

Success Story Data Collection Tool

Success Story Item	Your Answer
Intervention Information	
Region:	
Author:	
Proposed Title: This should include the intervention name and grab the attention of the reader	
Intervention Planning Start Date:	
Intervention Outcome Date:	
Intervention Target Audience	
Intervention Overview	
Intervention Summary: Focus might be on collaboration with partners, a community prevention initiative, advocacy efforts, using data to engage stakeholders, etc.	
The Public Health/Community Need for This Intervention: What is the environmental context/need that lead to this intervention?	
Intervention Location: if this intervention resulted in an event or celebration, where did it take place? If the intervention was/is an ongoing campaign or program, where is it taking place?	
How Did You Accomplish Your Success? <ul style="list-style-type: none"> • What actions did you perform? • Who else was involved? • Estimated costs and funding source(s). • Partners involved • Immediate outcomes (number of people reached) <i>Think in terms of replication. What would other community leaders like yourself need to know to replicate your program?</i>	
Partner(s) Contact Information: Add additional rows for multiple partners.	Address: Email: Office number:
Participant Quote: do you have a quote from participants that supported this intervention? Please include a signed release form.	Name: Quote:
Partner Quote: Do you have a quote from partners that supported this intervention? Please include the full contact information for the person(s) being quoted and a signed release form.	Name/Title: Organization Name: Quote:
Media Coverage: If media covered any aspect of the intervention planning process or outcome, describe what type of media was utilized and provide estimated indirect reach.	

Implications of the Intervention	
<p>Program Impact: Since the program was implemented, how is life different for program recipients? (Changes in culture/norms, organizations, and behavior; increased access to proven prevention practice or new product, etc.) What is the estimated number of people who have benefited from the program? Were there any (unintended) results that surprised you?</p>	
<p>Next Steps: What are the next steps that need to be taken to further or continue this effort?</p>	
<p>Barriers to Success: What barriers to success did you face and how did you overcome them?</p>	
<p>Lessons Learned: What were the key elements that made this a success? What would you do differently?</p>	
Publication Information	
<p>Do You Have a Photo? Please attach photo (jpg file) and signed media release form.</p>	<p>Yes No</p>
<p>Partner Logos?</p>	<p>Yes No</p> <p><i>If yes, please include an electronic copy with your submission.</i></p>

By submitting this form, I am agreeing to allow **(insert campaign/program name here)** to use this information to develop a success story that can be used in community presentations and/or in written forms of communication. I have reviewed all of the information above.

Signature

Title

Date

Office Use Only
Date Draft 1 Submitted to Campaign/Program Lead: _____
Feedback from Campaign/Program Received: _____
Draft 2 Submitted to Campaign/Program Lead: _____