Community Engagement										
Categories of Input/Engagement	**Entity:**									
	Form of Input in Assessment					**Priority Setting**		**Implementation / Oversight**		
Insert Y if yes, N if no	Survey	Focus Groups	Public Forum	Key Informant Interviews	CHNA Advisory Committee	Priorities set for hospital only	Priorities set for group of hospitals, PH, etc.	Participation in Project Planning	Partner on Individual Project(s)	Members of CB Function Oversight Body
Identified in CHNA									Enter A if project advisor, F if receiving funding, I if providing in-kind support	
Source of Input										
No specification										
Community-Based Organizations										
Govt Public Health Local										
Govt PH State										
Other Public Sector officials										
Lay community members										
Insert P for person, R for representative										
People experiencing disparities										
Medically underserved people										
Racial/ethnic minorities										