|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Community Priority Issue**1. **Child Abuse**
2. **Mental Health**
3. **Substance Abuse**
4. **Senior/Aging Population – Access & Isolation Issues**
5. **General Population – Access and Isolation Issues**
6. **Obesity**
 | **Name and Definition of Data/Metric****(Start and end point)** | **Population included in data**1. **0-4 yrs**
2. **5-12 yrs**
3. **13 – 17 yrs**
4. **18-24 yrs**
5. **25 – 34 yrs**
6. **35-44 yrs**
7. **45-54 yrs**
8. **55-64 yrs**
9. **65+**
 | **Frequency Data is collected and Released**  | **Who Collects the Data****(Your organization, WA State, etc)** | **Can you provide the data today to inform our process?** |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |
|  |  |  |  |  | 🞎Yes 🞎 No |

**Organization**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_