

Southeast Chicago Diabetes Community Action Coalition

Form C.1

Agency/Membership Profile



The Chicago Southeast Diabetes Community Action Coalition is updating and compiling a resource directory and database. This database has the following purposes: 1) improve communication among its members; 2) assess the services/resources brought to the coalition; and, 3) evaluate members development and participation, and impact of the Coalition. This Membership Profile and Database is divided into two parts: 1) Organizational and 2) Individual.

Please fill out additional profiles for each staff member, board member, or volunteer participating in the Coalition or its activities. Please FAX to: 312-996-3212 Attn: REACH Membership

Organization: _____

Program/Unit/Dept.: _____

Address: _____

Address: _____

City: _____ **State** |__| |__| **Zipcode:** |__| |__| |__| |__| |__|

Telephone: _____ **FAX:** _____

Webpage\URL: _____

Administrator/Manager/Owner: _____

Diabetes-related Contact: _____ **Telephone:** _____

Ownership/Governance: Non-Profit For Profit/Business Government> City County State Federal

Southeast Chicago Diabetes Community Action Coalition

For each Coalition-related person, please complete and attach an Individual Member/Participant Profile.
Designated Representative:
Alternative Representative:
Other Staff:
Other (student, volunteer):

Part II. Diabetes Services Inventory

Please describe the diabetes-related activities and services offered during the past 3 months.	Persons served	Offered in Spanish	Where?	Payment source	By whom
Individual Patient Education					
Diabetes Awareness Classes/Presentations					
Diabetes Self-Management Classes					
Diabetes Staff Training					
Diabetes Community Screening					
Screening for Complications (Eye, Foot, etc.)					
Diabetes Support Groups					
Dietitian Consults					
Diabetes Team					
Wellness Activities (diet, cooking, exercise, stress)					
Other:					

Is your diabetes program :

- 9 ADA Recognized Program
- 9 Recognized or certified by another agency
- 9 Planning to apply for ADA or other recognition

Southeast Chicago Diabetes Community Action Coalition

Part III. General Resources/Services Provided	Offered in Spanish	Have Interpreter	Persons served	Payment Sources-Fee? (Medicaid, Medicare, Free, etc)	Where offered? A Onsite B Offsite
Health Education/Health Promotion					
Primary Health/Medical Care					
Secondary/Specialty Health/Medical Care					
Case management/advocacy					
Long-term care (nursing home)					
Home Health-related Services					
Rehabilitation/Disability					
Mental Health/Substance Abuse					
Aging/Elderly					
Exercise/Recreational/Sports					
Diet/Nutrition/Food					
Educational/Training/School/Literacy					
Financial/Income Supplementation (Public Aid, Social Security, etc)					
Religious/Spiritual					
Legal					
Housing					
Community Safety/Action (Block clubs, CAPS)					
Economic Development/Employment					
Information/Communication/Library					

Thank you for your collaboration!