

# *Nine Habits of Successful Comprehensive Cancer Control Coalitions*



*A Guide for an  
Effective and  
Efficient Coalition*

November 2014



## **A Note from the American Cancer Society and the Comprehensive Cancer Control National Partnership**

### **How Were the Nine Habits Developed?**

The Nine Habits were developed utilizing information from an evaluation in 2012 that identified the attributes of high-performing CCC Programs and with input from CCC coalition members and many comprehensive cancer control experts throughout the nation.

### **Initial Presentation of the Nine Habits**

The Nine Habits of Successful Comprehensive Cancer Control (CCC) Coalitions were presented to all state, tribe, territory and Pacific Island Jurisdictions in a series of on-site workshops in 2012-2013. The information was well received by workshop participants and often requested afterwards to use in CCC coalitions efforts. Therefore, the Nine Habits information is presented in this simple guide so that coalition leaders and members can use the information and tools in their ongoing work with CCC coalitions.

### **Acknowledgments**

The evaluation and subsequent development of the Nine Habits were funded through a cooperative agreement between the American Cancer Society and the Centers for Disease Control and Prevention.

The American Cancer Society's CCC staff and consultants from Strategic Health Concepts led the development of the Nine Habits content and supporting materials for both the Nine Habits Workshop and this guide.

Many thanks to the Comprehensive Cancer Control Partners for their support and review of the guide as well as the many Comprehensive Cancer Control stakeholders throughout the nation who both reviewed the materials and have shared their examples illustrated in this guide.

*"We are what we repeatedly do. Excellence then, is not an act, but a habit." - Aristotle*

*This publication was supported by Cooperative Agreement Number 5U50DP001863 funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.*

# Nine Habits of Successful Comprehensive Cancer Control Coalitions

## How to Use this Guide

### Use the Nine Habits information and tools in a variety of ways and settings:

- ✓ Discuss and use the tools for one or two Habits during each CCC leadership meeting (Board, Steering Committee, Executive Committee, etc.) over the course of a year.
- ✓ Have coalition workgroups or committees dedicate a portion of their meeting or call time to discussing one of the Habits.
- ✓ Use the self-assessment tools with all members in a full coalition meeting and have them discuss their answers in small groups and make suggestions for improvement.
- ✓ Have a team building Nine Habits coalition leadership retreat and based on the discussions create new approaches to energize the coalition.
- ✓ Ask other coalitions how they have used the Nine Habits to improve the functioning of their coalition efforts.

## Identify Changes to Make

At the beginning of each Habit section in this guide, you will find a short set of questions. These Nine Habit “assessment questions” enable you to quickly assess coalition functioning related to that Habit. You will also be able to see the different perceptions of how the group you are working with views the coalition’s efforts in that Habit area.

### Step 1

Individually, the members of the group should answer the Nine Habits assessment questions related to the Habit area on which you are working.

### Step 2

As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

### Step 3

Identify areas where the team agrees the coalition is both doing well and could improve.

### Step 4

As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

### Step 5

Identify actions to take to improve coalition efforts in the Habit area.

## Step 6

Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

**As you use this guide, keep in mind the Habits are:**

- **Interconnected and comprehensive:** The Habits all work together and cover the spectrum of a coalition's operations.
- **Reflected in the coalition's values:** Coalition leadership and members believe in the importance of each of the Habits and strive to encourage other members to value them as well.
- **Integrated into the coalition's work:** The Habits are not a temporary focus or approach, but are a way of doing business in a coalition.

**Each of the Nine Habits in this guide is presented in the following format:**

- **Habit Questions:** A series of questions focused on that Habit to assess how the coalition functions in that area
- **Habit in Action:** Quick information about that Habit and "Do This" ideas to take to put the Habit into action
- **Coalition Spotlight:** Examples of how CCC coalitions incorporated the Habit into their efforts
- **Tools:** Questions and forms to assist you in making that Habit a reality in your coalition
- **Making it a Habit:** A place for you to identify the changes you will make to make it a habit for your coalition



## **Nine Habits of Successful Comprehensive Cancer Control Coalitions**

### **Habit 1: Empowering Leadership Page 5**

Strong coalition leaders show their leadership by welcoming decision making by their members. This empowerment builds trust and encourages accountability among members.

### **Habit 2: Shared Decision Making Page 11**

Shared decision making guides the coalition. Steps are put in place so that no one organization overpowers the decisions made by the coalition.

### **Habit 3: Value-added Collaboration Page 17**

Members acknowledge and appreciate the benefits of forging alliances and working on efforts that might not be prioritized without the coalition.

### **Habit 4: Dedicated Staff Page 23**

Because the members of the coalition are volunteers, who often hold leadership positions within their own organizations, the burden of additional work for coalition members needs to be recognized and partially handled by dedicated staff.

### **Habit 5: Diversified Funding Page 30**

Diversified funding can create wider support of and involvement in the coalition's efforts by a greater number of stakeholders and can allow the coalition to remain viable if one source of funding disappears.

### **Habit 6: Effective Communication Page 36**

Coalition communication is a consistent and purposeful dialogue that uses all appropriate channels for discussion and feedback, including email, websites, phone calls, meetings, and newsletters.

### **Habit 7: Clear Roles and Accountability Page 43**

Coalition members understand their roles and feel accountable for accomplishing agreed-upon tasks. Members understand the mission of the coalition and how they, as individuals, can help achieve that mission. Coalition member roles are defined and communicated both verbally and in written documents.

### **Habit 8: Flexible Structure Page 49**

The coalition structure is flexible, adapts to challenges, and facilitates implementation of the cancer plan. The coalition strives to operate in a way that maximizes the effective and efficient work of its coalition members.

### **Habit 9: Priority Work Plans Page 55**

Priorities are chosen and work plans are developed around evidence-based strategies. Work plans clearly articulate the expected outcomes, methods to reach those outcomes, responsibilities, and timelines. The work plans are used to guide actions and are revised as challenges and opportunities arise.

### **All Habit Assessment Questions Page 65**

# Habit 1: Empowering Leadership

The coalition's leadership style empowers members. Coalitions have strong leaders that in part show their leadership by allowing others to make decisions and move forward with coalition activities. This leadership style allows coalition members to feel trusted and satisfied as a member of the coalition. Empowered coalition members are interested in making progress on coalition activities and are more likely to hold themselves and others accountable for ensuring progress. Coalition structure, reporting and accountability measures are in place that allows this level of empowerment.

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[Habit 2: Shared Decision Making](#)

[Habit 3: Value-added Collaboration](#)

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## Habit 1 Assessment

**Step 1** - Individually answer the Habit questions below.

**Step 2** - As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

**Step 3** - Identify areas where the team agrees the coalition is both doing well and could improve.

**Step 4** - As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

**Step 5** - Identify actions to take to improve coalition efforts in this Habit area.

**Step 6** - Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

HOW DOES YOUR CCC COALITION RATE?				
<p>Circle a number for each statement.            (1 = This is not happening in our coalition. 5 = This sounds just like our coalition.)</p>				
Habit 1: Empowering Leadership				
1	2	3	4	5
Our coalition leaders are actively involved in coalition efforts.				
1	2	3	4	5
Our coalition leaders encourage decision making and action from other coalition members.				
1	2	3	4	5
In our coalition, we recruit leaders and encourage members into leadership positions.				

**Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:**

## **Habit 1 in Action**

Effective and empowering CCC coalition leaders clearly demonstrate in conversations, actions, and coalition operations their empowering leadership style by:

- Encouraging others in the coalition to make decisions
- Enabling and supporting members' efforts and progress toward identified outcomes

This leadership style results in CCC coalition members that are:

- Respected and trusted
- Invested in the outcome
- Productive
- Actively engaged

### **Do This!**

- **Leaders should review coalition operations to assure that the culture and systems are in place to take advantage of an empowering leadership style.**
- **Recruit and encourage other leaders that show strong leadership capabilities. Don't rely on luck and wait for volunteers.**
- **Assure diversity in your leaders. Leaders should not always come from the same organization, or have the same experience or professional degree. A variety of perspectives, experiences and backgrounds is good for the coalition.**
- **Set and communicate high expectations for your members. Ask for, allow and expect action.**
- **Focus on results – communicate the coalition's progress and successes.**

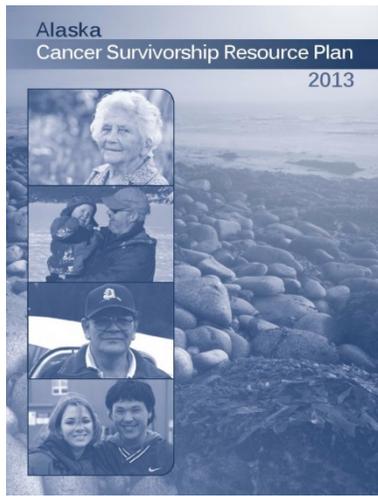
*“Leaders don't create more followers, they create more leaders.”*

*- Tom Peters*

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## Habit 1 Coalition Spotlight



### **Alaska Comprehensive Cancer Partnership**

The Alaska Comprehensive Cancer Partnership empowers leadership by utilizing volunteer leaders as Chairs for all working committees. The Partnership steering committee helps to recruit committee chairs from different facilities and organizations for maximum participation. The volunteer committee chairs provide leadership by setting the monthly agenda, facilitating meetings, developing yearly priority strategies to address Cancer Plan goals and providing outreach to new members for their committee. The chair of the Survivorship Committee worked with the members of the committee and other key organizational members of the

Partnership to develop an Alaska Cancer Survivorship Resource Plan (<http://dhss.alaska.gov/dph/Chronic/Pages/Cancer/comprehensive.aspx>). The resource plan focuses on cancer survivorship in Alaska as a priority and identifies actions to achieve the priority, resources needed, funding needed and in-kind resources needed. By supporting and empowering these leaders, the Partnership is able to expand beyond traditional partners and accomplish more than the state health department staff could alone.

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## Habit 1 Tool

### An Empowering Leader

Think of a good leader(s) you have worked with:

Who? \_\_\_\_\_

From your perspective, what made that person(s) a good leader?

List those characteristics:

- 
- 
- 
- 
- 

Review the list you created. Do you see a theme? Did you identify personal characteristics about how the leader made others feel, or business characteristics about what they knew? Often being a good leader is not just about being an expert in a field, or having an advanced degree, but also how you make people feel about themselves and their work. The quotes below reinforce this concept.

~~~~~

***“Outstanding leaders go out of their way to boost the self-esteem of their personnel. If people believe in themselves, it's amazing what they can accomplish.”***

**- Sam Walton**

***“As we look ahead into the next century, leaders will be those who empower others.”***

**- Bill Gates**

***“In the past a leader was a boss. Today's leaders must be partners with their people ... they no longer can lead solely based on positional power.”***

**- Ken Blanchard**

***“I know of no single formula for success. But over the years I have observed that some attributes of leadership are universal and are often about finding ways of encouraging people to combine their efforts, their talents, their insights, their enthusiasm and their inspiration to work together.”***

**- Queen Elizabeth II**

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*Habit 1 Empowering Leadership - Making it a Habit*

| <b>Changes to Make</b> | <b>When</b> | <b>Who</b> |
|------------------------|-------------|------------|
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |

**Notes:**

# Habit 2: Shared Decision Making

Shared decision making guides the coalition. No one organization overpowers the decisions made in the coalition, and mechanisms are in place so that this does not happen. Coalition members see that many perspectives, organizations and sources of information are considered as decisions are made. Decisions are based on data and stakeholder input.

## [Habit 2 Assessment](#)

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## Habit 2 Assessment

**Step 1** - Individually answer the Habit questions below.

**Step 2** - As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

**Step 3** - Identify areas where the team agrees the coalition is both doing well and could improve.

**Step 4** - As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

**Step 5** - Identify actions to take to improve coalition efforts in this Habit area.

**Step 6** - Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

| HOW DOES YOUR CCC COALITION RATE?                                                                                             |   |   |   |   |
|-------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
| Habit 2: Shared Decision Making                                                                                               |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| Members have the opportunity to engage in coalition decision making.                                                          |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| The process for making decisions (who, how, when) is documented and communicated to coalition members.                        |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| Decisions are made based on a variety of sources such as data and diverse stakeholder input.                                  |   |   |   |   |

**Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:**

## ***Habit 2 in Action***

Shared decision making in a CCC coalition looks like:

- No one organization overpowers the decisions made in the coalition and mechanisms are in place so that this does not happen.
- Decisions have strong rationale and are based on data, and stakeholder input.
- Coalition members see that many perspectives, organizations and sources of information are considered as decisions are made.
- Members understand how decisions are made.

### **Do This!**

- **Communicate and involve members on:**
  - **How decisions are made**
  - **When decisions will be made**
  - **What decisions will be made (setting priorities, allocating resources, leadership changes, etc.)**
- **Document how your coalition makes decisions (who and what criteria were used) and post or distribute the document for all coalition members to read.**

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## Habit 2 Coalition Spotlight

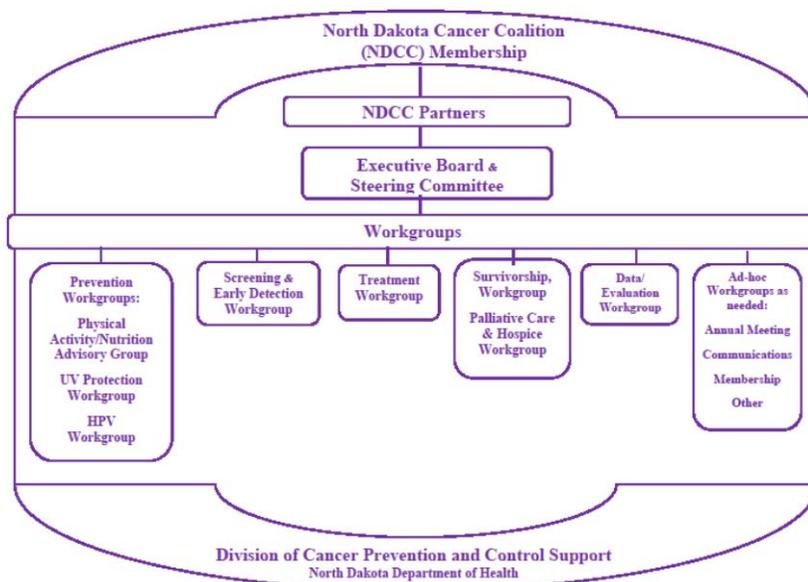
### North Dakota Cancer Coalition

The North Dakota Cancer Coalition (NDCC) decision making process is governed by established bylaws. The NDCC bylaws are reviewed on a regular basis to ensure they meet the needs of the coalition. The organizational structure of the NDCC lends itself well to ensure every member has the opportunity to voice his or her thoughts and ideas in the decision-making process.

The process begins with the Executive Committee of the coalition made up of the Chair, Vice Chair, Secretary and Treasurer. The Executive Committee, along with a member of each coalition workgroup and key standing committee members (such as data/evaluation and policy/advocacy) and state health department staff serve on the NDCC Steering Committee. Additionally, as the largest minority population in the state, at least two American Indian health-care leaders serve on the Steering Committee to ensure the needs of the state's minority population are addressed.

Members from the key standing committees and state health department staff are responsible for providing current and pertinent data and program information for the decision making process. The Steering Committee then reviews this information to bring recommendations to the NDCC on cancer plan implementation addressing the state's areas of greatest need and CDC priorities.

It is ultimately the NDCC membership that has the final vote on any major decisions of the coalition. During a scheduled NDCC in-person meeting or one of four annually scheduled conference calls, recommendations are discussed and voted on using the process set forth in the bylaws.



Revised 10-21-2013

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## Habit 2 Tool

### Shared Decision Making In Your Coalition – How Do You Do It?

List the different people and ways decisions are made in your coalition

| Who makes the decisions?     | What type of decisions are made? | Is the decision making process transparent? | In general, are people satisfied with the decisions made? | Ideas for improvement? |
|------------------------------|----------------------------------|---------------------------------------------|-----------------------------------------------------------|------------------------|
| Chair or Co-Chair            |                                  |                                             |                                                           |                        |
| Leadership Group             |                                  |                                             |                                                           |                        |
| Workgroups or Committees     |                                  |                                             |                                                           |                        |
| CCC Staff                    |                                  |                                             |                                                           |                        |
| General Coalition Membership |                                  |                                             |                                                           |                        |
| Other?                       |                                  |                                             |                                                           |                        |

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***Habit 2 Shared Decision Making - Making it a Habit***

| <b>Changes to Make</b> | <b>When</b> | <b>Who</b> |
|------------------------|-------------|------------|
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |

**Notes:**

# Habit 3: Value-added Collaboration

Members acknowledge and appreciate the “value-added” benefit of the coalition’s collaborative efforts. Coalition members see results from working with other members and forging alliances that otherwise, without the coalition, might not be realized. Interaction with other coalition members uncovers diverse strengths and resources otherwise unknown. The collaborative efforts that come from this value-added characteristic are viewed as worthwhile and effective. Ultimately, outcomes are achieved that might not happen if the coalition had not worked on the effort.

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## [Habit 3 in Action](#)

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### Habit 3 Assessment

**Step 1** - Individually answer the Habit questions below.

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**Step 6** - Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

| HOW DOES YOUR CCC COALITION RATE?<br>Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Habit 3: Value-added Collaboration                                                                                                                                 |   |   |   |   |
| 1                                                                                                                                                                  | 2 | 3 | 4 | 5 |
| We know coalition members have made connections with other members that have led to them working together or sharing resources.                                    |   |   |   |   |
| 1                                                                                                                                                                  | 2 | 3 | 4 | 5 |
| Our coalition's efforts influence key decision makers, government agencies, and other organizations.                                                               |   |   |   |   |
| 1                                                                                                                                                                  | 2 | 3 | 4 | 5 |
| Our coalition has visibility and credibility.                                                                                                                      |   |   |   |   |
| 1                                                                                                                                                                  | 2 | 3 | 4 | 5 |
| Members believe the coalition works on things that otherwise wouldn't have happened without the coalition's efforts.                                               |   |   |   |   |

**Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:**

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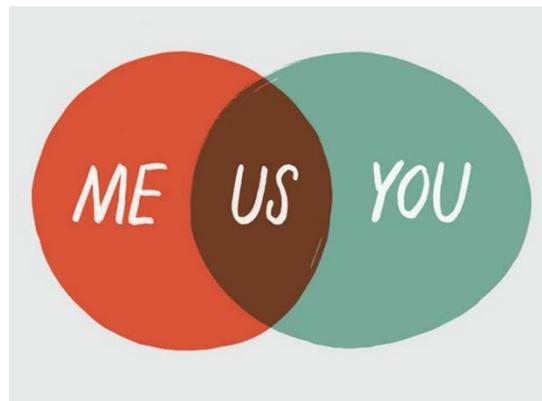
## Habit 3 in Action

Value-added collaboration is demonstrated in a coalition when:

- Members ask and identify: “What in the CCC plan would not happen if the coalition didn’t work on it?”
- Discussions about value-added collaborative efforts with other coalition members uncover diverse strengths and resources otherwise unknown.
- The focus is on assuring that coalition efforts enhance, expand, and create approaches to address a cancer plan objective; not duplicate others efforts or do something that would happen without the coalition’s involvement.

### Do This!

- **Be deliberate about what you do.**
  - **Systematically identify where the value-added opportunities are in your cancer plan. Don’t do things that would happen anyway.**
- **Demonstrate and communicate the value-added efforts of the coalition. Make sure your stakeholders and the public know:**
  - **We worked on this priority issue together.**
  - **This wouldn’t have happened without the coalition.**



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## Habit 3 Coalition Spotlight

The Wisconsin CCC Program conducted a partnership survey to assess the benefits of the collaborative work on cancer control being done in the state. They reported on the results of the survey as illustrated in an excerpt of the summary shown below:

Four out of five (80%) partners believed that the WI CCC Program has benefited the citizens of our state, while fewer partners (50%) reported that WI CCC directly impacted their own organization's ability to work on cancer issues.

### WI CCC Partner Survey --Highlights | 2011

#### The Summit

About 40% of the respondents attended the spring Summit, and of these, 51% gave it the highest rating for bringing partners together, while 31% gave it the highest rating for providing tools to implement the Plan.

*"Through the past few years there have been great speakers, content experts, and conversations, however, we need to ...take action steps, actual action items that have accountability instead of continuing to identify barriers we already know exist."*  
Summit participant

#### Perceived Impact of the WI CCC Program

Partners believed that the WI CCC Program has made an impact in Wisconsin by increasing coordination of groups throughout the state, and strengthening cancer policies and regulations. Four out of five believe that the WI CCC Program has benefited the citizens of our state. Sixteen respondents shared a specific impact, grouped into four general areas below with an example within each area.

✓ **Using the Plan to influence practice and make best use of resources**

*"Use the Plan as a supporting document for my organization when I'm trying to implement or enhance services or programs for my organization."*

✓ **Supporting policy**

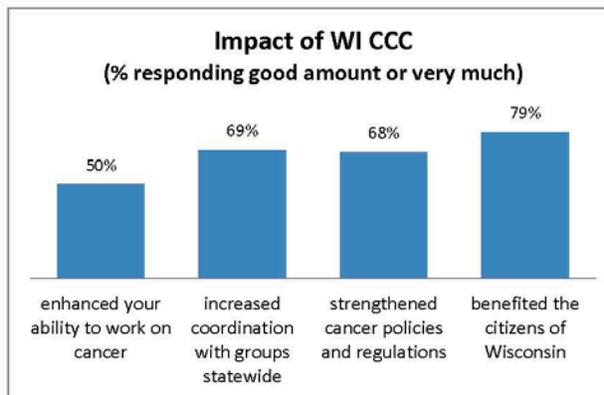
*"Oral parity bill"*

✓ **Bringing groups together**

*"The WCC helps to elevate cancer issues by spotlighting them and bringing organizations together with common themes and messaging. This has a good amount of impact in that resources are focused and used more efficiently by all groups working on cancer policy."*

✓ **Encourage specific program areas**

*"Survivorship has become more visible"*



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### ***Habit 3 Tool***

Name the value-added outcomes your coalition has achieved. In other words, what was the coalition able to accomplish together?

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- 
- 
- 

Do you think your stakeholders (coalition members, elected officials, funders, state and local health organizations) know about these value-added efforts and outcomes? If not, what are some ways you can communicate them to you stakeholders?

- 
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- 
- 
- 

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***Habit 3 Value Added Collaboration - Making it a Habit***

| <b>Changes to Make</b> | <b>When</b> | <b>Who</b> |
|------------------------|-------------|------------|
|                        |             |            |
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|                        |             |            |
|                        |             |            |
|                        |             |            |

**Notes:**

# Habit 4: Dedicated Staff

There is dedicated staff for coordination of coalition activities. Because the members of the coalition are volunteers and often include people who hold full-time positions in their own organization, the burden of additional work for coalition members needs to be recognized and partially offset by dedicated staff. It is important to clearly communicate what dedicated staff will do and the limitations of their work with the coalition. Dedicated staff plays an important role in the ongoing progress, coordination and communication of the coalition's efforts.

[Habit 1: Empowering Leadership](#)

[Habit 2: Shared Decision Making](#)

[Habit 3: Value-added Collaboration](#)

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## Habit 4 Assessment

**Step 1** - Individually answer the Habit questions below.

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| HOW DOES YOUR CCC COALITION RATE?                                                                                             |   |   |   |   |
|-------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
| Habit 4: Dedicated Staff                                                                                                      |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| The CCC program staff is sufficient to help the coalition make progress.                                                      |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| The roles and responsibilities of staff are clear and well communicated.                                                      |   |   |   |   |

**Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:**

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## *Habit 4 in Action*

Most coalition members hold full-time positions in their own organization, therefore, the burden of work for coalition members needs to be recognized and partially offset by dedicated staff.

Dedicated staff in a CCC coalition means:

- CCC is part of someone's paid job responsibilities
- The dedicated staff usually assists in the coalition operational work, such as:
  - Coordination
  - Communication
  - Tracking progress
- Having dedicated staff doesn't mean they do ALL the work. Coalition members still need to make commitments and be responsible for implementing the work of the coalition. The dedicated staff helps to support the ongoing progress of that work.
- Having dedicated staff doesn't have to be just one person, or only health department staff. Organizations can contribute a portion of an employee's time to the work of the coalition.
- Dedicated staff plays an important role in the ongoing coordination, progress and communication of the coalition's efforts. They also can be instrumental in identifying and applying for alternative sources of funding.

### **Do This!**

- **Recognize that the skills needed to work with a coalition are often different than those needed for other public health jobs.**
- **Match the right person based on the coalition's needs.**
- **Look beyond the health department for staff support.**

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## ***Habit 4 Coalition Spotlight***

The Kansas Cancer Partnership (KCP), like most cancer coalitions, found itself wanting to act on more of the good ideas and efforts coming from the partnership, and wanted to supplement the staff time to do so. The Midwest Cancer Alliance (a member of the Kansas Cancer Partnership) designated one of their staff members to provide support to the KCP approximately two days a week in a shared position arrangement. The Midwest Cancer Alliance staff person works closely with the Kansas Department of Health and Environment CCC program staff and the KCP leadership.



On the following page the Kansas Cancer Partnership staff developed a useful document for staff members to use to coordinate their roles and responsibilities to prepare for coalition meetings.

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**Kansas Cancer Partnership, Coalition Meeting Prep**

| Meeting Date:                       |      | Meeting Time: |            | Meeting Place |       |                                               |
|-------------------------------------|------|---------------|------------|---------------|-------|-----------------------------------------------|
| Activity                            | Lead | Assistant(s)  | start date | date due      | Count | NOTES/REMINDERS                               |
| Pre-meeting prep meeting            |      |               |            |               |       |                                               |
| Pre-meeting last check mtg          |      |               |            |               |       |                                               |
| Venue reservation                   |      |               |            |               |       |                                               |
| Catering arrangements               |      |               |            |               |       |                                               |
| Name of catering company & Rep      |      |               |            |               |       |                                               |
| Menu and for how many               |      |               |            |               |       |                                               |
| Catering specifics (time, extras)   |      |               |            |               |       |                                               |
| Sponsor recognition table card      |      |               |            |               |       |                                               |
| Send Save the Date (min 45 days)    |      |               |            |               |       |                                               |
| Send Invitation (30 days)           |      |               |            |               |       |                                               |
| Send inv + adv agenda (min 14 days) |      |               |            |               |       | Include map with agenda                       |
| Send reminder2 w/ adv agenda(1dy)   |      |               |            |               |       |                                               |
| News Release                        |      |               |            |               |       |                                               |
| Media Advisory Contact              |      |               |            |               |       |                                               |
| Agenda (draft & final)              |      |               |            |               |       | Draft date:                      Final date:  |
| Check Bylaws before final agenda    |      |               |            |               |       | (Make sure it is not time for elections, etc) |
| Talking points to key presenters    |      |               |            |               |       |                                               |
| 1                                   |      |               |            |               |       |                                               |
| 2                                   |      |               |            |               |       |                                               |
| Handout copies                      |      |               |            |               |       |                                               |
| Member folders and labels           |      |               |            |               |       |                                               |
| New Member Orientation packets      |      |               |            |               |       |                                               |
| Powerpoint outline/notes            |      |               |            |               |       |                                               |
| Cancer Action Team mtgs             |      |               |            |               |       |                                               |
| Prevention, chair:                  |      |               |            |               |       |                                               |
| Notetaker:                          |      |               |            |               |       |                                               |
| Early Detection, chair:             |      |               |            |               |       |                                               |
| Notetaker:                          |      |               |            |               |       |                                               |
| Treatment, chair:                   |      |               |            |               |       |                                               |
| Notetaker:                          |      |               |            |               |       |                                               |
| Survivor QoL:                       |      |               |            |               |       |                                               |
| Notetaker:                          |      |               |            |               |       |                                               |
| Survivor Care Plan:                 |      |               |            |               |       |                                               |
| Notetaker:                          |      |               |            |               |       |                                               |
| Travel (Auto, K-Tag, MiFi, Parking) |      |               |            |               |       |                                               |
| Refreshments (see Checklist)        |      |               |            |               |       |                                               |
| Coffee/tea                          |      |               |            |               |       |                                               |
| Snacks                              |      |               |            |               |       |                                               |
| Water/ice                           |      |               |            |               |       |                                               |
| Other items (cups, spoons, etc)     |      |               |            |               |       |                                               |
| Sponsor recognition table card      |      |               |            |               |       |                                               |
| Registration Table - List           |      |               |            |               |       |                                               |
| Sign-in sheet                       |      |               |            |               |       |                                               |
| Registration - name tags            |      |               |            |               |       |                                               |
| IT Setup (ITV equipment)            |      |               |            |               |       |                                               |
| Remote sites, ITV Setup             |      |               |            |               |       |                                               |
| Office Supplies (tape, pens, etc)   |      |               |            |               |       |                                               |
| Operating Guidelines (min. 1 copy)  |      |               |            |               |       |                                               |
| Incentive Items                     |      |               |            |               |       |                                               |
| Cancer Burden & Plan Docs           |      |               |            |               |       |                                               |
| Equipment (laptops, Ext cords, etc) |      |               |            |               |       |                                               |
| Clean up                            |      |               |            |               |       |                                               |
| Upcoming Events Notification        |      |               |            |               |       |                                               |
| Minute Notes                        |      |               |            |               |       |                                               |
| Thank You Cards to Sponsors         |      |               |            |               |       |                                               |

## ***Habit 4 Tool***

**Ask and answer the following questions:**

Does your coalition have dedicated staff?

What are their role and responsibilities?

Is this enough to get the job done? If not, can you think of creative ways to identify additional dedicated staff time to the coalition?

Does your coalition rely too heavily on coalition staff to do the work of the coalition? If so, how can coalition members take on more of the responsibility?

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***Habit 4 Dedicated Staff - Making it a Habit***

| <b>Changes to Make</b> | <b>When</b> | <b>Who</b> |
|------------------------|-------------|------------|
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |

**Notes:**

# Habit 5: Diversified Funding

Diversified funding is secured for implementing the coalition's priorities. Diversified funding allows the coalition to do more and not falter if one source of funding is eliminated. Diversified funding helps create widespread support and involvement in the coalition's efforts because of expanded stakeholders. Coalition members see the importance of diversified funding and become involved in helping to obtain resources for the coalition's efforts.

## [Habit 5 Assessment](#)

## [Habit 5 in Action](#)

## [Habit 5 Coalition Spotlight](#)

## [Habit 5 Tool](#)

## [Making it a Habit](#)

[Habit 1: Empowering Leadership](#)

[Habit 2: Shared Decision Making](#)

[Habit 3: Value-added Collaboration](#)

[Habit 4: Dedicated Staff](#)

[Habit 5: Diversified Funding](#)

[Habit 6: Effective Communication](#)

[Habit 7: Clear Roles and Accountability](#)

[Habit 8: Flexible Structure](#)

[Habit 9: Priority Work Plans](#)

## Habit 5 Assessment

**Step 1** - Individually answer the Habit questions below.

**Step 2** - As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

**Step 3** - Identify areas where the team agrees the coalition is both doing well and could improve.

**Step 4** - As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

**Step 5** - Identify actions to take to improve coalition efforts in this Habit area.

**Step 6** - Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

| HOW DOES YOUR CCC COALITION RATE?                                                                                             |   |   |   |   |
|-------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
| Habit 5: Diversified Funding                                                                                                  |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| We have a written resource plan that identifies funding and other types of resources needed to implement our cancer plan.     |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| We have identified coalition members who are actively working to fill resource needs.                                         |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| We have diversified funds to support our coalition's efforts.                                                                 |   |   |   |   |

**Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:**

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## ***Habit 5 in Action***

Diversified funding is important to a coalition because:

- Diversified funding allows the coalition to do more and not falter if one source of funding is eliminated.
- Putting “skin in the game” increases the support and involvement from coalition members.
- Coalition members see the importance of diversified funding and become involved in helping to obtain resources for the coalition’s efforts.

### **Do This!**

- **Communicate about funding:**
  - **This is what we have and what we don’t.**
  - **Explain the benefits of diversified resources.**
- **Develop a resource strategy for both money and in-kind resources.**
- **Create a resource “wish list:”**
  - **Let everyone know what you need.**

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## Habit 5 Coalition Spotlight

### **Kentucky Cancer Consortium**

The Kentucky Cancer Consortium developed a Kentucky Cancer Resource Plan to address the need for additional funds to implement its priorities.

#### **Purpose of Resource Plan**

*Kentucky's Cancer Action Plan (CAP) serves as a blueprint for cancer prevention and control throughout Kentucky. The purpose is to provide statewide coordination of public and private cancer control efforts that are ongoing or needed within our state. It is intended for use by individuals and organizations in all areas of cancer control statewide. Visit [www.kycancerc.org](http://www.kycancerc.org) to find the latest Cancer Action Plan. In order to implement the CAP and ensure its success, defining the resources needed is essential.*

## Executive Summary

The Resource Plan provides the best available estimates of the additional funding needed to reasonably implement some of the priority areas of the CAP. Additional benefits of having a resource plan are to plan ahead and focus on long-term sustainability for CAP priorities. It provides information on the resources needed for the priority areas, which currently include:

- Lung Cancer Prevention and Early Detection
- Colon Cancer Prevention and Early Detection
- Breast Cancer Prevention and Early Detection
- Cervical Cancer Prevention and Early Detection



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## **Habit 5 Tool**

### **Key Questions to Ask When Identifying Diverse Funding Sources**

1. Who will serve as the fiscal agent for holding and distributing the funds?
2. What will you do if a donor or funder wants to fund only a portion of an effort?
3. What will you do if someone wants to fund something that is not a priority in your CCC plan?
4. What will you do if someone wants to fund something in your CCC plan, but does not like the strategy(ies) you have identified?
5. How will you deal with others who view the CCC plan and your efforts as competition for funds for their cause or their organization?

### **Steps in Creating a Resource Strategy**

#### **Step 1: Determining Purpose and Scope of the Resource Strategy**

- Establish the rationale for developing a resource strategy.
- Identify benefits and challenges.
- Select a process for developing the resource strategy.
- Make initial decisions about the scope of the resource strategy.

#### **Step 2: Developing the Resource Strategy**

- Ask: Do we have enough detail to develop cost estimates?
- Decide what to include in your resource strategy (e.g., current resources).
- Identify budget categories for cost estimates.
- Develop a list of assumptions needed.
- Identify sources of information for assumptions.
- Develop your resource strategy and cost estimates.

#### **Step 3: Using the Resource Strategy**

- Determine how you will present and communicate about your CCC resource needs, including:
  - Audience
  - Major interests/concerns
  - Talking points
  - Forums/presentation setting
  - Materials needed

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*Habit 5 Diversified Funding - Making it a Habit*

| Changes to Make | When | Who |
|-----------------|------|-----|
|                 |      |     |
|                 |      |     |
|                 |      |     |
|                 |      |     |
|                 |      |     |

**Notes:**

# Habit 6: Effective Communication

Coalition communication is frequent and effective. Coalition communication is consistent, purposeful and effective.

Coalitions use a variety of ways to communicate with members including emails, websites, telephone calls, meetings and newsletters. Communication mechanisms allow for two-way communication and feedback.

Communication mechanisms are established for several groups including: coalition chairs, coalition leadership groups, workgroups, and the full coalition. Regular

communication serves several functions: it keeps coalition members apprised of coalition work, it reminds coalition members of their role and accountability in the coalition and it calls coalition members to action when needed. Coalition members feel more connected to the coalition and have a greater satisfaction in belonging to the coalition when they see their collaborative successes communicated.

[Habit 1: Empowering Leadership](#)

[Habit 2: Shared Decision Making](#)

[Habit 3: Value-added Collaboration](#)

[Habit 4: Dedicated Staff](#)

[Habit 5: Diversified Funding](#)

[Habit 6: Effective Communication](#)

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## [Habit 6 Assessment](#)

## [Habit 6 in Action](#)

## [Habit 6 Coalition Spotlight](#)

## [Habit 6 Tool](#)

## [Making it a Habit](#)

## Habit 6 Assessment

**Step 1** - Individually answer the Habit questions below.

**Step 2** - As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

**Step 3** - Identify areas where the team agrees the coalition is both doing well and could improve.

**Step 4** - As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

**Step 5** - Identify actions to take to improve coalition efforts in this Habit area.

**Step 6** - Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

| HOW DOES YOUR COALITION RATE?<br>Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Habit 6: Effective Communication                                                                                                                               |   |   |   |   |
| 1                                                                                                                                                              | 2 | 3 | 4 | 5 |
| Our communication with coalition members is efficient and effective.                                                                                           |   |   |   |   |
| 1                                                                                                                                                              | 2 | 3 | 4 | 5 |
| Coalition meetings are interactive - we have meaningful discussions and get work accomplished.                                                                 |   |   |   |   |

Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:

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## Habit 6 in Action

*Effective communication is important to a coalition because:*

- Coalitions who communicate effectively use a variety of ways to communicate with members including emails, websites, telephone calls, meetings and newsletters.
- Communicate in multiple ways so that everyone is hearing what you have to say and in the way they access information.
- Establish different communication strategies for different groups including: coalition chairs, coalition leadership groups, workgroups, and the full coalition.
- Diverse communication mechanisms that allow for two-way communication and feedback are best.
- Effective coalition communication is consistent, purposeful and timely. Regular communication serves several functions:
  - Keeps members apprised of coalition work.
  - Reminds members of their role and accountability in the coalition.
  - Calls coalition members to action when needed.
  - Helps members feel more connected to the coalition and have a greater satisfaction in belonging to the coalition when collaborative successes are shared.
- An established communication schedule (monthly or quarterly) is important so that people know when to expect to hear from you about coalition efforts and plans.

### **Do This!**

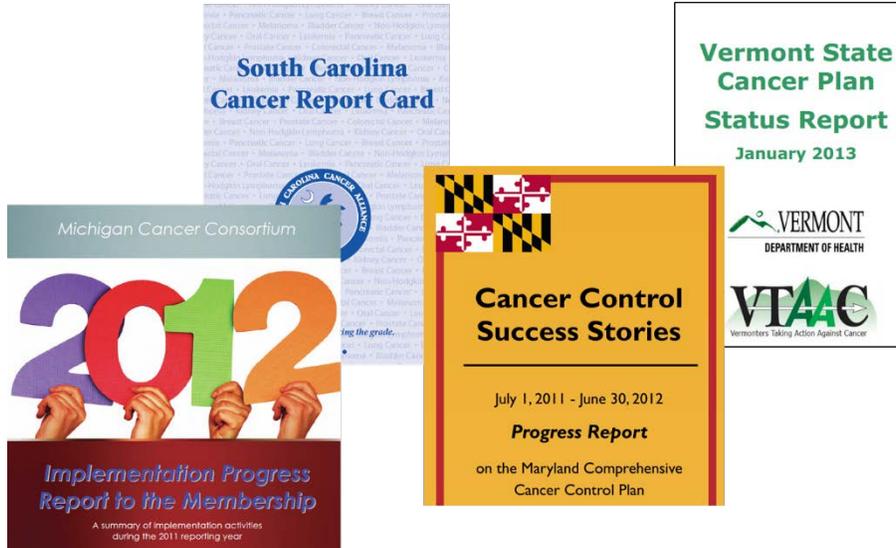
- **Create a simple communication plan:**
  - **Who, what, when and how**
- **Assure there are ongoing methods for feedback and input.**
- **Keep communication short and simple.**
- **If you are asking people to do something, make sure you are making it clear WHAT you want, WHEN you want it, and HOW to follow through with the action.**

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## Habit 6 Coalition Spotlight

Coalition progress reports can communicate to a variety of audiences the efforts and progress that CCC coalitions have made:



There are innovative ways to communicate the goals, objectives and strategies of the cancer plan and the cancer burden



### The Impact of Cancer in Indiana (1999-2008)

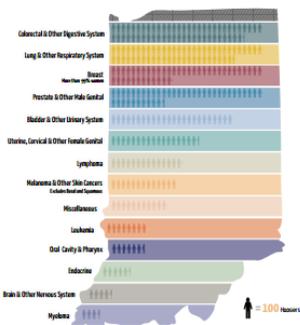
#### Average Cases Per Year

About 2.4 million Hoosiers, or 2 in 5 people now living in Indiana, will eventually develop cancer. Nationally, men have almost a 1 in 2 chance of developing cancer during their lifetime versus the median risk of developing cancer is slightly more than 1 in 3.

The Indiana Cancer Facts and Figures 2012 provides the most up-to-date cancer information available and identifies current cancer trends and their potential impact on Indiana residents. Download a free copy at [IndianaCancer.org](http://IndianaCancer.org).

#### On average...

30,272 Hoosiers were diagnosed with cancer this year  
 15,434 of those Hoosiers were male  
 14,838 of those Hoosiers were female



### The Impact of Cancer in Indiana (continued)

#### Economical impact...

\$1.01 billion was spent in 2003 by Hoosiers on direct costs of treating cancer  
 \$2.76 billion is the estimated amount of money Hoosiers will spend on direct costs for cancer care in 2013 if current trends continue

#### Cancer Risk Factors

|                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Body Weight, Diet, and Physical Activity</b></p> <p>Scientific evidence suggests that individuals who are obese or overweight are at a higher risk of developing cancer. In 2008, 66% of Hoosiers were overweight or obese, 31% were obese. In 2008, 21% of Hoosiers were physically active.</p>                                                 | <p><b>Tobacco</b></p> <p>All cancers that are attributed to tobacco use and secondhand smoke exposure should be prevented. The incidence of lung cancer in Indiana is estimated to be about 28% of cancer deaths in 2012. In 2008, 15% of Hoosiers were current smokers.</p>                                                 | <p><b>Sun Exposure</b></p> <p>The majority of the more than 2 million skin cancers that are diagnosed annually in the United States can be prevented by protection from the sun's rays.</p>                                                                                                                                                                              |
| <p><b>Infectious Diseases</b></p> <p>About 18% of cancers are related to infectious exposures, such as hepatitis B virus (HBV), human papillomavirus (HPV), human immunodeficiency virus (HIV), and Helicobacter pylori (H. pylori). Infection with H. pylori could be prevented through behavioral changes or the use of vaccines or antibiotics.</p> | <p><b>Healthcare Coverage</b></p> <p>Uninsured and underinsured patients are substantially more likely to be diagnosed with cancer at a later stage, when treatment can be more expensive and more difficult. In 2008, 15% of Hoosiers were uninsured, 35% had private insurance, 45% had Medicaid, and 1% had Medicare.</p> | <p><b>Screening</b></p> <p>Early diagnosis through regular screening examinations saves lives by identifying cancers when they are most curable and treatment is more successful. Cancer that can be detected by screening accounts for about half of all the cases of cancer and related health care costs, surgery, radiation, chemotherapy, and other treatments.</p> |

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An internal coalition communication plan is a useful tool to assure systematic and effective communication.

| Kentucky Cancer Consortium Communications Plan                                |                                         |      |                                                                                                                            |                                                         |                  |
|-------------------------------------------------------------------------------|-----------------------------------------|------|----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------|
| Sender                                                                        | Recipient                               | Flow | Content                                                                                                                    | Mode                                                    | Frequency        |
| Jennifer Redmond, KCC Program Director; Katie Bathje, KCC Program Coordinator | Steve Wyatt, KCC Principal Investigator | ↔    | Consultation/guidance                                                                                                      | Face-to-face meeting                                    | Every other week |
| Jennifer, Katie                                                               | All KCC partners *                      | →    | Newsletter on KCC activities, resources, successes, membership, and speakers, as well as relevant regional and state news. | PDF file sent to e-mail listserv and posted to Web site | Bi-monthly       |
| Jennifer, Katie                                                               | All KCC partners                        | ↔    | Announcements, information requests, and other communications not included in newsletter                                   | E-mail listserv                                         | As needed        |
| Jennifer, Katie                                                               | All KCC partners                        | ↔    | Requests for input to assist KCC decision-making                                                                           | E-mail                                                  | As needed        |
| Jennifer, Katie                                                               | Steering Committee                      | ↔    | One-on-one meetings, site visits                                                                                           | Face-to-face meeting                                    | Annually         |
| KCC Summit Planning Committee                                                 | All KCC partners                        | ↔    | Summit that offers continuing education and networking opportunities in cancer control in state.                           | Face-to-face meeting                                    | Annually         |
| KCC Partners, Steering Committee                                              | KCC evaluation team and program staff   | →    | Information on state cancer control activities related to the Cancer Action Plan                                           | Web data base                                           | Annually         |
| Jennifer; Katie; Suzanne Froelich, Communications Coordinator                 | All KCC partners, public                | ↔    | Comprehensive KCC Web site (updated monthly with input from KCC members)                                                   | Web site                                                | Continuous       |
| Jennifer, Katie, Suzanne                                                      | All KCC partners, media, public         | →    | KCC Biennial Report                                                                                                        | Printed publication and PDF file posted to Web site     | Every two years  |
| Jennifer, Katie, Suzanne                                                      | Media (newspapers, TV, radio)           | →    | Press releases, PSAs                                                                                                       | Print, e-mail, fax                                      | As needed        |

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## ***Habit 6 Tool***

Do you have a communication plan? If you do, review these questions to see if you are communicating in the most effective way you can. If you don't, create one and ask these questions as you develop your communication strategy!

- Do you communicate in multiple ways with your coalition?
- Do you have regular or set times that you communicate with your full coalition?
- Who do you communicate to and how?
  - The full coalition?
  - Workgroups or committees?
  - Non-member individuals and organizations?
  - Policy makers and decision makers?
- Do you tailor the method and the content of your communication to your audience?
- What do you communicate about?
  - Successes?
  - Needs?
  - Challenges?
  - A member call-to-action?

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***Habit 6 Effective Communication - Making it a Habit***

| <b>Changes to Make</b> | <b>When</b> | <b>Who</b> |
|------------------------|-------------|------------|
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |

**Notes:**

# Habit 7: Clear Roles and Accountability

Member roles are understood and members have a sense of accountability to accomplish agreed-upon tasks. Coalition members understand the mission of the coalition and how they, both as an individual and an organization, can help achieve that mission. Roles of the members in the coalition are defined and communicated both verbally and in written documents. Members can serve the coalition in a variety of roles and coalition members feel some flexibility in choosing and changing their roles over time. Because of the delineation and communication of roles, members understand what is expected from them and what they in turn can expect from other members and groups of the coalition.

[Habit 1: Empowering Leadership](#)

[Habit 2: Shared Decision Making](#)

[Habit 3: Value-added Collaboration](#)

[Habit 4: Dedicated Staff](#)

[Habit 5: Diversified Funding](#)

[Habit 6: Effective Communication](#)

[Habit 7: Clear Roles and Accountability](#)

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[Habit 9: Priority Work Plans](#)

[Habit 7 Assessment](#)

[Habit 7 in Action](#)

[Habit 7 Coalition Spotlight](#)

[Habit 7 Tool](#)

[Making it a Habit](#)

## Habit 7 Assessment

**Step 1** - Individually answer the Habit questions below.

**Step 2** - As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

**Step 3** - Identify areas where the team agrees the coalition is both doing well and could improve.

**Step 4** - As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

**Step 5** - Identify actions to take to improve coalition efforts in this Habit area.

**Step 6** - Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

| HOW DOES YOUR CCC COALITION RATE?                                                                                             |   |   |   |   |
|-------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
| Habit #7: Clear Roles and Accountability                                                                                      |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| The roles the coalition play to implement the plan are clear to members.                                                      |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| The vast majority of our members follow through with assignments and meet deadlines.                                          |   |   |   |   |

**Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:**

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## **Habit 7 in Action**

Clear roles and accountability are important to a coalition because:

- Coalition members better understand how they, both as an individual and an organization, can help achieve the coalition's goals.
- Roles should be defined and communicated both verbally and in written documents.
- Clearly defined roles can assist in coalition members having a sense of accountability.
- Members understand what is expected from them and what they in turn can expect from other members and groups of the coalition.
- Let members feel some flexibility in choosing and changing their roles over time.
- Acknowledge member roles and accountability by congratulating, thanking and highlighting their progress, contributions and successes!

### **Do This!**

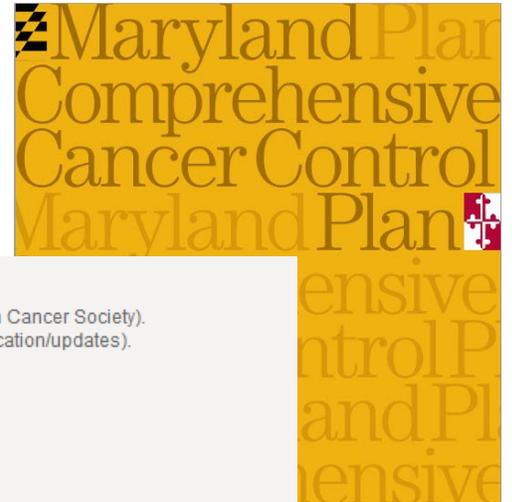
- **Create or update written roles for different “parts” of the coalition:**
  - **Include the number of calls, meetings, length of commitment, etc.**
- **Remind members about roles:**
  - **Ask them to recommit to current roles or encourage them to take on new roles.**
- **Identify the coalition's implementation role and emphasize this is different than just a planning role.**
- **Establish systems that identify expectations and then follow through with checking in on assignments (e.g., workplans).**
- **Create peer pressure by assigning meeting agenda items to members and having them provide progress reports.**
- **Assure there are ways to thank and congratulate members for their contributions and progress.**

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## Habit 7 Coalition Spotlight

The Maryland Cancer Collaborative identifies and communicates specific roles for their members. In addition, they make it easy to take the steps to join the group as well as get up to speed on the work of the Collaborative through an online orientation presentation.



### Membership

Members can be individuals or organizations (such as the Cancer Council, local Cancer Coalitions, American Cancer Society). Members can choose to join a committee or can join as corresponding members (to receive email communication/updates).

Please review the MCC Operating Principles [here](#) .

#### Benefits of membership:

- Collaboration throughout the state to increase impact and maximize resources
- Regular updates on cancer control activities throughout Maryland
- Avenues for networking across disciplines and organizations statewide
- Access to educational resources and training opportunities

#### Members agree to:

- Be identified as a member of the Maryland Cancer Collaborative
- Support and utilize the Cancer Plan
- Participate in meetings regularly (except for corresponding members)
- Take specific action to implement the goals, objectives, and strategies of the Cancer Plan
- Support and participate in evaluation of implementation efforts
- Report implementation efforts and progress to DHMH
- Report in-kind contributions toward Maryland Cancer Collaborative activities, such as student volunteer time, donated meeting space, implementation efforts, etc.
- Abide by and adhere to [Approval Procedure for Communicating Beyond the Collaborative](#) 
- Abide by and adhere to [Policy Ground Rules](#) 
- Bring available resources to the table (expertise, specific skills, educational materials, website and/or graphic design services, mailings, meeting rooms, student volunteers, etc.)

#### Join Us!

You can help control cancer in Maryland! Complete the *Join Us* Member Agreement Form to help with implementation of the Maryland Comprehensive Cancer Control Plan.

[Member Agreement Form](#) 

#### New Member Orientation

The Maryland Cancer Collaborative has created an orientation presentation for new members and others who may be interested in learning more about the development and activities of the Collaborative. You may access the new member orientation presentation [here](#).

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## Habit 7 Tool

### Take these steps to put this habit into practice:

- Reconfirm
- Recommit
- Request

- **Reconfirm.** Have a specific discussion about the role of the group with its members, together. Reconfirm the purpose of the group and their overall role in relation to others and in implementation of the cancer plan. Make sure to document the role of your leadership groups, workgroups and other parts of the coalition and make the information readily available to everyone. Remind members about their role to help focus efforts and avoid the coalition's efforts becoming unfocused. Remember that as individuals come and go those with the institutional memory about the role of the group may get lost.
- **Recommit.** Have a written mission and purpose for the coalition and make sure all members are made aware of the role of the coalition when they join. Ask members to sign a recommitment every 1-2 years that states their role as a member. At your next full coalition meeting, spend time talking about the role of members and give examples of how this has looked in the past. Recognizing members for the work they do serves as a reminder to others about their role.
- **Request.** Be specific about how members and other organizations can be involved in the efforts of the coalition. One simple way to do this is to write it down and share it widely. Create a list of "what you can do" that links to your cancer plan implementation priorities. If you don't ask, you may never know what organizations are capable of contributing.

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*Habit 7 Clear Roles and Accountability - Making it a Habit*

| Changes to Make | When | Who |
|-----------------|------|-----|
|                 |      |     |
|                 |      |     |
|                 |      |     |
|                 |      |     |
|                 |      |     |

**Notes:**

# Habit 8:

## Flexible Structure

The coalition structure is flexible, adapts to challenges and facilitates implementation of the CCC plan. The coalition strives to operate in a way that maximizes the effective and efficient work of its coalition members. As new priorities and efforts are identified, the coalition assesses its structure to assure the strengths and resources of the coalition are aligned with its efforts. This may mean changes in workgroups, changes in leadership, changes in communication methods, etc. Underlying a flexible coalition structure are some of the other Habits including: shared decision making, empowering leadership, and dedicated staff.

[Habit 1: Empowering Leadership](#)

[Habit 2: Shared Decision Making](#)

[Habit 3: Value-added Collaboration](#)

[Habit 4: Dedicated Staff](#)

[Habit 5: Diversified Funding](#)

[Habit 6: Effective Communication](#)

[Habit 7: Clear Roles and Accountability](#)

[Habit 8: Flexible Structure](#)

[Habit 9: Priority Work Plans](#)

[Habit 8 Assessment](#)

[Habit 8 in Action](#)

[Habit 8 Coalition Spotlight](#)

[Habit 8 Tool](#)

[Making it a Habit](#)

## Habit 8 Assessment

**Step 1** - Individually answer the Habit questions below.

**Step 2** - As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

**Step 3** - Identify areas where the team agrees the coalition is both doing well and could improve.

**Step 4** - As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

**Step 5** - Identify actions to take to improve coalition efforts in this Habit area.

**Step 6** - Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

| HOW DOES YOUR CCC COALITION RATE?                                                                                             |   |   |   |   |
|-------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
| Habit 8: Flexible Structure                                                                                                   |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| New members are recruited to the coalition based on the priorities of the coalition.                                          |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| Coalition members get help in finding an active role with the coalition's efforts.                                            |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| Our coalition structure is flexible and adapts when needed to best implement our priorities.                                  |   |   |   |   |

Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:

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## **Habit 8 in Action**

To have a flexible coalition structure that leverages the opportunities and effectiveness of the coalition's efforts to implement CCC plan priorities, consider these tips:

- As new priorities and efforts are identified, assess the coalition structure to assure the strengths and resources of the coalition are aligned with its efforts.
- The adage of “form should follow function” is a good rule of thumb to follow. In other words, let your priorities dictate the organization of your coalition.
  - This may mean changes in workgroups, changes in leadership, changes in communication methods.
  - For example: Your coalition may have always had a Prevention Workgroup with diverse representation and interests. But if your prevention priority is obesity and the majority of your members are interested in sun safety and tobacco control you may find you are getting very little participation in the Prevention Workgroup. Be clear about the role of the Prevention Workgroup in implementing the obesity priorities and help members of the group find a role for themselves.

### **Do This!**

- **Assure “form follows function.”**
- **Many coalitions have changed (and keep changing) their structure. Ask your leadership group if you need to do this.**
- **Ask: What do we want to accomplish? Are we set up to do that?**
- **Encourage members to move around.**
- **Don't let bylaws or rules be a barrier to getting work done!**

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## Habit 8 Coalition Spotlight

California developed cancer continuum teams when they created their state comprehensive cancer control plan. The teams stayed in place until they determined they could better utilize their members' expertise and more effectively implement their cancer control priorities by either creating new teams or reorganizing existing teams. The coalition chose priorities and after that the coalition leadership worked to restructure the teams to match the priorities. Moving forward, the leadership will ensure that as priorities are worked on, progress is made and new priorities are chosen, the coalition structure will be flexible to optimally implement those priorities.



### Situation

- Had “planning” workgroups
- Have new CCC plan
- Want to increase active members

### Solution

- Selected priorities from new CCC plan.
- Aligned new workgroups with priorities.
- Existing and new members signed up for a priority.

**Result: Now in a “do” structure instead of “plan” structure**

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## Habit 8 Tool

**Does your coalition's structure match up with your priorities?**

| Coalition Priority or Focus Area | What coalition group is responsible for implementing this priority? | Is this structure set up in an optimal way to implement the priority? | Is a change in our coalition structure needed? If yes, what change and how will it be made? |
|----------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
|                                  |                                                                     |                                                                       |                                                                                             |
|                                  |                                                                     |                                                                       |                                                                                             |
|                                  |                                                                     |                                                                       |                                                                                             |
|                                  |                                                                     |                                                                       |                                                                                             |
|                                  |                                                                     |                                                                       |                                                                                             |

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***Habit 8 Flexible Structure - Making it a Habit***

| <b>Changes to Make</b> | <b>When</b> | <b>Who</b> |
|------------------------|-------------|------------|
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |
|                        |             |            |

**Notes:**

# Habit 9: Priority Work Plans

Processes are in place to assure priority setting, use of work plans, and tracking of progress. Systematic operational methods are established, communicated and adhered to by the coalition members. Members understand how priorities are chosen and that this process will be used periodically to identify new priorities. Members understand how their work supports the CCC plan and the goals and objectives within the plan. Work plans are developed around evidence-based strategies and allow for a clear sense of expected outcomes, methods to reach those outcomes, responsibilities, and timelines. The work plans are used to guide actions and are revised as needed as challenges and opportunities arise. Accountability is established through the tracking of progress on work plans, and ultimately on objective measures in the CCC plan.

[Habit 1: Empowering Leadership](#)

[Habit 2: Shared Decision Making](#)

[Habit 3: Value-added Collaboration](#)

[Habit 4: Dedicated Staff](#)

[Habit 5: Diversified Funding](#)

[Habit 6: Effective Communication](#)

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[Habit 8: Flexible Structure](#)

[Habit 9: Priority Work Plans](#)

[Habit 9 Assessment](#)

[Habit 9 Habit in Action](#)

[Habit 9 Coalition Spotlight](#)

[Habit 9 Tool](#)

[Making it a Habit](#)

## Habit 9 Assessment

**Step 1** - Individually answer the Habit questions below.

**Step 2** - As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

**Step 3** - Identify areas where the team agrees the coalition is both doing well and could improve.

**Step 4** - As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

**Step 5** - Identify actions to take to improve coalition efforts in this Habit area.

**Step 6** - Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

| HOW DOES YOUR CCC COALITION RATE?                                                                                             |   |   |   |   |
|-------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
| Habit 9: Priority Work Plans                                                                                                  |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| Coalition priorities from the CCC plan are identified every 1-2 years.                                                        |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| The coalition focuses its work on the priorities it has identified from the CCC plan.                                         |   |   |   |   |
| 1                                                                                                                             | 2 | 3 | 4 | 5 |
| Members know about and are involved in developing action plans to implement strategies.                                       |   |   |   |   |

**Identify specific examples from your coalition that illustrate why you rated your coalition as you did in the statements above:**

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## Habit 9 in Action

*“If you don’t know where you are going, any road will get you there.”*

*-Lewis Carroll*

### There are two essential components to this habit:

- The coalition determines cancer plan **priorities** to assure its efforts are focused and meaningful.
- The coalition develops **work plans** for its priorities to assure work is effective and progress is tracked.

### Why Determine Cancer Plan Priorities?

- A CCC plan is comprehensive, yet the coalition cannot do everything at once because of limited resources and the need for sequential action.
- Focused efforts on a few things will accelerate your progress.
- The coalition should always determine priorities out of the cancer plan that represent CCC coalition value-added efforts.

### Do This!

#### Recommended Criteria for Setting Priorities

Make an initial “cut” by asking the following questions for each of the objectives in the cancer plan:

- Will this happen anyway? If no, it wouldn’t happen unless the coalition worked on it, then it is a value-added priority the coalition should consider.
- Is this a significant area of need? What is the result we expect to achieve if this strategy is implemented successfully?
- Does this have a reasonable chance for success?
- Can we track progress and outcomes?

The final determination of priorities can be selected based on the following:

- If CCC coalition members sign up to work on this effort, there is a higher likelihood that implementation of the priority will be successful. If no one signs up to work on it, it is very likely that implementation will not occur.

#### Reassess Priorities Every 1-2 Years by Asking

- Do the data and other information indicate we’ve accomplished our objective?
- Is there an individual organization that can continue work on this priority, without the efforts of the CCC coalition?
- Have we made progress on this priority? If not, do we need to stop our work, adjust our work, or continue our work?
- Are there other priorities in our cancer plan that we are able to address at this time?

### **Priority Work plans**

**Coalitions who are most effective in the implementation of their cancer plans have systematic methods of “getting the work done”. These methods are often in the form of priority work plans and are documented, communicated and adhered to by coalition members.**

- **Work plans are developed around evidence-based strategies and clearly state expected outcomes, specific tasks, responsibilities, and timelines.**
- **Work plans guide actions and are revised as challenges and opportunities arise.**
- **Accountability is established through tracking progress on work plans, and ultimately on objective measures in the CCC plan.**

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## Habit 9 Coalition Spotlight

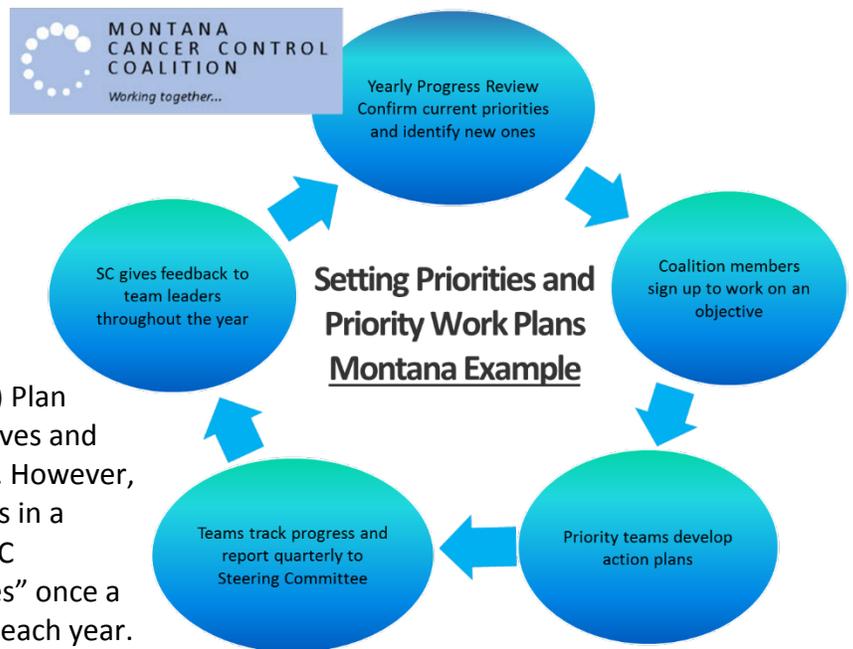
### Montana Cancer Control Coalition

In Montana, the Montana Cancer Control Coalition (MTCCC) has developed a process to prioritize the objectives MTCCC members work on yearly. In 2011, the MTCCC introduced a new 5-year Comprehensive Cancer Control (CCC) Plan that lines out evidence based objectives and strategies for the MTCCC to work on. However, in order to accomplish all of our goals in a more concentrated effort, the MTCCC decided to choose “priority objectives” once a year to give focus to what gets done each year. Some objectives will only take a year to accomplish while others will take multiple years.

The MTCCC Steering Committee reviews the objectives within the CCC Plan at their yearly Leadership Retreat. The Steering Committee members determine what objectives they would like to move forward; determining who within the leadership team will lead these groups. At the spring statewide MTCCC meeting, all of the chosen CCC Plan priority objectives are posted and members sign up to participate within a group. If MTCCC members would like to work on an additional objective that has not been chosen by the Steering Committee, as long as there are more than 2 people who are willing to lead and work on the objective, the new objective will be allowed. Additionally, if no one signs up to work on a chosen priority objective, it is not deemed a priority for the year and will be set aside for an upcoming year. As this is a 5-year plan, ideally all of the objectives will get worked on over the course of the five year cycle, meeting the goals that have been outlined.

At this spring meeting, the newly established priority objective teams convene and start developing an action plan that includes strategies for the year in order to meet their objective. This action plan lines out activities for the year and assigns responsibilities to members and allows for recruitment of new groups members to get tasks accomplished.

Once each group has a new action plan developed, teams meet monthly to discuss progress, modify action plans and plan activities. Teams complete a quarterly progress report that is submitted to the Montana Cancer Control Programs staff. The Steering Committee reviews progress and provides feedback to team leaders throughout the year.



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## Habit 9 Tool

### Three Steps to Implementing the Habit of Priority Work Plans

#### STEP 1: Choose Priorities

##### HOW TO CHOOSE A PRIORITY FROM YOUR CANCER PLAN

Your cancer plan includes what is needed to completely and effectively address the cancer burden in your state, tribe, territory or Pacific Island Jurisdiction. Yet, resources, such as time and money are limited. Therefore, it is necessary to prioritize what you think are the most important efforts for your coalition.

It is important to remember that **all** goals, objectives and strategies will remain in your cancer plan. But, prioritizing what your coalition will do together first is an important step in successful implementation of the plan. As efforts are completed, additional priorities can be added to your coalition's work.

It is recommended that you prioritize on an objective level (vs. goals or specific strategies in your plan). Once a priority objective is determined by the coalition, then a smaller group such as a workgroup designated to lead the implementation effort, can focus on what evidence-based strategies should be implemented to achieve the objective.

Your coalition can use the following criteria to discuss and determine your priorities from your plan:

- ***Is this an objective we need to work on together (i.e., it is not likely to be achieved without partners coming together to work on it)?***
- ***Is this a significant area of need? What is the result we expect to achieve if this strategy is implemented successfully?***
- ***Does it have a reasonable chance for success?***
- ***Can we track progress and outcomes?***
- ***Is it likely that we will be able to recruit other individuals and organizations to work on this over the next year?***

## STEP 2: Identify Stakeholders Who Can Help You with Implementation

To assist with implementation it is important to have the strong support and involvement of stakeholders. The following questions may be helpful to ask as you identify organizations you may want to help the coalition on this priority:

- Who has existing system and networks that are important to us in this priority?
- Who has influence with the organizations or systems the partnership will want to work with on this effort? For example, government agencies, schools, survivors, elected officials, hospitals, businesses, worksites, etc.
- What type of approach will be used for this strategy (e.g., policy development, community mobilization, system change, communication)? Who in our coalition has experience with this type of approach?
- Who is motivated to do something about this issue?

### Who Can Help Implement the Priority Strategy?

| Organization and name of person to contact | What do we want them to do? | Why they would want to be involved? |
|--------------------------------------------|-----------------------------|-------------------------------------|
|                                            |                             |                                     |
|                                            |                             |                                     |
|                                            |                             |                                     |
|                                            |                             |                                     |
|                                            |                             |                                     |

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### **STEP 3: Develop a Priority Work Plan**

Your cancer plan most likely does not provide the level of detail needed to fully implement the priority. A more detailed plan of action is needed – a priority work plan.

Key items to consider as you develop a plan of action:

- Link to existing successful programs, services or systems that are already in place and can be leveraged for this effort. These existing efforts do not necessarily need to be cancer related, or even health related. This is an opportunity to be creative and look for new partnerships.
- Local communities or groups of people will likely be impacted by the priority. Plan to obtain their support and involvement from the beginning of your implementation efforts.

As you develop the priority work plan, discuss these questions:

- What is known about how others have gone about addressing this type of priority issue?
  - ✓ Look for evidence-based interventions you can adopt or adapt.
- Who are the key stakeholders and decision makers that need to agree to and support this effort?
  - ✓ Plan your approach to get their support.
  - ✓ Organizations that have stable management and are fiscally sound will be more likely to stay actively engaged in your efforts.

Think through the major tasks needed to implement your priority strategy. Identify each of the major tasks and the information for each task identified in the work plan template on the next page.

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## PRIORITY WORKPLAN

Priority Objective from the Cancer Plan

Priority Strategy:

| What are the major tasks needed to implement the priority? | Who is responsible for this task? | Partners and Stakeholders to contact and work with | Due Date | Resources we need (including in-kind) | Resources we have (including in-kind) | How will we track our progress? |
|------------------------------------------------------------|-----------------------------------|----------------------------------------------------|----------|---------------------------------------|---------------------------------------|---------------------------------|
|                                                            |                                   |                                                    |          |                                       |                                       |                                 |
|                                                            |                                   |                                                    |          |                                       |                                       |                                 |
|                                                            |                                   |                                                    |          |                                       |                                       |                                 |
|                                                            |                                   |                                                    |          |                                       |                                       |                                 |
|                                                            |                                   |                                                    |          |                                       |                                       |                                 |

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*Habit 9 Priority Work Plans - Making it a Habit*

| Changes to Make | When | Who |
|-----------------|------|-----|
|                 |      |     |
|                 |      |     |
|                 |      |     |
|                 |      |     |
|                 |      |     |

**Notes:**

## 9 Habits CCC Coalition Assessment (All Questions)

The Nine Habit assessment questions enable you to quickly assess coalition functioning related to that Habit. You will also be able to see the different perceptions of the how the group you are working with views the coalition’s efforts in that Habit area.

**Step 1:** Individually, the members of the group should answer the Nine Habits assessment questions related to the Habit area on which you are working.

**Step 2:** As a group, discuss how people rated the coalition and how the ratings are the same or different across team members.

**Step 3:** Identify areas where the team agrees the coalition is both doing well and could improve.

**Step 4:** As a group, go through the Habit information (Habit in Action, Coalition Spotlight, Habit Tool).

**Step 5:** Identify actions to take to improve coalition efforts in the Habit area.

**Step 6:** Make specific plans to put those actions into practice. Write your plan down, including tasks, person(s) responsible and a timeline, and distribute them to your group.

| <b>HOW DOES YOUR CCC COALITION RATE?</b><br>Circle a number for each statement.<br>(1 = This is not happening in our coalition. 5 = This sounds just like our coalition.) |   |   |   |   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| Habit 1: Empowering Leadership                                                                                                                                            |   |   |   |   |
| 1                                                                                                                                                                         | 2 | 3 | 4 | 5 |
| Our coalition leaders are actively involved in coalition efforts.                                                                                                         |   |   |   |   |
| 1                                                                                                                                                                         | 2 | 3 | 4 | 5 |
| Our coalition leaders encourage decision making and action from other coalition members.                                                                                  |   |   |   |   |
| 1                                                                                                                                                                         | 2 | 3 | 4 | 5 |
| In our coalition, we recruit leaders and encourage members into leadership positions.                                                                                     |   |   |   |   |
| Habit 2: Shared Decision Making                                                                                                                                           |   |   |   |   |
| 1                                                                                                                                                                         | 2 | 3 | 4 | 5 |
| Members have the opportunity to engage in coalition decision making.                                                                                                      |   |   |   |   |
| 1                                                                                                                                                                         | 2 | 3 | 4 | 5 |
| Decisions are made based on a variety of sources such as data and diverse stakeholder input.                                                                              |   |   |   |   |
| 1                                                                                                                                                                         | 2 | 3 | 4 | 5 |
| The process for making decisions (who, how, when) is documented and communicated to coalition members.                                                                    |   |   |   |   |

**Habit 3: Value-Added Collaboration**

1 2 3 4 5  
Coalition members have made connections with other members that have led to them working together or sharing resources.

1 2 3 4 5  
Our coalition's efforts influence key decision makers, government agencies, and other organizations.

1 2 3 4 5  
Our coalition has visibility and credibility.

1 2 3 4 5  
Members believe the coalition works on things that otherwise wouldn't have happened without the coalition's efforts.

**Habit 4: Dedicated Staff**

1 2 3 4 5  
The CCC program staff is sufficient to help the coalition make progress.

1 2 3 4 5  
The roles and responsibilities of staff are clear and well communicated.

**Habit 5: Diversified Funding**

1 2 3 4 5  
We have a written resource plan that identifies funding and other types of resources needed to implement our cancer plan.

1 2 3 4 5  
We have identified coalition members who are actively working to fill resource needs.

1 2 3 4 5  
We have diversified funds to support our coalition's efforts.

**Habit 6: Effective Communication**

1 2 3 4 5  
Our communication with coalition members is efficient and effective.

1 2 3 4 5  
Coalition meetings are interactive - we have meaningful discussions and get work accomplished.

**Habit 7: Clear Roles and Accountability**

**1**                      **2**                      **3**                      **4**                      **5**  
The roles the coalition play to implement the plan are clear to members.

**1**                      **2**                      **3**                      **4**                      **5**  
The vast majority of members follow through with assignments and meet deadlines.

**Habit 8: Flexible Structure**

**1**                      **2**                      **3**                      **4**                      **5**  
New members are recruited to the coalition based on the priorities of the coalition.

**1**                      **2**                      **3**                      **4**                      **5**  
Coalition members get help in finding an active role with the coalition's efforts.

**1**                      **2**                      **3**                      **4**                      **5**  
Our coalition structure is flexible and adapts when needed to best implement our priorities.

**Habit 9: Priority Work Plans**

**1**                      **2**                      **3**                      **4**                      **5**  
Coalition priorities from the CCC plan are identified every 1-2 years.

**1**                      **2**                      **3**                      **4**                      **5**  
The coalition focuses its work on the priorities it has identified from the CCC plan.

**1**                      **2**                      **3**                      **4**                      **5**  
Members know about and are involved in developing action plans to implement strategies.