

SHIBA outreach event planning

This process is for volunteer coordinators to reference when planning or sub-contracting formal outreach events for SHIBA, such as the Welcome to Medicare birthday events.

Volunteer coordinator duties for sponsor-facilitated outreach event planning timeline

TIMELINE - FOUR MONTHS PRIOR	
Task completed	TASK
	Initiate contracting with SHIBA grants and budget coordinator.
	Develop preliminary budget (see page 4) with SHIBA grants and budget coordinator.
	Prioritize targeted areas .
	Request number of mailing addresses for zip codes in targeted population area(s) from SHIBA administrative assistant.
	Evaluate and determine the communication methods with SHIBA communications consultant – event invitations, postcards, flyers, media advertisements, etc.
	Check availability of sponsors and volunteer advisors for proposed event dates (speakers and counseling at events).
	Check with SHIBA field supervisor and RTCs for availability to speak/present .
	Research possible facilities/venues . Make sure facility/venue is designed for scale of presentation, capacity, and accessibility for the anticipated attendees. Determine audio/visual needs and other equipment, such as easels.

TIMELINE - THREE MONTHS PRIOR	
Task completed	TASK
	Confirm the budget with the SHIBA grants and budget coordinator.
	Confirm contracting complete with sponsors and/or community partners.
	Finalize communications methods and design of direct mailings and event invitations with SHIBA communications consultant.
	Initiate facility/venue rentals/reservations, including the completion of the Barrier-Free Checklist (for state <i>and</i> non-state facilities) (see page 6) NOTE: Some facilities already have completed the Barrier-Free Checklist on file at OIC - check with the SHIBA administrative assistant.
	If you are using a non-state facility, coordinate with the SHIBA administrative assistant to prepare and follow through with non-state facility form (see page 5) approval (you must attach the completed Barrier-Free Checklist).
	Coordinate with the SHIBA administrative assistant to prepare and submit a purchasing request for a facility/venue (you must include the Barrier-Free Checklist and, if applicable, the approved non-state facility form).
	Keep your sponsor event planning team and SHIBA staff informed of event planning updates.
	Create list of supplies and publications (see page 4) needed for event.

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TIMELINE - THREE MONTHS PRIOR <i>(Continued)</i>	
	Confirm facility/venue reservation/rental. Make sure SHIBA grants and budget coordinator has all required purchasing and Barrier-Free Checklist documentation.
	Confirm availability of SHIBA staff, your sponsor staff and volunteers for proposed event dates to speak/present .
	Communicate confirmed facility (ies) with confirmed speakers/presenters .
	Place order through Fulfillment for SHIBA publications and outreach materials for timely delivery by event date.

TIMELINE - TWO MONTHS PRIOR	
Task completed	TASK
	Confirm budget status with SHIBA grants and budget coordinator.
	Develop event attendee RSVP process.
	Work with SHIBA communications consultant to finalize mailing invites and direct mailing (allow six weeks for advanced planning prior to the event).
	Coordinate and finalize presentation selection with SHIBA communications consultant/SHIBA staff person who will present.
	Verify that you have received your publications and outreach materials from Fulfillment. If you haven't received your order by now, contact the SHIBA communications coordinator.
	Solicit volunteers to support event/provide on-site counseling, if necessary.
	Draft event agenda (see page 8).
	Submit your event via the online SHIBA event calendar request form as soon as you confirm event details.
	Keep your sponsor event planning team and SHIBA staff informed of any event planning updates.

TIMELINE - ONE MONTH PRIOR	
Task completed	TASK
	If you want to provide light refreshments at the event but it's not part of your event contract, contact the SHIBA administrative assistant.
	If light refreshments are part of your event contract, you or your community partner will coordinate light refreshments at the sponsor level.
	Finalize the event agenda (see page 8).
	Confirm presentation topics with speakers/presenters and provide final event agenda.
	Confirm with your volunteers their availability to provide event support and/or on-site counseling, setup and/or clean up.
	Coordinate with your regional training consultant or the SHIBA administrative assistant for the most current event feedback survey.
	Continue to keep your sponsor event planning team and SHIBA staff informed of event planning updates.
	Coordinate and prepare any handout packets with your volunteers, if needed.

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TIMELINE – TWO WEEKS PRIOR	
Task completed	TASK
	As necessary, coordinate event equipment, i.e. laptop, projector, signage.
	Prepare a participant event sign-in sheet (see page 9).

TIMELINE – DURING EVENT	
Task completed	TASK
	Set up A/V with presentation.
	If it pertains to your event, set up counseling tables and computers.
	Set up publications and outreach materials, and any necessary signage.
	If it pertains to your event, set up light refreshments.
	Make sure the participant event sign-in sheet is completed.
	Distribute and collect event feedback surveys.
	Break down and clean up.

TIMELINE – AFTER EVENT (<i>WITHIN 1 – 3 BUSINESS DAYS</i>)	
Task completed	TASK
	Complete Group Outreach form in STARS.
	Turn in light refreshment receipts and completed sign-in sheet to the SHIBA administrative assistant if SHIBA program office is paying directly.
	Complete the Agency Certification (barrier-free) (see page 7) and send to the SHIBA grants and budget coordinator no later than seven working days after the event.
	Be sure to include information about your event in your quarterly SHIBA narratives for grant reporting.
	Submit completed event feedback surveys to SHIBA administrative assistant.

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Example – Preliminary budget by event

DESCRIPTION	ESTIMATED COST	APPROVED BY SHIBA PROGRAM MANAGER OR GRANTS AND BUDGET COORDINATOR
Contracting:		
– Facility costs/rental	\$500.00	
– Travel		
– Light refreshments		
SHIBA staff and/or volunteer travel	\$900.00	
Publications/materials (pens, notepads, bags)	\$200.00	
Direct mailing/ invitations - development and printing	\$500.00	
Postage	\$3000.00	
ESTIMATED TOTAL:	\$5100.00	

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Example – Supplies and publications list for event

DESCRIPTION	QUANTITY	AVAILABLE IN FULFILLMENT?	ORDERED
SHIBA general brochure (SHP 858)			
Get help Paying for Medicare (SHP 849)			
Medigap plan chart (SHP 521)			
Stand-Alone Part D plans (SHP 839)			
Medicare Advantage plans (online only)			
Fraud publication or fact sheet			
Volunteer recruitment card (SHP766)			
SHIBA pocket folders			
SHIBA pens (SHS 1046)			
Notepads (SHS 989)			
Consumer Protection brochure			

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Example – Justification for using a non-state facility form

ADA ACCESSIBLE MEETING FACILITY CHECKLIST

Justification for Using a Non-State Facility

This form must be completed by the agency representative.
Agency Name: <u>Office of Insurance Commissioner</u>
Agency Representative <u>John Hamje</u> <u>Deputy Insurance Commissioner</u>
Activity Title <u>Welcome to Medicare Outreach Event</u> <small>(Name of meeting, convention, conference, etc.)</small>
Justification for using a non-state facility: _____ This outreach event is a grant funding performance requirement. The event will be attended by no less than 100 Medicare-beneficiaries.
The proposed location is the Norm Dicks Conference Center in Bremerton, Washington.
The Norm Dicks Conference Center is a large capacity venue conveniently to the attendees that will be invited to receive Medicare Information and enrollment assistance. The facility complies with the American with Disabilities Act. The completed Barrier-Free Access Checklist is attached.
Agency Representative Approval _____
Agency Head Approval _____
Date _____

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Example – Barrier-free access checklist (ADA checklist)

NOTE: Page 1 of 16 is shown below. Full form is available on My SHIBA under Forms.

Washington State Barrier-Free Access Checklist For State Leased Facilities, New and Renewals

Universal Access - Universal design or inclusive design is an approach to the design of products, services and environments to be as usable as possible by as many people as possible regardless of age, ability or situation. It links directly to the concept of an inclusive society, its importance is recognized by governments, business and industry.

Integrated setting - Examples: 1. Entrances that have one path of travel for people w/ disabilities or those who are temporarily able. Use sloped incline rather than ramp and stairs. 2. In fixed seating areas, (auditoriums, theatres) provide accessible seating throughout. Provide seating that does not obstruct views.

This checklist was developed by Real Estate Services (RES) with the assistance of the Governor's Committee on Disability Issues and Employment (GCDE), members of the disability community, and client agencies. This is a tool to help State government comply with requirements of the Americans with Disabilities Act Accessibility Guidelines (ADAAG), WAC 51-50, International Building Code (IBC) and ANSI 117.1.

It is important to note that meeting these checklist criteria will not, by itself, ensure that tenant agency programs, employment, and facilities are in full compliance with ADA and the other applicable laws. RES will assist tenant agencies in assessing and achieving program accessibility in leased facilities, **the tenant agency has ultimate responsibility for providing accessible services and programs.**

RES Project #:	Agency/Div.:
SR&L #:	Bldg. Name:
Approx. Square Feet:	Bldg. Address:
Person w/ Disability assisted review? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Lead Surveyor:	Suite/Floor(s):
Lead Surveyor's Ph.:	City:
	Survey Date:

Mandatory: Agency - Please identify required accessibility level for this facility:

Level 1 (Serve the public) or Level 2 (Serves primarily w/ people w/ disabilities) is the minimum access Level Required For This Facility/Project

Describe any special requirements for this project: (Attach separate sheets if necessary) _____

Definitions and Acronyms

Access Levels: Description of Barrier Free Design features expected for leased space.

Level 1: houses public employees, does or does not provide on-site services.

Level 2: houses public employees, primarily provides on-site services to clients with disabilities. i.e. Division of Vocational Rehabilitation

Accessible Route: Continuous unobstructed path.

ADAAG/ABA: Americans with Disabilities Act Accessibility Guidelines/Architectural Barriers Act Department of Justice (DOJ): "ADAAG is the standard that must be used for privately-owned public facilities under title III of the ADA.

WAC 51-50 Washington Administrative Code, has requirements (Amendments) unique to Washington State

IBC/ANSI117.1 International Building Codes, can use these, but must also comply w/ WAC 51-50 and ADAAG.

Measurements: measurement listed is exact minimum and max unless otherwise stated.

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Example – Agency certification

NOTE: The Agency Certification Statement is completed by the sponsor or partner contracted to facilitate an outreach event. The completed form is submitted to the grants and budget coordinator promptly after the event. The form is then provided to OIC’s fiscal office.

ADA ACCESSIBLE MEETING FACILITY CHECKLIST

Agency Certification Statement

This form must be completed by the agency representative.

Agency Name: Office of Insurance Commissioner

Agency Representative _____

Activity Title _____
(Name of meeting, convention, conference, etc.)

To the best of my knowledge, the non-state facilities provided to our agency by _____ on _____ **Did** **Did Not** Meet all of the Americans with Disabilities Act’s minimum accessibility requirements as listed in the state of Washington Financial and administrative Policies, Regulations, and Procedures manual (Part 4, Chapter 3, Section 10, Subsection 1.6) prescribed by the Office of Financial Management.

If the non-state facilities did not meet the minimum accessibility requirements, please explain: _____

Agency Representative Approval _____

Date _____

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Example – Event agenda

NOTE: Agenda is required *with* the Request for Light Refreshments prior to the event *if* refreshments are paid by OIC directly, i.e. not part of contract with sponsor or community partner.

Current agenda template can be found on My SHIBA under Resources



Welcome to Medicare

Date	December 17, 2015
Time	9:00 a.m. – 12:00 p.m.
Location	Nelson Manor Senior Apartments, Seattle, WA
Facilitator	Lori Wada, Programs Supervisor

Objective

Provide free, unbiased information about Medicare coverage and healthcare options to help improve the lives of Washington state residents.

Agenda items

- 9:00 a.m. – 10:00 a.m.** Basics of Medicare Lori Wada, Program Supervisor
- 10:00 a.m. – 10:45 a.m.** Medicare options Dale Ensign, Regional Training Consultant
- 10:45 a.m. – 11:00 a.m.** BREAK
- 11:00 a.m. – 11:30 a.m.** How to enroll..... Dale Ensign, Regional Training Consultant
- 11:30 a.m. - 12:00 p.m.** Q & A

Attendees

Approximately XX attendees will attend. Sign-in sheets will be completed.

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NOTE: Sign-in sheet is required *with* the Request for Light Refreshments *if* refreshments are paid by OIC directly, i.e. not part of contract with sponsor or community partner.

Sign-in sheet template can be found on My SHIBA under Forms.

Example – Event sign-in sheet



Presenter(s): _____
 Event Name: _____
 Event date/time: _____
 Location/Facility: _____

Sign-In

	Name (please print)	Do you want to be contacted?	Email Address*	Phone Number
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

*Emails will be used to send customer satisfaction survey link. Surveys are used to assess events for future planning improvements as needed.
 OIC does not share emails or phone numbers.

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