



**COMMUNITY HEALTH WORKER**  
Workforce Collaborative

# **OUTREACH AND EDUCATION SURVEY INSTRUCTIONS MANUAL**

CHW Collaborative Workforce

*The purpose of this manual is to help guide you in filling out the Outreach and Education Survey.  
In addition to protocols, this document includes answers to questions you may have when  
handling the forms*



## HOW TO ACCESS THE OUTREACH AND EDUCATION SURVEY

There are two methods to accessing the Outreach and Education Survey.

Use the following link: <https://www.surveymonkey.com/r/QCQT7NS>

OR

QR Code:



## HOW TO FILL OUT THE OUTREACH AND EDUCATION SURVEY

*This section of the manual will break down the survey step by step to clarify any questions or confusion you may have.*

### Q1: CHW1 or CHW 2 Grant

\* 1. Are you completing this Outreach and Education form for the CHW 1 (U3S) or CHW 2 (U3U) grant?

CHW 1 grant (U3S)

CHW 2 grant (U3U)

Indicate here which grant you are filling this out for.  
If you are in CHW1, please click “CHW 1 grant (U3S)”  
If you are in CHW2, please click “CHW 2 grant (U3U)”.

*If you are unsure - please ask your manager or supervisor.*

### Q1: Partner Organization Name

\* 2. Partner Organization Name

Indicate here which partner organization you work for. NAOPO members are listed together followed by all partners directly contracting with AAPCHO in order of state and name.

### Q2: CHW Identifier

\* 2. CHW Identifier:

Indicate your CHW identifier that is specific to you, and that you use to identify yourself in the community member profile form and CHW profile form.



**Q3: Number of people reached at event (both vaccinated and unvaccinated)**

\* 3. Number of people reached at event (both vaccinated and unvaccinated):

Indicate the number of people that you specifically spoke to or interacted with. This can include passing out flyers, speaking to individuals or groups, hosting workshops or checking people in/out, etc. If you cannot provide a specific number, estimate the number. This number cannot be negative. For online events/campaigns, indicate the number of people who have ‘viewed’, ‘liked’ the posts. This can also include people who have reached out to you due to the online event/campaign.

**Q4: Zip code of event**

\* 4. Zip code of event:

This outreach covers too big an area to enter a single ZIP code - such as a tweet or webinar

Otherwise, specify the zip code here (please specify)

Choose one of the following. Indicate the zip code (postal code – 5 numbers). This will be the physical location of the event hosted. If the event was virtual, select the option: “This outreach covers too big an area to enter a single ZIP code – such as a tweet or webinar”.



**Q5: If multiple zipcodes were reached, indicate additional zipcodes here**

\* 5. If multiple zipcodes were reached, indicate additional zipcodes here:

If the event was mobile and was physically in multiple locations, please indicate all zip codes that the event was held at. If there was only one location and no other zip codes were reached, please input 'N/A'.

**Q6: City and State of event**

\* 6. City and state of event (ex: Chicago, IL)

Indicate the City and State of the event. For example, Chicago Illinois, input: Chicago, IL (Abbreviate State).

**Q7: Neighborhood in the City**

\* 7. Neighborhood in the city (ex: The Bronx in New York, NY):

Indicate the neighborhood in the city. For example, The Bronx in New York, NY, or Pilsen in Chicago IL. Include the City and State with the neighborhood in the City.



**Q8: Date of the Outreach Effort**

\* 8. Date of the outreach effort - Use the following format for your answer: MM/DD/YYYY.

Date / Time

Date

MM/DD/YYYY

Indicate the date of when the event was hosted in this format of: Month/Date/Year

Use the following numbers for the month:

- |                |               |               |               |
|----------------|---------------|---------------|---------------|
| January – 01   | February – 02 | March – 03    | April – 04    |
| May – 05       | June – 06     | July – 07     | August – 08   |
| September – 09 | October – 10  | November – 11 | December – 12 |

After finding the following number for month – please combine it with the day with month first, then day.

Indicate the 0’s for the single digits

Example: January 5, 2022: 01/05/2022.

**Q9: What type of location is this outreach occurring at?**

\* 9. What type of location is this outreach occurring at?

Indicate the type of physical location or building where the event was being held. If none of the answers apply to the event, click on the following “Some other type of site (please specify)”, and write down the type of location.



**Q10: Is this the first time that this community member or group of community members has been contacted? If this is a group and it is the first time for most participants to be contacted, select ‘Yes’**

\* 10. Is this the first time that this community member or group of community members has been contacted? If this is a group and it is the first time for most participants to be contacted, select yes.

Yes

No

If you noticed that the majority of the participants/community members/patients are new to the event or health center, please indicate ‘Yes’. If majority of the participants/community members/patients have been seen with the health center or the event before, please indicate ‘No’

**Q11: Is this outreach occurring in the English language?**

\* 11. Is this outreach occurring in the English language?

Yes

No

Indicate ‘Yes’ if the event was being held in English. If English was not the primary language for this event, please indicate ‘No’ and. Continue to Question 12. If multiple languages occurred, **including English**, indicate ‘Yes’, and continue to fill out Question 12.



**Q12: If your answer is "No" (the outreach is not in English), then please list all other languages other than English that are being used below. If this outreach is occurring in English AND in another language, then please check BOTH boxes and ALSO list all other languages other than English that are being used below**

\* 12. If your answer is "No" (the outreach is not in English), then please list all other languages other than English that are being used below. If this outreach is occurring in English AND in another language, then please check BOTH boxes and ALSO list all other languages other than English that are being used below:

Language 1:

Language 2:

Language 3:

If you selected 'No' to Question 11 (If the event was not held in English), please indicate the language(s) the event was held in. If the event was held in multiple languages, including English, list the other language(s) other than English.

If you clicked 'Yes' to Question 11, please indicate 'N/A' to this question

**Q13: Which of the following methods are being used for this outreach effort (check all that apply)**

13. Which of the following methods are being used for this outreach effort:

Indicate ALL of the types of methods used to spread awareness about the event. This can include efforts from yourself, your colleagues, and the health center.





**Q14: How many community members receiving this outreach/intervention today say that they agree to receive a COVID-19 vaccine**

14. If possible to determine, how many community members receiving this outreach/intervention today say that they agree to receive a COVID-19 vaccine as a result of your efforts/intervention?

- This cannot be determined.
- This can be determined (please specify the number of people who agree to get vaccinated):

Indicate the number of people that say they will receive a COVID-19 vaccine. The community member does not need to receive the vaccine the same day. This question is specific to you and does not include your colleagues.

**Q15: Please select ALL of the characteristics of the community member(s) present (Check all that apply)**

15. Please select ALL of the characteristics below that describe the community member(s) present for/receiving/participating in this intervention today.

Indicate ALL types of people who interacted with you or were at the event.

**Q16: If this intervention was specifically geared to a specific population of community members, then please select ALL of the characteristics below that describe who this outreach/intervention was intended for.**

16. If this intervention was specifically geared to a specific population of community members (for example, this was an event at a high school specifically for teenagers, or it was specifically for the LGBTQ+ community at an LGBTQ+ resource center), then please select ALL of the characteristics below that describe who this outreach/intervention was intended for.

If the event was specific to a community (Example: Held at a Korean Church, or specifically to reach for the Korean community), indicate the characteristics that fit who the event was intended for.

## FREQUENTLY ASKED QUESTIONS

### **Who's required to fill out the survey? Only CHWs?**

*Any staff members who are part of the CHW Workforce Collaborative. This can include, but is not limited to: CHWs, Outreach assistants, project managers, CHW managers.*

### **Why do we need to fill out this survey?**

*This survey helps us understand how to increase COVID-19 vaccination rates and to help tailor materials and resources for you*

### **When is the best time to fill out this survey?**

*This survey is best filled out after the event has been completed*

### **How often do I need to fill out this survey?**

*This survey needs to be completed after every event*

### **Can I return to the survey if I haven't completed it?**

*No, you must finish the survey once you start it*

### **Does this survey ask for any personal information?**

*The survey does not ask for any personal information of the patient or yourself. The CHW identifier is there to protect your identity. Do not include any personal information.*

### **What if I don't know my CHW identifier?**

*Write down the CHW identifier that you use when filling out the Community Member Profile Form.*

### **What if the outreach and education event was held virtually?**

*Continue to fill out the survey. There are options to click for virtual*

### **What if I work for a chapter or a separate organization that is housed underneath the Health Center? (Question 2)**

*Indicate the health center name*

### **What if I don't know how many people I have interacted with? There were so many people. (Question 4)**

*Do your best to estimate and guess the number of people you have interacted with.*

### **What if I didn't interact with anybody in the event and I focused on more organizing. What does interaction mean?**

*Interacting can include but not limited to speaking (verbally or written) with a community member or patient, directing them to a location, providing any assistance whether it be on COVID-19 related or not, speaking with patients on the phone, etc. If you had absolutely no interactions with a community member, indicate 0.*

**What if I'm unsure about the neighborhood where the event was held? (Question 7) But I know the City and State.**

*Indicate the North/West/East/South of the City, and still include the City and State.*

**What if the event was held over multiple days? (Question 9). Which date do I put down?**

*Indicate the date that you worked for the date of outreach effort.*

**What if the event reached out to other types of community members than what was intended for? (Question 17)**

*That's alright! Indicate the characteristics for who the event was originally intended for.*

**What if I have more questions about the survey that was not answered through this manual?**

*Please contact Nashia and Julia, and CC' Vanessa with your question(s).*

**Contact Information:**

Nashia Choudhury, Program Director: [nchoudhury@aapcho.org](mailto:nchoudhury@aapcho.org)

Vanessa Wan, Program Coordinator: [vwan@aapcho.org](mailto:vwan@aapcho.org)

Julia Liu, Data Lead: [jliu@aapcho.org](mailto:jliu@aapcho.org)

Jen Lee, Deputy Director of AAPCHO: [jlee@aapcho.org](mailto:jlee@aapcho.org)