or other location, and the outcomes of these activities.

I. INDIVIDUAL CONSULTATIONS (indicate number of each)
VISITS:InitialFollow-up
LOCATION:ChurchOfficeHospitalHomeNursing HomePhone
GENDER:MaleFemale ETHNICITY:African AmericanCaucasianOther
AGES:0-1213-1718-3031-6465 & over
II. HEALTH CONCERNS EXPRESSED
PHYSIOLOGICAL:Weight Loss/GainOverweight/ObesityCancerDiabetesHypertensionHeart DiseaseStrokeInfant MortalityImmunizationsMental HealthKidney DiseaseNeurologicalGeneral Health/WellnessOther
RESPIRATORY:AsthmaBronchitisInfluenzaPneumoniaEmphysemaTuberculosisOther
AUTOIMMUNE:ArthritisRheumatoid ArthritisSclerodermaLupusOther
PSYCHOSOCIAL/SPIRITUAL:SpiritualGrief/Loss/DeathTransitions/AgingHospitalizationParentingMental HealthOther
HEALTH-RELATED BEHAVIORS:Diet/NutritionPhysical ActivityMedicationsTobacco UseSubstance AbuseRisky Sexual BehaviorFamily PlanningOther
ENVIRONMENTAL FACTORS:Medical AccessFinancesLiving ArrangementSafety/HousingInjury/ViolenceOther
SEXUALLY TRANSMITTED DISEASES:HIV/AIDSHepatitis AHepatitis BOther



C ONSUMER H EAITH R ESOURCE I NFORMATION S ERVICE		Host Site:	Month:		_ Year				
III. REFERI	III. REFERRALS								
SOURCE:	Self	Pastoral Staff	Physician	_Other Health Care l	Provider	_Other			
REFERRED	то:	Pastoral StaffPl	nysicianOthe	r Health Care Provide	erOthe	r			
INTERVENTI	ONS:	_Health Education/Guid	lance Counseling						
		_Case Management (coo	ordination/advocacy/r	eferral					
		_Surveillance (detection	/measurement/monito	oring)					
IV. HEALT	H SCREE	NINGS PROVIDED							
DATE	GROUP/LO	OCATION	TYPE OF SCREENING	# SCREENED	# ABNORMAL	HOURS			
X7 DI ANINI	NC/TIDD 4	TE MEETINGS III	D.						
DATE		TE MEETINGS HEL I (ministry team, minister,		AND PURPOSE OF MEET	TING	HOURS			



Host Site:		
	Month:	Year

VI. NLM DATABASE AND OTHER INTERNET SEARCHES				
DATE	NAME OF ONLINE RESOURCE AND HEALTH TOPIC(S) SEARCHED HO			
		·		
VII. HEA	LTH EDUCATION TOPICS PRESENTED			
DATE	TOPIC AND WHERE PRESENTED	HOURS		

VII. HEALTH EDUCATION TOPICS PRESENTED				
DATE	TOPIC AND WHERE PRESENTED	HOURS		

VIII. SPECIFIC OUTCOMES OF THIS MONTH'S ACTIVITIES	



**Comment(s):** 

Partner Organization:	
-----------------------	--

## CHRIS Partnership Reporting Form Name:

Reporting Dates:	 to	
Vamas		

The purpose of this form is to document the chronology of partner activities for the quarterly reporting dates.
Please submit this form by fax to or by e-mail to
Date:
Activity Name:
Description:
Outcome(s):
Comment(s):
Date:
Activity Name:
Description:
Outcome(s):
Comment(s):
Date:
Activity Name:
Description:
Outcome(s):
Comment(s):
Date:
Activity Name:
Description:
Outcome(s):



**Comment(s):** 

C ONSUMER H EALTH R ESCURCE I NFORMATION S ERVICE	Partner Organization:	Reporting Dates:	to
Date:			
<b>Activity Name:</b>			
Description:			
Outcome(s):			
Comment(s):			
Date:			
<b>Activity Name:</b>			
<b>Description:</b>			
Outcome(s):			
Comment(s):			
Date:			
<b>Activity Name:</b>			
Description:			
Outcome(s):			
Comment(s):			
Date:			
<b>Activity Name:</b>			
<b>Description:</b>			
Outcome(s):			



## **Evaluation Instruments**

The tools in this section are designed for the collaborative approach, which involves recruiting (inviting) and selecting worship communities to participate as host sites in a large-scale CHRIS program.

## **Section VI Contains:**

**Faith Community Follow-up Questionnaire** 

**Faith Leader Follow-up Questionnaire** 

Partnership Follow-up Questionnaire

All materials should display the CHRIS logo and the following statement:

## **CHRIS Program Faith Community Follow-up Questionnaire**



DEADLINE FOR SUBMISSION:		
Host Site:	Interviewer:	
	Date:	

- 1. Do you feel that the bi-monthly health topics that were provided through the CHRIS Program have increased your awareness of minority health issues?
- 2. Has the overall health information you received during the CHRIS Program resulted in positive changes in your health habits or lifestyle?
- 3. During the CHRIS Program, did you participate in any health screenings (e.g. blood pressure checks, weighin, diabetes testing, and HIV/AIDS testing)? If so, which one and how often?
- 4. What projects or programs would you like to see initiated under your health ministry in the coming year?
- 5. Do you wish for your church to continue the CHRIS Program?
- 6. Do you know the name of the federal organization that funded the CHRIS Program?
- 7. Do you have any comments that you would like to make about the CHRIS Program?

# **CHRIS Program Faith Leader Follow-up Questionnaire**



EADLINE FOR SUBMISSION:		
ost Site:	Name:	
	Date:	
Were you pleased with the CHRIS Program Coordinator's se	rvices?	
Were the program activities and services provided by the program coordinator what you expected?		
Has the overall health information you received during the Cyour health habits or lifestyle? Yes No	HRIS Program resulted in positive changes in	
In general, what are your thoughts about the program?		
Do you feel that the membership was receptive to the program	m?	
Do you feel that the membership benefited from the program	?	
	Were you pleased with the CHRIS Program Coordinator's see  Were the program activities and services provided by the pro  Has the overall health information you received during the C your health habits or lifestyle? Yes No  Please describe:  In general, what are your thoughts about the program?  Do you feel that the membership was receptive to the program	

7. What specific recommendations or comments do you have for improving the program?

# **CHRIS Program Coordinator Follow-up Questionnaire**



## DEADLINE FOR SUBMISSION:\_\_\_\_

Host Site:		Interviewer:	
		Date:	
1.	What were your top reasons for participating in the CHRIS Pro	gram?	
2.	How well did you understand the program's mission, goals, and Uery Well Well Somewhat Not at all	d objectives?	
3.	Do you feel that the program was beneficial for your church? <i>Please explain your answer:</i>	☐ Yes ☐ No	
4.	What were the good points about the program?		
5.	What were the bad points about the program?		
6.	Do you feel that MEO adequately managed the program in coo <i>Please explain your answer:</i>	rdination with you?  Yes  No	
7.	Overall, how satisfied were you with MEO's management?  Extremely Satisfied Satisfied Dissatisfied	Extremely Dissatisfied	
8.	In what ways could MEO improve the program?		
9.	Would you consider working with MEO on another program?		
10.	Would you recommend collaborating with MEO to a colleague organization?  Yes No	or other community-based health	
	Please explain your answer:		
11.	What message would you give to MEO upon departure?		