NYSARH Member Survey Summer 2019

*This survey will be sent via Survey Monkey link in regular email to NYSARH Members in good standing sometime toward the end of July with responses due by mid-August.*

Introductory paragraph…

*Draft Questions in no particular order*

Communications

1. NYSARH sends a Quarterly newsletter and periodic announcements using a CRM system called Campaign Monitor. Some email systems screen for CRM-generated emails, or tag them as spam. Please select the sentence that best describes your experience.
2. I regularly receive and read NYSARH emails sent from the CRM.
3. NYSARH emails from the CRM automatically go to my less-used email folder [unfocused/updates], not my main folder. Sometimes I notice them and sometimes not.
4. NYSARH emails from the CRM automatically go to my never-used email folder [spam/junk], not my main folder. I do not see them.
5. Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. NYSARH is on Facebook! Please select the sentence that best describes your experience.
7. I do not use Facebook.
8. I did not know that NYSARH had a Facebook page.
9. I have looked at the NYSARH Facebook page once or twice.
10. I have Liked NYSARH on Facebook
11. I Follow NYSARH on Facebook.
12. I have posted comments on the NYSARH Facebook page.
13. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
14. NYSARH has made some enhancement to the organization’s website. Please select the sentence that best describes your experience.
15. I check the NYSARH website frequently for information and updates.
16. I go to the NYSARH website for particular reasons such as membership renewal and conference registration.
17. I hardly ever check the NYSARH website.
18. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Determinants of Health

1. The Self-Management Resource Center offers “umbrella” licenses that permit an agency to deliver any SMRC workshops or training at various sites, but only if the agency is legally responsible for use, fidelity, compliance, reporting and liability for use of the content under the terms of your license. All covered agencies must be named on the license and agencies added or deleted after the issue of the license must be reported to SMRC. The cost is $8,000 for the license fee, which includes three Leader trainings and 400 workshops.
2. My organization does not offer and is not interested in offering evidence-based chronic disease prevention and/or self-management classes.
3. My organization does offer evidence-based chronic disease prevention and/or self-management classes, but we are not interested in operating under a NYSARH umbrella license.
4. My organization offers evidence-based chronic disease prevention and/or self-management classes, and we are interested in operating under a NYSARH umbrella license.
5. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership

1. In 2019 NYSARH launched the Board Member Portal. Did you use the Member Portal to join or renew your membership?
2. Yes
3. No
4. Don’t know/don’t remember
5. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. NYSARH plans to prepare a Member Directory that will reside on the Member Dashboard. Is your contact information, organizational information and any additional contacts correct on the Member Dashboard?
7. Yes
8. No
9. Don’t know/don’t remember
10. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Governance

*With format adjustments – it will look different in Survey Monkey*

Please identify Connections you bring to your membership in NYSARH.

|  |  |
| --- | --- |
| **Social/Relationship Capital** |  |
| Connections to policy makers |  |
|  Connections to a national field/industry network | Please specify: |
|   |  |
|   | AGING/DISABILITY SERVICES |
|   | EMERGENCY PREPAREDNESS |
|   | HANYS/IHA |
|   | ADVOCACY AND REPRODUCTIVE HEALTH |
|  Connections to particular communities and/or populations  | Please specify: |
|   | MIGRANT WORKERS |
|   | LGBTQ, UNINSURED AND UNDERINSURED, LOW-INCOME, WOMEN 20-29 |
|  Connections to funders |  |
|   | Other (please specify): |

Policy

1. NYSARH presented Testimony to the NYS Assembly Health Committee on May 31st. Please select the sentence that best describes your experience.
2. I contributed ideas/priorities for the Testimony.
3. I read the NYSARH Testimony.
4. I knew NYSARH had submitted Testimony.
5. I did not know NYSARH had submitted Testimony.
6. I do not think NYSARH should have submitted Testimony.
7. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. The Policy Committee gathers input using this survey to inform our work during the fall/winter/spring Advocacy Season. Please rate the intensity of your interest/concern regarding the following topics: *This will have a Likert scale.*
9. Workforce recruitment & retention
10. Wind-down of DSRIP
11. Push to move every toward Value Based Payment
12. Access to pharmacy/340B/pharmacy prices
13. Prevention Agenda/Population Health programs
14. Social Determinants of Health
15. EMS
16. Non-medical transportation
17. Environmental quality [water quality, lead paint, pollution]
18. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_