

Assessing Your Healthy Start CAN

Guiding Questions and Recommended Tools

Conducting a formal assessment among your CAN members can be a key tool for understanding CAN progress, needs, and ability to achieve equity. Assessments can also be used with priority persons/populations that are NOT attending your CAN events, to understand what would better engage them.

Why should HS grantees assess their CANs?

Healthy Start CANs should be routinely assessed to:

- Support the aim of addressing CAN work through a healthy equity lens
- Fortify relationship between CAN and grantee
- Ensure that the CAN membership is reflective of key stakeholders
- Cultivate and sustain effective community collaboration and partnership
- Inform management procedures, including recruitment and retention plans
- Gather information that supports CAN priorities
- Achieve HS performance measure benchmarks

How can HS grantees assess their CANs?

HS grantees should conduct assessments of their CANs in the ways that ensure accessibility to all CAN participants, linguistically and by level of language; and also ensure that information gathered will be useful to CAN and grantees. Assessments may be conducted by way of:

- Grantee-constructed surveys, specific to grantee's need and inquiry, or they may choose to use evidence-based/evidence-informed tools
- Listening sessions- Grantees may also choose to convene listening sessions where CAN members and stakeholders come together to discuss mission/vision/goals of CAN and addressing strengths, challenges, limitations, and work plans of the CAN.

What or which type of assessment can be used to assess the CANs?

- **Surveys/assessments**-e.g. using grantee/stakeholder created tools like SurveyMonkey or Microsoft Forms which capture data reflective of CAN demographics, members' skills, experience of participating on the CAN, addressing end goal/mission/vision of CAN; **OR** use evidence-based/evidence-informed tools, e.g. Wilder assessment, Partnership Survey, School Wellness Champion Survey, the American Association of Medical College Diversity and Inclusion Strategic Planning toolkit, or other option selected by the grantee
- **Focus groups**- convening CAN members and stakeholders to discuss mission/vision/goals of CAN and addressing strengths, challenges, limitations, lessons learned, and work plans of the CAN.
- **Purpose of assessment**- to ensure CAN is also promoting standards of care and practices of accountability across the HS grantee system of care.

When should you assess the CANs?

The frequency of assessment should be determined by the need of grantee/CAN, and how the gathered data will be used. Factors to consider: the focus on the CAN as a collective and its work plan, or if you want to gather data on members (demographics) and their experiences re: participation on the CAN.

Frequency of data gathering may be more frequent than the presentation of this report's findings and trends. E.G. CAN presents Survey to all members of CAN to gather initial data or baseline functioning and then to new members as they come on board; **OR** assess the entire CAN biannually or annually with a survey/assessment or focus group and data findings presented annually to reflect the most impact. Also consider the increments of change that are most useful to the CAN and grantee.

Sample Resources/Assessment Tools:

1. **Partnership Self-Assessment Tool:** to provide a measurement of the key indicators for successful collaboration and level of synergy. This 15-page "Partnership Self-Assessment Tool" contains a total of 67 questions. Eleven sections deal with the following topics:
 - Synergy
 - Leadership
 - Efficiency
 - Administration and management
 - Non-financial resources
 - Financial and other capital resources
 - Decision making
 - Benefits of participation
 - Drawbacks of participation
 - Benefits and drawbacks of participating in the partnership
 - Satisfaction with participation

Each section uses a Likert scale and/or yes and no questions. A Coordinator's Guide is the main instructional resource for this tool. This tool has been successfully used by Bronx Healthy Start. For questions contact: [David Lounsbury](#).

2. **Wilder Collaboration Factors Inventory:** Consists of 20 factors gleaned from empirical studies of what influences successful collaborations formed by nonprofit organizations, government agencies and other organizations.
 - Designed to be a tool for collaborative groups
 - Used periodically and repeatedly to help identify strengths and weaknesses with respect to the 20 factors that influence collaborative success.

This tool has been successfully used by Centerstone Healthy Start in Tennessee. For questions contact: [Rachel Hanson](#).

3. **Healthy Start CAN Annual Assessment:** A 13-item tool developed by Healthy Start San Diego to understand alignment around key HRSA collective impact reporting elements as defined in the annual performance report (HS-08): a common agenda, data collection across partners, present data on a consistent basis, and make informed decisions about future CAN activities. This tool prioritized brevity and alignment with HRSA reporting; questions should be tailored to the specific activities of each Healthy Start site. Approximately half of the questions are multiple choice and half qualitative or free response. Healthy Start San Diego includes a small incentive for a random sample of respondents to increase the response rate. For questions contact: [Lisa Bain](#).

4. **School Wellness Champion Survey:** This 34-item questionnaire was developed to assess how school wellness champions work together to support health and wellness policies, programs and activities. It is a product of a participatory research project funded by the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK R01 DK097096; Wylie-Rosett, PI; https://github.com/dlounsby/HS_wellness_toolkit). This tool is recommended by Bronx Healthy Start for adaptation in Healthy Start contexts.

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