

<b>1. Background</b>
Published date
Publicly available
Easy to locate
Lead group is community-based
Lead group for CHNA also led writing
<b>2. Shared Ownership</b>
CHNA led by single group or coalition
Lead group membership identified
Lead group membership inclusion process described
Lead group representative of community
Lead or lead group includes Local Health Department
<b>3. Defining Community</b>
Geography of community identified
Data source identified
Narrow or broad definition of community
Community demographic data provided
Demographic data source identified
<b>4. Data Collection &amp; Analysis</b>
Includes methods section
Methods section is thorough
Used existing model to inform methods
Included primary data
Included secondary data
Process for identifying data described
Process for prioritizing data described
<b>5. Types of Data</b>
Disease incidence & prevalence
Inpatient, emergency room, outpatient utilization
Education, household income, unemployment
Home ownership/rentals
Arrests, incarceration
Proximity of health food, food security
Proximity of basic & social services
Parks, recreation opportunities, open spaces
Access to transportation, system quality
<b>6. Community Engagement</b>
Gathered community input
Process for community input described
<b>7. Priority Setting</b>
Priority setting described
Priority is defined
Community board input on prioritization
Community at-large input on prioritization
Clear criteria for prioritization
Tools developed/used to help with priority setting
At least 3 priorities selected
Rational provided for priority areas not selected

<b>8. Strategy Development</b>
Strategies identified
Evidence provided
Policy change included as a strategy
Strategies assigned to responsible party
Community board approval
Hospital board approval
Timeline included
<b>9. Monitoring &amp; Evaluation</b>
Outcome objectives identified
Impact objectives identified
<b>10. Public Reporting</b>
Plan for public reporting included

For Questions

Please Contact: Bryna Koch, MPH

