

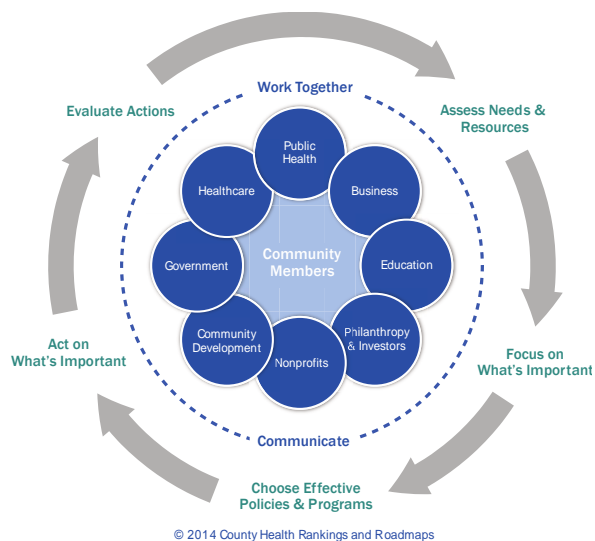
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SHARING LEADERSHIP

A Guide to Stakeholder Engagement

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In community health improvement efforts, building a diverse team of engaged community partners is important for the success of your efforts. However, recruiting and sustaining leaders who have a shared vision and commitment is easier said than done. This guide outlines key steps to lead you in that effort.

This guide focuses on who to engage, when to engage them, and a step-by-step section on how to engage them. That recruitment work, however, happens in a broader context of collaborative leadership. For additional information on key action steps to support sustained collaboration with local stakeholders, refer to the “Work Together” section of the [Wisconsin Guidebook on Improving the Health of Local Communities](#).

In this Guide:

- [What is a Stakeholder?](#)
- [Why Engage Stakeholders?](#)
- [Who to Engage as Community Stakeholders](#)
- [When to Engage Community Stakeholders](#)
- [How to Engage Community Stakeholders](#)
- [How to Overcome Obstacles](#)

What is a Stakeholder?

Stakeholders are individuals or groups that have any interest or influence in a project or could be impacted by its actions or results. In the context of a community health improvement processes, stakeholders could include individuals or groups of individuals living or working in the community; businesses, schools, media organizations, faith-based organizations, and volunteer organizations within the community; civic or political leaders from the community; emergency responders and allied health professional in the community, local healthcare providers; local and state health departments; and hospitals and clinics in the community. In short, positively impacting the health of citizens of a community and the community as a whole requires that all aspects of the community should function well, and as such, stakeholders in this process should include broad representation from diverse sectors of the community.

[Above adapted from Stakeholder Engagement – a Toolkit, available at:
http://www.revit-nweurope.org/selfguidingtrail/27_Stakeholder_engagement_a_toolkit-2.pdf]

Why Engage Community Stakeholders?

Engaging stakeholders both early and throughout a community health improvement process is a key component of successfully improving a community's health. Reasons for engaging community participants can be grouped in two categories: having a stronger community initiative and outcomes; and achieving important organizational requirements.

Stronger Community Health Improvement Efforts

Benefits of a broad-based community partnership can include:

- Maximizing and leveraging resources
- Avoiding duplicate efforts
- Generating increased community support and fostering a sense of community-wide ownership for project efforts
- Improving the quality and breadth of the data collected
- Increasing credibility of the assessment findings and implementation strategies
- Increasing the relevance of the efforts to all members of the community, including disadvantaged or minority populations within the community
- Encouraging future collaboration for community benefits/community health improvement
- Recognition that no one stakeholder represents the entire community and no one stakeholder can improve the health of the community as much a collaborative group of stakeholders

Concerns about partnering to conduct a community health improvement process can include worries regarding conflicting interests, decreased autonomy, and the resources required to successfully partner. However, these issues must be weighed against the benefits of partnership, and can be lessened by clear communication and planning. See “[Anticipating and Overcoming Potential Obstacles](#)” below.

[Adapted from: <http://www.cdc.gov/eval/steps/engagingstakeholders.PDF> and <http://www.rwjf.org/content/dam/web-assets/2009/01/a-practical-guide-for-engaging-stakeholders-in-developing-evalua>]

Achieving Organizational Requirements for Collaboration

For certain stakeholders, including health departments and non-profit hospitals, collaboration and community engagement are also specifically noted as standard or required for their community health improvement process. So, in addition to the practical benefits of collaboration, some partners may have the added benefit of achieving organizational requirements by effectively collaborating with stakeholders. More details on those specific requirements are listed in [Attachment 1](#).



Who to Engage as Community Stakeholders

Recognizing the benefits of and the requirements to engage stakeholders, the next consideration is the identification of the key community stakeholders in the process.

Questions to Ask

There are some important considerations when identifying potential stakeholders:

- Are there other individuals or groups in the community working on a similar process?
- Are there individuals or groups who have an interest or expertise in community health?
- Are there individuals or groups in the community who my organization/agency is required to collaborate with based on law or statute?
- Which individuals or groups in the community will be affected by your efforts?
- Which individuals or groups in the community can help garner support for these efforts?
- Which individuals or groups are the key decision makers or most influential in the community?
- Are there individuals or groups who can provide either in-kind or financial support to the local community health improvement efforts?
- Which individuals or groups in the community can impede efforts if they are not involved?
- Which individuals or groups have been involved with similar efforts in the past?
- Which individuals or groups have not been involved, but should have been or were underrepresented, in previous community health improvement efforts?

[Adapted from

http://www.revit-nweurope.org/selfguidingtrail/27_Stakeholder_engagement_a_toolkit-2.pdf
and <http://www.rwjf.org/content/dam/web-assets/2009/01/a-practical-guide-for-engaging-stakeholders-in-developing-evalua>

Key sectors to consider in stakeholder engagement

Stakeholders for community health improvement efforts should represent the diversity of the community and the different sectors that go into establishing the community. Here are some sectors to consider as a starting place:

Those required to conduct a Community Health Assessment and Improvement Process:

- Local health departments
- Non-profit hospitals
- Community Health Centers (Federally Qualified Health Centers)

Those with expertise or interest in, or who are affected by or can influence, the process:

- Community Non-profit Agencies
- Faith Based Organizations
- Universities and Schools

- Health and Allied health Professionals/Organizations
- Emergency Responders and Public Safety Officials
- Business/Economic Development Leaders
- Elected Officials
- University of Wisconsin Cooperative Extension offices

Those at risk of being not included in the process:

- Members of/Representatives for Minority Populations
- Members of/Representatives for At-risk or Vulnerable Populations

The list above provides a starting place. For several more thorough lists of community partners to engage in community health improvement, see:

- [Healthiest Wisconsin 2020 Partnership Model](#) (page 46)
- The Catholic Health Association Manual [Assessing and Addressing Community Health Needs](#) (pages 116-118)

Finally, while ideally all potential stakeholders could be involved, if time and resources are limited, consider prioritizing stakeholder engagement:

1. Stakeholders that are imperative to have involved: The process could not be successful unless this stakeholder is engaged.
2. Stakeholders that are important to have involved: This stakeholder can benefit the process in a practical or political manner.
3. Stakeholders that would be nice to have involved: This stakeholder can be engaged if there is sufficient time and resources.

[Adapted from <http://www.rwjf.org/content/dam/web-assets/2009/01/a-practical-guide-for-engaging-stakeholders-in-developing-evalua>]:

Additional Resources for Identifying Stakeholders:

- For additional guidance and a worksheet for identifying potential stakeholders, see: “Recruit and involve diverse stakeholders from multiple sectors” in the “[Work Together](#)” component in the *County Health Rankings and Roadmaps* Action Center.
- In addition, [Attachment 2](#) below includes a list with contact information for some stakeholder groups in Wisconsin.

When to Engage Community Stakeholders

Just as the community health improvement process should be a continuous cyclical process, stakeholder engagement should also be occurring throughout the process. It is important to realize there may be some attrition of stakeholders if not reengaged periodically. It is also important to realize that not all stakeholders may be involved at all stages of the process, which can be dependent on a stakeholder’s expertise, time and resources.



Key times to Consider Adding Partners:

- **Planning a new community health improvement cycle:** Look for other organizations that would want to co-sponsor the entire undertaking.
- **Assessment & prioritization stage:** Engage a broad cross section of participants. This gives the entire process and resulting priorities more legitimacy and buy-in.
- **Implementation planning:** Often, depending upon what health priorities are selected, additional partners need to be brought to the table at this point – for their technical expertise, for their endorsement/general engagement, or for resources (financial and in-kind).

How to Engage Community Stakeholders

Once you have identified the potential stakeholders that are necessary to your work, you can start recruiting.

First, develop a recruitment plan

1. Who will reach out and ask potential stakeholders to be involved?

- a. Use the networking capacity of your group to the fullest. Your current core group can identify individuals on your contact list that they know personally or organizations where they have a personal contact. If there are still names left on the list, they can be divided among the members of the core group.

2. How will they be contacted?


There are a number of ways to contact people and organizations:

- Face-to-face meetings
- Phone calls
- E-mail
- Personal letters
- Mass mailings
- Public Service Announcements or ads
- Flyers and posters

These are listed here in their approximate order of effectiveness, with direct personal contact being the best. It also takes longest, however, and probably should be reserved for those people on your list who are “must-haves” for your effort. Most people are likely to be recruited by phone. But, in that case, use the same talking points as in person (see below).

3. Prepare for the meeting

- **Learn about the person/organization you are recruiting:** Do some homework about your target person. What is their background, their work position, their special interests? What have you observed, or what can you learn about their personal style, or way of doing business? What other organizations in the community are they



affiliated with? Learn more about their organization. What is its mission? What activities/services are they involved in?

- Develop your talking points and any materials you plan to provide. (See the meeting outline below.)
- Visualize how the meeting will go: Think about the meeting ahead of time if it's a scheduled meeting. Visualize what will go on. Visualize how you see the other person responding –what he or she might say, and what you might say in response. Also visualize the outcome of the meeting: What outcome do you want? What do you want to walk away with? Then visualize yourself walking away with that outcome in hand. Much evidence in all walks of life– in sporting events, in stage performances, in just about any social encounter–suggests that visualizing your desired outcome can help you achieve your desired result. Try it for yourself. It's free, it's easy, you can do it anytime, you will get better at it with practice, and, it works.

[Source: [Coalition Building I: Starting a Coalition](#), The Community Toolbox]

Meet with potential stakeholders

Follow these recommended steps for an effective recruitment meeting with prospective stakeholders:

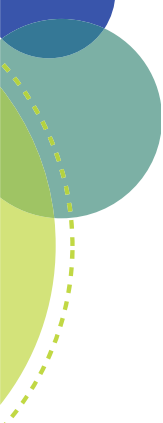
1. Thanks

Thank your prospective member for being there, for taking the time to meet with you. And do this sincerely. Sure, he or she might get something out of this meeting, and that's largely why they're there. But they might also be attending just because you asked them. They didn't have to come. Their coming may at least in part be out of respect for you and what you believe in. But expressing thanks is also practical. It reinforces their behavior of showing up and meeting with you. Indirectly, it reinforces their interest in your cause. Appreciation builds support.

2. Small Talk

In most face-to-face meetings, start with small talk. There might be times where you wouldn't waste a moment, and get right down to business from the first hello. But those instances are rare. We can be businesslike without being all business, all the time. We are human too.

What small talk? Anything of mutual interest–and it's best if you know in advance what those mutual interests are. Weather, sports, mutual acquaintances, a recent community event, something in the news. Something you will both agree on, and not something where you would disagree, which is the last thing you want right now. You want to start by building some common ground, and that's what small talk does.



In other words, small talk isn't necessarily small; it's done for a reason. It builds a relationship between those who are speaking. Your relationship now may make a difference, later on. In recruiting members, as in life, relationships make the world go around.

How much small talk? Let the other person guide you. He or she will do so by nonverbal signals—a shift in the seat, a change in expression, a look at a watch, or maybe by a direct statement. Follow that lead.

Also be aware of the time you have set aside for the meeting. That way, you can pace yourself and accomplish what you would like to do by meeting's end, before time runs out on you. You don't want to let things go on too long before you get to the main event, the main reason why you are there.

3. Tell Your Story

When small talk is done, state the purpose of the meeting, from your point of view. Tell the prospective member what your role is, why you made the contact, and what you would like to discuss in this meeting. Be direct and honest and concise. Put your agenda right on the table.

This is a time to present your key points in summary form. You don't want to give a long lecture at this point—because the target person may well not be interested, and also because what you want now is *dialogue*. But do bring along any fact sheets /brochures/ supplementary materials/reports, and give them to the prospective member as you talk, or at the end. That will fill in most of the detail. If the prospective member has specific questions, he will know enough to ask you.

Materials to consider bringing:

- Your most recent community health plan
- Materials your group has developed such as mission, vision, organizational structure, and timeline
- [Improving the Health of Local Communities: The Wisconsin Way](#)
- Handouts from [Making the Business Case](#) (for potential stakeholders in the business sector)

4. Ask

State what you are looking for from the meeting. Be explicit. Do you want the potential member:

- To come to one of your meetings?
- To serve on a board, or subcommittee?
- To undertake a specific task (alone, or with a task group of yours)?
- To write a check?
- To make some other kind of gift, or donate an in-kind service?
- To recruit others to your organization, by acting as intermediary?
- To get involved in some combination of the above?

- Something else?

If there is one specific thing you want, don't hesitate to ask for it directly.

But: It may be that you don't want one specific thing. You are hoping instead that the prospective member will contribute or participate in any of several possible ways. In that case, you might say something like: "Here are several ways you might be able to help us. Which of these might make sense for you?" In other words, you give the potential member some options. You offer a menu ("menu technique"), with several different "courses" to choose among.

Think also about the level of stakeholder engagement you want:

- **Active:** These stakeholders can take part in all of the process as co-leaders / co-sponsors or they can take part in most of the process.
- **Occasional:** Involved periodically during the process either at key stages or when significant decisions are made
- **Supporting:** More rarely involved, perhaps during only one stage or through financial help

Different stakeholders could be engaged at various stages for a most efficient community health improvement process.

5. Sell

After having made the request, state the benefits for your target person. Why should the target person want to or be willing to do what you are asking? Speaking directly, what's in it for him or her? You should be aware of those benefits in advance, and be able to present them without being asked. A reminder: To do this well, you should know something about the person you are meeting with, and plan your thoughts ahead of time.

What are these benefits? In brief, they include:

- Helping others
- Gaining information
- Meeting people
- Solving a problem
- Being included
- Improving status
- Having fun
- Making money

Sometimes, depending on the situation, you may want to state some benefits before asking for what you want. The order of these two can vary. In your presentation, it's also possible to weave the two together, in a way that's custom-tailored to your prospective member. At this point, it's hard to be more specific. With some practice, you'll have a better idea of how to go about it.



For specific benefits to the business community, see [Making the Business Case](#).

6. Listen

After your initial presentation, pause and listen to what your prospective member has to say. Give her or him some space and time to respond.

They will raise some of their main concerns, without much help from you. When you listen, listen very carefully to those concerns. Sometimes other people may not state their true concerns directly, out of politeness to you, or discomfort for them, or both. You may wish to probe a little and draw them out, and encourage them to get their real reactions out in the open. That will be helpful both to them and you. Of course, you should have a good idea of what those concerns might be before you go into the meeting. And you should also have a good idea of how you might respond to them if they are spoken aloud. In other words, you want to be able to anticipate and to counter most possible objections. And to do this well, you have to be able to listen well.

In listening and responding to concerns, it may help to have some fallback or alternative position in mind. So that if the target person is not willing or able at this time to commit to **A**, he or she could be offered **B**, or **C**, or **D**, or perhaps a smaller-size version of **A**. The underlying question is: "What can you commit to?"

7. Wind Up the Meeting

At this point, you may be ready to start winding up the meeting. It will help to review what you have agreed on so as to make any agreements or commitments made clear and explicit. When you state them, you can ask the other person something like, "Does that sound right?" or "Is that OK for you?". This allows him or her to correct you if needed, and also to verbally confirm what has been agreed to once again. Verbal agreement strengthens commitment. You then want to bring the meeting to a specific conclusion and not let things carry on too long, past your agreed-upon time. Don't wear out your welcome. Even if you have not been as successful as you would have liked, the chances are good you will have other opportunities.

8. Next Steps

With all your preparation and thoughtful execution, the chances also are that your prospect will have agreed to something, however small. Then let your prospective member know what the next steps are going to be. It might be "We'll make sure you know about the next meeting." Or "We'll be sending you a card in the mail." Or "Someone will call you and give you the details." These follow-up steps should (again) be clear and explicit, so that the prospect will know precisely what will happen next, and when – and will not be surprised or taken aback by any follow-up contacts that might occur.

9. Thanks

Thank the prospective member (again), both for time given, and for any commitments made to you and your cause. Show your appreciation. Once again, you want to reinforce any

favorable action taken. (This is also a good time to give them any literature or supplementary material to take with them, and/or to pass out to others.)

10. Small Talk

If there is time, a bit more small talk may end the meeting. The bonds get cemented.

11. Follow Up!

It should then go without saying, but it doesn't, that you actually do follow up on what you said you were going to do from your end. Most of the time, the prospective member has met you close to halfway. The remaining part of the responsibility is yours.

[Source: [Making Personal Contact with Potential Participants](#), The Community Toolbox]

Anticipating and Overcoming Potential Obstacles to Stakeholder Engagement

There are often barriers to engaging new stakeholders, and it is important to be aware of and anticipate them. Here are some common obstacles and tips for addressing them:

- Stakeholders might not be familiar with the CHIPP/CHNA process
 - Provide introduction/overview of the CHIPP/CHNA process
 - Make sure stakeholders are aware that they can ask questions throughout the process
 - Ensure that complex ideas are simplified and language is not filled with too much jargon
- Stakeholders might have difficulty participating
 - Consider offering transportation or child care resources
 - Choose convenient meeting times and locations
 - Stay organized and keep meetings on time
- There may have been past difficult history with stakeholders
 - Ensure open communication
 - Make sure they are aware of what specific contributions they can add to help the community's health improve
- Stakeholders may have been previously ignored
 - Make sure feel like part of the process
 - Listen and take their contributions seriously
 - Show appreciation for their contributions
- Leaders of stakeholder groups may be resistant to participation
 - Ask them individually to be part of the process
 - Support interests of their groups also, to foster a sense of working together
 - Demonstrate what value they add to the group and what value participating in the CHIPP/CHNA adds to them or their organization

[Adapted from Assessing and Addressing Community Health Needs:
http://www.chausa.org/Assessing_and_Addressing_Community_Health_Needs.aspx



and The Community Toolbox: <http://ctb.ku.edu/> (chapter 7)]

Further Information on Stakeholder Engagement

While this guide focuses on the identification and recruitment of community stakeholders to your community health improvement efforts, there are additional important steps for effective collaboration. In the “Work Together” section of the Wisconsin Guidebook on Improving the Health of Local Communities, there is information on how to:

- Build a common knowledge base
- Run effective meetings
- Convene stakeholders to develop the group’s vision, values and mission statements
- Decide on an organizational structure
- Develop a plan for obtaining resources
- Develop a plan for increasing participation
- Understand your community’s political environment
- Develop leadership capacity
- Evaluate the team and make any necessary changes
- Plan to sustain the work
- Develop a plan for financial sustainability
- Develop a system for succession planning and membership renewal

Perhaps equally important as recruiting stakeholders is sustaining that commitment. For guidance on sustaining partner engagement, see:

- “Develop leadership capacity” within the “**Work Together**” component of the *County Health Rankings and Roadmaps* Action Center
- [Sustainability Planning Guide for Healthy Communities](#) (CDC)

For additional background information on how to engage stakeholders, see “**Encouraging Involvement in Community Work**” from The Community Toolbox.

Acknowledgements

This tool borrows from many excellent sources of information available nationally which are listed in [Attachment 3: References](#).

The majority of the work creating this guide was provided by Parvathy Pillai, a CDC Post-EIS Practicum (PEP) Scholar assigned to the Wisconsin Division of Public Health. (Note: Her work was supported by funding from SciMetrika’s prime Government contract GS10F0340, order number 200-2011-F-40268.)

Attachment 1: Requirements for Collaboration

Local health departments

Collaboration is required by Wisconsin state statutes and administrative rules for local health departments (with the exception of tribes).

- “A local health department shall ... regularly and systematically collect, assemble, analyze and make available information on the health of the community, including statistics on health status, community health needs and epidemiologic and other studies of health problems”
- “A local health department shall ... involve key policymakers and the general public in determining and developing a community health improvement plan...”

<https://docs.legis.wisconsin.gov/statutes/statutes/251/05/3/>

Collaboration is required for local/tribal health departments seeking voluntary national accreditation by the Public Health Accreditation Board (PHAB) as the health departments must:

- Participate in or lead a collaborative process resulting in a comprehensive community health assessment (Standard 1.1)
- Engage with the public health system and the community in identifying and addressing public health problems through collaborative processes (Standard 4.1)
- Promote the community’s understanding of and support for policies and strategies that will improve the public’s health (Standard 4.2)
- Conduct a comprehensive planning process resulting in a Tribal/state/community health improvement plan (Standard 5.2)

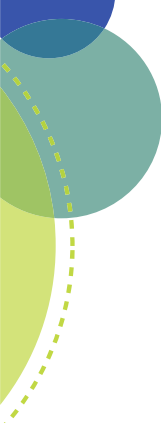
<http://www.phaboard.org/accreditation-process/public-health-department-standards-and-measures/>

The Public Health Accreditation Board also provides a recommended list of stakeholders in [Standard 1.1.1T/L](#) and [Standard 5.2.1](#).

Non-profit Hospitals

Collaboration is a requirement in the Community Health Needs Assessment (CHNA) process for non-profit hospitals that was set forth in the Affordable Care Act (ACA) and further detailed by the Internal Revenue Service (IRS).

- The ACA requires that a CHNA:

- 
- “Takes into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health.”

http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_public_laws&docid=f:publ148.111

- The most recent IRS guidance document (December 2014) states that the CHNA:
 - Must solicit and take into account input from at a minimum:
 - 1) At least one state, local, tribal or regional governmental public health department (or equivalent department or agency) with knowledge, information, or expertise relevant to the health needs of the community.
 - 2) Members of medically underserved, low income, and minority populations in the community, or individuals or organizations serving or representing the interests of such populations.
 - 3) Written comments received on the hospital facility’s most recently conducted CHNA and most recently adopted implementation strategy.
 - Can have an implementation strategy that was developed in collaboration with other organizations, including related organizations, other hospital organizations, for-profit and government hospitals, and State and local agencies, such as public health departments, provided:
 - The report identifies each hospital to which it applies.
 - Each hospital’s governing body adopts the report.
 - The report clearly identifies each hospital’s particular role and responsibilities in implementing the plan and the resources that hospital plans to commit to implementation.
 - The report includes a summary or other tool that helps the reader easily locate those portions of the plan that relate to each hospital.

<http://www.gpo.gov/fdsys/pkg/FR-2014-12-31/pdf/2014-30525.pdf>

Attachment 2: Links to Sources of Potential Stakeholders in Wisconsin

Note: While this list attempts to help local communities find stakeholders they might invite to collaborate on their community health improvement process, it is by no means a comprehensive list. For additional information on potential stakeholders, ask your current local stakeholders and state partners for suggestions and refer to the partnership lists cited on pages 4-5 above.

The following links may help you to identify and locate potential local stakeholders:

- Local health departments
 - <http://www.dhs.wisconsin.gov/localhealth/>
- Non-profit hospitals
 - <http://www.wha.org/wisconsin-hospitals.aspx>
- Community Health Centers (Federally Qualified Health Centers)
 - <http://www.wphca.org/?page=Members>
- Community Non-profit Agencies
 - United Way: <http://www.unitedwaywi.org/>
 - YMCA: <http://www.ymca.net/find-your-y/>
 - Community Action Partnership (CAP) Agencies <http://wiscap.org/member-agencies/>
 - Mental Health America of Wisconsin: <http://www.mhawisconsin.org/search-stateresources.aspx>
- Universities and Schools
 - UW Cooperative Extension: <http://www.uwex.edu/ces/>
 - Wisconsin Schools: <http://dpi.wi.gov/directories>
- Health and Allied health Professionals/Organizations
 - Physicians: <http://www.wisconsinmedicalsociety.org/>
 - Nurses: <http://www.wisconsinnurses.org/>
 - Dentists: <http://www.wda.org/>
 - Allied Health: varies by profession
- Emergency Responders and Public Safety Officials:
 - Police Departments: http://www.50states.com/wisconsin/police_departments.htm
 - Fire Departments: <http://dsps.wi.gov/Programs/Industry-Services/Industry-Services-Programs/Fire-Prevention/Fire-Program-Contacts>
 - EMS providers by county:
<http://www.dhs.wisconsin.gov/ems/EMSUnit/Provider/WICounties.htm>
- Business/Economic Development Leaders
 - Chambers of Commerce:
<http://www.wischamberfoundation.org/wcce/display.cfm?id=237>
 - Wisconsin Minority Business and Chamber Associations
<http://commerce.wi.gov/Act255/BD-MBD-Chambers&Associations.html>
 - Wisconsin Housing and Economic Development Authority:
<http://www.wheda.com/root/BusinessPartners/MortgageLenders/Dynamic.aspx?id=1108>
- Elected Officials:
 - <http://legis.wisconsin.gov/w3asp/waml/waml.aspx>
 - http://www.wisconsin.gov/state/core/wisconsin_cities_towns_and_villages.html

Attachment 3: References

- Stakeholder Engagement – a Toolkit, available at: http://www.revit-nweurope.org/selfguidingtrail/27_Stakeholder_engagement_a_toolkit-2.pdf
- CDC Program Evaluation Steps- Engaging Stakeholders: <http://www.cdc.gov/eval/steps/engagingstakeholders.PDF>
- CDC, Local Public Health System Performance Assessment Instrument: http://www.cdc.gov/nphsp/documents/07_110300%20Local%20Booklet.pdf
- Office of Disease Prevention and Health Promotion, Healthy People in Healthy Communities: Creating a healthy Community: <http://odphp.osophs.dhhs.gov/pubs/healthycommunities/creating.html>
- RWJF Evaluation Series: A Practical Guide for Engaging Stakeholders in Developing Evaluation Questions: <http://www.rwjf.org/content/dam/web-assets/2009/01/a-practical-guide-for-engaging-stakeholders-in-developing-evalua>
- Catholic Health Association Assessing and Addressing Community Health Needs: http://www.chausa.org/Assessing_and_Addressing_Community_Health_Needs.aspx
- Catholic Health Association/Texas Health Institute: Checklist for Community Stakeholder Involvement: <http://www.chausa.org/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=4294967363> (no longer available online; other Catholic Health Association community health improvement resources are available)
- UNC, Carolina Population Center, Stakeholder Engagement Tool: <http://www.cpc.unc.edu/measure/publications/ms-11-46-e>
- Principles of Community Engagement - Second Edition: <http://www.atsdr.cdc.gov/communityengagement/>
- The Community Toolbox: <http://ctb.ku.edu/>
- MAPP Visioning/NACCHO: http://www.naccho.org/topics/infrastructure/mapp/upload/visioning_full.pdf
- MAPP Matrix of Participation NACCHO: http://www.naccho.org/topics/infrastructure/mapp/framework/clearinghouse/upload/Ma-trix_of_participation.pdf
- Engaging Partners, Stakeholders and Community Members/CHA CHIP Resource Center/NACCHO: <http://www.naccho.org/topics/infrastructure/CHAIP/partner-engagement.cfm>
- MAPP Circles of Involvement Exercise/NACCHO: http://nnphi.org/CMSuploads/CirclesOfInvolvementExercise_NACCHO_201305.pdf
- NACCHO Tip Sheet — Guidance for Participant Identification: <http://www.naccho.org/topics/infrastructure/mapp/framework/clearinghouse/upload/Tip-Sheet-Participant-Identification.pdf>
- Mobilizing for Action through Planning and Partnerships (MAPP) Framework/NACHHO: <http://www.naccho.org/topics/infrastructure/mapp/framework/index.cfm>
- MAPP related toolkit/NACCHO: Example Workplan for the MAPP Process (requires free login): <http://www.naccho.org/toolbox/tool.cfm?id=905&c=1329436126715>

- Wisconsin Legislative Documents:
<https://docs.legis.wisconsin.gov/statutes/statutes/251/05/3/>
- 111th Congress Public Law 148, U.S. Government Printing Office:
http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_public_laws&docid=f:publ148.111
- PHAB Standards and Measures versions 1.0 and 1.5:
<http://www.phaboard.org/accreditation-process/public-health-department-standards-and-measures/>
- IRS Notice 2011-52: <http://www.irs.gov/pub/irs-drop/n-11-52.pdf>
- IRS final rules for charitable hospitals (December 29, 2014).
<http://www.gpo.gov/fdsys/pkg/FR-2014-12-31/pdf/2014-30525.pdf>
- Healthiest Wisconsin 2020: <http://www.dhs.wisconsin.gov/publications/P0/P00187.pdf>
- Wisconsin Clearinghouse for Prevention Resources / Transform Wisconsin:
<http://transformwi.com/>
- National Business Coalition on Health and the Community Coalitions Health Institute, Community Health Partnerships Tools and Information for Development and Support:
http://www.nbch.org/NBCH/files/ccLibraryFiles/Filename/000000000353/Community_Health_Partnerships_tools.pdf
- Coalitions Catalyzing Community Health Promotion (by Andrew Webber President and CEO National Business Coalition on Health)
http://www.memphisbusinessgroup.org/assets/1441/nbch_webber_commentary_2011.pdf
- The Business Interest in a Community's Health:
<http://www.businessgrouphealth.org/pdfs/BusinessInterestKellogg.pdf> (no longer available online; other National Business Group on Health resources are available)
- National Business Group on Health:
<http://www.businessgrouphealth.org/preventive/businesscase/index.cfm>
- VHA, Community Health Assessment Checklist: Guidelines for Process Evaluation:
<https://www.vhafoundation.org/documents/checklist.pdf> (no longer available online)
- Rural Health Works, Community Health Needs Assessment Template (CHNA template) found at: <http://ruralhealthworks.org/wp-content/files/2-CHNA-Toolkit-Text-and-All-Appendices-May-2012.pdf>
- Rural Health Works, Community Health Needs Assessment Template (CHNA template) Appendix D: <http://ruralhealthworks.org/wp-content/files/2a-MSTR-CHNA-Template-APPs-A-E-FINAL-Dec-2011-scan-copy.pdf>