



NJ Community Health Assessment, Policy Tracking, & Environmental Resources Tool (NJ CHAPTER)



User Guide | April 2015



The New Jersey Community Health Assessment, Policy Tracking, & Environmental Resources Tool (NJ CHAPTER) is based on the Centers for Disease Control and Prevention *Community Health Assessment and Group Evaluation (CHANGE) Action Guide: Building a Foundation of Knowledge to Prioritize Community Needs.*

Atlanta: U.S. Department of Health and Human Services, 2010.

For detailed information on the background of CHANGE visit:

www.cdc.gov/HealthyCommunitiesProgram

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FORWARD...

The New Jersey Prevention Network (NJPN) is a public health agency working to prevent substance abuse, addiction and other chronic diseases by building capacity among professionals, fostering positive collaboration among providers, and strengthening the field of prevention through the use of evidence-based practices and strategies. In order to help further that mission, we create tools and resources for our partners and the community to use. As part of the work conducted for the CDC's Community Transformation Grant project we created a health and policy assessment tool to drill down into the community to highlight areas of need that might not be as apparent looking at the empirical data available on the state and county level. These efforts continue to acknowledge and build upon the many efforts already occurring within New Jersey and to avoid duplication.

To create this tool, we used the Community Health Assessment aNd Group Evaluation (CHANGE) tool that was been developed by CDC as a framework for part of our project. The purpose of the CHANGE tool is to help communities identify and monitor important policy, systems, and environmental changes over time and help determine various approaches being used in New Jersey related to policy and systems changes. Through our thorough review of this tool, we made some significant changes to create a tool more appropriate for the use of the tool here in New Jersey. The revised tool is now referred to as the NJ Community Health Assessment, Policy Tracking & Environmental Resources Tool (NJ CHAPTER).

Like the CHANGE tool, NJ CHAPTER is not intended to be a written self-assessment survey. The intention and expectation is for this to be a guide to a comprehensive discussion or interview with key stakeholders within the four identified sectors (community-at-large, community institutions/organizations, schools and worksites) and addressing CDC's Five Strategic Directions. Though the original CHANGE was a policy and resource scan tool, it did not get at the details of any policies or resources that might be identified through the interview processes. We have enhanced this process to include the ability to gather this key information that will help us begin to build an inventory as well as a base line in these areas.

In order to develop a needs assessment that worked within New Jersey's unique governmental and regulatory structures, NJPN formed five Strategic Advisory Groups (SAG), one for each Strategic Direction, which were composed of experts and key stakeholders for the topic areas related to the Strategic Directions. Our SAG Experts took significant effort in working with NJPN to modify CDC's

CHANGE tool to focus on areas where there are not currently state laws or regulations. We didn't want the sectors to feel we were testing for enforcement or implementation levels, which might not be welcomed. The questions are based on promising or evidence based strategies that would benefit communities. Where possible, we have provided examples of sample policies or resources that you can share during your interview or after in order to support any interest by the key stakeholders you interview for sector to look into new policies that would be appropriate for their location. Please become familiar with the resources/links embedded in the CHAPTER as well as what we provided to you in the Resource and Policy Binder, which was distributed at this training.

We are confident that the implementation of NJ CHAPTER can be a learning opportunity for both you as the interviewer as you learn about the health promotion efforts with your community as well as a learning opportunity for the interviewee as you provide them with sample policies and other resources that can help improve their health promotion efforts.

Thank you in advance for your efforts in helping us create a healthier New Jersey.

Sincerely,



Diane Litterer, MPA, CPS
CEO & Executive Director
New Jersey Prevention Network

WHAT IS THE NJ CHAPTER TOOL

The purpose of the *NJ Community Health Assessment, Policy Tracking, & Environmental Resources (NJ CHAPTER)* Tool is to gather and organize data that identify community strengths and areas for improvement regarding current policy, systems, and environmental change strategies prior to deciding on the critical issues to be addressed in New Jersey in the future. *NJ CHAPTER* is designed as an interview tool to help capture this important data.

NJ CHAPTER consists of four separate tools for the four sectors below. Within each sector, there will be different key stakeholders who can help you gain the information for which the tool is asking. For a suggested list of key stakeholders for each sector, see Appendix A: “CHAPTER Sector Participant List.”

The **Community-At-Large Sector** includes community-wide efforts by municipalities that impact the social and built environments. The strategies and policies are set by municipal and county governmental departments/agencies such as the local health department, planning board or mayor’s office.

The **Community Institution/Organization Sector** includes entities within the community that provide a broad range of human services and access to facilities, such as childcare settings, faith-based organizations, senior centers, youth servicing organizations (i.e., boys and girls clubs and YMCA), and pharmacies.

The **School Sector** includes all primary and secondary learning institutions (e.g., elementary, middle, and high schools, whether private, public, or parochial).

The **Work Site Sector** includes places of employment, such as private offices, restaurants, retail establishments, and government offices.

Within each *NJ CHAPTER* sector are modules that model the CDC’s five strategic directions (your training binder has more information on each strategic direction):

1. Healthy and Safe Physical Environments,
2. Active Living and Healthy Eating,
3. Tobacco-Free Living,
4. High Impact Quality Clinical and Other Preventive Services, and
5. Social and Emotional Wellness.

Each module contains questions appropriate to the specific sector. For example, within the Community-at-Large Sector, Healthy and Safe Physical Environments Module, a *NJ CHAPTER* question is “*To what extent does the community maintain a network of biking routes (e.g., institute a bike lane program to add bike lanes when repaving roads)?*” As your team reviews the sectors, it will be helpful to familiarize yourself with the modules and the information within each.

NJ CHAPTER has a standard scoring system that measures policies and environmental strategies. More information on how to collect the data and enter your score is provided in the phases below.

Note: The terms “key stakeholder,” “key informant,” and “interviewee” are used interchangeably in this document.

HOW TO COMPLETE THE NJ CHAPTER TOOL

The *NJ CHAPTER* tool involves six phases. Much of your effort should be focused on collecting data from key stakeholders you have identified within each of the four sectors. This section will walk you through these phases in more detail. Be sure to pace your activities to take full advantage of your coalition members' time and ensure their shared ownership of the process.

PHASES OF THE NJ CHAPTER TOOL



PHASE 1: Assemble Your Coalition/Partnership NJ CHAPTER Team

Members of your Coalition/Partnership NJ CHAPTER Team should play an active role in the *NJ CHAPTER* process, from recommending sites within the sectors, to assisting or completing interviews, to entering data into the Excel worksheets. Identify who your NJ CHAPTER Team members will be. Be sure that all members contributing to collecting data are familiar with the tool, its objectives and how to use it.

PHASE 2: Identify Locations and Sector Sites

Step 1: Identify the disparate populations within your community.

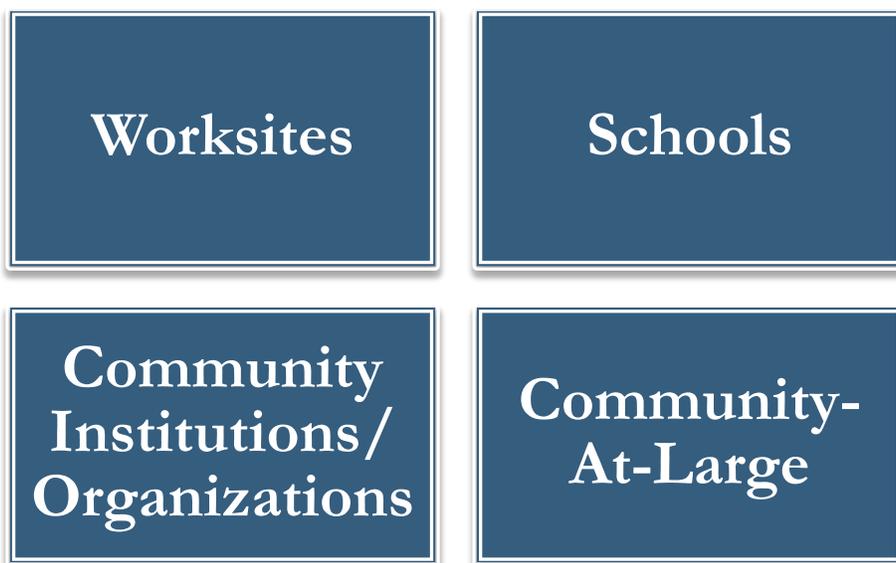
Identify disparate populations within your community. Disparate/High Risk populations can be defined by your knowledge of your community, including geographic locations or communities that have commonalities such as an ethnic group or. These should be the communities that you target to do your outreach. It is important that you and your team continue the next phases through the health disparities lens.

Step 2: Create list of sites within each sector.

Review the defined list of the four sectors (Community-at-large, Community Institutions/Organizations, Work Sites, and Schools) and the number of interviews you intend to complete so your *NJ CHAPTER* Team understands what is being assessed and can brainstorm whom to involve (see “*NJ CHAPTER* Sector Sites” box on the next page). Then begin to create a possible list of sites and contacts within each sector (see Appendix A: “CHAPTER Sector Participant List” for potential contacts). Using your *NJ CHAPTER* Team, you can determine if someone has a connection in the identified locations. Make note of each connection in preparation for the next section.

Note: Certain sites within a sector may not exist in your identified communities.

NJ CHAPTER SECTOR SITES



PHASE 3: Develop Your Team Strategy

Step 1: Determine which team member will connect with each site and identify suitable key informants.

As you created the list of sites, you and your team most likely have identified some team members that have connections with key people in each sector (i.e., they have collaborated in the past, they may know the person on a personal level, or they may sit on a committee or coalition together). An existing connection will help improve chances of getting an interview. If a connection with a sector site does not exist, make a phone call or visit the most appropriate person. A suitable key informant is any person who has a good understanding of the policies, procedures and environment of their site.

Step 2: Set the interview date.

Although there are various ways to collect data, (See *CHANGE* Tool page 14, “Table 1. Advantages and Disadvantages of Data Collection Methods”) the *NJ CHAPTER* tool focuses on key informant interviews or group key informant interviews, which could also function as focus groups. The tool is designed to be a dialogue in which questions are asked, feedback is generated, and notes are taken to document the process. It is not designed as a self-report assessment or a tool that individuals fill out for their own sites.

When contacting key informants to set up a meeting date, it is important that you:

- a. Introduce yourself,
- b. State the time it will take to complete the survey (approximately 1 to 1.5 hours),
- c. Give examples of the data to be collected, and

- d. State that others can join the interview, if needed.

At some sites, it may be preferred by your contact to set up a group key informant interview (where multiple people at that site participate at that same time) so that the interviewees provide the most accurate and comprehensive results. A group interview eliminates the need to set up multiple meetings with the same site and could make the collection process more efficient.

The interview should take place in a setting familiar to the key informant(s). The survey is intended to be given in person. For each of the questions, a discussion is needed that can bring about additional information as it relates to the policies, systems and environment of the site. A phone interview will be accepted but is not preferred.

You may find that several sites will not be willing to participate or may not have all the answers. That is okay. Move on to another site within the identified disparate population/location. You can also:

- a. Follow up with the site at a later date and inform them of some of the other sites that have participated to encourage their participation,
- b. Ask if there is another person within that same site that can participate, or
- c. Identify a new site in that sector.

TIPS! Contacting Sites

- Ask for the appropriate person that has knowledge regarding their site policies as they relate to health and the physical environment. Your first call to a site may not identify the “right” person to interview.
- You may need to interview more than one person at a single site.
- Document each person or contact that you made at each site. You may need to follow up later.

PHASE 4: Gather Data

Step 1: Preparing for the interview.

- a. **Become very familiar with the tool.** It is important for the chosen interviewers in your *NJ CHAPTER* Team to be very familiar with the survey tool they will be administering. The interviewer should review and be familiar with the:
 - i. Order of the questions in the sector tools,
 - ii. Terminology and strategies related to the five strategic directions,
 - iii. Definitions of underlined terms,
 - iv. Policy and environment scaled scores,
 - v. Key components of the five strategic directions, and
 - vi. Supplemental data collection documents: Chronic Disease Resource Inventory and Policy Scan Worksheet.

Use the Policy and Resource Binder provided to become familiar with the sample policies and toolkits that are relevant to each sector. You may need or want to reference some of these resources and policies during the interview. You should also review the supplemental data collection documents (i.e., Chronic Disease Resource Inventory and Policy Scan Worksheet) so that when there is a time to use those documents, you can quickly write in the appropriate areas without too much reading and reviewing during the interview.

- b. **Make copies.** Create enough copies for you and the person(s) you will be interviewing.

✓ **Materials for the interviewer.**

- NJ CHAPTER* Sector tool to be administered
- Notes page

✓ **Materials for the interviewee.**

- NJ CHAPTER* Sector tool to be administered
- Sector specific “*NJ CHAPTER* tool Response Scale”

- c. **Create two packets.** It is important to be organized. Create a packet for you (the interviewer) and for your site. Copies of the forms and documents you need should be in a report cover or binder with tabbed sections that are easy to reference and get to. Include enough notepaper to write down important information.

- d. **Complete the demographics page to the best of your ability.** Utilizing the different data sources indicated on the sector tool, pre-populate the “Demographics” page items as appropriate. Several items on the page will need to be completed by the site. Community-at-Large and Schools sectors will have most demographic data completed by you via US Census Bureau, NJ Department of Education website or other sources as indicated.

TIPS! How to Conduct a Successful Interview

- **Practice**—Rehearse and consider doing a mock-interview with a colleague.
- **Keep your goals in mind**—remember that what you want is to obtain information. Keep the interview on track and don't digress too much. Keep the conversation focused on your questions. Be considerate of your interviewee's time.
- **Don't take “yes/no” answers**—Monosyllabic answers don't offer much information. Ask for an elaboration, probe, and ask why. Silence may also yield information. Ask the interviewee to clarify anything you do not understand.
- **Respect**—make interviewees feel like their answers are very important to you (they are supposed to be!) and be respectful for the time they're donating to help us with this important project.

Adapted from Vilela, Marcelo. Conducting Interviews , Community Tool Box: Part B, Chapter 3, Section 12. Edited by Kate Nagy. http://ctb.lsi.ukans.education/promotion/tools/EN/sub_section_main_1047.htm

Step 2: Conduct the interview.

- a. Introduce yourself and remind the interviewee of the purpose of the interview. Tell the interviewee that you appreciate his or her time and involvement in the assessment process.
- b. Provide the interviewee their packet.
- c. Review with your interviewee the scaled responses on page 2 of the sector tool or on the separate document titled “*NJ CHAPTER* Tool Response Scale”. Be sure to confirm that the interviewee understands the scale.
- d. Begin to conduct the interview. Start with the “demographic” information. Then begin to read the full questions starting with “To what extent does....”. In most items, an example for the terminology is given (i.e., “Provide bicycle parking (e.g, bike rack or shelter) for patrons and employees?”). You should be familiar with the terminology in a way that allows for you to probe a detailed response.

The response you are looking for is not a number on the scale, at least not initially. The interviewer must ask the items in a way that encourages the interviewee to respond with actions and/or policies that the organization or school has put in place. Engage in a conversation about what they are doing to improve health in their organization or school. As you listen, write notes if needed and begin to determine how you would rate the answer. Note significant pieces of information that reflect the site's capacity or stage in adopting environmental change strategies and policies (i.e., worksite health screenings are available but at a high cost to employees or municipal planning board is reviewing guidelines for new developments and sidewalks.) This is when the well-organized, easy access binder or report cover comes into play.

Example Interview at school

Interviewer: "To what extent would you say the school posts signs around school grounds marking the campus as a tobacco-free school zone?"

Interviewee: "Well, we have street signs outside of the school, they were given to us by the NJ Department of Health."

Interviewer: "Was it part of your tobacco-free policy that signs are required to be posted?"

Interviewee: "No."

Interviewer: "Would you say that on the scale of 1-5, zero is an appropriate scaled number response for policy section and three (3) is appropriate for environment as there are no signs posted in the bathrooms?"

Interviewee: "Uhm...there are signs in the student bathrooms but not the faculty bathroom, I would say a 4 is more appropriate for environment. And I would hate to say zero for policy, but I guess that it is true. "

Once that open-ended response is given, share your recommended score for both the policy and environment section. Ask if your interviewee agrees with your assessment, and, if needed, discuss further. As the interviewer who is trained on these items, you are to suggest a scale number, and take into account the rating that the interviewee suggests when making your final decision.

The rating scale (1–5) for Policy and Environment is located on page one and two of the sector tools with an explanation for how the ratings are determined. A rating of 1 under Policy means the item was not identified as a problem based on the data collected. A rating of 5 means that all possible options were addressed in the data collected. Study these carefully to make sure your rating is accurate based on the parameters of the response. For example, a response of 1 under Environment indicates *At this point, no elements are in place in the environment.* For example in Community Institution, Healthy and Safe Physical Environments, *there is no bicycle parking for patrons that are accessible (no bike racks or shelters for bikes that are in walking distance of the organization).*

Allocate a number between 1 and 5 for both the policy and environment columns for each of the five modules. A response of 99 has been incorporated into the scale to be used only when the item is not applicable at the site (e.g., worksite does not offer a health insurance plan).

Enter the agreed upon score in the appropriate box. Continue to the next question, reading the complete question. “To what extent...”

Note: Most interviewers take notes rather than recording the session. If you do choose to record the interview, then ask the interviewee for permission first. Realize that some people are not comfortable being recorded and may want you to turn it off for sensitive subjects. Make sure your recording device is working well and that you don’t have to tinker with it during the interview. This can be distracting to both of you.

- e. Once the interview is over, it is very important to thank the person or people that you have met with. Follow up with a thank you letter.

TIPS! Entering Data

- The sooner you enter your notes and policy data into the Excel worksheets, or other reporting documents the more accurate your data will be.
- It is best if the interviewer is available when the data manager is entering data so that all data entered can be clarified as it is entered, if needed.

PHASE 5: Review and Enter Data Gathered

Step 1: Finalize your score.

In addition to getting a suggested score from your contact, we recommend to get further consensus from the members of your *NJ CHAPTER* Team. This is particularly recommended if you were not able to reach a consensus with your contact. You and your team have been trained on terminology and have the model policies that will reveal the appropriate score.

Gather the members of your *NJ CHAPTER* Team to review the data received. You may need to further brainstorm, debate and dialogue with the team to gain consensus on what these data mean in terms of parameters of the *NJ CHAPTER* tool. Data should be rated based on a comprehensive review of all written and verbal comments from the interview and agreement of everyone involved.

Finalize the allocated number between 1 and 5 for both the policy and environment columns for each of five modules for the four sectors. The item response (99) does not factor into the module's column total or percentage calculations.

APPENDIX A. SECTOR PARTICIPANT LIST

This list provides suggestions from previous CDC *CHANGE* tool users for organizations, institutions, and participants that may help you get started with the data-gathering and completion process. The list is organized by sector. This list is not exhaustive; feel free to identify other sites and individuals who may provide feedback to assist in your efforts.

Community Institution/Organization (CIO) Sector

Youth Servicing Organization	Participants	Healthcare Organization (non-hospital)	Participants
YMCA	<ul style="list-style-type: none"> • CEO • Senior program director • Executive director • Director of operations • Wellness director • Program staff • Site director 	Medical Clinic	<ul style="list-style-type: none"> • Executive director • Clinical director • Practice manager • Director of ambulatory services • Pediatric and adolescent services • Nurse supervisor • Diabetes educator • Clinical director • Practice manager
Head Start Agency	<ul style="list-style-type: none"> • Executive director • Site director • Teachers 	Hospice	<ul style="list-style-type: none"> • Executive director • Vice president of access
Boys and Girls Club	<ul style="list-style-type: none"> • CEO • Senior program director • Executive director • Director of operations • Wellness director • Program staff • Site director 	Federally Qualified Health Center	<ul style="list-style-type: none"> • Executive director • Health planner • Director of medical services
Family Center	<ul style="list-style-type: none"> • Executive director 	Medical Center/ Group	<ul style="list-style-type: none"> • Director of community outreach • Nurse practitioner
Youth Center	<ul style="list-style-type: none"> • Director 	Pediatric and Adolescent Services Clinic	<ul style="list-style-type: none"> • Nurse practitioner • Chief of pediatrics
		Senior Nursing Care Facility	<ul style="list-style-type: none"> • Director • Health administrator • Activities coordinator
Pharmacies	Participants	Faith-based Organizations	Participants
Pharmacy	<ul style="list-style-type: none"> • Manager • Pharmacist • Pharmacy technician • Store manager 	Church	<ul style="list-style-type: none"> • Priest • Pastor • Associate pastor • Parish nurse
Daycare Centers	Participants	Senior Centers	Participants
Daycare Center	<ul style="list-style-type: none"> • Director • Executive director • Site director • Teachers 	Senior Center/Community Center	<ul style="list-style-type: none"> • Director • Program staff • Site director

Community-At-Large Sector

Site	Participants
City/Municipal Government	<ul style="list-style-type: none"> • Director/Administrator • Risk manager • Administrative assistant to city planner • Health planner • Residents • City planner • City engineer • Director of city leisure services • Mayor • City/town council president or members • Financial analyst within city finance dept. • Human resource manager • Recreation director
County Government	<ul style="list-style-type: none"> • Assistant county manager • Planning director • Health director • Alliance for health board member • Director of parks and recreation • Director of community and economic development • Health department division manager • Health department commissioner/director • Health promotion coordinator
Board of Health	<ul style="list-style-type: none"> • Board member
County Freeholders	<ul style="list-style-type: none"> • Chairperson of county Freeholders
Minority Health Council	<ul style="list-style-type: none"> • Project coordinator of health disparities initiative • Chairman of minority health council
Bike and Pedestrian Committee	<ul style="list-style-type: none"> • Committee chair • Committee members
Area Agency on Aging	<ul style="list-style-type: none"> • Director • Seniors
Local Health Department/Department of Health Director of community health services	<ul style="list-style-type: none"> • Health officer • Registered environmental health specialist • Health promotion, planning and development manager • Public health nurse • Community program coordinator • Health Educator • School outreach and clinic division manager • Elderly, cancer and chronic disease program manager • Tobacco use prevention and control coordinator
Public Works	<ul style="list-style-type: none"> • Director • General foreman

Public Safety	<ul style="list-style-type: none"> • Chef of police • Division commander
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School Sector

Site	Participants
School	<ul style="list-style-type: none"> • Principal • Director of elementary schools • Director of child nutrition • Director of secondary schools • Director of community education • School nurse • Wellness coordinator • PE instructor • Food services director
Public School System	<ul style="list-style-type: none"> • Chairperson of health services • Director of child and nutrition services
School District	<ul style="list-style-type: none"> • Curriculum coordinator • Director • After-school coordinator • Tobacco-free coordinator • Safe and drug- free coordinator • Director of athletics • Board of cooperative educational services (BOCES) • Assistant principal • After-school coordinator • Food service staff • School board member • Superintendent/assistant superintendent

Work Site Sector

Site	Participants
Pet Product Store	<ul style="list-style-type: none"> • CEO (franchise) • Store manager
Medical Foundation	<ul style="list-style-type: none"> • Director of human resources
Manufacturing Company	<ul style="list-style-type: none"> • Chief financial officer • Human resources director • Executive director • Safety supervisor • Staff development coordinator • Benefits coordinator • Communication director
Restaurant	<ul style="list-style-type: none"> • General manager
Supermarket or Grocery Store	<ul style="list-style-type: none"> • Store director or manager • Registered dietician
Credit Union	<ul style="list-style-type: none"> • Chief executive director • Human resources director
Food Bank	<ul style="list-style-type: none"> • Executive director • Director of programs
Bus Companies	<ul style="list-style-type: none"> • Executive director • Safety supervisor • Staff development coordinator • Benefits coordinator • Communications director
Cooperative Extension	<ul style="list-style-type: none"> • Family and consumer science agent
Car Retailer or Repair Shop	<ul style="list-style-type: none"> • General manager
Healthcare (e.g., clinic, hospital, medical practice)	Participants
Long-Term Care Facility	<ul style="list-style-type: none"> • Occupational health and safety coordinator • Nurse
Hospice	<ul style="list-style-type: none"> • Vice president of access
Hospital	<ul style="list-style-type: none"> • Director of community health • Vice president of regional operations • Vice president • Chief nursing executive • Chief operating medical officer • Human resources manager
See Community Institution/Organization Sites Under Healthcare Organizations for others	



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