

# CREATING COMMITTEES FOR YOUR HEALTH FAIR

Creating committee(s) are helpful for putting a health fair together, although the number of committees and participants may depend on the size and scope of your health fair. A large health fair would probably benefit from several committees, while a small health fair might not need one at all.

## **PLANNING COMMITTEE**

The most important committee is the planning committee. Members of this committee can provide leadership and coordination of the health fair. It would be helpful to have members from the medical professions, local hospitals/health care agencies, the community and local media on your planning committee (Rice and Pollard 2008).



### Responsibilities may include:

1. Identifying the target audience.
2. Identifying the best ways to reach the target audience. Should entertainment and games be a part of the health fair? Should the health fair be only activity-oriented? Should screenings and immunizations be offered?
3. Developing a timeline.
4. Creating a schedule.
5. Selecting a date, time and location.
6. Creating a budget.
7. Identifying potential donors, sponsors, and vendors.
8. Coordinating contact of all donors, sponsors, vendors, and booth participants.
9. Assisting with management of the health fair.

Source: Rice and Pollard 2008

## **MEDICAL COMMITTEE**

It is also advisable to assemble a medical committee, if possible. Health professionals can help determine what is appropriate to include in a health fair for the target audience, as not all brochures, giveaways, or topics are necessarily appropriate (Rice and Pollard 2008).

If possible, appropriate screenings should be planned for the target community. Screenings can be more useful to people than a health risk appraisal (Rice and Pollard 2008). However, not all health fairs require screenings.

### Responsibilities may include:

1. Identifying key topics and booths for the target audience.
2. Determining the kinds of screenings, services, and activities.

3. Planning and arranging for booths from national organizations, such as the American Heart Association or government agencies, like the Centers for Medicare and Medicaid Services
4. Planning and arranging for clinical staff, laboratory services, etc.
5. Planning for immunizations appropriate for the target audience
6. Plan for equipment needs, such as blood pressure cuffs.

Source: Rice and Pollard 2008

## **ADMINISTRATIVE COMMITTEE**



An administrative committee might take care of “getting things done” and may even be broken into smaller committees, if desired (Rice and Pollard 2008). Some things an administrative committee might take care of include finding a venue, developing a floor plan and map, decorating, food, giveaways, entertainment, games, creating forms and signs (Rice and Pollard 2008).

If you decide to divide the work of the administrative committee further, some of those committees could be for: **facilities, giveaways, food, clerical, and outreach.**

Responsibilities may include:

### **Facilities:**

- Whether to hold a health fair inside vs. outside (if held outside, a contingency plan should be developed)
- Equipment and electrical needs
- Getting enough tables and chairs
- Making sure there are enough restroom facilities
- Adequate parking
- A locale that is accessible by public transportation and easy to find
- Planning for crowd flow
- Creating a map for participants to locate booths of interest at the fair, as well as essential services like restrooms and water fountains.
- Creating and posting signs at the fair for booths and directions to restrooms, water fountains, refreshments, entertainment, first aid, lost parents, and exits. Signs may be done by the clerical committee.

### **Giveaways**

- Obtaining giveaways and promotional items, bags to carry items

### **Food**



- The Sources for the refreshments
- Food Safety

## **Clerical**

- Writing letters and creating forms for:
  - Sign-in or registration
  - Evaluation
- Planning for setup and cleanup the day of the health fair
- Making sure there is enough staff
- Developing an assignment list for the day of the fair so volunteers can be easily directed to their assigned areas.
- Schedule a manager to be present for setup times

## **Outreach**

- Developing and disseminating posters, flyers and mailings
- Developing and disseminating announcements, including to the media - radio, TV, and newspapers
- Include a brief announcement about the health fair in church/temple bulletins
- A good point to emphasize is the estimated amount of money that can be saved by taking advantage of free screenings

Source: Rice and Pollard 2008

# FORMS AND TEMPLATES

## GUIDE TO FORMS & TEMPLATES

The forms and templates included in this guide are optional. They are provided as references for your health fair and should be used and modified as needed.

### PLANNING STAGE

#### **Budget Planning Checklist**

This form can be used to figure out what to include in your event and what you can afford, as well as if you need additional funding or donations, although it is important to remember that some providers may donate their goods or services (e.g. local supermarkets, local restaurants, doctors, hospitals, clinics, etc.). Not all the categories will apply to your health fair. Choose only the categories that make sense for your health fair.

#### Walkthrough

- 1) On the left hand side, fill in the number of materials needed
- 2) In the center, certain materials are listed. Feel free to make adjustments according to your health fair's needs
- 3) On the right, is a column for costs. Please fill in the estimated or actual cost of the materials you will need or use.
- 4) Add up the subtotals for each section and fill in the column next to the category of the section.
  - a) For example, you would list the subtotal for Promotional Materials next to that column.
- 5) Add up the total cost for all sections by adding up the subtotals.

#### **The Health Fair Planner**

The Health Fair Planner can be used to keep you on track with the tasks that need to be accomplished – to develop a timeline to accomplish necessary tasks, to delegate those tasks, and to keep track of the tasks that have been finished. Not all the tasks listed on the form may be applicable to your health fair. Choose only the ones that fit your health fair needs and modify the list as needed.

#### Walkthrough:

- 1) Activities/tasks are listed to the left – your health fair may not include all the activities/tasks and/or may require additional activities/tasks to be listed.
- 2) Advance time refers to how much advance time the activity requires.
  - a) For example, developing a budget may require 3 to 8 months of time
- 3) Due date refers to your deadline for the activity/task
- 4) Responsible party is the name(s) of the person(s) in charge of that particular task
- 5) Status refers to whether the task has been finished, is pending, etc.

## Health Fair Planning Worksheet

This form can be used to help plan and keep track of the topics, screenings, activities, etc. for your health fair, as well as to help you match topics to your target population or vice versa. For example, if your education topic is Alzheimer's that would be an appropriate topic for senior citizens and possibly adults, but not necessarily for children. The form includes sections for Education Topics, Screenings, Activities, and Promoting Your Fair. You should choose the ones that fit your health fair needs. Additionally, the form includes columns for Senior Citizens, Adults, and Children. These may or may not match the needs of your health fair. Please modify the list as needed.

### Walkthrough:

- 1) List the Education Topics/Types of Screenings/Types of Activities to the left
- 2) Check off the groups for which the topic/screening/activity may be appropriate
- 3) See if you have enough education topics/screenings/activities for your target population
- 4) On the last page, choose the appropriate type of outreach for your target population
  - a) For example, it may not be appropriate to send promotional letters to children. Printing flyers/posters may be more appropriate. Feel free to list other types of promotion that may be appropriate for your health fair.

## Provider Information Form

This form can be used to determine what services, activities, information, and giveaways/prizes you will have at your health fair, as well as what your service providers will need. It can also help you organize the floor plan for your health fair (organizing similar types of booths next to each other). It should be sent to those helping out with the health fair in any capacity – e.g. doctors, hospitals, local businesses, etc. For example, you would send it to a local pizzeria that will be donating free pizza for your event. You would also send it to a local doctor providing free medical advice or screening services. This will help you determine what services, activities, information, and giveaways/prizes to advertise for your health fair, as well as what equipment and other needs your providers have.

### Walkthrough

- 1) Have the provider fill out their contact information.
- 2) Have the provider fill out information regarding the service they will be providing.
- 3) Have the provider fill out what types of equipment they will need for the health fair.
- 4) Please modify the list according to your health fair.
- 5) Have the provider list the staff that will be at their booth. This information can be used to advertise for your health fair, make name tags/identification, as well as determine how much you they will need, in addition to other logistical information.

## Pre-registration List

This form can be used to pre-register those who want to attend the health fair. This is useful for health fairs that require attendance estimates in advance. Some activities that may require attendance estimates in advance are screenings, vaccinations and educational seminars. You may also want to use pre-registration for

other reasons: to be able to procure enough food, giveaways, seats, etc. for your participants. Additionally, it can also be used to keep track of how health fair participants heard about the event – for future purposes of outreach, etc. The information requested on the form may or may not fit the needs of your health fair, so you may wish to modify the list as needed.

#### Walkthrough

1. Have the employee(s) responsible for taking phone calls about the health fair, take down the following information: name, phone number, number of people planning to attend, how the caller heard about the fair, any information requested. Please modify the list as needed.

### **MARKETING STAGE**

#### **Sample E-mail**

This e-mail can be sent to members of your organization and community members, as well as to other organizations that have email lists to inform them about your health fair. Please modify as you see fit.

#### Walkthrough

1. Please add information specific to your health fair where you see capitalized text in between parentheses– e.g. ((DAY, TIME, AND PLACE)).

#### **Sample Promotion Letters**

These forms letters can be used to contact individuals, organizations or businesses in your community and can be modified according to your health fair needs.

- a. Doctor
- b. Pharmacist
- c. Hospital
- d. Non-profit Organization
- e. Local business

#### Walkthrough

1. Please add information specific to your health fair where you see capitalized text in between parentheses– e.g. ((DAY, TIME, AND PLACE)).

#### **Press Releases**

These press release forms can be used to advertise your health fair to local media, including local newspapers, radio, and television programs. Please modify for your health fair, as needed.

- a. children
- b. women
- c. men
- d. senior citizens

#### Walkthrough

1. Where it says “CONTACT”, please add the name and contact information of your contact person for the health fair.
2. Please add information specific to your health fair where you see text in between parentheses– e.g. ((HEADLINE)), [ORGANIZATION].
3. Please fill in information where you see bullets.

## **EVALUATION STAGE**

### **Provider Evaluation Form**

This form can be given to those helping out with the health fair to get feedback about the health fair from them. This is especially useful if you plan on holding future health fairs, so you can make the appropriate changes, if needed. Please modify for your health fair, as needed.

### **Attendee Exit Survey**

This form can be given to health fair attendees to get feedback about the health fair from them. This is especially useful if you plan on holding future health fairs, so you can make the appropriate changes, if needed. Please modify for your health fair, as needed.

### **Specific Events Conducted**

This form can be used to evaluate the events conducted. This is especially useful if you plan on holding future health fairs, so you can make the appropriate changes, if needed. Please modify for your health fair, as needed.

### **Walkthrough**

1. Where it says “CONTACT”, please add the name and contact information of your contact person for the health fair.
2. Please add information specific to your health fair where you see text in between parentheses– e.g. ((HEADLINE)), [ORGANIZATION].
3. Please fill in information where you see bullets

### **Health Screenings Performed**

This form can be used to evaluate the health screenings performed, if any. (Providing health screenings is not mandatory for your health fair.) This is especially useful if you plan on holding future health fairs, so you can make the appropriate changes, if needed. Please modify for your health fair, as needed.

### **Results and Follow-up**

This form can be used to list key learnings, screenings results, and survey results and identify follow-up. This is especially useful if you plan on holding future health fairs, so you can make the appropriate changes, if needed. Please modify for your health fair, as needed.

## **FOLLOW-UP**

### **Sample Follow-up Letters**

These form letters can be used to follow-up with and thank those individuals, organizations, and businesses that helped out with the health fair. Please modify for your health fair, as needed.

- a. Doctor
- b. Pharmacist
- c. Hospital
- d. Non-profit Organization
- e. Local business

### **Walkthrough**

1. Please add information specific to your health fair where you see capitalized text in between parentheses– e.g. ((DAY, TIME, AND PLACE)).

# **PLANNING FORMS**

## BUDGET PLANNING CHECKLIST

This is a guide only. You may want to add other tasks that you or others in your organization have identified.

x		Cost (\$)		x		Cost (\$)
	<b>Promotional Materials</b>				<b>Displays</b>	
	Flyers				Tablecloths	
	Printing				Chairs	
	Artwork				Generator	
	Posters				Surge protectors	
	Promotional items				Extension cords	
	Banners				Garbage cans	
	Giveaways				Individual booth needs	
	Other				Equipment rental	
					Display boards	
					Other	
	<b>Health Fair Staff</b>				<b>Paperwork and Permits</b>	
	Gifts				Screening forms	
	Meals				Screening tests	
	Identification				Machine rental	
	Wrap-up party				Evaluations	
	Security				Postage	
	Other				Correspondence	
					Signs	
	<b>Decorations</b>				Rental space	
	Balloons				Parking permits	
	String				Liability insurance	
	Tape				Thank-you notes	
	Staples				Health permits	
	Markers				Other	
	Banners					
	Posters				<b>Travel Expenses</b>	
	Signs				Airline tickets	
	Other				Hotels	
					Car rentals	
					Mileage	
					Restaurant food	
					Other	
	<b>Refreshments</b>				<b>TOTAL</b>	
	Participants					
	Staff					
	Volunteers					
	Other					

## HEALTH FAIR PLANNER

To help you organize the many tasks on the planning time line, we are including this Health Fair Planner. You may want to add other tasks that you or others in your organization have identified.

Activity	Advance Time	Due Date	Responsible Party	Status
Develop budget				
Site rental fees				
Marketing and information expenses				
Speaker fees				
Travel expenses				
Required permits				
Prop rentals				
Vendor fees				
Event and security staffing				
Personnel costs				
Other				
Submit proposal to management				
Investigate potential sites				
Proximity of location to employee audience				
Site availability for desired date and time				
Maximum attendee capacity				
Parking				
Fees				
Available equipment and staff				
Signage restrictions				
Activity restrictions				
Form planning committee				
Lock in site and date				
Create promotional and informational material				
Submit for legal, regulatory, and compliance review				
Finalize program offerings				
Sign up				
Participating physicians				
Other professionals				
Cosponsors				
Select vendors				
Food				
Entertainment				
Props				
Other				
Develop promotional plan				
Create advertising				
Point-of-service signage				

Other promotion opportunities				
Order premiums and patient education materials				
Finalize vendor agreements				
Schedule staffing				
Postfair activities				
Measurement tools				
Follow-up plan				
Other				

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_







## HEALTH FAIR PLANNING WORK SHEET (CONT'D)

PROMOTING YOUR FAIR			
	Senior Citizens	Adults	Children
((Flyers/posters))			
((Promotional letters))			
((E-mail reminders))			
((Other))			

POVIDER INFORMATION FORM				
Organization name:				
Address:				
City:		State:		ZIP:
Contact person:				
Phone:		Fax:		

Service Description	
Describe your booth or display—be brief, yet specific.	
Screening service:	
Activity/demonstration:	
Awareness/information:	
Giveaways:	
Raffle prize donation:	

Facility Needs		
You will be provided with 1 six-foot table and 2 chairs. If you have additional needs, please note the number and size below.		
Tables _____	VCR and TV monitor _____	3-prong adapters _____
Chairs _____	Electrical outlets _____	Other (please specify your needs in detail)

Staff	
Please note all staff who will be representing you at your booth.	
Name:	Title or credentials:
Please note any other requirements you may have for participation.	

(In addition to using the above form, you should have your legal department develop a release to be signed by the providers to confirm that they assume responsibility for any medical advice given at the fair.)

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# **MARKETING LETTER TEMPLATES**

## **SAMPLE EMAIL**

### **Mark Your Calendar!**

By now you should have received my letter telling you about the Health Fair that **the organization** is sponsoring on **((DAY, DATE, TIME, AND PLACE))**. Be sure to mark your calendars now! In addition to **((TYPE OF HEALTH SERVICES, EDUCATION, ADVOCACY AND/OR OTHER ACTIVITIES YOU PLAN TO HAVE))**, you'll find answers to many of your health questions, useful brochures, and benefits explanations. It will be informative and fun and may reassure you or alert you to a situation that needs attention. Take a more active role in your health and your family's health. Please call **((PERSON COORDINATING THE EVENT))** at **((EXTENSION))** to pre-register for the event. **((NOTE: ADD A DEADLINE IF YOU WANT A HEAD COUNT IN ADVANCE.))**

Hope to see you at the fair!

**((NAME OF CEO))**

## SAMPLE PROMOTION LETTER - DOCTOR

((DATE))

((DOCTOR'S NAME))  
((ADDRESS))  
((CITY, STATE ZIP CODE))

Dear Dr. ((NAME)):

All of us need to take an active role in maintaining our personal health. For this reason, ((ORGANIZATION NAME)) is sponsoring a Health Fair for our community. The event will be held on ((DATE—INCLUDING DAY OF THE WEEK, TIME, AND PLACE)).

((ORGANIZATION NAME)) is committed to helping our community lead productive, healthier lives. The health fair is a terrific way for them to learn about health care issues in a fun, supportive environment.

I know you are dedicated to ensuring that your patients understand their health care options, so I hope you will join us in our education effort. I invite you to give a presentation, conduct health screenings, or offer any other service that might enhance the value of this event. It is a great opportunity to better acquaint our employees with your services.

If you are interested in participating, please contact ((NAME OF INDIVIDUAL COORDINATING THE EVENT WITHIN THE ORGANIZATION)) at ((PHONE NUMBER, INCLUDING AREA CODE, AND EXTENSION)) on or before ((DATE)).

Sincerely,

((SIGNATURE))

((NAME))  
((TITLE))

## SAMPLE PROMOTION LETTER - PHARMACIST

((DATE))

((PHARMACIST'S NAME))  
((NAME OF PHARMACY))  
((ADDRESS))  
((CITY, STATE ZIP CODE))

Dear ((Mr./Ms. NAME)):

All of us need to take an active role in maintaining our personal health. For this reason, ((ORGANIZATION NAME)) is sponsoring a Health Fair for our community. The event will be held on ((DATE—INCLUDING DAY OF THE WEEK, TIME, AND PLACE)).

((ORGANIZATION NAME)) is committed to helping our community lead productive, healthier lives. The health fair is a terrific way for them to learn about health care issues in a fun, supportive environment.

I know you are dedicated to ensuring that patients understand the medications that have been prescribed to them, so I hope you will join us in our education effort. I invite you to give a presentation or offer any other service that might enhance the value of this event. It is a great opportunity to better acquaint our community with the services of your pharmacy.

If you are interested in participating, please contact ((NAME OF INDIVIDUAL COORDINATING THE EVENT WITHIN THE ORGANIZATION)) at ((PHONE NUMBER, INCLUDING AREA CODE, AND EXTENSION)) on or before ((DATE)).

Sincerely,

((SIGNATURE))

((NAME))  
((TITLE))

## SAMPLE PROMOTION LETTER – HOSPITAL

((DATE))

((HOSPITAL ADMINISTRATOR'S NAME))  
((TITLE))  
((NAME OF HOSPITAL))  
((ADDRESS))  
((CITY, STATE ZIP CODE))

Dear ((Mr./Ms. NAME)):

All of us need to take an active role in maintaining our personal health. For this reason, ((ORGANIZATION NAME)) is sponsoring a Health Fair for our community. The event will be held on ((DATE—INCLUDING DAY OF THE WEEK, TIME, AND PLACE)).

((ORGANIZATION NAME)) is committed to helping our community lead productive, healthier lives. The health fair is a terrific way for them to learn about health care issues in a fun, supportive environment.

I know your facility is dedicated to ensuring that patients understand the treatment options available to them, so I hope you will join us in our education effort. I invite someone from your medical staff to conduct a health screening, give a presentation, or offer any other service that might enhance the value of this event. It is a great opportunity to better acquaint our community with your hospital's programs and services.

If you are interested in participating, please contact ((NAME OF INDIVIDUAL COORDINATING THE EVENT WITHIN THE ORGANIZATION)) at ((PHONE NUMBER, INCLUDING AREA CODE, AND EXTENSION)) on or before ((DATE)).

Sincerely,

((SIGNATURE))

((NAME))  
((TITLE))

# SAMPLE PROMOTION LETTER - NONPROFIT

((DATE))

((NONPROFIT ADMINISTRATOR'S NAME))

((TITLE))

((NAME OF ORGANIZATION))

((ADDRESS))

((CITY, STATE ZIP CODE))

Dear ((Mr./Ms. NAME)):

All of us need to take an active role in maintaining our personal health. For this reason, ((ORGANIZATION NAME)) is sponsoring a Health Fair for our community. The event will be held on ((DATE—INCLUDING DAY OF THE WEEK, TIME, AND PLACE)).

((ORGANIZATION NAME)) is committed to helping our community lead productive, healthier lives. The health fair is a terrific way for them to learn about health care issues in a fun, supportive environment.

I know your organization is dedicated to educating the general public about ((ORGANIZATION'S AREA OF SPECIALTY: FOR EXAMPLE, HEART DISEASE, DIABETES, ETC)), so I hope you or your staff will join us in our education effort. I invite you to give a presentation, disseminate information, or offer any other service that might enhance the value of this event. We can provide free booth space to a representative from your organization. The health fair is a great opportunity to acquaint our community with your organization's services.

If you are interested in participating, please contact ((NAME OF INDIVIDUAL COORDINATING THE EVENT WITHIN THE ORGANIZATION)) at ((PHONE NUMBER, INCLUDING AREA CODE, AND EXTENSION)) on or before ((DATE)).

Sincerely,

((SIGNATURE))

((NAME))

Chief Executive Officer

## SAMPLE PROMOTION LETTER – LOCAL BUSINESS

((DATE))

((MERCHANT'S NAME))

((TITLE))

((NAME OF BUSINESS))

((ADDRESS))

((CITY, STATE ZIP CODE))

Dear ((Mr./Ms. NAME)):

All of us need to take an active role in maintaining our personal health. For this reason, ((ORGANIZATION NAME)) is sponsoring a Health Fair for our community. The event will be held on ((DATE—INCLUDING DAY OF THE WEEK, TIME, AND PLACE)).

((ORGANIZATION NAME)) is committed to helping our community lead productive, healthier lives. The health fair is a terrific way for them to learn about health care issues in a fun, supportive environment.

This event presents you with a unique opportunity to introduce your products and services that are of interest to our employees. Setting up a booth, conducting a seminar or demonstration, or donating products or services for our goody bags or raffle are some of the ways your business can build awareness among our community.

If you are interested in participating in the Health Fair or would like more information, please contact ((NAME OF INDIVIDUAL COORDINATING THE EVENT WITHIN THE ORGANIZATION)) at ((PHONE NUMBER, INCLUDING AREA CODE, AND EXTENSION)) on or before ((DATE)).

Sincerely,

((SIGNATURE))

((NAME))

((TITLE))

# **PUBLICITY TEMPLATES**

# SAMPLE PRESS RELEASE – CHILDREN

FOR IMMEDIATE RELEASE

CONTACT: \_\_\_\_\_

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((HEADLINE))`

**[Organization] to Hold Health Fair for Children and Their Parents**

((SUBHEAD))

**Here's Information You Need for Good Health!**

((COPY))

[ORGANIZATION] is conducting a Health Fair on [DATE], at [LOCATION] from [TIME] to [TIME]. The free event provides an informative and entertaining way for children and their parents to learn about health issues that are important to them. The Health Fair will offer attendees:

- 
- 

In addition, [ORGANIZATION] will provide food, entertainment, and free gifts to participants.

Come and have fun!

# SAMPLE PRESS RELEASE - WOMEN

FOR IMMEDIATE RELEASE

CONTACT: \_\_\_\_\_

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((HEADLINE))

**[Organization]** to Hold Health Fair for Women

((SUBHEAD))

**Here's Information You Need for Good Health!**

((COPY))

[ORGANIZATION] is conducting a Health Fair on [DATE], at [LOCATION] from [TIME] to [TIME]. The free event provides an informative and entertaining way for women of all ages to learn about health issues that are important to them. The Health Fair will offer attendees:

- 
- 
- 

In addition, [ORGANIZATION] will provide food, entertainment, and free gifts to participants.

Come and have fun!

# SAMPLE PRESS RELEASE - MEN

FOR IMMEDIATE RELEASE

CONTACT: \_\_\_\_\_

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((HEADLINE))

**[Organization]** to Hold Health Fair for Men

((SUBHEAD))

**Here's Information You Need for Good Health!**

((COPY))

[ORGANIZATION] is conducting a Health Fair on

[DATE], at [LOCATION] from [TIME] to [TIME]. The free event

provides an informative and entertaining way for men to learn

about health issues that are important to them. The Health Fair will offer

attendees:

- 
- 
- 
- 

In addition, [ORGANIZATION] will provide food, entertainment, and free gifts to participants.

Come and have fun!

# SAMPLE PRESS RELEASE – SENIOR CITIZENS

**FOR IMMEDIATE RELEASE**

CONTACT: \_\_\_\_\_

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((HEADLINE))

**[Organization] to Hold Health Fair for Senior Citizens**

((SUBHEAD))

**Here's Information You Need for Good Health!**

((COPY))

[ORGANIZATION] is conducting a Health Fair on [DATE],  
at [LOCATION] from [TIME] to [TIME]. The free event provides an  
informative and entertaining way for adults aged 65 years and older to  
learn about health issues that are important to them. The Health Fair will offer attendees:

- 
- 
- 

In addition, [ORGANIZATION] will provide food, entertainment, and free gifts to participants.

Come and have fun!

# **FEEDBACK FORMS**

# PROVIDER EVALUATION FORM

Thank you so much for your participation in our health fair. We would like to get your feedback about the health fair so we can make it even better next time. Please complete this evaluation form at your booth. We will collect it before you leave. Thanks!

Name \_\_\_\_\_

Organization \_\_\_\_\_

## 1. Please rate the health fair on the following aspects using a scale from poor to excellent.

(Circle your responses.)

	Poor	Fair	Good	Excellent	
1	2	3	4		Information in advance regarding the health fair
1	2	3	4		Accessibility of the health fair staff for questions/problems
1	2	3	4		Location and setup of your booth
1	2	3	4		Organization of the health fair
1	2	3	4		Number of employees visiting your booth
1	2	3	4		Meeting your expectations and objectives
1	2	3	4		Overall perception of the health fair

2 Approximately how many community members visited your booth? \_\_\_\_\_

3 Would you be interested in participating in a future health fair?

Yes       No

4 Please make any comments or suggestions on improving the health fair from your perspective as a provider.

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*Thank you for your feedback*

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## ATTENDEE EXIT SURVEY

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Your opinion about the Health Fair is important to us. Please take a moment to carefully complete this survey, and give it to the person at the exit desk before you leave.

1. Having just attended this health fair, how would you rate your knowledge of your health?  
(CIRCLE YOUR ANSWER.)

Poor                  Fair                  Good                  Very Good                  Excellent

2. Why did you attend the Health Fair? (PLEASE BE AS SPECIFIC AS POSSIBLE.)

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3. Overall, how would you rate the health fair? (CIRCLE YOUR ANSWER.)

Poor                  Fair                  Good                  Very Good                  Excellent

4. Who, if anyone, attended the health fair with you? (PLEASE CIRCLE ALL THAT APPLY.)

Spouse                  Adult relative                  Friend                  Child

5. The following is a list of statements describing the Health Fair. Please rate each statement. Use a scale of 1 to 5 with "1" being "Disagree Completely" and "5" being "Agree Completely."  
(CIRCLE ONE ANSWER FOR EACH STATEMENT BELOW.)

	<u>Disagree Completely</u>	<u>Disagree Somewhat</u>	<u>Neither Agree Nor Disagree</u>	<u>Agree Somewhat</u>	<u>Agree Completely</u>
The health fair helped me understand my own risks for diseases and conditions at this stage of my life.	1	2	3	4	5
The health fair encouraged me to be active in health care decisions about diagnosis and treatment of health conditions.	1	2	3	4	5

The health fair helped me to make and keep to prevention and treatment plans.	1	2	3	4	5
I learned things that I did not know before.	1	2	3	4	5
I believe going to this health fair was a good use of my time.	1	2	3	4	5
I'm more likely to take my medications as I should since going to the health fair.	1	2	3	4	5
I <u>better</u> understand the importance of good nutrition since going to the program.	1	2	3	4	5
I understand the importance of an ongoing communication with my health care provider.	1	2	3	4	5
I learned that talking with my health care provider about my health concerns is important.	1	2	3	4	5

6. Please rate the following health fair events. (PLEASE CIRCLE ONE ANSWER PER EVENT.)

<u>Activity/Screening Know</u>	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Poor</u>	<u>Don't</u>
[ ]	5	4	3	2	1
[ ]	5	4	3	2	1
[ ]	5	4	3	2	1
[ ]	5	4	3	2	1
[ ]	5	4	3	2	1

7. What did you like most about the health fair?

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8. Did you pick up any of the materials at the health fair? (PLEASE CIRCLE YOUR ANSWER.)

Yes      No

If yes, on what topics?

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9. What topics at the health fair would you like to learn more about?

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10. Were the location and time of the health fair convenient for you?

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11. How could future health fairs be improved?

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12. Based on your experience at this health fair, what is your impression of the sponsoring organization? (PLEASE CIRCLE YOUR ANSWER.)

Excellent

Good

Fair

Poor

# **EVALUATION FORMS**







# **FOLLOW-UP LETTER TEMPLATES**

## SAMPLE FOLLOW-UP LETTER - DOCTOR

((DATE))

((DOCTOR'S NAME))  
((ADDRESS))  
((CITY, STATE ZIP CODE))

Dear Dr. ((NAME)):

Our Health Fair was a valuable health education event for our community. This was, in no small part, due to experts such as you who answered our community's health questions and spoke on medical topics. ((IF THE PHYSICIAN DID SOMETHING ELSE AT THE HEALTH FAIR, CHANGE SENTENCE ACCORDINGLY.))

So, please accept our sincere thanks for taking the time from your busy schedule to participate in this educational initiative. Through such programs as the Health Fair, we can work together toward the goal of helping our community become healthier.

Sincerely,

((SIGNATURE))

((NAME))  
((TITLE))

## SAMPLE FOLLOW-UP LETTER - PHARMACIST

((DATE))

((PHARMACIST'S NAME))  
((NAME OF PHARMACY))  
((ADDRESS))  
((CITY, STATE ZIP CODE))

Dear ((Mr./Ms. NAME)):

Our Health Fair was a valuable health education event for our community. This was, in no small part, due to experts such as you who discussed new pharmaceutical treatments and answered questions about drug interactions and potential side effects. ((IF THE PHARMACIST DID SOMETHING ELSE AT THE HEALTH FAIR, CHANGE SENTENCE ACCORDINGLY.))

So, please accept our sincere thanks for taking the time from your busy schedule to participate in this educational initiative. Through such programs as the Health Fair, we can work together toward the goal of helping our community become healthier.

Sincerely,

((SIGNATURE))

((NAME))  
((TITLE))

## SAMPLE FOLLOW-UP LETTER - HOSPITAL

((DATE))

((HOSPITAL ADMINISTRATOR'S NAME))

((TITLE))

((NAME OF HOSPITAL))

((ADDRESS))

((CITY, STATE ZIP CODE))

Dear ((Mr./Ms. NAME)):

Our Health Fair was a valuable health education event for our community. This was, in no small part, due to experts such as you who administered screenings and discussed trends and innovations in the health care industry. ((IF HOSPITAL STAFF DID SOMETHING ELSE AT THE HEALTH FAIR, CHANGE SENTENCE ACCORDINGLY.))

So, please accept our sincere thanks for allowing a member of your staff to participate in this educational initiative. Through such programs as the Health Fair, we can work together toward the goal of helping our community become healthier.

Sincerely,

((SIGNATURE))

((NAME))

((TITLE))

## SAMPLE FOLLOW-UP LETTER – NONPROFIT

((DATE))

((NONPROFIT ADMINISTRATOR'S NAME))  
((TITLE))  
((NAME OF NONPROFIT ORGANIZATION))  
((ADDRESS))  
((CITY, STATE ZIP CODE))

Dear ((Mr./Ms. NAME)):

Our Health Fair was a valuable health education event for our community. This was, in no small part, due to experts such as you who could answer questions about the symptoms, diagnosis, and treatment of some of today's most prevalent diseases. ((IF THE REPRESENTATIVE FROM THE NONPROFIT ORGANIZATION DID SOMETHING ELSE AT THE HEALTH FAIR, CHANGE SENTENCE ACCORDINGLY.))

So, please accept our sincere thanks for taking time from your busy schedule to participate in this educational initiative. Through such programs as the Health Fair, we can work together toward the goal of helping our community become healthier.

Sincerely,

((SIGNATURE))

((NAME))  
Chief Executive Officer

## SAMPLE FOLLOW-UP LETTER – LOCAL BUSINESS

((DATE))

((MERCHANT'S NAME))

((TITLE))

((NAME OF BUSINESS))

((ADDRESS))

((CITY, STATE ZIP CODE))

Dear ((Mr./Ms. NAME)):

Our Health Fair was a valuable health education event for our community. For the event to be successful, it was important to have raffle prizes, as well as activities and demonstrations that were fun and educational. We appreciate your gift of ((FILL IN WHAT THE BUSINESS DONATED)) to help make the event a success. ((IF THE BUSINESS CONDUCTED AN ACTIVITY—SUCH AS A HEALTHY COOKING DEMONSTRATION OR AN EXERCISE WORKSHOP—SUBSTITUTE WITH A SENTENCE SHOWING APPRECIATION FOR THAT SPECIFIC ACTIVITY.))

So, please accept our sincere thanks for agreeing to participate in this educational initiative. Through such programs as the Health Fair, we can work together toward the goal of a healthier tomorrow.

Sincerely,

((SIGNATURE))

((NAME))

((TITLE))