APPENDIX B

SAMPLE FORMS

Contact or Encounter Form — 109 Form for Items Distributed — 110 Form for Items Received — 111

Contact or Encounter Form

Design a brief form, similar to the one shown here, to keep track of all contacts related to program activities between program personnel and people outside the program. Tailor the *type of contact* and *services provided* sections to the activities conducted by your program. For example, an enforcement program might have a list of reasons for stopping drivers or a list of types of sobriety checks. If a category labeled *Other* is used frequently, you need to add new categories to accommodate items that are being assigned to *Other*. Below is a general contact form that can be adapted for any program to prevent unintentional injury.

Contact or Encounter Form			Contact/Encounter No.:		
Type of Contac	t	Other Assistar	nce Provided		
Telephone 🗅		Information Only			
Personal Meeting		Training			
Electronic Mail		Consultation			
Other (Specify)		Counseling			
		Curriculum or Materials			
		Other (Specify)			
Who Initiated Co	ntact				
Program Staff					
Program Participant		Program S			
Other (Specify)		Participated	in Contact		
Purpose of Conta	act				
Request for Financial Support					
Request for Legislative Support					
Request for Other Support					
Request for Volunteer Services					
Offer of Volunteer Services					
Request to Participate in Program					
Request for Information					
Request for Incentive					
Other (Specify)					

FORM FOR ITEMS DISTRIBUTED

A distribution form should be completed for each unit (i.e., person or household in the target population) to whom items (e.g., infant safety seats) were distributed. The purpose is to document the number of items distributed and the characteristics of the people who received the item(s). Below is a generic form that can be adapted to suit your program.

	D	Distribution No.	[Number Consecutively]				
		Date	:				
List of Itoms Distributed:							
List of Items Distributed:							
Number of item(s) distributed:	Location wl	nere item(s) were distributed:					
Item(s) Distributed To Households							
Number of people in household:		-					
Age and sex of people in household:	Age and sex of people in household: [Divide by appropriate intervals, say 5- or 10-year intervals]						
10 years or under	Females:	Males:					
11-20 years	Females:	Males:					
21-30 years	Females:	Males:					
31–40 years	Females:	Males:					
41-50 years	Females:	Males:					
51-60 years	Females:	Males:					
61-70 years	Females:	Males:					
71 years or older	Females:	Males:					
Item(s) Distributed To Individuals							
Age and sex of individual person: [Di	ivide by appropriate	intervals, say 5- or 10-year in	tervals]				
10 years or under	Female: 🗖	Male: 🖵					
11–20 years	Female: ם	Male: 🖵					
21-30 years	Female: ם	Male: 🗅					
31-40 years	Female: 🗖	Male: 🗖					
41–50 years	Female: 🗅	Male: 🗖					
51–60 years	Female: 🗖	Male: 🗖					
61–70 years	Female: 🗖	Male: 🗖					
71 years or older	Female:	Male: 🗖					
Other Assistance Provided							
Installation 🗅	Training 🗅	Counseling 🗅 Re	ferral 🗖				

FORM FOR ITEMS RECEIVED

Keep track of all items given to you by members of the target population. An example of items received would be car safety seats returned to a loan program. The purpose is to document the number of items received and the characteristics of the people who hand in the items. Below is a generic form that can be adapted to suit your program.

ITEMS RECEIVED		Receipt No.:	[Number Consecutively]	
		Date:		
List of Items Received:				
Number of item(s) received:	Location wh	ere item(s) were received:		
	Item(s) Received From	m Households		
Number of people in household: _				
Age and sex of people in household	1: [Divide by appropriat	e intervals, say 5- or 10-year	intervals]	
10 years or under	Females:	Males:	_	
11–20 years	Females:	Males:	_	
21-30 years	Females:	Males:	_	
31-40 years	Females:	Males:	_	
41-50 years	Females:	Males:	_	
51-60 years	Females:	Males:	_	
61-70 years	Females:	Males:	_	
71 years or older	Females:	Males:	-	
	Item(s) Received Fro	om Individuals		
Age and sex of individual person: [I	Divide by appropriate in	tervals, say 5- or 10-year intervals	ervals]	
10 years or under	Female: ם	Male: 🗖		
11-20 years	Female: 🖵	Male: 🗖		
21-30 years	Female: 📮	Male: 🗖		
31-40 years	Female: 🗖	Male: 🗖		
41-50 years	Female: 🛛	Male: 🗖		
51-60 years	Female: 🗖	Male: 🗖		
61–70 years	Female: 🗖	Male: 🗖		
71 years or older	Female: 🖵	Male: 🖵		
Other Assistance Provided				
Counseli	ng 🖵 Referral	□ Training □		

Appendix C

CHECKLIST OF TASKS

For Programs to Prevent Unintentional Injury

Program Development

As soon as you or someone in your organization has the idea for a program to prevent unintentional injury, begin evaluation.

- **1.** Investigate to make sure an effective program similar to the one you envision does not already exist in your community.
- **2.** If a similar program does exist *and* if it is fully meeting the needs of your proposed target population, modify your ideas for the program so that you can fill a need that is not being met.
- 3. Decide where you will seek financial support.
 - ► Find out which federal, state, or local government agencies give grants for the type of program you envision.
 - Find out which businesses and community groups are likely to support your goals and provide funds to achieve them.
- 4. Decide where you will seek nonfinancial support.
 - ➤ Find out which federal, state, or local government agencies provide technical assistance for the type of program you envision.
 - ➤ Find out which businesses and community groups support your goals and are likely to provide technical assistance, staff, or other nonfinancial support.
- 5. Develop an outline of a plan for your injury-prevention program. Include in the outline the methods you will use to provide the program service to participants and the methods you will use to evaluate your program's impact and outcome.

- 6. Evaluate the outline. For example, conduct personal interviews or focus groups with a small number of the people you will try to reach with your injury-prevention program. Consult people who have experience with programs similar to the one you envision, and ask them to review your plan. Modify your plan on the basis of evaluation results.
- 7. Develop a plan to enlist financial and nonfinancial support from all the agencies, businesses, and community organizations you have decided are likely sources of support. Use the outline of your plan for the injury-prevention program to demonstrate your commitment, expertise, and research.
- 8. Evaluate the plan for obtaining support. For example, conduct personal interviews with business leaders in your community. Modify your plan on the basis of evaluation results.
- 9. Put your plan for obtaining support into action.
- **10.** Keep track of all contacts you make with potential supporters.
- **11.** If unexpected problems arise while you are seeking support, re-evaluate your plan or the aspect of your plan that seems to be the source of the problem. For example, if businesses are contributing much less than you had good reason to expect, then seek feedback from businesses that are contributing and those that are not. Or if you did not receive grant funds for which you believed you were qualified, contact the funding agency to find out why your proposal was rejected. Modify your plan according to your re-evaluation results, and continue seeking support.
- **12.** When you have enough support for your program, expand on the outline of your plan for the injury-prevention program. Include in the design a mechanism for evaluating the program's impact and outcome.
- **13.** Evaluate your program's procedures, materials, and activities. For example, conduct focus groups within your target population. Modify the plan on the basis of evaluation results.
- **14.** Develop forms to keep track of program participants, program supporters, and all contacts with participants, supporters, or other people outside the program.
- **15.** Measure the target population's knowledge, attitudes, beliefs, and behaviors that relate to your program goals. The results are your baseline measurements.

Program Operation

- 1. Put your program into operation.
 - Track all program-related contacts (participants, supporters, or others). Track all items either distributed to or collected from participants.
 - As soon as the program has completed its first encounter with the target population, assess any changes in program participants' knowledge, attitudes, beliefs, and (if appropriate) behaviors.
- **2.** Continue tracking and assessing program-related changes in participants throughout the life of the program. Keep meticulous records.
- **3.** If unexpected problems arise while the program is in operation, re-evaluate (using qualitative methods) to find the cause and solution. For example, your records might show that not as many people as expected are responding to your program's message, or your assessment of program participants might show that their knowledge is not increasing. Modify the program on the basis of evaluation results.
- **4.** Evaluate ongoing programs (e.g., classes on fire safety given each year to third graders) at suitable intervals to see how well the program is meeting its goal of reducing injury-related morbidity and mortality.

Program Completion

- 1. Use the data you have collected throughout the program to evaluate how well the program met its goals: to increase behaviors that prevent unintentional injury and, consequently, to reduce the rate of injuries and injury-related deaths.
- **2.** Use the results of this evaluation to justify continued funding and support for your program.
- **3.** If appropriate, publish the results of your program in a scientific journal.

APPENDIX D

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APPENDIX E

GLOSSARY

- Attitudes: People's biases, inclinations, or tendencies that influence their response to situations, activities, people, or program goals.
- **Baseline information:** Data gathered on the target population before an injury-prevention program begins.
- **Closed-ended questions:** Questions that allow respondents to choose only from a list of possible answers. (Compare *Open-ended questions*.)

Comparison group: (see Control group)

- **Contact:** Any personal interaction between program staff and a person or household in the target population (sometimes called encounter). Also the person or household with whom program staff interacted.
- **Control group (or comparison group):** A group whose characteristics are as similar as possible to those of the intervention group. To evaluate program effects, evaluators compare differences in changes between the two groups. See also *Intervention group*.
- **Encounter (contact):** In evaluation, any personal interaction between a program and a person, household, or group of people in the target population.
- **Experimental designs:** In evaluation, methods that involve randomly assigning people in the target population to one of two or more groups in order to eliminate the effects of history and maturation. The program's effects are measured by comparing the change in one group or set of groups with the change in another group or set of groups.
- **Focus group:** A qualitative method of evaluating program materials, plans, and results. A facilitator moderates a discussion among four to eight people, allowing them to talk freely on the subject of interest.

- **Formative evaluation:** Research conducted (usually while the program is being developed) on a program's proposed materials, procedures, and methods.
- **History:** The knowledge, skills, or other attributes that people have with regard to the goals of an injury-prevention program *before* the program begins.
- **Impact evaluation:** Research to determine how well a program is meeting its intermediate goals of changes in people's knowledge, attitudes, and beliefs.
- **Instrument:** The tool used to gather information on people's knowledge, attitudes, beliefs, or behavior (e.g., a questionnaire).
- **Intervention:** The method, device, or process used to prevent an undesirable outcome.
- **Intervention group:** The group in an experimental study or evaluation who is to receive the intervention. See also *Control group.*
- **Item:** One question or statement on an instrument used to measure knowledge, attitudes, beliefs, or behaviors.
- **Maturation:** The knowledge, skills, or other attributes that people gain with regard to the goals of an injury-prevention program *while the program is going on*, but which are *not* due to program activities.
- **Morbidity:** Any deviation from a state of well-being, either physiological or psychological; any mental or physical illness or injury.
- **Outcome evaluation:** Research to determine how well programs succeeded in achieving their ultimate objective of reducing morbidity and mortality.
- **Open-ended questions:** Questions that allow respondents to answer freely in their own words. (Compare *Closed-ended questions.*)
- **Pilot test:** A small-scale trial conducted before a full-scale program begins to see if the planned methods, procedures, activities, and materials will work.
- **Placebo:** A service, activity, or item that is similar to the intervention service, activity, or item but without the intervention characteristic that is being evaluated.
- **Prevalence:** The amount of a factor of interest (e.g., knowledge or head injury) that is present in a specified population at a specified time.

- **Probe:** A method of soliciting more information about an issue than respondents gave in their first response to questions.
- **Process evaluation:** Research to determine how well a program is operating. Includes assessments of whether the program and its materials are reaching the target population and, if so, in what quantity.
- **Qualitative methods:** Ways of collecting descriptive data on the knowledge, attitudes, beliefs, and behaviors of the target population. In general, information gathered using qualitative methods is not given a numerical value.
- **Quality assurance:** A system to ensure that all aspects of a program will be of the highest possible caliber.
- **Quantitative methods:** Ways of collecting numerical data on the target population. Use quantitative data to draw conclusions about the target population.
- Quasi-experimental design: In evaluation, methods that do not involve randomly assigning members of the target population either to an intervention or to a comparison group but which, nevertheless, reduce the effects of history and maturation. Evaluators have less control over factors that affect the comparison group than they do with experimental designs.
- **Randomization:** Assigning individuals by chance (using a predetermined method) to groups that will either receive the injury-prevention intervention or not receive it. It is used for experimental-design programs. The predetermined method is usually based on a table of random numbers or a computer-generated list.
- **Rate:** A measurement of how frequently an event occurs among people in a certain population at a point in time or during a specified period of time.
- **Reach:** The number of people or households who receive the program's message or intervention.
- **Readability:** The level of reading skill required to be able to understand written materials.
- Sample: A subset of people in a particular population.
- **Sampling frame:** Complete list of all people or households in the target population.
- **Schematic:** The order (in symbols) in which events occur during an experimental or quasi-experimental study.

Survey: A quantitative (nonexperimental) method of collecting information at one point in time on the target population. Surveys may be conducted by interview (in person or by telephone) or by questionnaire.

Survey instrument: (see Instrument).

Survey item: (see Item)

- **Target population:** The people or households the program intends to serve.
- **Unit:** One person or household in the target population.

1. Which sections of this book did you read? [Check all answers that apply.]

Introduction	Appendix A: Examples of Questions	
How This Primer Is Organized	to Ask, Events to Observe, and Who or What to Count	
Section 1: General Information	Appendix B: Sample Forms	
Section 2: Stages of Evaluation	Appendix C: Checklist of Tasks	
Section 3: Methods of Evaluation	Appendix D: Bibliography	
	Appendix E: Glossary	

	Useful	Somewhat Useful	Not Useful	Did Not Read
What is your opinion of this book?	D	D	D	D
What is your opinion of each section of this book?				
Introduction	D		ū	D
How This Primer Is Organized				
Section 1: General Information				
Section 2: Stages of Evaluation	ū	D		
Section 3: Methods of Evaluation				
Appendix A: Examples of Questions to Ask, Events to Observe, and Who or What to Count				
Appendix B: Sample Forms				
Appendix C: Checklist of Tasks	D	D	ū	ū
Appendix D: Bibliography				
Appendix E: Glossary				

3. How did you use this book? [Check all answers that apply.]

Personal	reference	
reisonai	reletence	

Staff instruction 🗅 Library resource 🗅

Other (Specify) ____

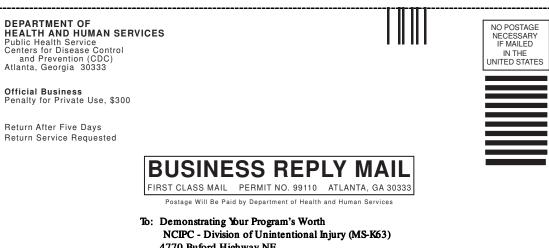
4. Check your job category

Health Professional 🛛	Other Professional	Executive/Manager 🗅	Educator 🗅
Other (Specify)			

5. Check your employer's category

6. Do you have suggestions on how to improve this book?

No postage necessary - Fold along dotted lines - Seal with tape



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