The Developmental Disabilities Administration (DDA) is using a communications tool through GovDelivery. This tool allows DDA to send email messages to both DDA employees and public subscribers. After messages are sent, reports are generated that will provide information on how many people opened the message and if they clicked on links in the message. This allows DDA to determine if messaging is successful or needs to be changed. Let the DDA Communications Unit know if you have questions about what type of messaging is appropriate for GovDelivery.

Instructions:
- An Office Chief or regional / RHC designee must approve GovDelivery Communication Requests prior to submission. Routine messages such as meeting or training notices do not require this level of approval.
- Standard / routine messages (routine or informational messages) – submit request at least one week in advance.
- Urgent messages (information is necessary to be communicated to employees or subscribers within a few days) – submit request at least 48 hours in advance.
- Emergent messages (information that must be conveyed to DDA employees or subscribers right away) – submit request at least one hour in advance (when possible).
- Email completed GovDelivery Communication Request form to DDAGovDelReq@dshs.wa.gov.

Message Tips:
- Short and succinct
- Clear and concise; include deadlines or relevant dates
- Plain talk – no fancy words or jargon, limit acronyms
- “5 W’s” - Who, what, where, when, why
- Person first language: use “you”
- Include a clear, direct subject line
- Include relevant websites

Communication Details

1. Who is the audience?

☐ DDA employees  ☐ Public subscribers  ☐ All subscribers (both DDA employees and public subscribers)

Choose provider type(s) if message will be to targeted audience (otherwise leave blank):

☐ Adult Family Homes  ☐ Group Training Homes
☐ Alternative Living  ☐ Hospitals
☐ Child Foster Care  ☐ Individual Providers
☐ Child Group Care  ☐ Licensed Staffed Residential Programs
☐ Companion Homes  ☐ Nursing Facilities
☐ Community Crisis Stabilization Services  ☐ Overnight Planned Respite Services
☐ Community Intermediate Care Facility for Individuals with Intellectual Disabilities
☐ Community Protection Residential Providers  ☐ State Operated Living Alternatives
☐ Companion Homes
☐ Counties and County contracted providers  ☐ Supported Living
☐ Group Homes  ☐ Waiver providers

Choose county or region if message will be to targeted area (otherwise leave blank):

☐ All Region 1 or only:
☐ Adams  ☐ Douglas  ☐ Kittitas  ☐ Spokane
☐ Asotin  ☐ Ferry  ☐ Klickitat  ☐ Stevens
☐ Benton  ☐ Franklin  ☐ Lincoln  ☐ Walla Walla
☐ Chelan  ☐ Garfield  ☐ Okanogan  ☐ Whitman
☐ Columbia  ☐ Grant  ☐ Pend Oreille  ☐ Yakima

☐ All Region 2 or only:
☐ Island  ☐ San Juan  ☐ Snohomish
☐ King  ☐ Skagit  ☐ Whatcom

☐ All Region 3 or only:
☐ Clallam  ☐ Jefferson  ☐ Mason  ☐ Skamania
☐ Clark  ☐ Kitsap  ☐ Pacific  ☐ Thurston
☐ Cowlitz  ☐ Lewis  ☐ Pierce  ☐ Wahkiakum
☐ Grays Harbor
2. Which subscriber list(s) should the message be sent to? Check all that apply.

- [ ] Emergency Alerts
- [ ] Employees
  - [ ] All Employees
  - [ ] Trainings and Events for Staff
  - [ ] Employee Safety
- [ ] Employment and Contracting Opportunities
  - [ ] DDA Employment Opportunities
  - [ ] Contracting Opportunities with DDA
- [ ] Information
  - [ ] Eligibility
  - [ ] Home and Community Based Services
  - [ ] Legislation
  - [ ] News and Announcements
  - [ ] Rules and Policies
  - [ ] Publications, Brochures
  - [ ] Residential Habilitation Center News and Information
  - [ ] Resources
- [ ] Projects
  - [ ] Advanced Home Care Aide Specialist
  - [ ] Consumer Directed Employer
  - [ ] Electronic Visit Verification
  - [ ] Adult Family Home Meaningful Activities Project
- [ ] Provider Information
  - [ ] Background Checks
  - [ ] Billing / Payment Information
  - [ ] Care Provider Bulletins
  - [ ] Dear Provider Letters
  - [ ] Provider Resources
- [ ] Surveys
  - [ ] Survey Opportunities and Results
- [ ] Trainings and Events
  - [ ] Trainings and Events

3. What is the message?

**MESSAGE TITLE**

**MESSAGE NARRATIVE (INCLUDE SHORT MESSAGE BELOW OR ATTACH WORD DOCUMENT WITH FORM)**

- [ ] Include hyperlink / action button; if checked, provide link:
- [ ] Include attachment; if checked, provide document with Communication Request:
- [ ] Include specific contact information; if checked, provide information:

3. When?

What date should the message be sent? __________ DATE __________

If the message is ready sooner would you like to: [ ] Send early  or  [ ] Wait until scheduled date?

Is there a specific deadline related to this message?  [ ] Yes  [ ] No

If yes, please explain:

Is this a re-occurring message (i.e., a monthly training announcement)?  [ ] Yes  [ ] No

**Message Approved By:**

**NAME AND TITLE OF OFFICE CHIEF OR REGIONAL / RHC DESIGNEE WHO APPROVED THE MESSAGE**

Note: Informational or re-occurring messages may not need approval for each message. Contact the Communications Unit staff if you have questions.

**Other Analytics**

Would you like to receive the analytic results for the message?  [ ] Yes  [ ] No

If yes, provide the names of individuals who should receive this information: