

Conduct a needs assessment of the school and community...

- *Developing a needs assessment of the school and community could be the first step in exploring a community action plan*

PURPOSE

- To determine if an identified concern is truly a problem that should be dealt with through broad-based community action.

STEPS TO FOLLOW

- Prepare a needs assessment form (*reproduce sample form on reverse side*) including the name of your PTA, your school and your identified concern in appropriate places.
- Determine who is to receive the needs assessment form, how it is to be distributed and the due date for the return. Determine method of follow-up.
- Survey appropriate agencies to obtain statistics on the identified concern. This can be done by making personal contacts or by sending a cover letter and the needs assessment form to some or all of the agencies listed below.
 1. School personnel
 2. Private and church-related programs
 3. Chamber of Commerce and major employers
 4. Local, county, state, federal departments of health, education, probation and social services
 5. Libraries
 6. Professional and volunteer agencies
 7. Community organizations
 8. Other
- Obtain statistics reflecting the community's ethnic and socioeconomic background. Information may be obtained from the school district office and will be necessary if you apply for a grant to fund your project.
- Evaluate information received. Review all data obtained and compile the responses to the questions on the needs assessment form. Determine whether or not the school and community concur with the identified concern and believe that a problem exists.

If it is determined that a problem exists, the information gathered will be a basis for the formulation of a community action plan. If it is determined that a problem does not exist, or is not of concern to the school and community, it is best not to invest time and money in seeking solutions.

- Prepare a final report which includes the following information:
 1. Reason for study
 2. Statistics obtained (*Note the numbers by age, socioeconomic status, ethnic background or religious affiliation.*)
 3. Community responses
 4. Professional resource people interviewed and their responses
 5. Other resources used such as periodicals, books, films, surveys
 6. Findings (*Does a problem exist that requires further action?*)

Distribution of the report to those who participated in the survey is a courtesy that will compensate them for their cooperation and will raise the level of awareness within the community. It can also be used as a tool in developing and implementing a plan of action.

Unit Name																														

Street Address																														

City, State, Zip Code																														
Date: _____																														
To: _____																														
From: _____																														
Subject: _____																														
<p>The purpose for conducting a needs assessment is to determine if an identified concern is truly a problem that should be dealt with through broad-based community action. The members of our PTA executive board are concerned about _____. We would like to know your thoughts on this subject. Your response to the questions below will assist us in determining whether or not you concur in our concern and the direction we should take if you agree there is a problem.</p> <table style="width: 100%; border: none;"><tr><td style="width: 60%;">1. In your opinion is there a problem?</td><td style="width: 20%;">Yes <input type="checkbox"/></td><td style="width: 20%;">No <input type="checkbox"/></td></tr><tr><td>2. Is the school affected by the problem?</td><td>Yes <input type="checkbox"/></td><td>No <input type="checkbox"/></td></tr><tr><td>3. Is the neighborhood affected by the problem?</td><td>Yes <input type="checkbox"/></td><td>No <input type="checkbox"/></td></tr><tr><td>4. Is the problem citywide?</td><td>Yes <input type="checkbox"/></td><td>No <input type="checkbox"/></td></tr><tr><td>5. Are the following groups of people affected by the problem?</td><td></td><td></td></tr><tr><td> • Students</td><td>Yes <input type="checkbox"/></td><td>No <input type="checkbox"/></td></tr><tr><td> • Families</td><td>Yes <input type="checkbox"/></td><td>No <input type="checkbox"/></td></tr><tr><td> • School staff</td><td>Yes <input type="checkbox"/></td><td>No <input type="checkbox"/></td></tr><tr><td> • Everyone</td><td>Yes <input type="checkbox"/></td><td>No <input type="checkbox"/></td></tr><tr><td>6. Additional comments</td><td></td><td></td></tr></table> <p>_____</p> <p>_____</p>	1. In your opinion is there a problem?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	2. Is the school affected by the problem?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	3. Is the neighborhood affected by the problem?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	4. Is the problem citywide?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	5. Are the following groups of people affected by the problem?			• Students	Yes <input type="checkbox"/>	No <input type="checkbox"/>	• Families	Yes <input type="checkbox"/>	No <input type="checkbox"/>	• School staff	Yes <input type="checkbox"/>	No <input type="checkbox"/>	• Everyone	Yes <input type="checkbox"/>	No <input type="checkbox"/>	6. Additional comments		
1. In your opinion is there a problem?	Yes <input type="checkbox"/>	No <input type="checkbox"/>																												
2. Is the school affected by the problem?	Yes <input type="checkbox"/>	No <input type="checkbox"/>																												
3. Is the neighborhood affected by the problem?	Yes <input type="checkbox"/>	No <input type="checkbox"/>																												
4. Is the problem citywide?	Yes <input type="checkbox"/>	No <input type="checkbox"/>																												
5. Are the following groups of people affected by the problem?																														
• Students	Yes <input type="checkbox"/>	No <input type="checkbox"/>																												
• Families	Yes <input type="checkbox"/>	No <input type="checkbox"/>																												
• School staff	Yes <input type="checkbox"/>	No <input type="checkbox"/>																												
• Everyone	Yes <input type="checkbox"/>	No <input type="checkbox"/>																												
6. Additional comments																														

Your name _____ Your title _____

The agency you represent, if any _____

Your address _____

Your phone no. _____

Please return to _____ No later than _____.

For additional information please contact _____ at _____.