**Assessing Our Community Engagement**

*Instructions: Please use this form to guide your conversation with Healthy Start participants, Community Partners, and Healthy Start staff. Please identify 3-5 individuals to engage in a brief conversation. Please identify at least one person from each category below. Please complete one form for yourself.*

*You may also select “Other” as an option if necessary.*

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| --- | --- | --- | --- | --- |
| Please check the respondent’s affiliation with Healthy Start below: | | | | |
| Healthy Start Participant | Community Partner | Healthy Start Staff | Other | Self |
|  |  |  |  |  |

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| Question: | Response: |
| 1. Are you familiar with the goals of the CANs Community Partners? |  |
| 1. How does the CAN strategically identify Community Partners? |  |
| 1. What is the CAN currently doing to engage and retain Community Partners? |  |
| 1. How does the CAN engage Healthy Start participants (Moms and Dads)? |  |
| 1. Do the Community Partners trust one another in the CAN? |  |
| 1. Are the Community Partners involved in decision making aspects for the CAN? |  |
| 1. Are Heathy Start participants (Moms and Dads) involved in decision making aspects of the CAN? |  |
| 1. Who decides and determines what actions, activities, events, etc the CAN undertakes. |  |
| 1. Does your CAN engage community members who are not Community Partners or public health professionals? |  |
| 1. Has your CAN developed or established any systems change initiatives with local, state, or federal governments or community based organizations? |  |