# Appendix 3

**Program Documentation** 

### **Program Documentation**

The purpose of the Program Documentation tool in the Planned Approach to Community Health (PATCH) process is to provide for the collection of basic information. It may serve as an ongoing recording document for monitoring program objectives, activities, and accomplishments. It may also be used to record significant events that have an impact on the community's health. The Program Documentation outlines data a community may wish to obtain when assessing the health status of the community and identifying major health priorities. The community should review the data forms and adapt them to meet its needs. If the community is addressing a preselected health problem or population, the data collected may need to be significantly changed. The program documentation contains the following forms:

- I. Community Profile
- II. Unique Health Events
- III. Number of Deaths and Years of Potential Life Lost by Major Disease Categories
- IV. Five Leading Causes of Death by Age Groups
- V. Comparison of Mortality Rates for Leading Causes of Death by Race, Sex, and Age Groups
- VI. Community Leader Opinion Survey Data
- VII. A Comparison of Behavioral Data (Percentage) Among Adults by Community, State, and Nation
- VIII. Priority Problems Identified
  - IX. Community Program Objectives
  - X. Community Participants
  - XI. Intervention Plan
- XII. Intervention Activity Summary

### **PD-I. Community Profile**

Commun	ity:						
Lead age	ncy:						
Address:							
		ban Ru lescription: _					
Per capita	yment rate: a income:		Commur	nity	Sta	ite	
		rty level (%):		-		ite	
Age distr	ibution in	years:					
Co	ommunity				State		
Age	0/0	No.		Age	0/0	No.	l
<1:				<1:			
1-14:				1-14:			
15-24:				15-24:			
25-64:				25-64:			
≥65:				≥65:			
total pop	oulation			total po	pulation		

### Number of households, by household size:

Number of persons in household

Community	State
1:	1:
2:	2:
3:	3:
4-5:	4-5:
6+:	6+:

Total number of households:

### **Annual household income:**

	Comm	unity	Sta	ate
Amount	0/0	No.	0/0	No.
<b>&lt;</b> \$15,000:				
\$15,000 to \$24,999:				
\$25,000 to \$49,999:				
\$50,000+:				

### Marital status:\*

<sup>\*</sup>Generally includes persons 18 years of age and older.

### Racial/ethnic composition:

Tadam composi			% by	sex .
	No.	0/0	Male	Female
White:				
D11				
Black:				
Hispanic*:				
-				
American Indian+:				
Asian#:				
Other:				
Includes both blacks and v	whites. +O	r Alaska Nati	ve. #Or Pa	cific Islander.
Education:				
Number of persons cur	rently enro	olled:		
	Con	nmunity		
Elementary school	_			
High school	_			
Technical school	_			
College	_			
Educational achieveme	ent (% of a	dults who	completed):	
	·	nmunity		State
Elementary school		v		
plus 3 years of high scho	ool _			
High school	_			
Technical school	_			
College:				
1-3 years	_			
4 years	_			
≥5 years	-			

### PD-II. Unique Health Events

A unique health event is an event or activity that takes place in the community that may have a short-term or long-term effect on the health or health risks of its citizens.

Examples of unique health events include special community health promotion and health education activities, health legislation, and environmental or natural events. Events can have a negative or positive effect on health. For instance, positive events might include the addition of fluoride to the drinking water or passing a law requiring the use of seatbelts. Negative events might include a hurricane or flood or the repeal of the tax on tobacco products.

Do not report PATCH program results or activities in this section. Report PATCH activities in PD-XII.

Date	Description of the Event	Number of People Affected

### PD-III. Number of Deaths and Years of Potential Life Lost by Major Disease Categories\*

Community		_ Year	
Disease Category	Rank	# of Deaths	YPLL† Before Age 75
Heart disease			
All cancers			
Lung cancer		‡	:
Cerebrovascular disease			
Emphysema			
Influenza and pneumonia			
All fatal injuries			
Motor vehicle injuries		#	:
Liver disease			
Suicide			
Homicide			
Diabetes mellitus			
Other			
Total			

- Based on leading causes of death.
- YPLL = Years of potential life lost for deaths > 1 year of age.
- To calculate the "Total" number of deaths or YPLL, add all numbers in ‡ the column except for lung cancer and motor vehicle injuries.

Source:		

### PD-IV. Five Leading Causes of Death by Age Groups

Community		Year	
Age < 1	Cause	Total*	Percent <sup>†</sup>
1			
2			
3			
4			
5			
All other causes			
Age 1-14	Cause	Total*	Percent <sup>†</sup>
1			
2			
3			
4			
5			
All other causes			
Age 15-24	Cause	Total*	Percent <sup>†</sup>
1			
2			
3			
4			
5			
All other causes			

<sup>\*</sup> Total number of deaths from this cause.

<sup>&</sup>lt;sup>†</sup> Number of deaths from this cause divided by total of all deaths in this age group. Source:

### PD-IV. Five Leading Causes of Death, by Age Groups in

Community	Y	/ear	
Age 25-44	Cause	Total*	Percent <sup>†</sup>
1			
2			
3			
4			
5			
All other causes			
Age 45-64	Cause	Total*	Percent <sup>†</sup>
1			
2			
3			
4			
5			
All other causes			
Age 65+	Cause	Total*	Percent <sup>†</sup>
1			
2			
3			
4			
5			
All other causes			

<sup>\*</sup> Total number of deaths from this cause.

<sup>&</sup>lt;sup>†</sup> Number of deaths from this cause divided by total of all deaths in this age group. Source:

PD-V. Comparison of Mortality Rates for Leading Causes of Death by Race, Sex, and Age Groups

mong Males Aged	/ United States /	(Year) (Year)	Rank in nation # of deaths Rate						nong Females Aged	/ United States /	(Year) (Year)	Rank in nation # of deaths Rate					
Mortality Rates (per 100,000) for Leading Causes of Death Among Males Aged	State	(Year)	Rank in state # of deaths Rate						Mortality Rates (per 100,000) for Leading Causes of Death Among Females Aged	/ State	(Year)	Rank in state # of deaths Rate					
Mortality Rates (per 100)	Community/		Rank Cause # of deaths Rate	1.	2.	3.	4.	5.		Community		Rank Cause # of deaths Rate	1.	2.	3.	4.	5.

# PD-V. Comparison of Mortality Rates for Leading Causes of Death by Race, Sex, and Age Groups

Mortality Rates (per 100,000) for Leading Causes of Death Among White Males Aged

Community				/ State	/ United States / (Year)
Rank Cause		# of deaths	Rate	Rank in state # of deaths Rate	Rank in nation # of deaths Rate
1.					
2.					
3.					
4.					
5.					
Mo	ortality	Rates (pe	r 100,000	Mortality Rates (per 100,000) for Leading Causes of Death Among White Females Aged	ng White Females Aged/
				(Year)	(Year) (Year)
Rank Cause		# of deaths	Rate	Rank in state # of deaths Rate	Rank in nation # of deaths Rate
1.					
2.					
3.					
4.					
5.					

PD-V. Comparison of Mortality Rates for Leading Causes of Death by Race, Sex, and Age Groups

lack and Other Males Aged	/ United States /	(Year) (Year)	Rank in nation # of deaths Rate						slack and Other Females Aged	<ul><li>United States</li></ul>	(Year) (Year)	Rank in nation # of deaths Rate					
eading Causes of Death Among Bl	State	(Year)	Rank in state # of deaths Rate						eading Causes of Death Among B	/ State	(Year)	Rank in state # of deaths Rate					
Mortality Rates (per 100,000) for Leading Causes of Death Among Black and Other Males Aged	Community/		Rank Cause # of deaths Rate	1.	2.	3.	4.	5.	Mortality Rates (per 100,000) for Leading Causes of Death Among Black and Other Females Aged	Community		Rank Cause # of deaths Rate	1.	2.	3.	4.	5.

### **PD-VI. Community Leader Opinion Survey Data**

Data col	lection method	Num	Number of interviewers			
Total nu of people	mber e interviewed	From: To: Date collected				
Rank	Health problem	Number of persons identifying problem	Percentage of persons identifying problem			
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
Source:						

## PD-VII. A Comparison of Behavioral Data (Percentage) Among Adults by Community, State, and Nation

	C	omm	nunity		St	ate		Nat	tion
	М	F	Total	М	F	Total	М	F	Total
Seatbelt (2)									
Seatbelt (3)									
Hypertension (1)									
Hypertension (2)									
Overweight (1)									
Overweight (2)									
Current smoking									
Acute (binge) drinking									
Chronic drinking									
Drinking and driving									
Sedentary lifestyle									
No leisure time activity									
Regular and sustained activity									
Regular and vigorous activity									
Cholesterol screening (1)									
Cholesterol screening (2)									
Cholesterol awareness									
Community data source:									
State data source:									
National data source:									

### **PD-VIII. Priority Problems Identified**

On the basis of an analysis of the behavioral data, community mortality data, community opinion data, and other pertinent information (community) has identified the following community priority problems:					
Rank	Problems				
#1					
#2					
#3					
#4					
#5					

### **PD-IX.** Community Program Objectives

1.			
1.			
_			
2.			
3.			
Э.			
4.			
5.			
<i>J</i> .			

An objective may be written for each priority problem identified.

### Example:

By December 31, 1998, the proportion of persons in X Community who report that they smoke will decrease from 33% (1994 survey data) to 30%.

### PD-X. Community Participants

List of individuals participating in the Planned Approach to Community Health Participant: Date Started: Address: Date Ended: Reason: Telephone: Affiliation: Involvement: **Steering Committee Community Group** Fax: Other Participant: Date Started: Date Ended: Address: Reason: Telephone: Affiliation: Involvement: **Steering Committee Community Group** Other Fax: Participant: Date Started: Address: Date Ended: Reason: Telephone: Affiliation: Involvement: **Steering Committee Community Group** Other Fax: Participant: Date Started: Date Ended: Address: Reason: Telephone: Affiliation: Involvement: **Steering Committee Community Group** Fax: Other

### PD-XI. Intervention Plan

On separate pages describe the planned interventions. Include a discussion of the items indicated below.

- A. Relate intervention to community health problem by describing the:
  - 1. Community objective addressed
  - 2. Behavioral objective(s) addressed
  - 3. Contributing factors (e.g., predisposing, enabling, reinforcing factors)
- B. Specify intervention objectives ("learning objectives" or descriptions of participants' status as a result of the intervention). These may relate to changes in knowledge, attitude, skills, behaviors, or policies.
- C. Describe intervention activities.
- D. Describe evaluation plans:
  - 1. Process evaluation methods and instruments
  - 2. Impact evaluation methods and instruments

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### **PD-XII. Intervention Activity Summary**

A.	Describe the intervention active program objectives:	vity including purpose and relationship to					
В.	Check primary strategy used:	educational  policy  environmental					
C.	If the intervention is mainly educational, list the —intervention setting:						
	-target group:						
	<ul> <li>-total number of hours individuals participated (e.g., six two-hour sessions equal 12 hours):</li> <li>-total number and sociodemographics of participants (e.g., age, gender, race)</li> </ul>						
D.	Name the intervention coordina	tor:					
	Telephone number:						
	Address:						

E.	List resources required including in-kind. Staff/Volunteer's time:						
	Tasks	# of workers	Total # of hours				
	Other resources:						
	Type	Amount	Source				
F.	F. List informational materials produced/used (attach sample):						
G.	G. Summarize the evaluation of the intervention, relating to the Evaluation Worksheet (page CG5-19). (Attach samples of letters, agendas, and questionnaires used to assist with evaluation and replication):						