

# Community Health Assessment, Policy Tracking & Environmental Response Tool



## (NJ CHAPTER) -Community Institution/Organization Sector



The Community Institution/Organization Sector includes entities within the community that provide a broad range of human services and access to facilities, such as:

- 1) Daycare centers,
- 2) Faith-based organizations,
- 3) Health care organizations (non-hospital),
- 4) Pharmacies,
- 5) Senior centers,
- 6) Youth servicing organization,

### Directions

In the two response columns in each of the following modules (Healthy and Safe Physical Environments, Active Living and Healthy Eating, Tobacco-Free Living, High Impact Quality Clinical and Preventive Services, and Social and Emotional Wellness) please indicate the appropriate number (#) from the scales on this page that best represents your answer for each item.

Provide both a Policy Response # and Environment Response # for each statement in the appropriate column. Response # 99 should be used only when the policy or environmental change strategy is not applicable at your site (for example, stair promotion not suitable in one-story building).

**Definitions for this sector begin on page 10.**

### Scale

Response #	Policy	Environment
1	Not identified as problem	Elements not in place
2	Problem identification/gaining agenda status	Few elements in place
3	Policy formulation and adoption	Some elements are in place
4	Policy implementation	Most elements are in place
5	Policy evaluation, adjustment and/or termination	All elements in place
99	Not applicable	Not applicable

**Below we have provided examples of how you might apply the Scale above using real policy and environmental strategies.**

Response #	Policy	Environment
1	<p>This stage represents the time when the issue has not yet been identified as a concern or a problem.</p> <p>For example, the institution/organization has never discussed a policy promoting stairwell use at their location; complaints have never been filed and issues have not been raised by patrons.</p>	<p>At this point, no elements are in place in the environment.</p> <p>For example, there are no appropriate signs or maps to locate stairs, no positive visual appeal of the stairwell including new paint, lighting, carpet, or artwork, no posted motivational signs, and no music.</p>
2	<p>This stage involves getting a problem onto the radar screen of the authoritative body that must deal with the issue. This is usually done when the issue or problem is categorized as a social or public problem.</p> <p>For example, the institution/organization discusses instituting a stairwell promotion policy after complaints are filed by patrons who do not feel safe using the stairs because they are dark and uninviting; policy implications and issues are being considered.</p>	<p>At this point, only a few elements are in place in the environment.</p> <p>For example, there are appropriate signs or maps to locate stairs, but there is no positive visual appeal of the stairwell including new paint, lighting, carpet, or artwork, no posted motivational signs, and no music.</p>
3	<p>This stage involves analyzing policy goals and solutions, the development or creation of alternative recommendations to resolve or address the identified public problem, and final selection of a policy.</p> <p>For example, the institution/organization developed and approved the policy, but it has not yet been implemented. It will be implemented in the next fiscal year.</p>	<p>At this point, some elements are in place in the environment.</p> <p>For example, there are appropriate signs or maps to locate stairs, and there is positive visual appeal of the stairwell including new paint, lighting, carpet, or artwork, but there are no posted motivational signs and no music.</p>
4	<p>This occurs within organizations directed to carry out adopted policies. Implementation begins once a policy has been formulated and adopted, and administrators have made a decision about how to deploy necessary resources (human and financial) to actualize the policy.</p> <p>For example, the stairwell promotion policy was established and passed last year by the institution/organization, communicated to all patrons, and implemented this year. The end of this year will be the review and comment period of the policy.</p>	<p>At this point, most elements are in place in the environment.</p> <p>For example, there are appropriate signs or maps to locate stairs, there is positive visual appeal of the stairwell including new paint, lighting, carpet, or artwork, and there are posted motivational signs, but there is no music.</p>
5	<p>This stage involves determining to what extent the policy has been enforced, and what occurred as a result of the policy. Based on the evaluation results, adjustments can be made to the current policy to ensure effectiveness.</p> <p>For example, the stairwell promotion policy was in place last year, and a comment period was held. The policy was revamped, and is now implemented with revisions including increased funding for stairwell improvements and promotional items.</p>	<p>At this point, all elements are in place in the environment.</p> <p>For example, there are appropriate signs or maps to locate stairs, there is positive visual appeal of the stairwell including new paint, lighting, carpet, or artwork, there are posted motivational signs, and there is music.</p>
99	<p>This type of policy is not appropriate for this community institution/organization.</p>	<p>This type of environmental change strategy is not appropriate for this community institution/organization.</p>

## Community Institution/Organization: Demographics

**General Instructions:** Please indicate your answer by marking an 'X' or the correct information in the appropriate box for your response. Please use Census.gov and the CDC CTG Designated Rural Area List to complete this section.

<b>Name of organization:</b>
<b>Name of interviewee:</b>

<b>Best description of the community setting</b> (choose ONE only):	
Rural*	
Suburban	
Urban	
<b>*Please see CDC's CTG Designated Rural Areas List</b>	

<b>The median household income of the community</b> (choose the best estimated category):	
< \$25,000	
\$25,000 - \$34,999	
\$35,000 - \$49,999	
\$50,000 - \$74,999	
\$75,000 - \$99,999	
\$100,000 - \$124,999	
≥ \$125,000	

<b>Type of Institution/Organization</b> (choose ONE type only):	
Senior Center	
Faith-based Organization	
Daycare Center	
Youth Servicing Organization	
Pharmacy	
Health-Care Organization (Non-Hospital)	

<b>Organization Type</b> (choose ONE only):	
Private	
Public	

<b>Profit Type</b> (choose ONE only):	
For-Profit	
Not-for-Profit	

<b>Target Population</b> (choose ALL that apply):	
Children/Youth* (ages: <18)	
Adults (ages: 18-64)	
Seniors/Older Adults (ages: 65+)	
Other, please specify:	
<b>* If serving children/youth, what grades being served</b> (choose ALL that apply):	
Preschool	
Elementary School	
Middle School	
High School	

<b>Community Institution Questions</b>	
Do you offer onsite bike parking?	
Do you have onsite fitness equipment or a gymnasium to promote physical activity?	

<b>Total number of individuals being served</b>	
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## Community Institution/Organization: Healthy and Safe Physical Environments

- Based on knowledge of your organization, please use the Policy and Environment scales included in the “Directions” on page 1 to indicate the most appropriate responses for each statement.
- Provide both a Policy Response # and Environment Response # for each statement in the appropriate column.
- You may use the “comments” section to provide additional information.
- Response # 99 should be used only when the policy or environmental change strategy is not applicable at your site (e.g., stair promotion not suitable in one-story building).

**For definitions of underlined terms, see page 10.**

<i><b>TO WHAT EXTENT does your organization address the following in policies:</b></i>	<b>Policy Response #</b>	<b>Environment Response #</b>
1. Provide a safe area outside (e.g., through lighting, signage, crime watch) or a walking path on or near building property to allow constituents and employees to walk or be physically active?		
2. Enhance access to public transportation (e.g., bus stops, light rail stops, van pool services, subway stations) within <u>reasonable walking distance</u> ?		
3. Provide bicycle parking (e.g., bike rack, shelter) for patrons and employees?		

**Describe a successful environmental strategy, policy or practice in this area that you would like to highlight and provide more information about.** Provide a brief description of the policy, who it targets or impacts, and how it makes your community institution/organization healthier or safer.

## Community Institution/Organization: Active Living and Healthy Eating

- Based on knowledge of your organization, please use the Policy and Environment scales included in the “Directions” on page 1 to indicate the most appropriate responses for each statement.
- Provide both a Policy Response # and Environment Response # for each statement in the appropriate column.
- You may use the “comments” section to provide additional information.
- Response # 99 should be used only when the policy or environmental change strategy is not applicable at your site (e.g., stair promotion not suitable in one-story building).

**For definitions of underlined terms, see page 10.**

<i><b>TO WHAT EXTENT does your organization address the following in policies:</b></i>	<b>Policy Response #</b>	<b>Environment Response #</b>
1. Institute <u>healthy food and beverage options</u> in vending machines, in onsite cafeteria, and food venues?		
2. Institute healthy food purchasing (e.g., to reduce the caloric, sodium, and fat content of foods offered) for cafeteria and onsite food venues?		
3. Provide safe, unflavored drinking water at no cost to patrons?		
4. Prohibit using <u>food as a reward or punishment</u> ?		
5. Provide direct support (e.g., money, land, pavilion, sponsorship, advertising) for supporting community-wide nutrition opportunities (e.g., farmers' markets, <u>community gardens</u> )?		
6. Utilize <u>culturally appropriate</u> communication strategies (i.e., promotional materials in different languages, culturally relevant messaging) to promote active living and healthy eating?		
7. Institute healthy food preparation practices (e.g. steaming, lowfat, low salt, limited frying) for cafeteria and onsite food preparation venues?		
8. Promote stairwell use (e.g., make stairs appealing, post motivational signs near stairs to encourage physical activity)?		
9. Promote access to onsite fitness center, gymnasium, or physical activity classes?		
10. Provide access to a broad range of competitive and noncompetitive physical activities that help to develop the skills needed to participate in lifetime physical activities?		
11. Restrict <u>screen time</u> to less than 2 hours per day for children between 2 and 18 years of age?		
12. Have a <u>wellness coordinator</u> that focuses on active living and healthy eating strategies for your patrons?		

**Describe a successful environmental strategy, policy or practice in this area that you would like to highlight and provide more information about.** Provide a brief description of the policy, who it targets or impacts, and how it makes your community institution/organization healthier or safer.

## Community Institution/Organization: Tobacco-Free Living

- Based on knowledge of your organization, please use the Policy and Environment scales included in the “Directions” on page 1 to indicate the most appropriate responses for each statement.
- Provide both a Policy Response # and Environment Response # for each statement in the appropriate column.
- You may use the “comments” section to provide additional information.
- Response # 99 should be used only when the policy or environmental change strategy is not applicable at your site (e.g., stair promotion not suitable in one-story building).

**For definitions of underlined terms, see page 11.**

<i><b>TO WHAT EXTENT</b> does your organization address the following in policies:</i>	<b>Policy Response #</b>	<b>Environment Response #</b>
1. Institute a <u>smoke-free policy 24/7 for outdoor public places</u> ?		
2. Institute a <u>tobacco-free policy 24/7 for outdoor public places</u> ?		
3. Implement a <u>referral system</u> to help patrons to access tobacco cessation resources and services, such as a <u>quitline</u> (e.g., 1-866-NJ-STOPS or 1-800-QUIT-NOW)?		

**Describe a successful environmental strategy, policy or practice in this area that you would like to highlight and provide more information about.** Provide a brief description of the policy, who it targets or impacts, and how it makes your community institution/organization healthier or safer.

## Community Institution/Organization: High Impact Quality Clinical and Other Preventive Services

- Based on knowledge of your organization, please use the Policy and Environment scales included in the “Directions” on page 1 to indicate the most appropriate responses for each statement.
- Provide both a Policy Response # and Environment Response # for each statement in the appropriate column.
- You may use the “comments” section to provide additional information.
- Response # 99 should be used only when the policy or environmental change strategy is not applicable at your site (e.g., stair promotion not suitable in one-story building).

**For definitions of underlined terms, see page 12.**

<b><i>TO WHAT EXTENT does your organization address the following in policies:</i></b>	<b>Policy Response #</b>	<b>Environment Response #</b>
1. Provide access to chronic disease self-management programs (e.g., weight loss program, <u>Take Control of Your Health</u> , etc)?		
2. Provide routine screening, follow-up counseling and education to patrons to help address chronic diseases and related risk factors (e.g., poor nutrition, physical inactivity, hypertension, high cholesterol, elevated blood sugar levels, tobacco use and exposure)?		
3. Promote chronic disease prevention to patrons (e.g., post signs reminding patrons to get blood pressure checked, quit smoking, avoid secondhand smoke)?		
4. Promote chronic disease prevention to patrons in a <u>culturally appropriate</u> manner (e.g., post signs reminding patrons to get blood pressure checked, quit smoking, avoid secondhand smoke)?		
5. Use health care extenders (i.e., community health workers, patient navigators, pharmacists) in prevention messaging or services?		
6. Offer financial (or other) incentives for patrons to adopt behaviors related to chronic disease prevention?		
7. Participate in community coalitions and partnerships (e.g., food policy council, tobacco-free partnership, neighborhood safety coalition) to address chronic diseases and related risk factors (e.g., poor nutrition, physical inactivity, tobacco use and exposure)?		

**Describe a successful environmental strategy, policy or practice in this area that you would like to highlight and provide more information about.** Provide a brief description of the policy, who it targets or impacts, and how it makes your community institution/organization healthier or safer.

## Community Institution/Organization: Social and Emotional Wellness

- Based on knowledge of your organization, please use the Policy and Environment scales included in the “Directions” on page 1 to indicate the most appropriate responses for each statement.
- Provide both a Policy Response # and Environment Response # for each statement in the appropriate column.
- You may use the “comments” section to provide additional information.
- Response # 99 should be used only when the policy or environmental change strategy is not applicable at your site (e.g., stair promotion not suitable in one-story building).

**For definitions of underlined terms, see page 10.**

<i><b>TO WHAT EXTENT</b> does your organization address the following in policies:</i>	<b>Policy Response #</b>	<b>Environment Response #</b>
1. Have a <u>wellness coordinator</u> that focuses on the social and emotional wellness of your patrons?		
2. Have a mission statement (or a written policy statement) that includes the support or commitment to patron health and well-being, specifically social and emotional wellbeing?		
3. Have a policy to refer patrons to substance abuse services if abusing alcohol or substances on premises?		
4. Offer life-skills programs for parents, families and youth (i.e., parenting support, general counseling)?		
5. Offer life-skills programs for parents, families and youth (i.e., parenting support, general counseling) in a <u>culturally appropriate</u> manner for the community population?		
6. Incorporate mental health and emotional wellness components within current programs and services?		
7. Provide anti-bullying policies that go beyond school policies (e.g., organized recreational activities)?		
8. Institute a policy addressing sexual abuse in regards to adults working with children?		

**Describe a successful environmental strategy, policy or practice in this area that you would like to highlight and provide more information about.** Provide a brief description of the policy, who it targets or impacts, and how it makes your community institution/organization healthier or safer.

## Dialogue Question

Is there any information we can provide you on additional policies that you might want to adopt?

## ***Definitions:***

**Policy:** Laws, regulations, rules, protocols, and procedures, designed to guide or influence behavior. Policies can be either legislative or organizational in nature. Policies often mandate environmental changes and increase the likelihood that they will become more permanent (institutionalized or sustainable). Examples of legislative policies include taxes on tobacco products, provision of county or city public land for green spaces or farmers' markets, regulations governing the National School Lunch Program, or clean indoor air laws. Examples of organizational policies include schools requiring healthy food options for all students, a district ban on the sale of less than healthy foods throughout the school day, menu labeling in restaurants, required quality assurance protocols or practices (e.g., clinical care processes), or a human resources policy that requires healthy foods to be served at meetings.

**Environment:** Physical, social, or economic settings designed to influence people's practices and behaviors. Examples of alterations or changes to the environment include:

**Physical:** Structural changes or the presence of programs or services, including the presence of healthy food choices in restaurants or cafeterias, improvements in the built environment to promote walking (e.g., walking paths), the availability of smoking cessation services to patients or workers, and the presence of comprehensive school health education curricula in schools.

**Social:** A positive change in attitudes or behavior about policies that promote health or an increase in supportive attitudes regarding a health practice, including an increase in favorable attitudes community decision makers have about the importance of nonsmoking policies or an increase in non-acceptance of exposure to secondhand smoke from the general public.

**Economic:** The presence of financial disincentives or incentives to encourage a desired behavior, including paying higher prices for tobacco products to decrease their use or the provision of nonsmoker health insurance discounts to encourage smoking cessation

### **Healthy and Safe Physical Environments Module (Pg. 4)**

**Reasonable walking distance:** One mile is considered a reasonable distance to walk. More information can be found at: [http://www.cdc.gov/pcd/issues/2008/jul/pdf/07\\_0087.pdf](http://www.cdc.gov/pcd/issues/2008/jul/pdf/07_0087.pdf)

### **Active Living and Healthy Eating Module (Pg. 5)**

**Healthy food and beverage options:** Healthy foods are fruits, vegetables, whole grains, and related combination products, and nonfat and low-fat dairy that are limited to 200 calories or less per portion as packaged. Healthy beverages are water without flavoring, additives, or carbonation, low-fat and nonfat milk, 100% fruit juice, and caffeine-free. More information can be found at:

- Dietary Guidelines for Americans, 2005:  
<http://www.health.gov/dietaryguidelines/dga2005/document/pdf/DGA2005.pdf>
- Institute of Medicine, Nutrition Standards for Foods in Schools:  
<http://www.iom.edu/~media/Files/Report%20Files/2007/Nutrition-Standards-for-Foods-in-Schools-Leading-the-Way-toward-Healthier-Youth/factsheet.ashx>

**Food as a reward or punishment:** An example of using food as a reward is providing candy or fast-food coupons to students or patrons because they have behaved well or met an academic or fundraising goal. An example of withholding food as punishment is not giving one student or patron a snack or meal that is offered to all others because of his or her inappropriate behavior. More information can be found at:  
<http://www.cdc.gov/HealthyYouth/SHI>

**Community gardens:** The process of growing, processing, and distributing food in and around cities and suburbs or urban agriculture provides individuals and families with many benefits. Advantages of urban agriculture include an alternative source of fresh produce, improved life satisfaction, and a way to preserve cultural identity and traditions. Most importantly, community gardening and urban farming have the potential to provide a supplemental source of fruits and vegetables. Urban agriculture may be done on land owned by a community group, institution, municipality, land trust, or some other entity. Food grown on these plots can be kept for personal consumption or used to procure supplemental income. Additional benefits of urban agriculture beyond food provision include building job skills, improving self-esteem, and contributing to community revitalization. Characteristics of community gardening initiatives comprise: land and supply procurement; organization of participants; reduction of barriers to fresh produce; production of primary or alternative source of fresh produce; and entrepreneurial gardens.

**Culturally appropriate:** Culturally appropriate community programs, literature or interventions are defined as meeting each of the following characteristics: (a) The intervention is based on the cultural values of the group, (b) the strategies that make up the intervention reflect the subjective culture (attitudes, expectancies, norms) of the group, and (c) the components that make up the strategies reflect the behavioral preferences and expectations of the group's members.

**Screen time:** Time spent watching television, playing video games, or engaging in non-educational computer activities.

**Wellness coordinator and/or wellness committee:** This position or committee organizes and develops programs and activities to improve the health of a community or workplace. The coordinator has ability to educate and inspire people to recognize the rewards of good health and work toward achieving those goals. Working with either human resources or community health methods a coordinator would utilize to improve health include educational programs, examining policies or insurance plans, implementing physical health and nutrition programs, screenings or other preventive services.

### **Tobacco-Free Living Module (Pg. 6)**

**Smoke free policy 24/7 for outdoor public places:** Prohibit smoking in all outdoor areas of the institution/organization (e.g., walkways, parking lots, facility-owned vehicles) and at sponsored events around the clock 24 hours a day, 7 days a week by anyone (e.g., patrons, employees, visitors). Smoke-free policy can be extended to private residences used as institutions/organizations to provide childcare, foster care, adult care or similar social services. The policy does not apply to the use of tobacco for cultural or traditional purposes. More information can be found at:

- <http://www.thecommunityguide.org/tobacco/worksite/smokefreepolicies.html>
- <http://www.tobaccofreekids.org/research/factsheets/pdf/0144.pdf>
- [http://www.cdc.gov/tobacco/basic\\_information/secondhand\\_smoke/guides/business/index.htm](http://www.cdc.gov/tobacco/basic_information/secondhand_smoke/guides/business/index.htm)
- <http://www.surgeongeneral.gov/library/secondhandsmoke/factsheets/factsheet5.html>

**Tobacco free policy 24/7 for outdoor public places:** Prohibit the use of all tobacco products in all outdoor areas of the institution/organization (walkways, parking lots, facility-owned vehicles) and at sponsored events around the clock 24 hours a day, 7 days a week by anyone (e.g. patrons, employees, visitors). Tobacco-free policy can be extended to private residences used as institutions/organizations to provide childcare, foster care, adult care or similar social services. The policy does not apply to the use of tobacco for cultural or traditional purposes. More information can be found at:

- <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/tobacco/index.htm>
- <http://www.thecommunityguide.org/tobacco/worksite/index.html>

**Referral system:** A resource to which tobacco users are referred for more intensive interventions that supplement the tobacco-use treatment delivered by a healthcare provider. Users can be referred to programs, resources or services within the healthcare delivery system itself or in the larger community. A quitline, the

American Lung Association, and the American Cancer Society are examples of possible referral resources. Additional information can be found at: <http://www.prevent.org/The-Community-Health-Promotion-Handbook/Healthcare-Provider-Reminder-Systems.aspx>

**Quitline:** An information and counseling service that offers telephone support for people who want to quit using tobacco. Some quitlines offer additional services, such as nicotine replacement therapy, online cessation information and programs, and referral to tobacco-use treatment programs in the community. Quitlines that have proactive services provide clients with multiple scheduled follow-up sessions with quitline counselors during the quit process that do not need to be initiated by the client. More information can be found at: <http://www.nj.gov/njhealthlink/programdetails/njquitline.html?pageID=NJ>

### **High Impact Clinical and Other Preventive Services Module (Pg. 7)**

**Take Control of Your Health:** New Jersey based peer-led evidence-based workshops that give older adults with chronic conditions and/or their caregivers the knowledge, skills and confidence to take a more active role in their health care. Participants report the following benefits: Improvements in physical activity, stamina and pain control; better communication with their health care providers; and reduced doctor and hospital visits. For more information visit <http://www.state.nj.us/health/senior/cdsmp/index.shtml>

**Culturally appropriate:** Culturally appropriate community programs, literature or interventions are defined as meeting each of the following characteristics: (a) The intervention is based on the cultural values of the group, (b) the strategies that make up the intervention reflect the subjective culture (attitudes, expectancies, norms) of the group, and (c) the components that make up the strategies reflect the behavioral preferences and expectations of the group's members.

### **Social and Emotional Wellness (Pg. 8)**

**Wellness coordinator and/or wellness committee:** This position or committee organizes and develops programs and activities to improve the health of a community or workplace. The coordinator has ability to educate and inspire people to recognize the rewards of good health and work toward achieving those goals. Working with either human resources or community health methods a coordinator would utilize to improve health include educational programs, examining policies or insurance plans, implementing physical health and nutrition programs, screenings or other preventive services.

**Culturally appropriate:** Culturally appropriate community programs, literature or interventions are defined as meeting each of the following characteristics: (a) The intervention is based on the cultural values of the group, (b) the strategies that make up the intervention reflect the subjective culture (attitudes, expectancies, norms) of the group, and (c) the components that make up the strategies reflect the behavioral preferences and expectations of the group's members.