

Session 12



Evaluation To Track Your Progress (Only for Community Health Workers)

Objectives

By the end of this session, community health workers will learn how to:

- Create a vision for offering the With Every Heartbeat Is Life course in their community
- Know the basics of a project evaluation
- Choose strategies to implement the evaluation
- Learn the role of a community health worker in an evaluation
- Collect data to show the results from their evaluation
- Participate in the evaluation process
- Develop an evaluation workplan

Materials and Supplies

To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- 2 sets of color markers for participants to use

Handouts

Give each participant these handouts during this session:

- Examples of Evaluations (pages 12.17-12.18)
- Types of Evaluations (page 12.19)
- Three Ways to Offer the With Every Heartbeat Is Life Course in Your Community (pages 12.20-12.22)
- Outcome Evaluation Strategies and Forms (page 12.23)
- Community Health Worker Train the Trainer Pretest and Posttest (pages 12.24-12.34)
- Feedback Form: What Did You Think About the Training? (for Strategy 1) (pages 12.35-12.39)

- My Health Habits Pretest and Posttest (pages 12.40-12.56)
- Screening Form (pages 12.57-12.58)
- Clinical Measures and Followup Form (pages 12.59-12.63)
- Community Health Worker Activities Form (pages 12.64-12.66)
- Recording Log (for Strategies 1, 2a, 2b, and 3) (pages 12.67-12.68)
- Tips for Collecting Data (page 12.69)
- Develop an Evaluation Workplan (pages 12.70-12.72)

Before This Session

Before doing any evaluation, check to see if the organization you work for has an Institutional Review Board (IRB). If so, check with it before collecting any data. Many organizations don't have an IRB. Also, some evaluations are exempt from IRB reviews.

Session Outline

Introducing the Session

1. Welcome
2. About This Session

Conducting the Session

1. Develop a Vision for Offering the With Every Heartbeat Is Life Course in Your Community
2. Basic Information on Evaluations
3. Three Strategies for Offering the With Every Heartbeat Is Life Course in Your Community
4. Data Collection
5. The Role of Community Health Workers in the Evaluation Process
6. How to Get on the Team
7. Group Activity: Develop an Evaluation Workplan

Review of Today's Key Points

Closing

Introducing the Session

1. Welcome

DO **Welcome** participants to the session.

2. About This Session

SAY You've learned a lot of information while taking the With Every Heartbeat Is Life course. You've gained new skills and shown great progress and motivation. Now, you're ready to put your With Every Heartbeat Is Life training into action in your community. Congratulations!

SAY This session is for community health workers. It will teach you how to do a formal evaluation to assess the value of With Every Heartbeat Is Life or any project or program you implement.

NOTE



You can modify any of the evaluation tools (pretest and posttest) provided in the session to fit your needs. If you would like to share any of your evaluation results and feedback, send them to HealthEdu@nhlbi.nih.gov.

Conducting the Session

1. Develop a Vision for Offering the With Every Heartbeat Is Life Course in Your Community

SAY During this session, you'll develop a vision for With Every Heartbeat Is Life in your community.

ASK Can someone tell me what a vision is?

NOTE



Allow about 2 to 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

DO **Add** the following answers if they're not mentioned:

- A vision is your dream, an image, or a picture of what you want to do and what you imagine With Every Heartbeat Is Life will do for the people you serve.
- It's your direction or goal.
- It's what inspires, motivates, and engages people to take action.

SAY You can describe your vision in writing, as a drawing, or in other ways.

Some examples of vision statements are:

- "A heart healthy and stroke-free community"
- "An active, healthy, and informed community"

SAY Let's divide up into small groups, and each group will create a vision. Start by asking yourselves: "What do we want our community to be like after we implement With Every Heartbeat Is Life?" You'll have about 20 minutes. When you're done, one person will describe your group's vision.

NOTE



Divide the participants into small groups. **Give** each group a set of color markers and a large piece of paper or poster board.

SAY

Now, please share your visions.

NOTE



Allow 2 to 3 minutes for someone from each group to present. Congratulate them for a job well done.

2. Basic Information on Evaluations

SAY

When you offer the With Every Heartbeat Is Life course in your community, you'll want to know if it helped achieve your vision. An evaluation can help you do this.

ASK

What are some benefits of an evaluation?

NOTE



Allow about 2 minutes for participants to answer. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

DO

Add the following answers if they aren't mentioned.

An evaluation offers you a way to:

- Find out if your plan is working as intended
- Learn if you're meeting specific goals
- Find out which areas you need to change or improve
- Get information about your plan to share with your community and funders

DO **Give** each participant the “Examples of Evaluations” handout (pages 12.17-12.18).



SAY Now we’ll look at how a few evaluations were used.

DO **Ask** volunteers to read each example and tip out loud.

SAY You now have some examples of evaluations. Let’s go over the seven steps for implementing and evaluating With Every Heartbeat Is Life.

- 1. Choose the activities.** Work with your agency or organization to choose and plan the activities you want to do. For example, you may offer to teach the With Every Heartbeat Is Life course.
- 2. Carry out those activities.** For example, you could recruit 20 parents from a local school to sign up for the course.
- 3. Collect data to show if the activities are helping.** You could use questionnaires to find out what participants learned in the sessions, how they used the information, and if they made heart healthy lifestyle changes.

But think creatively about how to collect data. Questionnaires aren’t the only way. Data can come from a lot of different places. For example, participants can give you testimonials (stories), photographs, or journal entries about how With Every Heartbeat Is Life has affected them. You could create a social media page for participants to post their information.

Remember: You need to protect participants’ privacy and get their consent when collecting any information about them.

- 4. Enter data.** Trained community health workers or staff can enter information you collect into a database.
- 5. Analyze the data.** An evaluator can analyze the data and summarize the findings. For example, an evaluator may find that the participants who are now walking for 60 minutes daily have lowered their blood pressure and lost weight.
- 6. Write a report about the results.** A report can show how the community has changed as a result of With Every Heartbeat Is Life. For example, the evaluator may describe how participants’ eating habits and physical activities changed while taking the course.

7. Share the results. Sharing results can increase community members' interest in *With Every Heartbeat Is Life* and motivate them to take action to improve their health. Consider using charts, infographics, social media, and videos to communicate your results.

SAY You've seen how evaluations can help you. Now, let's take a look at two types of evaluations: process and outcome.

DO **Give** each participant the "Types of Evaluations" handout (page 12.19).



HANDOUT

DO **Ask** a volunteer to read the handout out loud.

3. Three Strategies for Offering the *With Every Heartbeat Is Life* Course in Your Community

NOTE



Before the session, read the charts on pages 12.20-12.22. They list the strategies in more detail. Each strategy includes the following: goals, description of activities, setting, and target audience.

SAY Let's discuss three strategies for offering *With Every Heartbeat Is Life* in your community:

- 1. Train the Trainer.** Use the *With Every Heartbeat Is Life* manual to train a group of community health workers. They then train other community health workers or offer the course in their community.
- 2. Community Education.** Use the manual to teach the course in your community. With the help of other agencies or health professionals, you can also offer health screenings to course participants. If needed, refer participants with elevated numbers (such as for blood pressure, cholesterol, or blood sugar) to their health care provider or a clinic for followup.
- 3. Lifestyle and Clinical Management.** Clinic staff can teach the course to patients. During the course they can monitor the patients' blood pressure, cholesterol, body mass index (BMI), waist measurement, and blood sugar levels. They can offer support and encouragement in addition to making sure that patients are following their treatment plan.

ASK If you offer health screenings, why should you partner with other agencies, such as a clinic?

NOTE

Allow about 2 minutes for participants to respond.

DO **Add** the following answers if they're not mentioned:

- To have trained health care staff measure participants for blood pressure, cholesterol, or blood sugar
- So an authorized agency can get written permission from participants before the screening
- To refer participants with elevated numbers to their health care provider or a clinic

NOTE

Some community health workers may be working in clinical settings, and they may teach patients about conditions such as HIV/AIDS, substance abuse, or prenatal care. Community health workers can use these skills to work with patients who have risk factors for heart disease, such as high blood pressure, unhealthy cholesterol levels, or diabetes.

DO **Give** each participant the “Three Ways to Offer the With Every Heartbeat Is Life Course in Your Community” handout on pages 12.20-12.22.



SAY Please read the strategies to yourself. When you're done, we'll discuss how you could use these strategies.

ASK What do you think of the strategies? Do you have any questions?

NOTE

Allow about 2 minutes for participants to respond.

4. Data Collection

NOTE

Before the session, **read** the “Outcome Evaluation Strategies and Forms” on page 12.23. It describes each strategy, how to use data collection forms, and the type of information you can collect to evaluate With Every Heartbeat Is Life.

SAY

First, we’ll talk about how you begin collecting data.

DO

Give each participant the “Outcome Evaluation Strategies and Forms” handout on page 12.23. Also **give** participants copies of the data collection forms on pages 12.24–12.68 and **describe** each form. The data collection forms are:



- Community Health Worker Train the Trainer Pretest and Posttest (pages 12.24–12.34)
- Feedback Form: What Did You Think About the Training? (for Strategy 1) (pages 12.35–12.39)
- My Health Habits Pretest and Posttest (pages 12.40–12.56)
- Screening Form (pages 12.57–12.58)
- Clinical Measures and Followup Form (pages 12.59–12.63)
- Community Health Worker Activities Form (pages 12.64–12.66)
- Recording Log (for Strategies 1, 2a, 2b, and 3) (pages 12.67–12.68)

SAY

You’ll find the answers to the test questions at the bottom of the test pages, as needed.

On the data collection forms, you’ll see small (subscript) numbers next to some of the responses. Assigning numeric values to text responses makes it easier to tabulate the results. We recommend assigning these numbers or “numeric values” to the responses for analyzing the data.

Let’s start with the “Community Health Worker Train the Trainer Pretest and Posttest” forms. Use the pretest form at the beginning of the training and the posttest form at the end.

After the training, you'll also complete the "Feedback Form: What Did You Think About the Training?" questionnaire. It collects information on what you like and dislike about the training, how confident you feel about training others, and ideas for improving the training.

SAY For the second strategy, Community Education, you can use the "My Health Habits Pretest and Posttest" forms, which participants fill out, to find out if they're changing their health habits. If you also do health screenings, use the "Screening Form" to record participants' test results.

SAY For the third strategy, Lifestyle and Clinical Management, fill out the "My Health Habits Pretest and Posttest" form to record how they're changing their health habits. You also can use the "Clinical Measures and Followup Form" to record patients' test results.

Use the "Community Health Worker Activities Form" to make sure you're doing everything you can to help patients stay on their treatment plan.

SAY The "Clinical Measures and Followup Form" is useful for community health workers who work in a clinical setting.

ASK How many of you work in a clinic, hospital, or other medical setting?

NOTE

Allow 2 minutes for participants to respond.

DO **Ask** each participant to look at the "Community Health Worker Activities Form" again (pages 12.64-12.66).

SAY Keep track of what you do to help patients stay on their medicines. Also record the followup activities you do to help patients make lifestyle changes.

ASK Does anyone have questions about the "Community Health Worker Activities Form"?

NOTE



Allow 2 minutes for participants to respond.

SAY By collecting data, we can show the important role community health workers have in helping patients stay on their treatment plans and control their risk factors.

SAY The last form, the “Recording Log,” focuses on process evaluation activities. It tells you which form to use and what type of information to collect for each strategy.

SAY Let’s review the “Recording Log” handout. The information you’ll collect for the Train the Trainer strategy is:

- Number of participants trained
- Number of sessions taught
- Number and percentage of participants who rate the training “good” or higher
- Number and percentage of participants who report that they “will” or “most likely will” change their health habits
- Number and percentage of participants using the *With Every Heartbeat Is Life* manual 30 days after the training
- Types of activities that participants are completing 30 days after the training

DO **Ask** a volunteer to read out loud the information for the Community Education strategy and the Lifestyle and Clinical Management strategy.

ASK Does anyone have questions?

SAY The results of the “Recording Log” show you which activities are being implemented and how. The log also gives you the feedback you need to improve your *With Every Heartbeat Is Life* course.

SAY Before using these data collection forms, review the “Tips for Collecting Data” handout on page 12.69.

5. The Role of Community Health Workers in the Evaluation Process

SAY Some of you may be thinking that doing an evaluation is too complicated and that there's no role in it for you. But that isn't true.

ASK Has anyone already worked on an evaluation? Can you share what you did?

NOTE



Allow 3 minutes for participants to respond.

SAY Community evaluation teams may have the following members:

- A project manager
- An evaluator
- Community health workers
- Health professionals

And here are some examples of what community health workers can do:

- Help decide which evaluation activities to do and with whom.
- Hand out and collect questionnaires and other materials.
- Enter data into a computer.
- Provide feedback on what worked and what didn't work.
- Share results of the evaluation with community members.
- Attend training meetings about With Every Heartbeat Is Life evaluations.

SAY Your involvement in the evaluations can help show the value of having community health workers on the With Every Heartbeat Is Life team. Community health workers are key to tracking With Every Heartbeat Is Life activities in the community.

SAY With time and practice, you will become more confident about being part of an evaluation.

6. How to Get on the Team

SAY Let's talk about how to get on an evaluation team.

ASK First off, do you have an evaluator on your team or in your agency?

NOTE



Allow 2 minutes for participants to respond.

ASK Do you have any ideas about how to get involved with evaluations at your organization?

NOTE



Allow about 2 to 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

DO **Add** the following if they're not mentioned:

As a community health worker, you can:

- Find out who does evaluations in your agencies.
- Share this session on evaluations with your supervisors.
- Ask your supervisors how you can be involved in evaluations.
- Ask your supervisors if you can attend trainings on evaluations.

SAY If your agency doesn't have an evaluator, try to link with an outside evaluator who supports community health workers.

- SAY** An evaluator can help you and your agency:
- Develop an evaluation plan
 - Make sure you carried out the evaluation as intended
 - Conduct an analysis
 - Write a report on the data collected

More Information

Your agency can get the services of an outside evaluator by contacting:

- Other community health projects or workers
- A university's school of public health
- A foundation that has community health projects
- Your state health department

7. Group Activity: Develop an Evaluation Workplan



ACTIVITY

- SAY** We're going to develop evaluation workplans. Please work in the same group you did for the Developing a Vision activity.

- DO** **Give** each group a project from the “Develop an Evaluation Workplan” handout (pages 12.70-12.72).



HANDOUT

NOTE



Group 1 will work on project 1, group 2 will work on project 2, and group 3 will work on project 3.

- SAY** Each group has a different project. Your handout describes each project. It also has questions to help you decide how to think about the project.

NOTE



Ask one person from each group to present the group's evaluation plan to the entire group. Allow about 5 minutes for each presentation.

SAY

Thank you for doing such a wonderful job!

Review of Today's Key Points

SAY

Let's review what we learned today.

What's an evaluation?

An evaluation is a formal process to assess the value of the With Every Heartbeat Is Life course or any project or program you implement. An evaluation helps you see if you're meeting your project goals.

What do you learn from an evaluation?

- If your project is working as planned
- If you're meeting your goals
- What needs to be changed and/or improved
- If your activities are helping people make healthy choices
- Information you can share with the community and funders

What's the role of community health workers in the evaluation process?

- Helping to decide which activities should be carried out
- Administering questionnaires and other instruments
- Collecting the instruments
- Entering data into computers
- Providing feedback on how activities are done and how they can be improved
- Sharing the results with the community

What strategies can you evaluate by using this session of the *With Every Heartbeat Is Life* manual?

- You can evaluate the training of community health workers to promote heart health in the community.
- You can evaluate what community members have learned and which changes they have made to have heart healthy lifestyles.
- You can evaluate how the course has helped patients manage their risk factors and change their lifestyles.

Who forms the community evaluation team?

- A project manager
- An evaluator
- Community health workers
- Health professionals

Closing

SAY Thank you for coming today. What did you think of today's session?

NOTE

Allow a moment for participants to respond.

SAY Community health workers play an important role in the evaluation of *With Every Heartbeat Is Life*. We hope this session helps you achieve positive results in your work with the community. I wish you success in implementing *With Every Heartbeat Is Life* in your community.



Examples of Evaluations

Example 1

In May, doctors from a community clinic referred 45 patients to the With Every Heartbeat Is Life course taught by community health workers. Thirty participants attended all of the sessions and 15 participants attended only a few sessions.

The health workers' followup visits to participants' homes found that those who attended all the classes were using the project's heart healthy recipes, doing physical activities, and taking their medicines. The other participants weren't taking any of these steps.

The followup visits showed that taking part in all of the sessions is closely related to how much the course helps participants.

Tip

Plan to track participation at every stage of your project. Track referrals, class attendance, and follow up after the classes.

Example 2

A community health clinic offered classes about the importance of physical activity. Before the class, participants were walking less than 30 minutes a day. By the end of the course, the participants who went to at least six of the classes were walking 30 minutes or more per day.

The community health clinic learned that people who regularly attended the sessions increased their physical activity.

Tip

Know your project goals and review them throughout your project. Make sure that project activities are making sense and are helping you to reach the goals of the project.



Examples of Evaluations (continued)

Example 3

A group of community health workers posted flyers in the community about a cholesterol screening event. Few people showed up to the event. The community health workers talked with community leaders and developed a new recruitment strategy. They went door to door, talking to people about the importance of cholesterol screening.

They asked them to share the information with friends and family.

The community health workers held a second screening and had a much better turnout.

By finding out what didn't work and getting input from others, the health workers successfully changed how they recruited participants.

Tip

Don't focus only on the positive results of the project. You can learn a great deal by looking at what went wrong and what didn't work.

Example 4

Community health workers held several heart health sessions for community members. A participant at one of the sessions talked about her experience lowering her blood pressure.

She described how her doctor told her that she had high blood pressure, and she talked about all of the healthy changes that she made. After 3 months, she had lost 10 pounds, and her blood pressure got under control.

The community health workers asked this participant to share her story at a community gathering. Now more people are interested in taking part in the heart health sessions.

Tip

Be creative. Evaluations are about more than just numbers. Participants' stories, pictures, and journals can be very powerful tools that describe how your project has affected them.



Types of Evaluations

Process Evaluation

A process evaluation looks at your project's activities and whether you're doing the activities as planned. It also tells you who's participating in the activities. You can track the specifics, such as the time spent on activities and how many participants attended.

The results of a process evaluation show you which activities were more successful than others. Process evaluations give you the feedback you need to improve your project.

Example

You can collect information about the number of sessions you taught from the *With Every Heartbeat Is Life* manual and how much time you spent on activities during the sessions.

Outcome Evaluation

Outcome evaluation describes the effect your project had on your participants. You can learn how participants' knowledge, feelings (attitudes), or actions (behaviors) changed after taking part in the project. You also can track changes in clinical values, such as blood pressure and weight.

Example

You give a questionnaire to participants before the first class and after the last class. You compare the results of the two questionnaires to see how much participants learned or how much they changed their behaviors.



Three Ways To Offer the With Every Heartbeat Is Life Course in Your Community

Strategy	Goals	Description of Activities	Settings	Target Audience
1. Train the Trainer				
Learn how to teach the course	<ul style="list-style-type: none"> ▪ Increase the number of community health workers who are prepared to train others ▪ Increase the use of the <i>With Every Heartbeat Is Life</i> manual by trained community health workers ▪ Increase knowledge about heart health ▪ Increase positive attitudes about a healthy lifestyle and behaviors ▪ Increase participants' ability to identify risk factors for heart disease 	<p>Trained community health workers train others by:</p> <ul style="list-style-type: none"> ▪ Recruiting community health workers ▪ Teaching the With Every Heartbeat Is Life course ▪ Administering the pretest and posttest ▪ Doing followups to make sure the community health workers are teaching all or parts of the course 	<p>Clinical and nonclinical:</p> <ul style="list-style-type: none"> ▪ Community-based organizations ▪ Clinics ▪ Hospitals ▪ Public library 	<ul style="list-style-type: none"> ▪ Community health workers ▪ Other health professionals like nurses, registered dietitians, nutritionists, and public health educators
2. Community Education				
a. Teach the With Every Heartbeat Is Life course only	<ul style="list-style-type: none"> ▪ Increase knowledge about heart health ▪ Increase positive attitudes about making healthy changes ▪ Increase the adoption of healthy lifestyle behaviors 	<p>Trained community health workers who work in nonclinical settings:</p> <ul style="list-style-type: none"> ▪ Recruit members of the community ▪ Teach the With Every Heartbeat Is Life course ▪ Administer the "My Health Habits Pretest and Posttest" 	<p>Nonclinical:</p> <ul style="list-style-type: none"> ▪ Community-based organizations ▪ Resource centers ▪ Homes ▪ Schools ▪ Faith-based organizations ▪ Senior centers 	<ul style="list-style-type: none"> ▪ Families and community members with signed informed consent forms



Three Ways To Offer the With Every Heartbeat Is Life Course in Your Community (continued)

Strategy	Goals	Description of Activities	Settings	Target Audience
<p>b. Teach the With Every Heartbeat Is Life course and screen program participants</p>	<ul style="list-style-type: none"> ▪ Increase knowledge about heart health ▪ Increase positive attitudes about making healthy changes ▪ Increase the adoption of healthy lifestyle behaviors ▪ Track participants' clinical data ▪ Refer participants with elevated clinical measures to health care professionals 	<p>Trained community health workers working in nonclinical settings:</p> <ul style="list-style-type: none"> ▪ Recruit members of the community ▪ Teach the With Every Heartbeat Is Life course ▪ Administer the “My Health Habits Pretest and Posttest” ▪ Take height, weight, and waist measurements ▪ Measure participants' blood pressure, cholesterol, and blood sugar levels ▪ Refer participants with elevated clinical measures to health care professionals 	<ul style="list-style-type: none"> ▪ Nonclinical but in partnership with a health care professional 	<ul style="list-style-type: none"> ▪ Families and community members with signed informed consent forms



Three Ways To Offer the With Every Heartbeat Is Life Course in Your Community (continued)

Strategy	Goals	Description of Activities	Settings	Target Audience
3. Lifestyle and Clinical Management				
Teach the With Every Heartbeat Is Life course; screen and manage program participants	<ul style="list-style-type: none"> ▪ Increase knowledge about heart health ▪ Increase positive attitudes about making healthy changes ▪ Increase adoption of healthy lifestyle behaviors ▪ Lower BMI, blood pressure, cholesterol, and blood sugar levels 	<p>Trained community health workers who participate as members of the health care team:</p> <ul style="list-style-type: none"> ▪ Teach the With Every Heartbeat Is Life course to patients with heart disease risk factors and to patients interested in learning about heart health ▪ Administer the “My Health Habits Pretest and Posttest” ▪ Take patients’ height, weight, and waist measurements ▪ Work with health care professionals to track patients’ blood pressure, cholesterol, and blood sugar ▪ Do followup activities (home visits and phone calls) to make sure patients are following their treatment plans and making lifestyle changes ▪ Provide social support and encouragement 	<ul style="list-style-type: none"> ▪ Clinics ▪ Hospitals ▪ Managed care programs ▪ Health centers ▪ Private health care providers’ offices ▪ Health departments 	<ul style="list-style-type: none"> ▪ Patients with heart disease risk factors ▪ Patients interested in learning about heart health



Outcome Evaluation Strategies and Forms

Strategy	Forms	Use This Form	Outcome Evaluation
1. Train the Trainer			
Learn how to teach the course	Community Health Workers Train the Trainer Pretest and Posttest	Before and after the training	<ul style="list-style-type: none"> ▪ Number and percentage of participants who learned more ▪ Number and percentage of participants who changed their skills
2. Community Education			
a. Teach the With Every Heartbeat Is Life course only	My Health Habits Pretest and Posttest	Before and after teaching the course	Number and percentage of participants who learned more and changed their attitudes and behaviors
b. Teach the With Every Heartbeat Is Life course and screen program participants	My Health Habits Pretest and Posttest	Before and after teaching the course	Number and percentage of participants who learned more and changed their attitudes and behaviors
	Screening Form	Before and after teaching the course	<ul style="list-style-type: none"> ▪ Number and percentage of participants referred to a health care professional ▪ Number and percentage of participants who followed up with a health care professional
3. Lifestyle and Clinical Management			
Teach the With Every Heartbeat Is Life course; screen and manage program participants	My Health Habits Pretest and Posttest	<ul style="list-style-type: none"> ▪ Before and after teaching the course ▪ 12 months after collecting initial (baseline) data 	Number and percentage of patients who learned more and changed their attitudes and behaviors
	Clinical Measures and Followup	<ul style="list-style-type: none"> ▪ Before teaching the course (baseline) ▪ 6 months after baseline ▪ 12 months after baseline 	<ul style="list-style-type: none"> ▪ Number and percentage of patients whose clinical values changed ▪ Number and percentage of patients who are taking their medications
	Community Health Worker Activities Tracking	<ul style="list-style-type: none"> ▪ First followup encounter (after the course is taught) ▪ 3-month followup ▪ 6-month followup ▪ 12-month followup 	Number and percentage of patients contacted for followup



Community Health Worker Train the Trainer

Pretest and Posttest

FOR INTERNAL USE ONLY

For Strategy 1

Participant identification (ID) number: _____

Name of teacher: _____

- | | | |
|--|-------------------------------|----------------|
| <input type="checkbox"/> Pretest | Start date (MM/DD/YYYY): | ____/____/____ |
| <input type="checkbox"/> Posttest | End date (MM/DD/YYYY): | ____/____/____ |
| <input type="checkbox"/> 30-day followup | Date of contact (MM/DD/YYYY): | ____/____/____ |

Was the participant contacted 30 days after training ended to get information about how they are using the *With Every Heartbeat Is Life* manual?

- ₁ Yes
- ₂ No

What activities is the participant doing? _____



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

Participant Information

Please tell us some information about yourself by completing this form **before the training**. Ask for assistance if you need it.

1. Today's date (MM/DD/YYYY): ____ / ____ / ____

2. Date of birth (MM/DD/YYYY): ____ / ____ / ____

3. Age (in years): _____

4. Sex

₁ Male

₂ Female

5. Do you consider yourself Latino or Hispanic?

₁ Yes

₂ No

6. Which race do you consider yourself to be?

₁ Alaska Native

₂ American Indian

₃ Asian

₄ Black or African American

₅ Native Hawaiian or other Pacific Islander

₆ White

₇ Mixed race



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

Participant Information (continued)

7. How many years of school have you completed?

- ₁ Some elementary school
- ₂ Finished elementary school
- ₃ Some high school
- ₄ Graduated from high school or received high school equivalency diploma (GED)
- ₅ Some technical/vocational school
- ₆ Graduated from technical/vocational school
- ₇ Some college/university
- ₈ Graduated from college/university
- ₉ Some postgraduate school
- ₁₀ Graduated from postgraduate school

8. Have you worked as a community health worker before?

- ₁ Yes
- ₂ No

9. If yes, for how long?

_____ years _____ months



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

Participant Information (continued)

10. What health topics have you taught? *(You may select more than one answer.)*

- ₁ None
- ₂ Asthma
- ₃ Diabetes
- ₄ Cancer
- ₅ HIV/AIDS
- ₆ Heart disease
- ₇ Others (please specify): _____

11. Have you used manuals to teach community members?

- ₁ Yes
- ₂ No

If yes, please write the name(s) of the manual(s) that you have used.

12. Is this your first training with the *With Every Heartbeat Is Life* manual?

- ₁ Yes
- ₂ No



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

Please circle only one answer for each question.

Mrs. Jones, who is 65 years old, is Gloria's mother. Mrs. Jones has diabetes and her blood pressure is 148/98 mmHg (millimeters of mercury). Her cholesterol level is 250 mg/dL (milligrams per deciliter). Mrs. Jones often buys microwave meals, gets breakfast at a fast food restaurant on her way to work, and salts the food she makes at home.

1. What are the factors that put Mrs. Jones at risk for heart disease?

- a. Using small amounts of salt at home, being physically inactive, and being overweight
- b. Having high blood pressure, having high cholesterol, and having low blood sugar
- c. Being an older woman, having high blood pressure, having high cholesterol, having diabetes, and eating a high-sodium diet
- d. Having high cholesterol, having low blood pressure, using lots of salt, and being physically inactive

2. A community health worker explains to Mrs. Jones what high blood pressure is, as follows:

- a. High blood pressure is the number that you get when you add 100 to your age.
- b. High blood pressure is when the body circulates more blood based on your height and weight.
- c. Talk to your health care provider if your blood pressure numbers are high for you.
- d. High blood pressure is when the blood suddenly stops going to the brain.

Answers: 1-c, 2-c



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

Please circle only one answer for each question.

Gloria, the daughter of Mrs. Jones, is 30 years old and 25 pounds overweight. She likes to cook and likes to make fried food. When she doesn't have time to cook, she gets the special meals at fast food restaurants. Because of pain in her legs, Gloria drives her car everywhere. She enjoys watching TV and playing computer games with her friends. Gloria's cholesterol level is 240 mg/dL.

3. What are the factors that put Gloria at risk for heart disease?

- a.** Having high cholesterol, walking, and being age 30 and overweight
- b.** Being overweight, having high blood pressure, and having a family history of heart disease
- c.** Being overweight, being physically inactive, and eating foods high in fat
- d.** Being age 30, having had a heart attack, and having low blood pressure

Answers: 3-b



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

4. Which of these lifestyle changes can help people prevent heart disease?

Mark your answer with an X.

a. Reading the food label and choosing foods with less sodium, saturated fat, and sugar

- ₁ Yes
- ₂ No
- ₃ Don't know

b. Preparing foods by baking, broiling, or boiling, instead of frying

- ₁ Yes
- ₂ No
- ₃ Don't know

c. Drinking a lot of whole milk

- ₁ Yes
- ₂ No
- ₃ Don't know

d. Stocking the kitchen with potato chips

- ₁ Yes
- ₂ No
- ₃ Don't know

e. Cooking with lard

- ₁ Yes
- ₂ No
- ₃ Don't know

f. Eating large portions of food

- ₁ Yes
- ₂ No
- ₃ Don't know

Answers: 4 a,b-yes; 4 c,d,e, f-no



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

5. This question is about food serving sizes.

Mark your answer with an X.

a. Is 1 cup of cooked oatmeal one serving?

- ₁ Yes
- ₂ No
- ₃ Don't know

b. Is 1 cup of cantaloupe one serving?

- ₁ Yes
- ₂ No
- ₃ Don't know

c. Is ½ cup of orange juice one serving?

- ₁ Yes
- ₂ No
- ₃ Don't know

d. Is 1 ounce of low-fat American cheese one serving?

- ₁ Yes
- ₂ No
- ₃ Don't know

e. Is 1 English muffin one serving?

- ₁ Yes
- ₂ No
- ₃ Don't know

Answers: 5 b,d,e-yes; 5 a, c-no



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

6. Do you think the following actions are healthy?

Mark your answer with an X.

a. Removing the skin from chicken

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

b. Cooking with lard instead of canola, olive, or corn oil

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

c. Eating canned vegetables instead of fresh or frozen vegetables

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

d. Choosing regular sandwiches instead of super-sized sandwiches when eating out

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

e. Adding fruits and vegetables to your meals

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

Answers: 6 a, d, e-agree; 6 b,c-disagree



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

7. Mark your answer with an X for the following statements.

a. Secondhand smoke isn't dangerous to your heart health.

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

b. The desirable level for LDL, the bad cholesterol, is less than 100 mg/dL.

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

c. Having a waist measurement greater than 35 inches is healthy for a woman.

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

d. Adults need about 2.5 hours of moderate to vigorous physical activity per week.

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

e. The A1C (blood) test shows the average blood sugar level during the last 3 months.

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

f. People know when they have high cholesterol because they begin to gain weight.

- ₁ Agree
- ₂ Disagree
- ₃ Don't know

Answers: 7 b, d, e-agree; 7 a, c, f-disagree



Community Health Worker Train the Trainer

Pretest and Posttest (continued)

8. A heart healthy diet should be followed by the following people:

Circle the answer below that you think correctly completes this statement.

- a. Only people who have high cholesterol
- b. Only adults who have heart disease
- c. Everyone (after age 2) for their whole life
- d. Everyone between 40 and 65 years old

9. How important is it to you to reduce your risk of heart disease?

Mark your answer with an X.

- ₁ Not important
- ₂ Somewhat important
- ₃ Important
- ₄ Very important

10. How confident are you about teaching the With Every Heartbeat Is Life course to community members? *Mark your answer with an X.*

- ₁ I am not confident.
- ₂ I am somewhat confident.
- ₃ I am confident.
- ₄ I am very confident

Answers: 8-c



Feedback Form

What Did You Think About the Training?

For Strategy 1

Participant identification (ID) number (Optional): _____

Date (MM/DD/YYYY): _____ / _____ / _____

City: _____ **State:** _____

Mark your answer with an X.

1. The training you attended was:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

3. The picture cards were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

2. The handouts in the manual were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

4. The demonstrations were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A



Feedback Form

What Did You Think About the Training? (continued)

For Strategy 1 (continued)

5. The visuals were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

7. The educational materials were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

6. The content presented was:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

8. The trainer's knowledge of the course content was:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A



Feedback Form

What Did You Think About the Training? (continued)

For Strategy 1 (continued)

9. The way the trainer taught the course was:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

10. The activities you participated in (role plays, pledges, etc.) were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

Write your answers to the following questions:

11. What did you like best about the training?

12. What did you like least about the training?

13. Are there any areas that should be improved for future trainings?



Feedback Form

What Did You Think About the Training? (continued)

For Strategy 1 (continued)

14. Will you teach the With Every Heartbeat Is Life course to community members?

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will

17. Will you share the information from the training with friends?

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will

15. Will you change your health habits?

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will

18. Will you share the information from the training with community health workers?

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will

16. Will you share the information from the training with your family?

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will



Feedback Form

What Did You Think About the Training? (continued)

For Strategy 1 (continued)

19. Are there other ways that you can share the information?

₁ Yes

₂ No

a. If yes, please explain:

20. What changes will you make as a result of participating in the training?

21. Other comments:



My Health Habits

Pretest and Posttest

FOR INTERNAL USE ONLY

For Strategies 2a, 2b, and 3

- ₁ Pretest Start Date (MM/DD/YYYY): ____/____/____
- ₂ Posttest End Date (MM/DD/YYYY): ____/____/____

Name of person administering the “My Health Habits” questionnaire:

Location:

- ₁ Clinic:
Patient identification (ID) number: _____
- ₁ Community-based organization:
Participant identification (ID) number: _____
- ₁ Other: _____
Participant identification (ID) number: _____



My Health Habits

Pretest and Posttest (continued)

Participant Information

1. **Today's date** (MM/DD/YYYY): ____ / ____ / ____

2. **Date of birth** (MM/DD/YYYY): ____ / ____ / ____

3. **Age (in years):** _____

4. Sex

₁ Male

₂ Female

5. Do you consider yourself Latino or Hispanic?

₁ Yes

₂ No

6. Which race do you consider yourself to be?

₁ Alaska Native

₂ American Indian

₃ Asian

₄ Black or African American

₅ Native Hawaiian or other Pacific Islander

₆ White

₇ Mixed race



My Health Habits

Pretest and Posttest (continued)

Participant Information (continued)

7. Have you been told by a health care professional that you have diabetes?

- ₁ Yes
 - ₂ No
 - ₃ Don't know
-

8. Does your family have a history of heart disease?

- ₁ Yes
 - ₂ No
 - ₃ Don't know
-

9. Do you have any heart disease risk factors?

- ₁ Yes
- ₂ No
- ₃ Don't know



My Health Habits

Pretest and Posttest (continued)

Salt and Sodium

How often do you do the following? *Mark your answer with an X.*

1. Do you buy fresh vegetables or low- or no-sodium canned vegetables?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

4. Do you cook from scratch to avoid high-sodium prepackaged foods?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

2. Do you use bouillon cubes when you cook?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

5. Do you add salt to the water when you cook beans, rice, pasta, or vegetables?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

3. Do you read labels to choose low- or no-sodium foods?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

6. Do you buy meats such as ham, bologna, hot dogs, or sausage?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time



My Health Habits

Pretest and Posttest (continued)

Salt and Sodium (continued)

How often do you do the following? *Mark your answer with an X.*

7. Do you use a salt shaker at the table?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

9. Do you choose fruits and vegetables instead of potato chips, French fries, and pork rinds?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

8. Do you fill the salt shaker with a mixture of herbs and spices instead of salt?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time



My Health Habits

Pretest and Posttest (continued)

Saturated Fat

How often do you do the following? *Mark your answer with an X.*

1. Do you choose fat-free milk or 1% milk when you have milk?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

3. Do you use vegetable oil to grease baking pans and skillets instead of using lard or butter?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

2. Do you choose low-fat cheese?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

4. Do you read the food label to help you choose foods lower in saturated fat, sugar, and sodium?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time



My Health Habits

Pretest and Posttest (continued)

Saturated Fat (continued)

How often do you do the following? *Mark your answer with an X.*

5. Do you remove the skin before cooking chicken?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

7. Do you choose fat-free or low-fat salad dressing or mayonnaise?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

6. Do you drain the fat and throw it away when you cook ground meat?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

8. Do you use vegetable oil to prepare your food instead of using lard?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time



My Health Habits

Pretest and Posttest (continued)

Weight Management

How often do you do the following? *Mark your answer with an X.*

1. Do you read labels to choose foods lower in calories?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

3. Do you put more vegetables on your plate than you do meat?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

2. Do you bake or grill chicken or other foods instead of frying them?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

4. Do you serve yourself large portions of food?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time



My Health Habits

Pretest and Posttest (continued)

Weight Management (continued)

How often do you do the following? *Mark your answer with an X.*

5. Do you drink water or unsweetened tea instead of regular soda?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

7. Do you eat fruit instead of desserts or snacks that have a lot of sugar?

- ₁ Never
- ₃ Sometimes
- ₃ Most of the time
- ₄ All the time

6. Do you drink lemonade with sugar or powdered drinks with sugar?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time

8. Do you eat more when you feel stressed?

- ₁ Never
- ₂ Sometimes
- ₃ Most of the time
- ₄ All the time



My Health Habits

Pretest and Posttest (continued)

Physical Activity

Mark your answer with an X.

1. Do you do any type of physical activity at your job?

- ₁ Yes
- ₂ No

2. Not including what you do at your job, do you do any other physical activity?

- ₁ Yes
- ₂ No
- ₃ If yes, answer the following questions. If no, go to **Smoking**

a. What type of physical activity do you do?
You may select more than one answer.

- ₁ Walking
- ₂ Aerobic exercise
- ₃ Playing sports
- ₄ Other (please specify): _____

c. How many minutes per day do you do physical activity?

- ₁ Less than 30 minutes
- ₂ 30 to 59 minutes
- ₃ 60 minutes or more

b. How often do you do physical activity?

- ₁ Rarely (1 day a week)
- ₂ Several times a week
(2 to 6 days a week)
- ₃ Every day



My Health Habits

Pretest and Posttest (continued)

Smoking

Mark your answer with an X.

1. Do you smoke?

₁ Yes

₂ No

2. Does anyone else in your family smoke?

₁ Yes

₂ No

3. Do you allow people to smoke in your home?

₁ Yes

₂ No



My Health Habits

Pretest and Posttest (continued)

Alcohol

Mark your answer with an X.

NOTE



One drink is one beer (12 ounces) OR one glass of wine (5 ounces) OR 1½ ounces of distilled spirits (liquor, straight or in a mixed drink). Moderate drinking is up to 1 drink per day for women and up to 2 drinks per day for men.

1. Do you drink alcohol?

- ₁ Yes
- ₂ No
- ₃ If yes, answer the following questions. If no, go to **Knowledge**.

a. How often do you drink?

- ₁ Rarely (on special occasions)
- ₂ Occasionally (once a month)
- ₃ Once a week
- ₄ Regularly (several times a week)
- ₅ Every day

c. How often do you drink more than three drinks in one day?

- ₁ Never
- ₂ Once or twice a week
- ₃ Three to six times per week
- ₄ Every day

b. When you drink, how many drinks do you have per occasion?

- ₁ One to two drinks
- ₂ Three to four drinks
- ₃ Five or more drinks



My Health Habits

Pretest and Posttest (continued)

Knowledge

Mark your answer with an X.

1. Can your waist measurement indicate that you have a high risk of heart disease?

- ₁ Yes
- ₂ No
- ₃ Don't know

4. Can eating foods that are high in sodium increase your risk of high blood pressure?

- ₁ Yes
- ₂ No
- ₃ Don't know

2. Can the BMI chart tell you if you're overweight?

- ₁ Yes
- ₂ No
- ₃ Don't know

5. Does lard have a low amount of saturated fat?

- ₁ Yes
- ₂ No
- ₃ Don't know

3. Does your liver make all of the cholesterol your body needs to be healthy?

- ₁ Yes
- ₃ No
- ₃ Don't know

6. Can eating too much saturated fat raise your cholesterol level?

- ₁ Yes
- ₂ No
- ₃ Don't know

Answers: 1, 2, 3, 4, 6 -yes; 5-no



My Health Habits

Pretest and Posttest (continued)

Knowledge (continued)

Mark your answer with an X.

7. Is a consistent blood pressure of 140/90 mmHg considered high?

- ₁ Yes
- ₂ No
- ₃ Don't know

9. Is being physically active a way to reduce your risk for heart disease?

- ₁ Yes
- ₂ No
- ₃ Don't know

8. If you haven't gained weight, does that mean your cholesterol is fine?

- ₁ Yes
- ₂ No
- ₃ Don't know

10. Is it only people with high cholesterol who need to follow a heart healthy diet?

- ₁ Yes
- ₂ No
- ₃ Don't know

Answers: 7, 9-yes; 8, 10-no



My Health Habits

Pretest and Posttest (continued)

Knowledge (continued)

Mark your answer with an X.

11. Can nonsmokers die from secondhand smoke?

- ₁ Yes
- ₂ No
- ₃ Don't know

13. Is having a waist measurement greater than 35 inches healthy for a woman?

- ₁ Yes
- ₂ No
- ₃ Don't know

12. Is having a fasting blood sugar of 126 mg/dL or higher considered diabetes?

- ₁ Yes
- ₂ No
- ₃ Don't know

14. How confident are you in your ability to cook heart healthy foods?

- ₁ Not confident
- ₂ Somewhat confident
- ₃ Confident
- ₄ Very confident

Answers: 11, 12-yes; 13-no



My Health Habits

Pretest and Posttest (continued)

A Day With the Harris Family

People act in different ways when they learn they need to make lifestyle changes to lower their chances of getting heart disease.

Read about how the members of the Harris family react to the news about their risks for heart disease. Then place an X next to the name of the family member with whom you identify the most.



The Disbeliever

It takes awhile and some convincing for Darnell to decide to take care of his heart. At first he says he isn't concerned that he's at risk for heart disease. He doesn't intend to change. "Nothing's going to happen to me," he says.



The Frustrated

James is frustrated because he's aware of his risk factors for heart disease, he's made some changes, but he can't control all of them. "Sometimes you try as hard as you can, but if there's a brick wall standing between you and your goal, what can you do?" says James.



The Well Intentioned

When Pam first learns that she's at risk for heart disease, she's going to take action right away to improve her health. But instead, for a long time, she puts it off. "It's harder walking the walk than talking the talk," she says.



The Active

Ms. Diane (Grandma Harris) learns that she's at risk for heart disease and quickly makes a plan. She gets information and attends classes to learn how to improve her health. She makes healthy lifestyle changes, sets reasonable goals, and helps others to do the same. "Once you know better, you owe it to yourself to do better," says Ms. Diane.



The Believer

Kayla is very motivated to make changes to improve her health. She knows it's easy to fall back into old habits. She makes plans to prevent setbacks, but starts over again when they happen. Kayla believes she and her family can achieve a heart healthy lifestyle. She has a positive attitude, asks for help when needed, and doesn't give up. "If I just believe it, then I can do it!" says Kayla.



My Health Habits

Posttest Only (continued)

Please answer these questions after completing all of the sessions of the With Every Heartbeat Is Life course. *Mark your answer with an X.*

1. How satisfied are you with the With Every Heartbeat Is Life sessions presented by community health workers?

- ₁ Not satisfied
- ₂ Somewhat satisfied
- ₃ Satisfied
- ₄ Very satisfied

2. With whom have you shared the information from the sessions?

Mark your answer with an X. You can select more than one answer.

- ₁ Friends
- ₂ Family
- ₃ Coworkers
- ₄ Others (please specify): _____



Screening Form

FOR INTERNAL USE ONLY

For Strategy 2b

Participant identification (ID) number: _____

Name of person completeing the form: _____

Community health worker identification (ID) number: _____

Location:

₁ Community-based organization: _____

₂ Other setting (please specify): _____

Name of partnering organization: _____



Screening Form (continued)

Use this chart to record the screening information from each participant

Measurement	Pretest Date (MM/DD/YY) ____ / ____ / ____	Posttest Date (MM/DD/YY) ____ / ____ / ____
Blood Pressure (Average of two readings)		
Systolic (top number)	_____ mmHg	_____ mmHg
Diastolic (bottom number)	_____ mmHg	_____ mmHg
Overweight and Obesity		
Height	_____ feet _____ inches	_____ feet _____ inches
Weight	_____ pounds	_____ pounds
BMI	_____ BMI	_____ BMI
Waist measurement	_____ inches	_____ inches
Cholesterol		
Total	_____ mg/dL	_____ mg/dL
LDL	_____ mg/dL	_____ mg/dL
HDL	_____ mg/dL	_____ mg/dL
Triglycerides	_____ mg/dL	_____ mg/dL
Blood Sugar		
A1C	_____ %	_____ %
Blood sugar level (nonfasting)	_____ mg/dL	_____ mg/dL
Blood sugar level (fasting)	_____ mg/dL	_____ mg/dL

Refer all participants with elevated levels for further evaluation.

1. Does participant have elevated level(s)?

- ₁ Yes
- ₂ No

2. Did the participant go for followup care?

- ₁ Yes
- ₂ No

If yes, participant was referred to:



Clinical Measures and Followup Form

FOR INTERNAL USE ONLY

For Strategy 3

Participant identification (ID) number: _____

Name of person completing the form: _____

Community health worker identification (ID) number: _____

Location:

Clinic



Clinical Measures and Followup Form (continued)

Participant Information

1. **Today's date** (MM/DD/YYYY): ____ / ____ / ____

2. **Age (in years):** _____

3. **Sex**

- ₁ Male
 ₂ Female

4. **Do you consider yourself Latino or Hispanic?**

- ₁ Yes
 ₂ No

6. **Does your family have a history of heart disease?**

- ₁ Yes
 ₂ No
 ₃ Don't know

5. **Which race do you consider yourself to be?**

- ₁ Alaska Native
 ₂ American Indian
 ₃ Asian
 ₄ Black or African American
 ₅ Native Hawaiian or other Pacific Islander
 ₆ White
 ₇ Mixed race

7. **Do you have any heart disease risk factors?**

- ₁ Yes
 ₂ No
 ₃ Don't know



Clinical Measures and Followup Form (continued)

Participant Information (continued)

Measurement	Baseline Date: ___ / ___ / ___	6 months after baseline Date: ___ / ___ / ___	12 months after baseline Date: ___ / ___ / ___
8. Cholesterol			
Have you been told by a health care provider that you have high cholesterol?	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
Are you on medication?	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
Total	_____ mg/dL	_____ mg/dL	_____ mg/dL
LDL	_____ mg/dL	_____ mg/dL	_____ mg/dL
HDL	_____ mg/dL	_____ mg/dL	_____ mg/dL
Triglycerides	_____ mg/dL	_____ mg/dL	_____ mg/dL
9. Blood Pressure			
Have you been told by a doctor or other health professional that you have high blood pressure?	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
Are you on medication?	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
Systolic	_____ mmHg	_____ mmHg	_____ mmHg
Diastolic	_____ mmHg	_____ mmHg	_____ mmHg



Clinical Measures and Followup Form (continued)

Participant Information (continued)

Measurement	Baseline Date: ___ / ___ / ___	6 months after baseline Date: ___ / ___ / ___	12 months after baseline Date: ___ / ___ / ___
10. Diabetes			
Have you been told by a health care provider that you have prediabetes?	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
Have you been told by a health care provider that you have high blood sugar levels?	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
Are you on medication?	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
A1C	_____ %	_____ %	_____ %
Blood sugar level (fasting)	_____ mg/dL	_____ mg/dL	_____ mg/dL
11. Overweight and Obesity			
Weight	_____ pounds	_____ pounds	_____ pounds
Height	_____ feet _____ inches	_____ feet _____ inches	_____ feet _____ inches
BMI	_____ BMI	_____ BMI	_____ BMI
Waist measurement	_____ inches	_____ inches	_____ inches
12. Medication <i>(If the patient is on medication[s], ask the question below.)</i>			
Do you take your medication as prescribed by your health care provider?	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No



Clinical Measures and Followup Form (continued)

Participant Information (continued)

Measurement	Baseline Date: ___ / ___ / ___	6 months after baseline Date: ___ / ___ / ___	12 months after baseline Date: ___ / ___ / ___
13. If the answer to question 12 is “no,” please ask the patient: “Can you tell me why you’re not taking your medication?” <i>(Based on the patient’s response, please check all the answers that apply.)</i>			
a. I believe taking medication every day isn’t good for me.	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
b. I forget to take my medication.	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
c. My provider’s directions were confusing.	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
d. I stopped taking medication when I felt better.	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
e. I feel sick when I take the medication.	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
f. I don’t have anyone to help me.	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
g. The medication is too expensive.	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
h. Other reason (please specify):	_____	_____	_____



Community Health Worker Activities Form

FOR INTERNAL USE ONLY

For Strategy 3

Please complete this form after the course is taught, to record the encounters with the patient.

Participant identification (ID) number: _____

Name of person completing the form: _____

Community health worker identification (ID) number: _____

Name of person who taught the course: _____

Location:

Clinic



Community Health Worker Activities Form (continued)

For Strategy 3 (continued)

Which of the following activities do you do for your patients? *Mark your answer with an X.*

Activities	First followup encounter Date: ___/___/___	3 month followup Date: ___/___/___	6 month followup Date: ___/___/___	12 month followup Date: ___/___/___
1. Listen to their concerns	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
2. Make appointments for them	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
3. Remind them to keep appointments	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
4. Make transportation arrangements	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
5. Serve as interpreter	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
6. Provide counseling/educational materials	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
7. Go over counseling/educational materials	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
8. Ask if they have any questions about their medication	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
9. Encourage them to stay on their treatment plan	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
10. Give suggestions for how to remember to take their medicine	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No



Community Health Worker Activities Form (continued)

For Strategy 3 (continued)

Which of the following activities do you do for your patients? *Mark your answer with an X.*

Activities	First followup encounter Date: ___/___/___	3 month followup Date: ___/___/___	6 month followup Date: ___/___/___	12 month followup Date: ___/___/___
11. Ask about difficulties with changing their lifestyle habits	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
12. Explain the benefits of changing their lifestyle	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
13. Encourage them to participate in support groups	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
14. Refer them to health and community services	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
15. Conduct followup home visit	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
16. Make followup phone calls	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
17. Write down what you discussed during the home visit or phone call	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
18. Meet with your supervisor on a regular basis	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
19. File notes in their chart	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No
20. Other: _____	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No	<input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₂ No



Recording Log

Strategies 1, 2a, 2b, and 3

Strategy	Use This Form	Information
1. Train the Trainer		
Learn how to teach the course	Attendance record	<ul style="list-style-type: none"> ▪ Number of participants trained _____ ▪ Number of sessions taught _____
	Feedback Form	<ul style="list-style-type: none"> ▪ Number and percentage of participants who rate the training “good” or higher _____ ▪ Number and percentage of participants who report that they “will” or “most likely will” change their health habits _____
	Community Health Workers Train the Trainer (Posttest Only)	<ul style="list-style-type: none"> ▪ Number and percentage of participants using the <i>With Every Heartbeat Is Life</i> manual 30 days after the training _____ ▪ Types of activities that participants are completing 30 days after the training _____
2. Community Education		
a. Teach the course only	Attendance record	<ul style="list-style-type: none"> ▪ Number of participants trained _____ ▪ Number of sessions taught _____
	My Health Habits Posttest	<ul style="list-style-type: none"> ▪ Number of participants satisfied with the course _____ ▪ Number of participants who shared information about the course _____
b. Teach the course and screen program participants	My Health Habits Posttest	<ul style="list-style-type: none"> ▪ Number of participants satisfied with the course _____ ▪ Number of participants who shared information about the course _____
	Screening Form	<ul style="list-style-type: none"> ▪ Number of participants screened _____ ▪ Number of participants with elevated clinical values _____ ▪ Number of participants referred to a health care professional _____ ▪ Number of participants who followed up with a health care professional _____



Recording Log (continued)

Strategies 1, 2a, 2b, and 3 (continued)

Strategy	Use This Form	Information																																																												
3. Lifestyle and Clinical Management																																																														
Teach the With Every Heartbeat Is Life course; screen and manage program participants	Attendance Record	<ul style="list-style-type: none"> Number of patients counseled/taught _____ Number of sessions taught _____ 																																																												
	My Health Habits Posttest	<ul style="list-style-type: none"> Number of participants satisfied with the With Every Heartbeat Is Life course _____ Number of participants who shared information about the With Every Heartbeat Is Life course _____ 																																																												
	Clinical Measures and Followup Form	<table border="1"> <thead> <tr> <th>Information</th> <th>Baseline</th> <th>6 months</th> <th>12 months</th> </tr> </thead> <tbody> <tr> <td>Number of patients screened</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Number of patients with:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Prehypertension</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High blood pressure</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High cholesterol</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Prediabetes</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High blood sugar</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ BMI of 25 or more</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Waist measurement greater than 35 inches (for women)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Waist measurement greater than 40 inches (for men)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Number of patients taking medications for:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High blood pressure</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High cholesterol</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Diabetes</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Information	Baseline	6 months	12 months	Number of patients screened				Number of patients with:				▪ Prehypertension				▪ High blood pressure				▪ High cholesterol				▪ Prediabetes				▪ High blood sugar				▪ BMI of 25 or more				▪ Waist measurement greater than 35 inches (for women)				▪ Waist measurement greater than 40 inches (for men)				Number of patients taking medications for:				▪ High blood pressure				▪ High cholesterol				▪ Diabetes			
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Community Health Worker Activities Form	<ul style="list-style-type: none"> Number of patients contacted at first encounter _____ Number of patients contacted at 3 months _____ Number of patients contacted at 6 months _____ Number of patients contacted at 12 months _____ Listed the activities community health workers conducted at first encounter, at 3 months, at 6 months, and at 12 months _____ 																																																													



Tips for Collecting Data

Before you begin:

- Check with your organization. It or its Institutional Review Board may need to approve the data collection forms before you use them. You need to protect participants' privacy and get their consent when doing evaluations. You'll need to follow the policies of your organization and your funding agency.
- Make sure you understand how to fill out a questionnaire before you ask others to fill it out. Know the form well, so you can answer any questions participants may have.

When you administer a questionnaire:

- Bring plenty of forms and pens with you.
- Ask participants to answer each question completely. Missing information will make it hard for you to analyze the data.
- If the budget allows, give a small prize to thank people who sign up for the program or fill out your form.
- Always remember to thank participants.

NOTE



During the pretest and posttest, you can **read** the questions out loud if people need help with their forms. Don't give answers to the questions.



Develop an Evaluation Workplan

Write your workplan to evaluate With Every Heartbeat Is Life. Here are three examples of what to do. These examples can help you think through your own evaluation plan.

Example 1: Training Community Health Workers To Promote the With Every Heartbeat Is Life Course in Your Community

- Your agency has agreed to conduct a With Every Heartbeat Is Life Train the Trainer workshop for 25 community health workers from community agencies.
- Your supervisor asks you and two other community health workers to plan a Train the Trainer workshop and develop the evaluation plan.

Who is your target audience?	What strategy will you use?	Which forms will you use to collect the data?	What activities will you use to conduct the evaluation?	Who will manage the data?	Who will write the evaluation report?
			How will you recruit participants?	Who will collect the data?	
			When will you schedule the workshop?	Who will enter the data?	
			Who will teach the workshop?	Who will analyze the collected data?	



Develop an Evaluation Workplan (continued)

Example 2: Helping Community Members Make Heart Healthy Lifestyle Changes

- Your community-based organization is in Baltimore.
- Your supervisor asks you to help develop the evaluation plan for the With Every Heartbeat Is Life course.
- The course is for adults ages 30 to 60.
- The goal is to recruit, teach, and increase the knowledge, attitudes, and skills of the community members attending the course.

Who is your target audience?	What strategy will you use?	Which forms will you use to collect the data?	What activities will you use to conduct the evaluation?	Who will manage the data?	Who will write the evaluation report?
			<p>How will you recruit participants?</p> <p>When will you schedule the classes?</p> <p>Who will teach the classes?</p>		



Develop an Evaluation Workplan (continued)

Example 3: Helping Patients Manage Their Risk Factors for Heart Disease and Make Lifestyle Changes

- Your clinic is located in Southeast Washington, D.C.
- Your clinic has decided to get involved in a comprehensive project on heart health to help patients change their behaviors and lower their clinical levels (such as blood pressure, cholesterol, and blood sugar).
- You and two other community health workers attended a community health workers conference and received the *With Every Heartbeat Is Life* manual.
- Now, your supervisor wants your group to develop activities and an evaluation plan for the project.

Who is your target audience?	What strategy will you use?	Which forms will you use to collect the data?	What activities will you use to conduct the evaluation?	Who will manage the data?	Who will write the evaluation report?
			<p>How will you recruit participants?</p> <p>When will you schedule the classes?</p> <p>Who will teach the classes?</p>		