

# Prioritizing Issues

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# Learning Objectives

## At the completion of the session, participants will be able to do the following:

1. Draft the different types of criteria that they believe their core team should consider in their community's issue prioritization process.
2. Use at least two tools or methods, including a QI technique or tool, for issue prioritization.
3. Design an issue prioritization process that ensures attention to health condition priorities, system-level issues and a social determinant of health or health inequity priority.
4. Ensure that CHA findings and other objective information inform priority setting.
5. Plan an issue prioritization process in their community that positions the CHIP to lead to systematic action-planning and ownership by community members, partners, and elected officials.
6. Involve project staff, community members, and LPHS partners meaningfully in an issue prioritization process in a way that manages their expectations.
7. Explain key considerations for how to ensure that different sectors of the community and public health system have an equal voice in setting priorities.
8. Understand the role of community will and other contextual factors that influence issue prioritization and how to address this in planning the process.
9. Re-state the CHA/CHIP demonstration site project requirements for issue prioritization and CHIP development.
10. Describe the required documentation on issue prioritization and CHIP development and implementation from PHAB Standards and Measures Version 1.0.

# Identify Strategic Issues

Strategic issues (or Vision Areas, Priority Areas) are **fundamental policy choices or critical challenges** that must be addressed in order for a community to achieve its vision.



# The Process



- Determine the method for completing this phase
- Present summary of all four assessments
- **Brainstorm potential strategic issues**
- **Develop an understanding about why an issue is strategic**
- **Consolidate overlapping or related issues**
- **Conduct a prioritization or selection process**
- **Arrange issues into an ordered list**
- Disseminate results
- Evaluate the process



# Brainstorm & Categorize Strategic Issues

Ensure that brainstorm process includes potential issues from all assessments and that they include:

- Results from Community Health assessment
- Health condition priorities
- System level issues
- Social determinants of health

Consider using Affinity Diagram to ensure that information from all the assessments and these topic areas are considered.

# Affinity Diagram\*

Why use it?

- To allow a QI team to creatively generate a large number of ideas/issues and organize in natural groupings to understand the problem and potential solutions.

What does it do??

- Encourages creativity by everyone on team
- Breaks down communication barriers
- Encourages non-traditional connections among ideas/issues
- Allows breakthroughs to emerge naturally
- Encourages ownership of results
- Overcomes “team paralysis”



*\*PH Memory Jogger page 12*

# How to Build an Affinity Diagram

- Phrase the issue under discussion in a full sentence and write at the top of full size flip chart paper
- Distribute 3 x 5 post-it notes to each participant
- Follow the rules for brainstorming
- Have each participant write their ideas on the Post-Its, one idea per sheet in large letters, 4-7 words each
- Have participants place their Post-Its on Flip Chart
- Facilitator assists group to sort Post-Its into 5 – 10 related categories
- For each category create a title or heading
- Review categories and ideas to rearrange, if necessary

# Uptake of Vaccines Example (Kittitas, WA)

## Physicians reasons

Vaccine efficacy is low

Severity of infection is

## Barriers

Insurance status

Lack of routine healthcare in adolescents

comfortable with your

## Patient-related

Parent knowledge about illnesses is insufficient

Parent perception of vaccinations

Overestimated risk of side effects – parent fear

Parent perception that children are at low risk of contracting illness

Adolescent/parent refusal

## Other questions

Would you support vaccinations in other settings? (school clinics, teen clinics, health department clinics)

*What are your clinics plans with the loss of universal vaccine status in WA?*

What do you think your coverage rate is?

Do you refer elsewhere for immunizations? All, or only certain? List of reasons...

Do you have a system to track/recall immunization patients?

Do you ever perform routine audits of charts for immunization status?

How do you check imms status, EMR, paper chart, CHILD profile?

## Barriers to vaccinating adolescents

### Reasons for not vaccinating

Insurance

Incomplete record status

Do you have a priority that can give i

Cost o

Would you seek settings? (school health dep

Residen

My child i

Unknown vaccine efficacy

Severity of infection is low

Safety of vaccination

Oppose vaccinations  
*personal or religious values*

Inconvenient

Too many vaccines may "overwhelm" immune system

Medical contraindication of child or sibling

Signed exemption?

New vaccine with little safety track record

Can cause other health problems (allergies, autism)

Lack of knowledge about recommended vaccines

Need for multiple doses

Vaccines may cause the diseases meant to protect against

School entry requirements

Does your provider remind you of needed immunizations?

Forgetfulness

*Promotes promiscuity*

*Children oppose vaccinations*

*Herd immunity*

*Diseases are very rare*

*Don't know current recommendations - they change frequently*

*Don't know what shots my child has had - no access to record*



# Criteria for Prioritizing Issues

Size	How many people are affected?
Seriousness	Deaths, hospitalizations, disability
Trends	Is it getting worse or better?
Equity	Are some groups affected more?
Intervention	Is there a proven strategy?
Values	Does our community care about it?
Resources	Build on current work – available \$?
Others?	Social Determinant, root cause

# Exercise-Criteria to Prioritize Vacation Choices

- Each person at the table generates a list of at least 4 criteria
- Share criteria around the table (clarify as needed)
- Gain consensus at table on 5 criteria to use in your prioritization process for where to take your next vacation

# Exercise-Criteria to Prioritize Issues

- Each person at the table generates a list of at least 4 criteria
- Share criteria around the table (clarify as needed)
- Gain consensus at table on 5 criteria to use in your prioritization process for health issues

# Control and Influence

- This is a conceptual tool to help give a team guidance on what to focus on when trying to pick a topic to improve
- They should focus where they have both control and knowledge
- In Public Health we may work more in the influence part of the circle or quadrant

Control

No Control

Knowledge

Do It

Influence

No Knowledge

Get Help

Stay  
Away



# Control and Influence

It helps to understand where:

- We have control
- We may need assistance
- We can influence only
- We should stay away from

It also points out that we can expand our control area by becoming more knowledgeable, seeking assistance, and trying to be influential in areas beyond our control

# Rate the Seriousness of the Health Problem

(Hanlon Method for Prioritizing Health Problems APEXPH)

Give each health problem a numerical rating on a scale of 0 through 10 .

The table below is an example of how the numerical rating might be established.

How Serious a Health Problem is Considered	“Seriousness” Rating
Very Serious (e.g., very high death rate; premature mortality; great impact on others; etc.)	9 or 10
Serious	6, 7, or 8
Moderately Serious	3, 4, or 5
Not Serious	0, 1, or 2

# Rate the Size of the Health Problem

Give each health problem a numerical rating on a scale of 0 through 10 (reflects % of the local population affected by the particular health problem)

<b>Percent of Population with the Health Problem</b>	<b>“Size of the Problem” Rating</b>
25% or more	9 or 10
10% through 24.9%	7 or 8
1% through 9.9%	5 or 6
.1% through .9%	3 or 4
.01% through .09%	1 or 2
Less than .01% (1/10,000)	0



# Rate Effectiveness of Available Interventions

It may be helpful to define upper and lower limits of effectiveness and assess each intervention relative to these limits. For example, vaccines are a highly effective intervention for many diseases; those diseases would receive a high “Effectiveness of Intervention Rating.”

<b>Effectiveness of Available Interventions in Preventing the Health Problem</b>	<b>“Effectiveness” Rating</b>
Very Effective; 80% to 100% effective (e.g., vaccine)	9 or 10
Relatively Effective 60% to 80% effective	7 or 8
Effective 40% to 60%	5 or 6
Moderately Effective 20% to 40% effective	3 or 4
Relatively Ineffective 5% to 20% effective	1 or 2
Almost Entirely Ineffective Less than 5% effective	0

# Criteria Matrix

Health Issue	Importance			Control			Serious	Size	Effective Actions	Total
	H	M	L	H	M	L				
1. Immunizations	3				2		5	6	10	26
2. Teen Pregnancy		2				1	7	3	4	17
3. Childhood Obesity	3				2		9	8	3	25
4. Low HS Graduation		2		3			4	6	3	18
5. Alcohol/Drug Use			1			1	8	3	2	15

# Prioritization Matrix-Weighing Your Options

Use it to narrow down options through a systematic approach of comparing choices by applying criteria

What does it do?

- Quickly surfaces basic disagreements to resolve up front
- Forces teams to focus on the best things to do
- Limits “hidden agendas” by surfacing criteria as part of process
- Increases chance of follow-through as get more buy-in
- Reduces the chance of selecting someone’s “pet project”

*PH Memory Jogger, pages 105- 115*

# How to Use Prioritization Matrix

- Take topics/issues and ask:  
Does X contribute more than Y in achieving the goal, based on our criteria?
- Once you have agreement on the answer, then decide how much:
  - 1 = equally important
  - 5= significantly more important
  - 10= exceedingly more important
  - 1/5 significantly less important
  - 1/10=exceedingly less important
- Assign agreed-upon value to the issue contributing more and the reciprocal score to the other
- Total the scores and prioritize the issues, highest to lowest

# Example of Prioritization Matrix

(Each issue against Importance criterion)

	1. Immu.	2. Engage Commu.	3. CHIP	4. Food	5. Family Planning	Row Total
1. Immu.		10	1	1	5	17
2. Engage Community	1/10		1	1/5	1/5	1.5
3. CHIP	1	1		1/5	1	3.2
4. Food	1	5	5		5	16
5. Family Planning	1/5	5	1	1/5		6.4

# Restaurant — Enjoyment criteria

	McDonalds	Olive Garden	Outback	Row Total
McDonalds				
Olive Garden				
Outback				

# Tables - Prioritization Exercise

- Each table conducts a prioritization exercise on criteria of “Relaxation” for the following family vacations:
  - Camping at your favorite campground
  - Las Vegas weekend
  - Disney World or Disneyland (whichever is closest)
- Then redo the prioritization matrix for the criteria of “Expense”
- Create Summary Matrix

# Tables Report Out on Prioritization Exercise





# Short Break

Be Back in 15 minutes, please!



# Prioritization Exercise: Wireless Voting Technology

## •Benefits of the Technology:

- Ratings are instantaneous
- Ratings are anonymous
- Use of the technology can shorten the length of time it takes to get to consensus
- Works well with large groups
- Keeps participants actively engaged



## •Drawbacks of the Technology:

- It is not as effective with small groups
- The process can be time consuming if there is a large list of items to prioritize and if the list of criteria is extensive
- On-the-spot programming can be time consuming

# Prioritization Exercise: Wireless Voting Technology

- We will participate in a “mock” prioritization exercise
- You will be asked to prioritize the following issues:
  - Lack of dentists in area who accept Medical Assistance (residents having to travel outside of county)
  - High infant mortality rates
  - Highest childhood obesity rates in the state
  - Increase in teen suicide rates (increase of 25% over past 3 years)
- Each will be rated across the following two criteria:
  - Seriousness of the issue (What are the consequences if we do not address? What is the scope of the issue?)
  - Ability to impact the issue (Are we in a position to effectively make a difference and “move the needle”?)

# Voting Time!!!



# Prioritization Exercise: Wireless Voting Technology

## Tabulating & Reviewing the Results

- What is the best way to tabulate the results?
  - Average ratings?
  - % of highest ratings?
  
- How do I report on the results during the meeting?
  - Matrix
  - Listing from high to low
  
- Consider having the group dictate decision-making criteria
  - Where do you “draw the line in the sand”?
  - What if the group debates the ratings or is surprised?



# Prioritization: Overcoming Potential Barriers



# Prioritization: Overcoming Potential Barriers

- Prioritization is skewed by those in attendance
- Attendance is less than what was expected
- Attendees do not like criteria or proposed process
- Attendees debate the outcome of the prioritization
- Certain individuals are upset that their issue is not one of the top
- New issues will arise and be suggested for consideration, even if data clearly indicates that it is not a significant issue
- The group is unwilling to make a final decision on drawing the line in the sand on top priorities
- The group takes on too many priorities



# The Importance of Community Ownership

- Be strategic and representative in who participates in the prioritization
  - This will assist in helping the community embrace the results
- Be sure to balance the framework for the day with flexibility; attendees may very well throw some curveballs
  - Debate about criteria
  - Some individuals will campaign hard for “their issue”
- Always go back to the objectives and purpose of the prioritization
- Be sure to set the expectations at the very beginning
- As a facilitator of this exercise, you must be perceived as objective and not biased toward a particular issue



# Ensuring Meaningful Engagement of Partners

- Have an agenda that is developed with input from others (as Steering Committee perhaps)
- Promote the meeting well in advance...get RSVPs (follow-up if needed)
- Ask for volunteers for various roles
  - Facilitator (might be public health representative)
  - Notetaker
  - Tabulator of results
- It is important for individuals to feel as if it is their process, not yours that you are forcing upon them
- Again, need to strike the appropriate balance between having a framework and flexibility

# Comanche County's Story

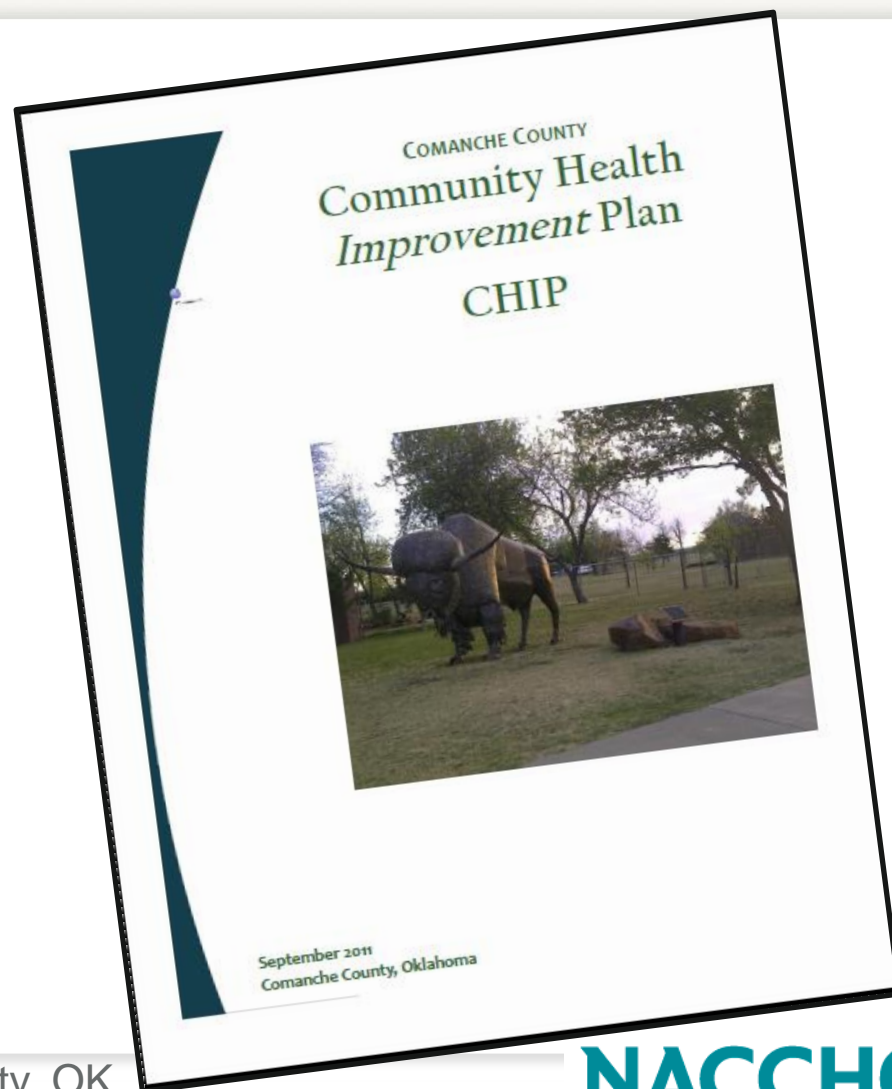
## CHIP Planning Meeting

### ➤ Review and Discussion of Data

- Advance material via email
- Highlight data from featured topics

### ➤ Voting on Priority Areas

- Three votes each
- Top 5 selected



Slide courtesy of Comanche County, OK

# Highlights of our Quality Approach....

## The BIG Payoff!

CHIP meeting included key officials that had been difficult to engage:

- Mayor
- City Council Members
- CEOs from both major hospitals\*\*\*
- City Manager
- County Commissioner
- Representatives from every major coalition
- Representatives from outlying communities



Slide courtesy of Comanche County, OK

# 5 Priority Areas Selected

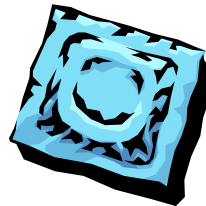
- Obesity



- Tobacco Use and Prevention



- Violence

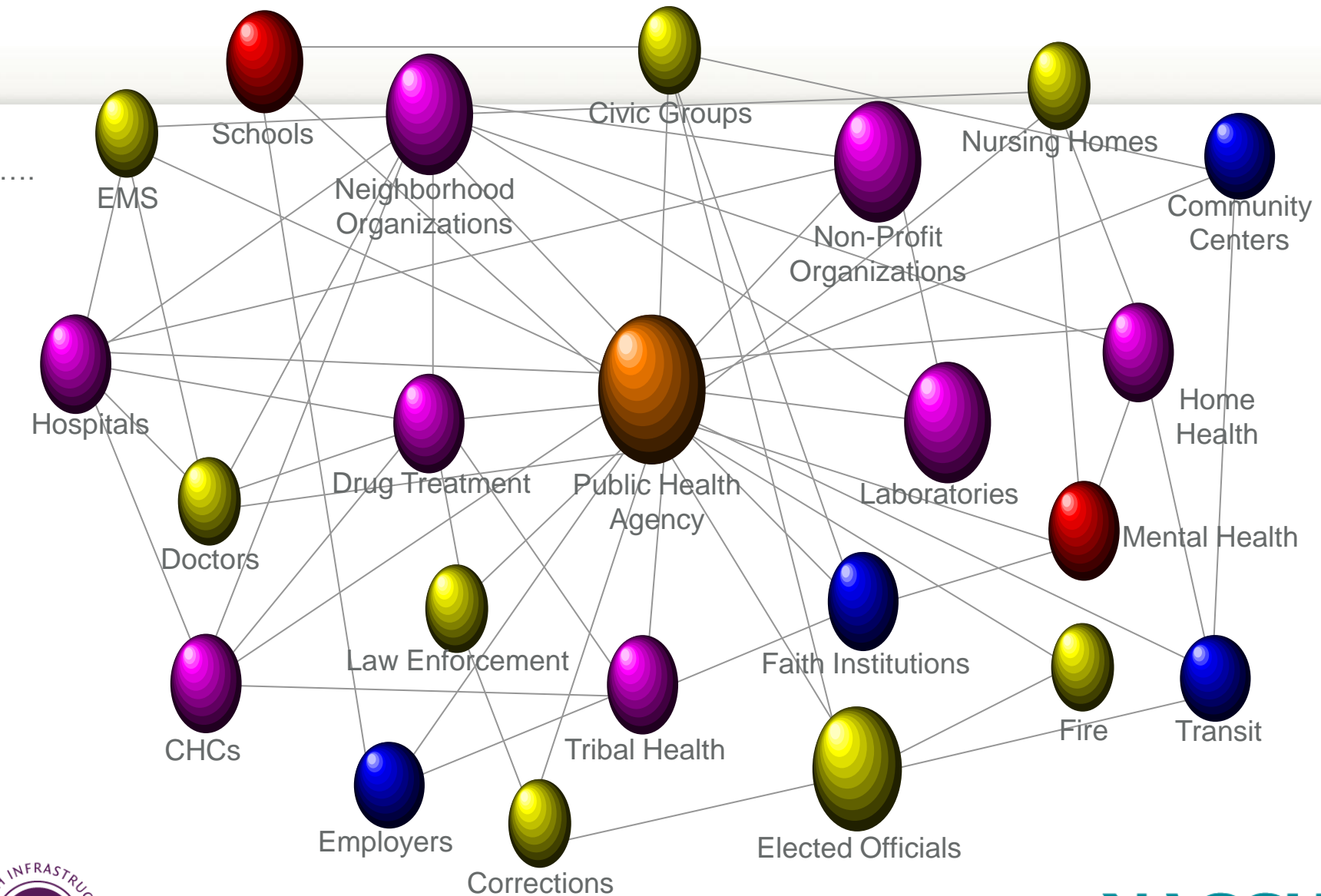


- Sexual Health



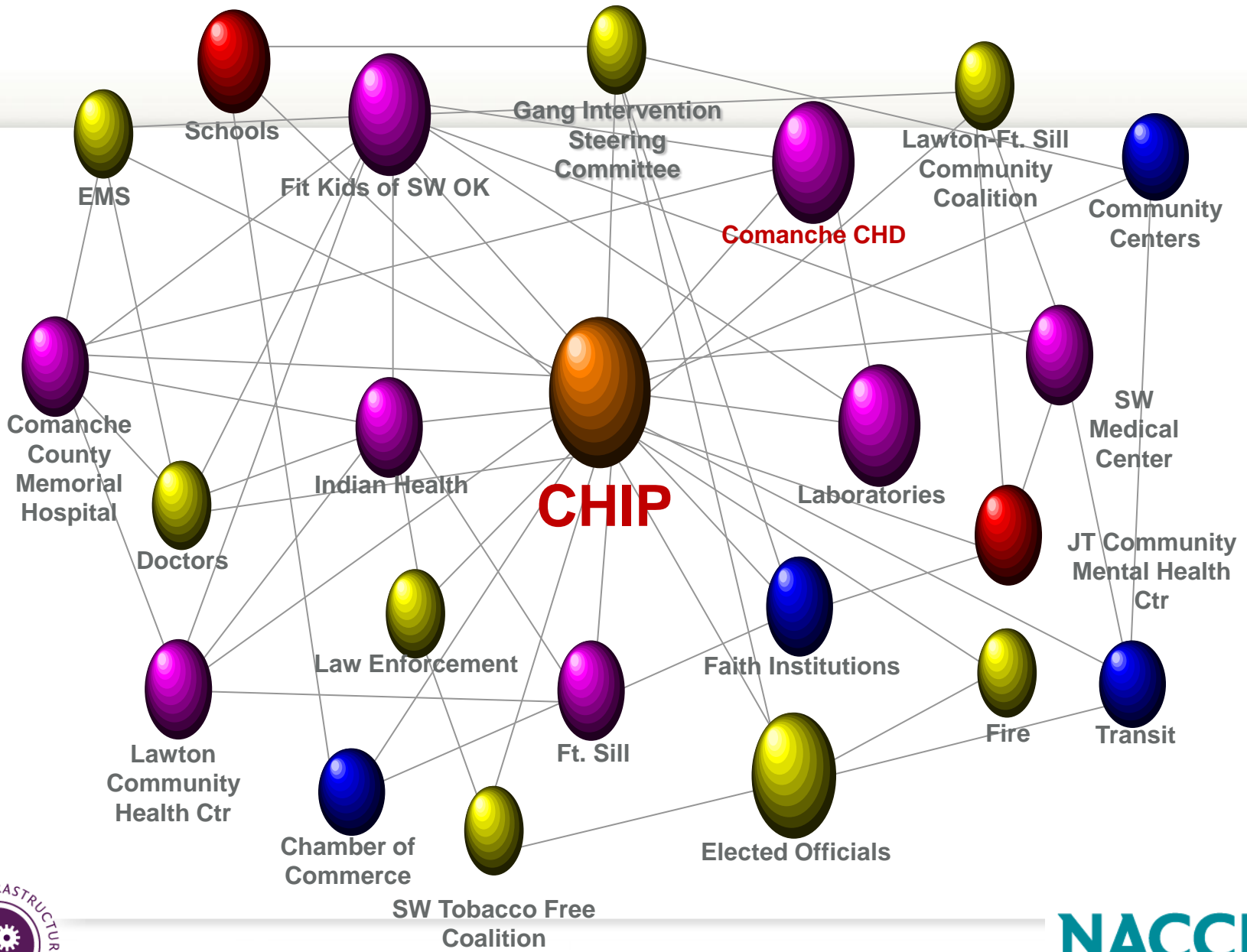
- Access to Care

# Local Public Health System



Slide courtesy of Comanche County, OK





Slide courtesy of Comanche County, OK

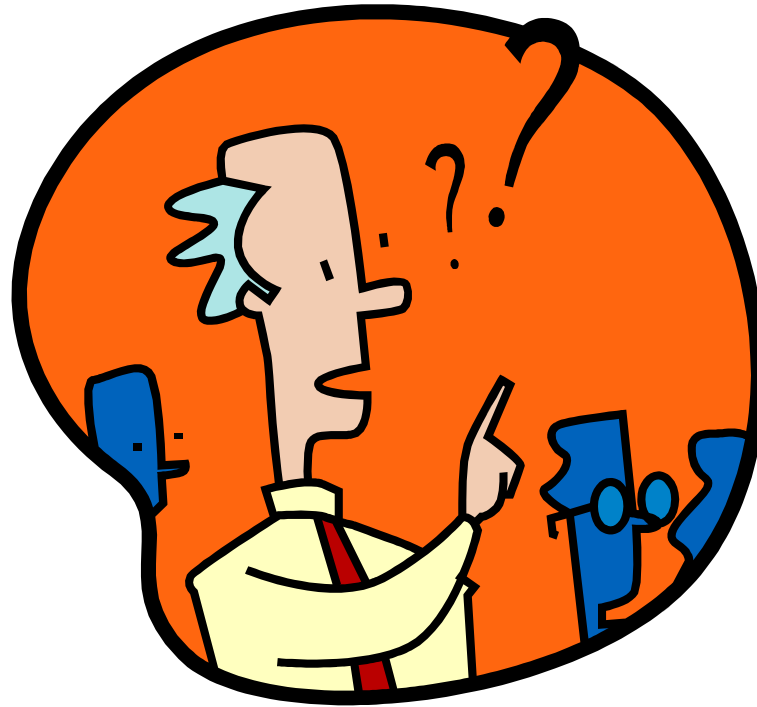


# Let's Discuss!

Sites discuss which of these techniques you may want to take back and recommend for use in your prioritization processes.



# What questions or comments do you have?





# PROJECT REQUIREMENTS & PHAB STANDARDS AND MEASURES: ISSUE PRIORITIZATION



# Project Requirements: Issue Prioritization

## Engage Community Members and LPHS Partners

“Community members must be engaged in a meaningful and substantive way throughout the CHA and CHIP processes, including indicator selection, data collection, data analysis, data presentation and distribution, **issue prioritization**, CHIP creation, implementation of CHIP, and monitoring of results.”

“Partners should be engaged in a strategic way throughout the CHA and CHIP processes, including gaining access to data, mobilizing community members, data collection, data review, **issue prioritization**, and CHIP implementation.”

# Project Requirements: Issue Prioritization

## Address the Social Determinants of Health

- **Consider multiple determinants of health, especially social determinants** like social and economic conditions that are often the root causes of poor health and health inequities among sub-populations in their jurisdictions.
- Have a particular focus on the following:
  - **...Including at least one of these issues [social determinants of health or health inequity] as a priority** for community health improvement efforts in addition to other health priorities in the CHIP.

# Project Requirements: Issue Prioritization

## Required characteristics of the CHIP:

- Background information that does the following:
  - Briefly describes the way in which community members and LPHS partners were engaged in development of the CHIP, particularly their **involvement in both the issue prioritization** and strategy development.
- Priority issues section that does the following:
  - Describes **the process by which the priorities were identified**.
  - Outlines the **top priorities for action**. The priorities need to include at least one priority aimed at addressing a social determinant of health that arose as a key determinant of a health inequity in the jurisdiction.
  - Includes a **brief justification** for why each issue is a priority.

# Project Requirements: Issue Prioritization

## Required characteristics of the Community Health Improvement Process Report

- CHIP overview:
  - Describe how community members and LPHS partners were engaged in development of the CHIP, especially for **issue prioritization** and strategy development.
  - Summarize the **top priorities for action** and the **process by which these were identified**.

# PHAB Requirements: Issue Prioritization

*\*Be sure to review the standards listed below to identify the measures and required documentation that PHAB seeks related to issue prioritization.*

Standard 1.1: Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment

Standard 5.2: Conduct a comprehensive planning process resulting in a tribal/state/community health improvement plan

# PHAB Requirements: Issue Prioritization

For example...

## **Measure 1.1.2T/L: Complete a Tribal/local community health assessment**

*Required documentation 1.a:* Documentation that data and information from various sources contributed to the community health assessment and how the data were obtained. [Guidance: Provide documentation that identifies and describes the community health status and areas for health improvement, the factors that contribute to health challenges...]

## **Measure 5.2.1L: Completed community health improvement planning process that included...**

*Required documentation 1c:* Issues and themes identified by stakeholders in the community. [Evidence that stakeholder discussions were held and that they identified issues and themes...]

*Required documentation 1e:* A process to set community health priorities. [Evidence that participants developed a set of priority community health issues.]

## **Measure 5.2.2L: Produce a community health improvement plan as a result of the community health improvement process**

*Required documentation 1.a:* Community health improvement plan dated within the last five years that includes: community health priorities...

