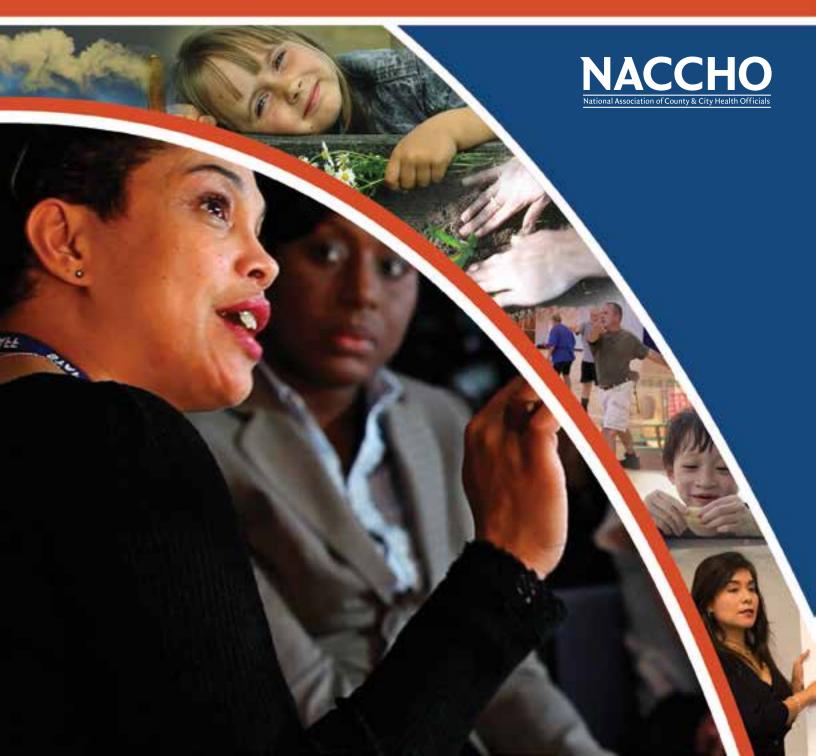


# National Public Health Performance Standards

## **Local Assessment Facilitator Guide**





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## **Acknowledgments**

The National Public Health Performance Standards (NPHPS) Local Public Health System Assessment Facilitator Guide was supported by funds made available from the Centers for Disease Control and Prevention (CDC), Office for State, Tribal, Local, and Territorial Support under grant #3U38HM000449-05S1. The content of this guide is the opinion of the authors and does not necessarily represent the official position of or endorsement by CDC.

The NPHPS materials were developed collaboratively by several national partner organizations, including the following: CDC; the American Public Health Association (APHA); the Association of State and Territorial Health Officials (ASTHO); the National Association of County and City Health Officials (NACCHO); the National Association of Local Boards of Health (NALBOH); the National Network of Public Health Institutes (NNPHI); and the Public Health Foundation (PHF). We thank the staff of these organizations for lending their time and expertise in creating this guide. This local version of the NPHPS Local Public Health System Assessment Instrument Facilitator Guide was developed by NACCHO, the Local NPHPS Reengineering Workgroup, and CDC.

We also want to extend our deep appreciation to the many state, local, and board of health representatives who provided their input on the original NPHPS materials and their subsequent iterations. Feedback has resulted in more valuable materials for all NPHPS users.

We will periodically update the NPHPS materials as sites gain experience in using them. Additional comments and suggestions for improving the document, and quotes, tips, or descriptions to enrich its content are always welcome. Please send all comments to performancestandards@naccho.org.



## **Background and Introduction**

Welcome to the National Public Health Performance Standards (NPHPS). The NPHPS exists to improve the quality of public health practice and the performance of public health systems throughout the country. The NPHPS are supported by a national partnership initiative that developed and continually updates the NPHPS (hereafter referred to as the Performance Standards) for state and local public health systems (LPHS) and for public health governing bodies based on the 10 Essential Public Health Services (Essential Services).

The NPHPS includes three instruments that were originally developed between 1997–2001 under the leadership of CDC and its partner organizations to assess the performance of state and LPHSs and public health governing bodies, respectively. This Facilitator Guide supplements the third revision of these materials. Through working groups and field test activities, hundreds of representatives from the NPHPS partner organizations assisted in developing, reviewing, testing, and refining these instruments to ensure they are practice-oriented and user-friendly.

More details on NPHPS and the three instruments and detailed guidance on implementing a NPHPS assessment of LPHS performance can be found in the NPHPS Local Implementation Guide. This Facilitator Guide focuses on how to facilitate a local Performance Standards assessment using the NPHPS Local Public Health System Assessment Instrument (Local Instrument).

#### **NPHPS Overview**

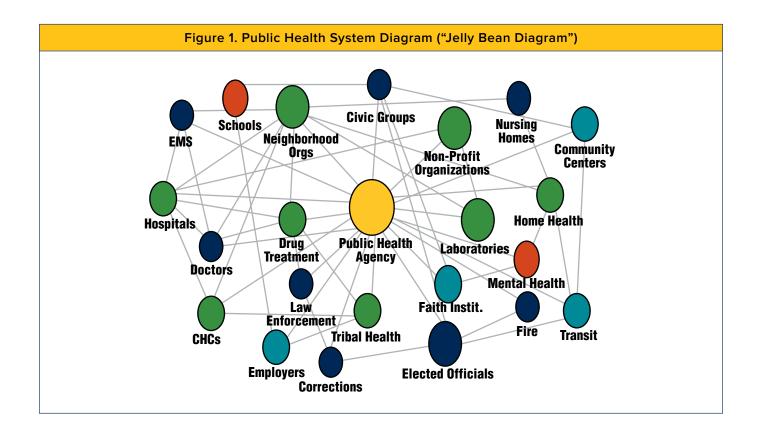
The overall purpose of the NPHPS Local Instrument is to improve public health system performance. During the local Performance Standards assessment, LPHS partners share information and build relationships that become the foundation for improvement activities that take place following the assessment process. During the NPHPS assessment, users can expect to:

- Complete the assessment with documented discussion and scores related to each performance measure.
- Enhance understanding of the public health system.
- Build relationships within the public health system.
- Foster an interest and awareness in performance improvement.

The NPHPS addresses questions such as:

- "What are the components, activities, competencies, and capacities of our public health system?"
- "How well are the Essential Services being provided in our system?"

When answering these questions, the Essential Services and Model Standards focus on the *overall LPHS*, rather than a single organization. An LPHS includes all public, private, and voluntary entities that contribute to public health activities within a given area. LPHSs are a network of entities with differing roles, relationships, and interactions (see "Figure 1. Public Health System Diagram ("Jelly Bean Diagram")"). All of the entities within an LPHS contribute to the health and well-being of the community in some way. Taking a systems perspective with this assessment ensures that the contributions of all entities are recognized in assessing the local delivery of the Essential Services. This is a critical component of the assessment and can be challenging for communities that do not necessarily think of the collection of organizations and groups as a system. Conducting the assessment with the emphasis on the system helps to increase awareness and understanding of the system concept.



Additionally, the Performance Standards describe an *optimal level of performance* rather than provide minimum expectations. This ensures that the Performance Standards may be used for *continuous quality improvement* by serving as a guide for learning about public health activities throughout the system and determining how to make improvements. All communities have areas upon which they can improve their performance. The Performance Standards assist communities in identifying unique assets and places to improve.

The dialogue between entities in the LPHS that occurs in completing an assessment of the Performance Standards helps identify strengths, weaknesses, and short- and long-term improvement opportunities within the system. This information may then be used to improve and better coordinate public health activities at the local level. In addition, the results gathered provide a better understanding of the public health system's performance. This information will facilitate informed, effective policy and resource decisions, resulting in an *improved LPHS*. The ultimate goal of improved LPHS performance is to improve the public's health.

#### The Purpose of the Assessment

Because the Performance Standards describe an optimal level of performance and capacity to which all public health systems should aspire, the local NPHPS provides every LPHS—no matter the level of sophistication—with benchmarks by which the system may be assessed and therefore helps to identify areas of strength and priority opportunities for improvement.

The NPHPS Local Instrument is a valuable tool in identifying areas for system improvement, strengthening local partnerships, and assuring that a strong system is in place for effective response to day-to-day public health issues and public health emergencies. NPHPS users report numerous benefits, including:

- Improving organizational and community communication and collaboration, by bringing partners to the same table.
- Educating participants about public health and how activities are interconnected.
- Strengthening the diverse network of partners within state and LPHSs.
- Identifying strengths and weaknesses to be addressed in quality improvement efforts.
- Providing a baseline on performance to use in preparing for participation in voluntary, national public health department accreditation.
- Providing a benchmark for public health practice improvements, by setting a "gold standard" to which public health systems aspire.

The NPHPS is also connected to many other local public health initiatives, including:

- Mobilizing for Action through Planning and Partnerships (MAPP)—MAPP is a community-wide strategic process for improving public health created by NACCHO and CDC. The Local Public Health System Assessment is one of four assessments within MAPP. Completing the Local Instrument through a broad-based and participatory process is one of the most direct ways that LPHSs can complete the Local Public Health System Assessment. The Local Public Health System Assessment is one of the unique features of MAPP compared to other strategic processes. Implementation Guide Appendix D provides more details on the relationship between the Performance Standards and MAPP. More information about MAPP can be found at www.naccho.org/mapp.
- Internal Revenue Service (IRS) Requirements for Non-Profit Hospitals: Community Benefit—Under the authority of the Patient Protection and Affordable Care Act of 2010 (PPACA), the IRS requires that non-profit hospitals complete a comprehensive community health needs assessment and implementation strategy every three years to maintain non-profit status. Including public health expertise in completing the community health needs assessment and implementation strategy is required to meet the requirements of the law. Including a broad set of LPHS partners, including local health departments, in assessment efforts can help such hospitals meet these requirements, because it can contribute valuable data to a comprehensive community health needs assessment and provide a forum for health departments to contribute to the hospitals' related efforts. To learn more about this IRS requirement of non-profit hospitals, please go to www.naccho.org/topics/infrastructure/mapp/chahealthreform.cfm.
- National Public Health Department Accreditation—The Local Instrument can play a role in preparing local health departments to fulfill the standards for the Public Health Accreditation Board's (PHAB's) voluntary, national public health department accreditation program. The Performance Standards are explicitly cited in the guidance for the following PHAB Standards and Measures Version 1.0:
  - 1. A tool that contributes data to the State, Local, or Tribal Health Assessment (a pre-requisite and described in Standard 1.1).
  - 2. A tool that can support mobilizing community partnerships (Standard 4.1).
  - 3. A tool that supports a State, Community, or Tribal Health Improvement Plan (a pre-requisite and Standard 5.2).

Although a system-wide assessment, the Performance Standards can also provide valuable information for agency strategic planning—a PHAB pre-requisite—and can uncover strengths and weaknesses across all 10 Essential Public Health Services, which also serve as the foundation of PHAB's Standards and Measures. More information can be found on PHAB's Web site at www.phaboard.org.

#### The Facilitator Guide

This Facilitator Guide is intended to provide users with practical guidance, helpful tips, and sample tools for facilitating completion of the NPHPS Local Instrument to assess the performance of LPHSs. The guide accompanies the Local Assessment Instrument and the Local Implementation Guide. All three documents should be used together to complete a Performance Standards assessment of LPHSs.

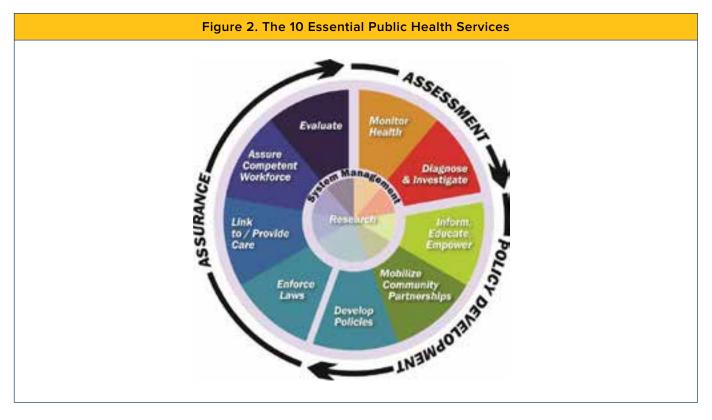
This Facilitator Guide includes a brief overview of NPHPS; an overview of the facilitation process; information on how to use this guide; and practical guidance and scripts for facilitating an assessment Essential Service-by-Essential Service. It contains helpful tips and timeframes for successfully facilitating assessment meeting discussions to complete the Local Instrument. This Facilitator Guide should be used in conjunction with the Local Instrument and the Local Implementation Guide. In-depth information on the NPHPS and options for facilitating completion of the Local Instrument are included in the NPHPS Local Implementation Guide. Additional resources may also be found on NACCHO's Performance Standards Web site at: www.naccho.org/performancestandards.

#### **Local Instrument Format**

The 10 Essential Public Health Services (Essential Services) outlined below provide the framework for the Local Instrument by describing the public health activities that should be undertaken in all local communities. Hence, the instrument is divided into ten sections; one for each of the Essential Services. The Essential Services correspond to one of the three core public health functions as shown in Figure 2.

#### The 10 Essential Public Health Services

- **1**. Monitor health status to identify community health problems.
- 2. Diagnose and investigate health problems and health hazards in the community.
- 3. Inform, educate, and empower people about health issues.
- 4. Mobilize community partnerships to identify and solve health problems.
- 5. Develop policies and plans that support individual and community health efforts.
- **6.** Enforce laws and regulations that protect health and ensure safety.
- 7. Link people to needed personal health services and assure the provision of healthcare when otherwise unavailable.
- 8. Assure a competent public health and personal healthcare workforce.
- 9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- **10**. Research for new insights and innovative solutions to health problems.



The following elements comprise each section in the Local Instrument:

- **Essential Service**—includes a bulleted list of activities and common public health system partners engaged in the activities for the particular Essential Service.
- Model Standard—represents the major components or practice areas of the Essential Service.

  Generally, there are two to four Model Standards for each Essential Service.
- Discussion Questions—describe different considerations and facets of activities that relate to a
  Model Standard. They allow LPHS partners to thoroughly explore their system's performance related
  to a Model Standard.
- **Performance Measures**—determine the level at which the LPHS performs related to the Model Standard via a specific score that is based on LPHS partners' consensus. These measures are the assessment questions to which participants respond.
- **Discussion Notes**—capture important factors from the discussion, including strengths, weaknesses, and short- and long-term improvement opportunities for a Model Standard.
- **Summary Notes**—contain details, additional ideas, or synthesis across Discussion Notes that apply to the Essential Service as a whole. These notes may be helpful and applicable to some or all of the Model Standards in an Essential Service.

In addition to assessing performance of the Essential Services, the Local Instrument includes the following **two** supplemental and optional questionnaires:

1. Priority of Model Standards Questionnaire (page 89)—This questionnaire asks sites to consider the priority of each Model Standard to their LPHS, using a scale of 1 to 10. Responses are analyzed so that sites may consider prioritized Model Standards in relation to their local performance measure scores. While this is an optional questionnaire, communities are highly encouraged to complete this to help them identify and prioritize performance improvement opportunities.

2. Local Health Department Contribution Questionnaire (page 92)—In this questionnaire, Performance Standards assessment participants are asked to think about each Model Standard as a whole and use a four-point scale to assess the local health department's direct contribution to the achievement of each Model Standard. This is also an optional questionnaire in the Local Instrument. Completion of the questionnaire is useful for understanding the local health department's role specifically and can serve as an important input into the local health department's own strategic planning efforts.





### **Overview of Assessment Facilitation**

#### **Facilitating an Assessment**

Effective facilitation of the Performance Standards assessment is crucial to a successful endeavor. It ensures collaborative review and discussion of current LPHS activity and consensus scoring of how the Essential Services and Model Standards are being addressed by a LPHS. Hundreds of local health departments across the United States have conducted the assessment with the help of strong facilitators with a good understanding of group process and the assigned Essential Service(s). If you have been invited to facilitate, congratulations! The process is exciting and rewarding.

#### Role of the Facilitator

Facilitators serve as guides through the assessment process and work with and under the guidance of an Assessment Coordinator/Planning Team who is leading the planning and conduct of the overall local Performance Standards assessment. Facilitators ensure that participants contribute and share in meaningful ways and that performance measure scoring is completed fairly and is representative of the collective voice. Facilitators will also work closely with designated recorders whose role includes documenting the discussion for each Model Standard and Essential Service.

It is important to note that depending on the assessment process format used, facilitators may be assigned to facilitate discussion and scoring for one or for multiple Essential Services. The facilitation process is the same for each Essential Service and would simply be repeated for each Essential Service to which you are assigned to facilitate.

Specific roles for the facilitator include:

- Understanding the assessment process after attending facilitator training, and ideally, are familiar with the Essential Services and the LPHS partners.
- Maintaining neutrality and facilitating the discussion without influencing participant opinions.
- Encouraging all participants to contribute to open and honest discussion focused on the system rather than any one organization.
- Facilitating responses to Discussion Questions and scoring of Performance Measures, along with identification of strengths, weaknesses, and short- and long-term improvement opportunities.

When facilitating the assessment, facilitators seek to help participants achieve the following desired outcomes:

- Complete the assessment with documented discussion and scores for each performance measure.
- Enhance understanding of the LPHS.
- Build relationships within the LPHS.
- Foster interest, awareness, and planned collective action for performance improvement.

Facilitators accomplish this by taking on general facilitation responsibilities including to:

- Establish and ensure the participants adhere to ground rules.
- Set the pace while managing the group process, soliciting input from all participants.
- Drawing out different points of view for the sake of learning and understanding.
- Fostering reflection and checking group opinion.

- Providing guidance and support.
- Maintaining a high energy level during the process.

Facilitators also take on NPHPS specific responsibilities including:

- Ensuring a focus on the "system."
- Reviewing Model Standards and facilitating structured and open discussion.
- Facilitating consensus building and open-ended discussion.
- Obtaining a decision on the final score for each Performance Measure.
- Identifying system strengths, weaknesses, and short- and long-term improvement opportunities.

#### **Common Local Performance Standards Assessment Participants**

Some of the organizations and sectors that are involved in the LPHS that should be invited and encouraged to participate in the Performance Standards assessment include the following:

- Local health departments—also known as local public health agencies, these organizations serve as the governmental entity for public health at the local level and play a major role in creating and ensuring the existence of a strong LPHS.
- **Healthcare providers**—hospitals, physicians, community health centers, mental health organizations, laboratories, and nursing homes, which provide preventive, curative, and rehabilitative care.
- **Public safety agencies**—police, fire, and emergency medical services, which are often focused on preventing and coping with injury, emergencies, and other health-related situations.
- **Human service and charity organizations**—food banks, public assistance agencies, and transportation providers that facilitate access to healthcare and receipt of other health-enhancing services.
- Education and youth development organizations—schools, faith institutions, youth centers, and
  other groups that assist with informing, educating, and preparing children and adolescents to make
  informed decisions and act responsively regarding health and other life choices and to be productive
  contributors to society.
- Recreation and arts-related organizations—parks and recreation departments, community cultural
  centers, and other groups that contribute to the physical and mental well-being of those who work,
  live, learn, and play within the community.
- **Economic and philanthropic organizations**—employers, community development organizations, zoning boards, United Way, and community and business foundations that provide resources necessary for individuals and organizations to survive and thrive in the community.
- Environmental agencies or organizations—air and water quality authorities, green space coalitions, and other groups which contribute to, enforce laws related to, or advocate for a healthy environment.

#### **Assessment Meeting Outline**

The Assessment Coordinator/Planning Team will select the overall process and format for completing the Performance Standards assessment, which may entail a one- or two-day retreat or a series of assessment meetings. Regardless of assessment process format selected, the recommended facilitation process is the same and includes the same steps. This Facilitator Guide includes aspects of the Local Instrument pages that participants will have in-hand during the assessment meeting(s) along with corresponding facilitator pages containing a suggested script, tips, and a complete outline for the process at each step. In addition, suggested posters or room visuals are described on pages 22–24. These posters can support a successful assessment process and aid the facilitator and participants. The general steps for facilitation in a Performance Standard assessment are listed below. More detailed guidance on the steps is included on pages 25–31.

#### Welcome Participants and Facilitate Introductions

- Welcome.
- Introduce facilitator and recorder.
- Introduce participants and review agency/organization public health system contributions.

#### **Provide an Overview of the Process**

- Set ground rules and obtain agreement (see page 22).
- Review participant materials.
- Review the overall assessment process and Local Instrument.

#### Discuss the Essential Service(s) and its Model Standards\*

- Overview core questions for the Essential Service(s).
- Describe the Essential Service(s).
- Review common LPHS partners typically involved in the Essential Service(s) and cross-reference with those present at the assessment meeting(s).
- Report and/or review what the LPHS is currently doing to address the Essential Service(s) (see each individual Essential Service beginning on page 39 for different methods of presenting this report).
- Facilitate discussion on participant responses to the report of current Essential Service(s) activities and/or have participants share what is currently occurring locally for the Essential Service(s).

#### **Review Model Standard Using Discussion Questions\***

- Describe the Model Standard and its activities;
- Facilitate discussion on questions to explore all aspects of how the Model Standard activities are currently addressed locally.

#### Facilitate Consensus Scoring\*

 Facilitate preliminary scoring of Performance Measures based on collective voice of participants who provide responses via voting cards.

- Facilitate consensus building for final score for Performance Measures.
- Participants and recorder take Discussion Notes about the Model Standards and particular strengths, weaknesses, and short- and long-term improvement opportunities.

## Summarize Model Standard Strengths, Weaknesses, and Short- and Long-Term Improvement Opportunities\*

- Participants and recorder take Discussion Notes about the Model Standard score and particular strengths, weaknesses, and short- and long-term improvement opportunities for the Model Standard. Capture the details of this discussion and participant ideas on each of these items in the Discussion Notes section found at the end of each Model Standard in the Local Instrument.
- Facilitate discussion, as needed, to ensure that strengths, weaknesses, and short- and long-term
  opportunities for each Model Standard are discussed, if these items have not come up during the
  scoring process.

#### **Summarize Essential Service Attributes, Opportunities, and Conclusions**

- Facilitate summary discussion on strengths, weaknesses, and short- and long-term improvement opportunities across all Model Standards within each Essential Service.
- Facilitate summary discussion on the similarities and differences among all Model Standards in the Essential Service and the collective opportunities for improvement that may exist.

#### Facilitate Completion of the Optional Supplemental Questionnaires

- If the Priority of Model Standards Questionnaire will be completed during the assessment, participants may respond to the priority questionnaire during discussion of each Model Standard or during the summary discussion at the end of each Essential Service.
- If the Local Health Department Contribution Questionnaire will be completed during the assessment, participants may respond to the questionnaire during discussion of each Model Standard or during the summary discussion at the end of each Essential Service.

#### **Facilitator Preparation**

Before the assessment begins, the following activities are recommended for facilitator preparation:

- Review the Essential Service section(s) to be facilitated.
- Identify terminology that may be challenging for participants, keeping in mind that the assessment may include some public health jargon unfamiliar to non-traditional LPHS partners. Use the NPHPS glossary (available at www.naccho.org/performancestandards).
- Identify Discussion Questions or Performance Measures that may be confusing for participants. Discuss them with other facilitators or those in charge of organizing the assessment to improve comprehension before the assessment meeting begins.

<sup>\*</sup>Repeat for each Model Standard per Essential Service.

- Have a clear understanding of the consensus and voting processes. Identify useful questions to solicit views from participants when they are diametrically opposed.
- Review the facilitation process.
- Review the facilitation tips and suggested questions you may need to use to draw out more information, especially during the consensus process.

#### **Recommended Facilitator Materials**

In addition to copies of this Facilitator Guide, the following materials are useful for facilitators. Your local Assessment Coordinator/Planning Team will determine which materials will be provided to you in addition to this Facilitator Guide.

- Assessment Meeting Agenda.
- Participant List.
- Facility (meeting site) Information/ Overview.
- NPHPS orientation materials, such as reports or presentations (if applicable).
- 10 Essential Services Handout (see Implementation Guide Appendix I).
- Flip charts and Paper.
- Markers.
- Performance Standards.
- Local Instrument Copies.
- Voting Cards, if applicable (see Implementation Guide Appendix H).
- Ink pens.
- Post-it<sup>®</sup> pads.
- Meeting Posters, including Scoring Chart (page 23) and Public Health System Diagram (page 24).
- Electronic voting devices (if applicable).
- Recorder note template (see Implementation Guide Appendix M).
- Laptop computer.
- Projector.

#### Recommended Posters or Visuals for Meeting Room(s)

Many past local Performance Standards assessment facilitators have found it useful to have posters in the meeting space to serve as references for the participants. The following six items can be written on a flip chart or made into posters and used in each break-out or meeting room. Examples of these posters can be found in Local Implementation Guide Appendix J.

#### **Poster 1: Ground Rules**

- Stay present (phones on silent/vibrate, limit side conversations).
- Speak one at a time.
- Be open to new ideas.
- Step up/step back (to make sure all participate).
- Avoid repeating previous remarks.
- Allow facilitator to move conversation along.
- Welcome all perspectives.
- Use Voting Cards to vote (everyone votes at same time).
- Raise hand to request additional discussion before voting.
- Prepare to provide examples and explanation to inform group and increase understanding of your rating.

#### Poster 2: Meeting Agenda

- Introductions.
- Ground rules review.
- Process and material overview.
- Essential service and activities review.
- Review current Essential Service activity.
- Participant reflection and input.
- Repeat the following for each Model Standard:
  - Read Model Standard.
  - Discuss Model Standard activity (i.e., examples).
  - Facilitate Discussion Questions.
  - Score Performance Measures.
  - Further discussion as needed/re-vote if necessary.
  - Consensus on final score.
  - Summarize strengths, weaknesses, and short- and long-term improvement opportunities for the Model Standard.
- Summarize overall group discussion on each Model Standard or summary of Essential Service for large group report-out.
  - Strengths.
  - Weaknesses.

- Short-term improvement opportunities.
- Long-term improvement opportunities.

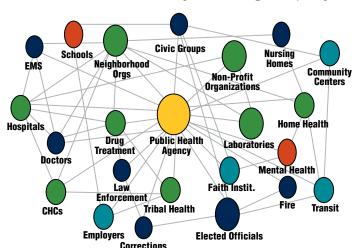
#### **Poster 3: Discussion Principles**

What is the collective picture of how we are doing across the jurisdiction related to this Essential Service?

- Consider responses to Discussion Questions.
- Keep focus on Model Standard.
- Stay focused on system as a whole, but share specific examples.
- Purpose is to get honest and accurate perception of system performance for quality improvement.
- Share concrete examples.
- Share strengths.
- Share weaknesses.
- Suggest recommendations for short- and long-term improvement opportunities.

#### Poster 4: Scoring Chart

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.



Poster 5: Public Health System Diagram (Jelly Bean Diagram)

#### Poster 6: Summary Report

(Optional—only needed if there is a large group report-out following the meeting)

Identify a volunteer to give a two- to three-minute report at the conclusion of meeting(s) to complete the Local Instrument on the discussion for each of the Essential Services. The report should include the following:

- What did you learn from the discussion about how this Essential Service is carried out locally?
   Frame the "report out" in terms of the following:
  - System strengths.
  - System weaknesses.
  - Short-term improvement opportunities.
  - Long-term improvement opportunities.
- Were your previous opinions confirmed or were there surprises? How so?

#### **Participant Materials**

The following materials are recommended for each participant.

- Assessment meeting agenda.
- Local Instrument copy (or at least the Essential Service section(s) they will work on).
- NPHPS Orientation Materials, if applicable.
- 10 Essential Services Handout (see Implementation Guide Appendix I).
- Set of voting cards, if applicable (see Implementation Guide Appendix H).\*
- Ink pens and Post-it<sup>®</sup> pads.

<sup>\*</sup>Electronic voting devices may be used in lieu of voting cards.



### **Detailed Process Guidance**

#### **Facilitate Completion of the Optional Supplemental Questionnaires**

- If the Priority of Model Standards Questionnaire will be completed during the assessment, participants may respond to the priority questionnaire during discussion of each Model Standard or during the summary discussion at the end of each Essential Service.
- If the Local Health Department Contribution Questionnaire will be completed during the assessment, participants may respond to the questionnaire during discussion of each Model Standard or during the summary discussion at the end of each Essential Service.

Based on the Assessment Meeting outline on pages 19–20, the following additional guidance is offered to support facilitators:

#### **Welcome Participants and Facilitate Introductions**

Open the meeting or workgroup discussion with a warm welcome and thank all participants for their time commitment to this important work. Introduce yourself as the facilitator and explain your responsibility and role, which is to guide the process to ensure that everyone's voice is heard, measures are scored by group consensus, and that all is accomplished in the allotted timeframe. Likewise, ask the recorder to do the same. Ask participants to introduce themselves with a brief description of how their organization contributes to the Essential Services.

#### **Provide an Overview of the Process**

Review the purpose of the Performance Standards assessment, the overall assessment process format, the meeting goal, timeframe, and participant materials and how they will be used. Review the general ground rules (group norms or group etiquette) as listed on poster 1 on page 22 and ask participants to add any additional ground rules that they think will increase the effectiveness of the group interaction. Ask for group agreement on the ground rules before moving forward. A head nod from each person usually does the trick.

Explain that the group will go through a standardized process filled with sharing, listening, learning, discussion, and collective and consensus-based decision-making. Use the Assessment Meeting Outline visual (pages 19–20) to define each step in the process. If meeting in small workgroups, ask for a volunteer to summarize the discussion in a summary report to the full group at the end of the session, if this is planned (see poster 6 on page 24).

Provide participants with a general overview of the steps involved in reviewing and scoring each Essential Service, which is the following:

- State the Essential Service and the core question(s) that the Essential Service is addressing.
- 2. Read the activities that comprise the Essential Service as listed in the Local Instrument.
- 3. Review the potential LPHS partners typically engaged in the work for this Essential Service and ask participants to identify which partners on the list are present at the meeting and which are not.

Report on and/or review what the LPHS is currently doing to address the Essential Service (see "Plan Essential Service Review" on page 26 for different methods to do this). If a report—expert or informal—on

the Essential Service was prepared, have the expert or participant(s) responsible share the report. If a report was not prepared, ask participants to share examples of how the Essential Service is being addressed by their organizations and others within the local jurisdiction. (See the next section for an explanation of preassessment reports or onsite sharing as options of discussing Essential Service activity and preparing the participants for the assessment.) The Assessment Coordinator/Planning Team will select which method will be used for the assessment. As sharing and discussion begins, poster 3 on page 23 is useful to remind participants about the purpose of the discussion: to share a collective picture of what is occurring across the jurisdiction related to the Essential Service and/or the related Model Standards. Other important discussion reminders include maintaining a focus on the Essential Service or Model Standard under discussion, focusing on the system as a whole rather than any one organization, providing specific and concrete examples to explain a viewpoint, sharing honest and accurate perceptions of performance, sharing strengths, weaknesses, and short- and long-term improvement opportunities.)

- **4.** Process the group's sharing about current Essential Service activity by asking the following reflective questions:
  - a. What were some of the key points that you heard that really stuck out or resonated with you?
  - b. Was the information consistent with your experience? If so, how? If not, what is different?
  - c. Where do you need further clarification?
  - d. What else is occurring that has not been mentioned? (most important question)
- 5. Review the first Model Standard within an Essential Service. Address any clarification questions and ask participants to describe how the LPHS contributes to the Model Standard. Round-robin sharing works well if time is limited for each participant to share his/her views. Ask probing questions as necessary to ensure that all parts of the Model Standard are discussed.

#### Plan Essential Service Review

When planning a local Performance Standards assessment, your Assessment Coordinator/Planning Team will have decided on the best option for gathering accurate and comprehensive information regarding how the LPHS is fulfilling the activities related to each Essential Service to inform the group discussion and score each Model Standard. Two of the options include gathering and preparing this information before the assessment meeting and two options are facilitated onsite during the assessment meeting. The options are briefly described below. Ask your Assessment Coordinator or a Planning Team member which option was selected. The facilitator guidance outlined next assumes option one (Participant Sharing at the Assessment Meeting) is used. If any of the other options are selected, you may wish to make notes in the Facilitator Guide with specific instructions from your Assessment Coordinator/Planning Team member(s) and reminders for how each Essential Service should be introduced and how that may affect how the time in the assessment meeting is used.

#### **Onsite Options**

(Limited preparation needed pre-assessment.)

1. Participant Sharing at the Assessment—The assessment process is most frequently conducted with this option, which includes beginning the discussion on each Essential Service and Model Standard by small groups of assessment participants who are involved in delivering a particular Essential Service. If this option is chosen, Assessment Coordinators/Planning Team members need to decide whether or not participants will self-select to the workgroups focused on particular Essential

Services or if they will be assigned. Once in the workgroups and in a round-robin fashion, all participants working on a particular Essential Service shares how their organization is contributing to the Essential Service. Your role is to facilitate this discussion and ensure that everyone has a chance to contribute their ideas.

This sharing becomes the basis for answering Discussion Questions and scoring Performance Measures in the Local Instrument. If this is completed in small workgroups, recording highlights from each workgroup on flip charts can be helpful to ensure the larger group of assessment participants are aware of what is shared in the individual workgroups. These flip charts can be posted around the room for all to see throughout the meeting or at the end of the assessment.

2. Brainstorming in an Orientation Session—With this option, in a pre-assessment meeting orientation session, participants brainstorm lists of local activities and organizations contributing to the Essential Service performance. These lists are then used during large- or small-group discussions and the performance measure scoring that occurs for each Essential Service (depending on overall assessment format used). To do this, a flip chart page for each Essential Service is posted around the room and participants write responses to the question, "What organizations are involved in providing Essential Service X in our community?" to generate a list of system partners for each Essential Service. The final list for each Essential Service is used as a way to stimulate discussion, answer Discussion Questions, and score Performance Measures. If this option is used, your role as facilitator is to ensure that the list is referred to during discussions.

#### **Report Options**

(Requires significant preparation for the pre-assessment meeting.)

- 1. Expert Report—This option includes having a local expert(s), before the assessment meeting(s), research and develop a brief written or oral report on how the LPHS is fulfilling the activities for each Essential Service. The report findings are shared at the assessment meeting(s) (or ahead of time) and then during the assessment meeting participants are invited to add to the report based on their knowledge of what is occurring in the system. Both the report and the discussion become the basis for answering Discussion Questions and scoring Performance Measures in completing the Local Instrument. If this option is used, your role is to remind participants to consider the report's findings in considering their thoughts and making their contributions to the discussions and voting.
- 2. Consolidated Written Report—This option requires that those invited to participate in the assessment prepare and submit written comments regarding how their organization is contributing to the various Essential Services. All comments are compiled into a written report ahead of the assessment meeting and shared with the full group of participants during the assessment meeting(s). The report serves as the basis for answering Discussion Questions and scoring Performance Measures for each Essential Service. This method allows input from LPHS organizations that may not be able to attend the actual meeting(s). Like the Expert Report option, your role as facilitator is to remind participants to consider the report's findings in considering their thoughts and making their contributions to the discussions and voting.

#### **Review Model Standards Using Discussion Questions**

Use the Discussion Questions outlined in the Local Instrument and this Facilitator Guide to more fully explore the Model Standard activities in the local jurisdiction. The Discussion Questions elicit specific detail that is vital for focusing to consider when they score a Performance Measure. Be sure the group explores all questions. Discussion Questions are organized by important considerations including:

#### Awareness

Even if the work is occurring, do people know about it?

#### Involvement

Are public health services provided within the system in a coordinated and efficient manner?

#### Frequency

Is the service or activity completed routinely and according to best practice and timeline standards?

#### Quality and Comprehensiveness

- Is the service or activity provided based on evidence-based research? Are measurable process and outcome data available?
- Is the service being provided in a comprehensive manner?

#### Usability

- Is the activity in the question completed across the local jurisdiction?
- Is the activity dispersed among programs or organizations?
- Are the results and information derived from public health assessment, research, evaluation and other activities used to improve public health?

Some Discussion Questions have suggested detail or lists in the Facilitator Guide to help facilitators more fully explore the questions with the participants.

#### These lists are not included in the Local Instrument.

It is important to ask about the items listed in the Facilitator Guide if the participants have not shared or discussed anything related to these items during their discussion otherwise.

#### **Facilitate Consensus Scoring**

The goal is to obtain group consensus on the score for each Performance Measure of a Model Standard. The discussion among participants that you facilitate is a critical part of achieving consensus. Once participants have reviewed and talked about the Discussion Questions and the other questions that you may present to them for consideration and discussion, ask participants to vote on the level at which the LPHS is performing each of the Performance Measures. In deciding and making their vote, encourage them to think about the following:

- The entire system and not specific organizations.
- Assign the score that best describes the current level of activity within the system shared during the discussion.

Remember that the Performance Measures are all defined as optimal standards. Therefore, in order
for a measure to be scored optimal, the LPHS would have provided comprehensive examples of highquality work across all public health areas and throughout the entire local jurisdiction under any one
Model Standard to look similar to, and function consistently with, the Model Standard.

Participants will be asked to vote by using their voting cards (or electronic voting/automated response technology) only. Scoring options are as follows:

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

As participants vote, it is often helpful to have participants define the percentage and ask recorders to capture that detail. This helps increase understanding of where participants fall in the scoring range. Refer participants to poster 4 if they need to review these options.

#### **Building Consensus on Performance Measure Scoring**

Rarely do all participants completely agree on the scores for Performance Measures. Sometimes the differences will be due to participants being unclear on the process and voting based on their organization's performance as opposed to the overall LPHS. However, most of the time, disagreements are purely based on different perceptions, experiences, and knowledge of the LPHS's activities.

To better understand the issues, ask those at both ends of the spectrum what specifically informed their vote. An example would be, "Those who rated this at minimal performance, what informed your vote? Those who rated this at optimal performance, what specifically informed your vote? Those in the middle, what informed your vote?" This level of sharing helps to increase understanding of where participants are coming from with their scoring. Recorders should record the information shared in response to these questions. This discussion is intended to further inform the collective and consensus-based vote.



Remember, it is key to have the group working on a particular Model Standard come to consensus on the current rating of how the LPHS is currently performing against the Model Standard.

There are many other useful questions to help the group come to consensus on a score for Performance Measures. Here are a few useful questions.

- Why do you think we have such a split on this particular Model Standard?
- Help me understand why some of you are so passionate about this?

- Are some of us voting our positions or do we genuinely see the system this differently?
- Could someone explain to us what experience has made you believe that we are failing in this area?
- For those of you who scored the activity low (or high), could you talk about why you scored it low (or high)?
- Why did those of you who scored the activity low not think the system should score higher? Why did those of you who scored the activity high not think the system deserved to score lower?
- What would make the "no" person vote "moderate activity" or the "optimal" voter indicate "significant activity"?

Once new information has been shared, it often increases understanding and causes some rankings to change. Asking the following question is often a good next step:

Given this new information, how do we think the system as a whole is functioning?

After group discussion, conduct a second vote to score a Performance Measure. Knowing that you may not have total unanimity, ask those that are not in total agreement with the group if they are comfortable moving forward knowing that their comments related to system strengths and weaknesses are captured by the recorder and will inform performance improvement. Ultimately, the final score does not matter as much as the quality of the notes to help understand the scores and the differences of opinions. This is why communication between the facilitator and recorder is key.

## Summarize Model Standard Strengths, Weaknesses, and Short- and Long-Term Improvement Opportunities\*

If these details have not already been covered in the group review of the Discussion Questions or scoring process, facilitate a discussion among participants to identify what they perceive as the strengths, weaknesses, and short- and long-term improvement opportunities related to the Model Standard. The details of this facilitated discussion should be captured by the recorder in the Discussion Notes section in the Local Instrument for each Model Standard.

Experienced facilitators may be able to collect this information, although it may be a bit more challenging, as they facilitate through the discussion on each Model Standard. This can be accomplished by posting columns labeled strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities on a flip chart or a white board. As strengths emerge in the discussion, ask the group, "Is this a strength we want to capture?" Strengths, weaknesses, and short- and long-term improvement opportunities often naturally come out of the discussion. If this is clearly emerging, capture it throughout the process, review at the end of the discussion, and discuss whether these opportunities are short-term (next 6–12 months) or long-term (12 months+).

Because the purpose of conducting the Performance Standards assessment is ultimately to improvement LPHS performance, it is absolutely essential to capture this information to carry over into performance improvement activities planning that occurs at the end of the assessment.

#### Summarize Essential Service Attributes, Opportunities, and Conclusions

Once you have completed facilitated discussion and recorded the strengths, weaknesses, and short- and

<sup>\*</sup>The following options were referenced on page 26, "Plan Essential Service Review."

long-term improvement opportunities for each Model Standard, turn the group's focus to the Essential Service as a whole. Facilitate discussion that explores the similarities and differences in the strengths, weaknesses, and short- and long-term improvement opportunities recorded for each of the Model Standards within a single Essential Service. Record these reflections and conclusions in the space provided at the end of each Essential Service section for Summary Notes. If meeting in small workgroups, this information should be captured by the recorder and a participant volunteer should be prepared to share it on behalf of the group during a meeting of the larger group.

Because the purpose of conducting the Performance Standard assessment is ultimately performance improvement, it is absolutely essential to capture this information to carry over into performance improvement planning and action.

Experienced facilitators may be able to collect this information, although it may be a bit more challenging, and make connections among the attributes, such as the strengths, weaknesses, and short- and long-term improvement opportunities for an Essential Service as they facilitate the discussion and score each Model Standard. This can be accomplished by posting a Summary Notes heading on a flip chart or a white board and begin to make the connections on similarities and note the differences among the Model Standard attributes as you move through them within one Essential Service.

#### **Facilitate Completion of the Optional Supplemental Questionnaires**

This is also a point at which participants may respond to the Priority of Model Standards (Priority) and Local Health Department Contribution (LHD Contribution) Questionnaires if they are being completed during the assessment meeting. Refer to the Assessment Coordinator/Planning Team to determine if the optional questionnaires will be used and how they will be used. More information on their use can also be found in the NPHPS Local Implementation Guide.

Depending on the method selected during planning, sites should complete the Priority and/or LHD Contribution questionnaires either at the time of the assessment or shortly thereafter. Although system partners should respond to the Priority questionnaire, the LHD Contribution questionnaire may be completed by a group of local health department-only representatives. Like the Performance Standards assessment itself, discussions related to these questionnaires should be led by a facilitator and groups should strive for consensus in generating their responses to these questions. If the group completing the questionnaires did not participate in all discussing and scoring LPHS performance of all Essential Services, it may be helpful to provide a brief summary of what services are being provided locally related to each Essential Service and the various organizations contributing to them.

When responding to the Priority questionnaire, participants should rate the priority of each Model Standard without regard to performance scores or rank order. In considering this questionnaire, the following questions may be helpful for participants: "On a scale of 1 to 10, what is the priority of this Model Standard to our LPHS?" or "On a scale of 1 to 10, how important is it to improve our performance in this activity (e.g., through a quality improvement process, increased emphasis or resources)?" Facilitators should encourage participants to use the full scale and remind them that it is not feasible for every Model Standard to be a priority at the same time. Also, participants should realize that this questionnaire is an opportunity to arrive at an honest appraisal of the priorities within their system, so neither is there no right or wrong response, nor is there a need to reflect what they may view as priorities from other sectors, unless those are truly important within their LPHS.

In responding to the LHD Contribution questions, participants should estimate how much of the activity relevant to each Model Standard is conducted by the local health department. Responses should reflect the current status of the local health department contributions. For example, if all Model Standard activities are conducted by the local health department, the response should be 76-100%. On the other hand, if the local health department conducts very few of the activities related to the Model Standard, the answer should be 0-25%.



## **General Facilitation Tips**

The following tips are techniques that help create a more productive environment and discussion throughout the assessment process. Your role and effectiveness as a facilitator can be enhanced by putting these tips into practice.

- Whenever possible, call participants by name to add a personal touch and increase comfort.
- Encourage all participants to contribute. Emphasize similarities and points of agreement. Also, draw out different points of view.
- Use active listening skills.
- Show respect for the process and the experience.
- Point out relevant information in the discussion and how it pertains to the Model Standard.
- Keep discussion relevant to the Model Standard being reviewed at the time.
- Encourage concrete examples of activities, but discourage anecdotes.
- Keep people focused on the LPHS as a whole, particularly when voting or identifying strengths, weaknesses, and improvement opportunities.
- Work to garner "buy-in" from power players without excluding anyone.
- Have people frame their discussions in the categories of strengths, weaknesses, and short- and long-term improvement opportunities to help the recorder capture thoughts in an organized way.
- Never be defensive. You should not need to defend the process.
- Keep an eye on the time. Move the group along as necessary. Ask for the recorder's assistance in monitoring the time.
- Refrain from sharing your opinion or adding to the discussion. Maintain the facilitator role by asking
  questions and referring to other participants if questions are posed by a participant.
- Use the visuals in the room either on posters or flip charts. They are very helpful in keeping the focus and maintaining process.
- Ensure adequate discussion has occurred to hold an informed vote.

#### **An Essential Facilitation Skill: Practice Active Listening**

- Remain focused on the participant and what he or she is saying and demonstrate that you are actively listening by acknowledging their participation.
- Steer participants toward expression of their interests and values rather than their positions and demands. It may be helpful to request, "Help us understand why this is important to you."
- Understand that everyone has "mixed motives" that may get in the way of their cooperation.
- Pay special attention to surprise, differences, and disagreements.
- Reflective listening (i.e., repeating back what you heard participants say) validates responses and ensures accuracy of meaning.

#### **Troubleshooting Tips**

If the discussion becomes all about the local health department:

- Remind participants that this is a system, not a single organization or the local health department, assessment.
- Even though the local health department might have a strong presence, it may not be aware of all the activity going on in the LPHS.
- Remind participants that there are often system duplications and inefficiencies in how the local health departments work with the rest of the LPHS that need to be uncovered for improvement.

If individuals become defensive about their organizations' performance:

- Use reflective listening to validate their good work while reminding them that this is a LPHS assessment and their strengths can be leveraged to improve the system overall.
- Remind participants that there is always room for improvement and they are rating the system against optimal standards, not minimal standards.

If one person dominates the discussion:

- Use reflective listening to validate their point and ask for others for their opinion.
- Facilitate a round-robin dialogue to allow everyone to respond in an orderly manner and to ensure each participant has an opportunity to contribute. Be mindful to start round-robin contributions with different participants so that the same person does not have the first or last word each time.
- Reference the ground rules as needed.
- Remind participants that this is a LPHS assessment, not an assessment of one organization.

If the group gets off topic or too far into details:

- Use reflective listening to validate the importance of the conversation.
- Confirm the recorders noted what was discussed.
- Use a parking lot (created on a flip chart) to "park" the idea or issue for a later time.
- Re-read the question asked and remind participants of the overall goal of the assessment.
- If it is important to a participant that the issue be captured in their own words, suggest that they write it on a sticky note (Post-it®) and give it to the recorder to be entered into the comments exactly as they've worded it.

If the group feels like they do not have enough information or expertise to answer a question:

- Capture what the group does and does not know.
- Note who is missing from the conversation.
- Vote on the Performance Measure knowing the group has limited information. Lack of awareness is an indicator of system performance.
- Flag the question and revisit it after gathering more information from missing individuals.

This challenge often arises in areas where very technical information may be needed. At times, there
may only be one to two people in their group to speak to the issue (i.e., emergency preparedness).
 Encourage participants to listen and trust their colleagues, but also keep in mind that lack of
awareness is a voting and scoring consideration.

If supervisors or higher ranking staff seem to make participants uncomfortable or seem to drive the scoring:

- Encourage participants to all vote at the same time without waiting to see how others vote.
- Suggest to higher ranking staff or opinion leaders (ahead of the meeting or discreetly during a break) that they hold their vote until others initiate voting.
- Discuss with the supervisors or other higher ranking staff during a break about what is occurring
  and ask for their assistance with stepping back a bit and encouraging their staff or colleagues to
  step up with sharing.



**General Facilitation Tips** 



#### **Using the Facilitator Guide**

#### Layout

The Facilitator Guide includes facilitation guidance at the beginning of each Essential Service—as well as each Model Standard within each Essential Service—followed by the corresponding Local Instrument pages (participant guidance). The Facilitator Guidance pages are delineated by blue headline text, whereas the Local Instrument pages' headlines are orange. This allows facilitators to lead discussion with one complete reference guide as opposed to moving between a copy of the Local Instrument and a copy of the Facilitator Guide as separate documents.

The facilitator guidance includes suggested script that you can use. All script is italicized for your convenience. Text that is not in italics is intended to provide a direction or tip to you as a facilitator.

#### **Estimated Times**

The Facilitator Guide includes estimated times for each section. Based on the estimated times, most sessions take two to two-and-a-half hours to fully cover one Essential Service with robust discussion, consensus building, and voting. The first Essential Service that a group explores takes longer than others because participants are learning the process. The times are merely suggestions for planning and *do not* include time needed for introducing participants, setting ground rules/group norms, or reviewing the assessment process and materials. Plan discussion times accordingly and build in this extra time needed for the discussion and voting for the first Essential Service that the group reviews. Group process varies and some groups take much longer in discussion, whereas others may move more quickly. Larger groups usually take longer to facilitate to ensure all participants have a chance to contribute to the discussion. For this reason, it is important to stay on top of the time your group has been allotted to complete the task and do your best to follow the process while moving the group along.

#### **Scoring Process Guidance**

The script related to the scoring process contained in this Facilitator Guide assumes that voting cards are used to arrive at a score for each Performance Measure in the Local Instrument because this is the most commonly used scoring method. However, some sites may choose to use electronic voting devices, which is perfectly acceptable. When using electronic voting devices, plan for a minute or so for participants to enter in their votes because this equipment shows the percentage of participants that have voted and it may be necessary to wait a few minutes while the number of votes are calculated and you clarify whether or not everyone entered in their vote. When there are large differences in the proportion of participants who voted one way versus another, it may take some additional time to request that those participants whose votes were on opposite ends of the spectrum to share their reasoning so that the group as a whole can better understand this. The group, with the guidance of the facilitator, then works to achieve consensus on a final score for each Model Standard. If electronic voting devices are used, it is recommended that facilitators modify the script provided in this guide with handwritten notes or reminders.

#### **Printing**

This Facilitator Guide is designed for each section to be able to stand-alone, because each facilitator may only be facilitating discussion and voting for one or a few Essential Services. Ideally, facilitators should print the Facilitator Guide introduction and the sections of the guide that relate to the Essential Services to which they are assigned and place them in a three-ring binder. This will allow the facilitator to easily reference both the facilitator guidance and Local Instrument pages during the assessment meetings in which they are facilitating. It is *not* necessary to print the entire Facilitator Guide unless a facilitator will be facilitating all 10 Essential Service discussions and scoring.



# Essential Service 1: Monitor Health Status to Identify Community Health Problems



#### **OVERVIEW**

#### **Facilitator Guidance**

#### **Facilitator Script and Tips**

(Total Time for Essential Service 1: approximately 2 hours 15 minutes–2 hours 45 minutes)

#### Step 1: State the Essential Service and Questions It Addresses

Time for Steps 1–3: 15–20 minutes

The activities in Essential Service 1 answer the following questions:

- What's going on in our community?
- Do we know how healthy we are?

#### **Step 2: Define the Essential Service**

(See description from Local Instrument on page 43.)

In order to understand what's going on in our community and how healthy we are as a community, the following activities encompass Essential Service 1: Monitor Health Status to Identify Community Health Problems.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

#### Step 3: Explore Partners Commonly Gathered for Essential Service 1

(See list of partners in Local Instrument on page 43.)

Let's look at the bottom of page 43 at the partners commonly gathered to discuss the performance of the local public health system (LPHS) in monitoring health status to identify community health problems.

Facilitate a brief dialogue based on the following questions. Be sure the recorder(s) are capturing the information.

- Based on this list of partners, who do we have present in our group today? Feel free to check the boxes next to each partner announced as part of the assessment for Essential Service 1 today.
- Who is present today, but not listed here?
- Are there any other partners who contribute to this work who are not listed or are not present today?

#### Step 4: Facilitate Discussion to Explore the Essential Service Fully

Time for Step 4: 20 minutes

Thinking about the description we just heard regarding Essential Service 1, what are we doing specifically in our community to address such activities?

Overview

If a report or presentation has been prepared in advance to describe what is occurring related to the Essential Service or a single Model Standard, start the discussion by referring to that report or hearing that presentation and seeking reflections and reactions on its contents.

Process the information provided by the participants or by the report or expert by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information discussed so that an accurate and complete picture of current LPHS activity is recorded. Model Standard

#### **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes				
Strengths	Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities	

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 1.

#### **Local Instrument**

#### What's going on in our community?

#### Do we know how healthy we are?

Monitoring health status to identify community health problems encompasses the following:

- Assessing, accurately and continually, the community's health status.
- Identifying threats to health.
- Determining health service needs.

group (e.g., March of Dimes).

- Paying attention to the health needs of groups that are at higher risk than the total population.
- Identifying community assets and resources that support the public health system in promoting health and improving quality of life.
- Using appropriate methods and technology to interpret and communicate data to diverse audiences.
- Collaborating with other stakeholders, including private providers and health benefit plans, to manage multisectoral integrated information systems.

Partners gathered to discuss the performance of the local public health system (LPHS) in monitoring health status to identify community health problems may include:

The local health department or other	State health department.	
governmental public health agency.	National level agency or organizations.	
The local board of health or other local governing entity.	Community-based organizations.	
University or academic institutions.	Epidemiologists.	
Public health laboratories.	Environmental health data experts.	
Health/hospital systems.	Emergency preparedness teams.	
Managed care organizations.	The general public.	
Local chapter of national health-related	Community health planners.	

# Model Standard 1.1: Population-Based Community Health Assessment

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 1.1



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 1.1: Population-Based Community Health Assessment.

(See description from Local Instrument on page 47.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20–30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **conducting CHAs** and developing community health profiles.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If a question was already addressed in the discussion, there is no need to ask it again. Summarize what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Use the following lists to inquire about types of data sets: (Quality and Comprehensiveness)

- Demographics?
- Socioeconomics?
- Availability of health resources and services?
- Quality of life data?
- Behavioral risk factors?
- Community environmental health indicators?
- Social and mental health data?
- Maternal and child health data?
- Death/illness and injury data?
- Communicable disease data?
- Sentinel event data?
- Are data compared to a community similar to yours?
- Are data compared to the region?
- Are data compared to the state?
- Are data compared to Healthy People 2020 national objectives?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: Varies based on consensus building, generally 10–15 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measure for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to local public health) meets the Performance Measure.

Model Standard 1.1

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 1.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 1.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 1.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move on to the next Model Standard.

#### **Local Instrument**

The LPHS completes a detailed community health assessment (CHA) to allow an overall look at the community's health. A CHA identifies and describes factors that affect the health of a population and pinpoints factors that determine the availability of resources within the community to adequately address health concerns. This provides the foundation for improving and promoting the health of the community and should be completed at least every three years. Data included in the CHA are accurate, reliable, and interpreted according to the evidence base for public health practice. CHA data and information are shared, displayed, and updated continually according to the needs of the community.

By completing a CHA, a community receives an in-depth picture or understanding of its health. From the CHA, the community can identify the most vulnerable populations and related health inequities, prioritize health issues, identify best practices to address health issues, allocate resources where they are most needed, and provide a basis for collaborative efforts to promote the public's health. The CHA also tracks the health of a community over time and compares local measures to other local, state, and national benchmarks.

To accomplish this, members of the LPHS work together to:

- Assess the health of the community regularly.
- Continuously update the CHA with current information.
- Promote the use of the CHA among community members and partners.

#### **Discussion Questions for Model Standard 1.1**

#### **Awareness**

- (a) Was everyone aware of the assessment?
- (b) Does everyone have access to the CHA?

#### Involvement

(a) How many of you have participated in the assessment?

#### Frequency

- (a) How often is the CHA completed?
- (b) How often do updates to the CHA occur?

#### **Quality and Comprehensiveness**

- (a) Which data sets are included in the CHA?
- (b) How is the CHA used to monitor progress toward:
  - · Local health priorities?
  - · State health priorities?
- (c) Healthy People 2020 national objectives?
- (d) How well does the CHA examine data over time to track trends?
- (e) How are the data helping identify health inequities?

#### **Usability**

- (a) How accessible to the general public are the CHA results?
- (b) How is the CHA distributed to the community?
- (c) How is the CHA used to inform health policy and planning decisions?

#### **Performance Measures for Model Standard 1.1**

At what level does the LPHS... 1.1.1 Conduct regular CHAs? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 1.1.2 Update the CHA with current information continuously? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 1.1.3 Promote the use of the CHA among community members and partners? Minimal No Activity Moderate Significant Optimal 0 0 0 0 0

# Model Standard 1.2: Current Technology to Manage and Communicate Population Health Data

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 1.2



Time for Step 1: 2 minutes

Let's take a closer look at Model Standard 1.2: Current Technology to Manage and Communicate Population Health Data.

(See description from Local Instrument on page 53.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Time for Step 2: 20-30 minutes

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 1.2

Step 3: Facilitate Discussion to Explore the Model Standar	d Fully
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Given the description of this Model Standard, let's explore further your LPHS's work around **using current** technology to manage and communicate population health data.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If a question was already addressed in the discussion, there is no need to ask it again.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants *do not* have these lists in the Local Instrument.

Use the following list to inquire about different activities related to combining, analyzing, and displaying data on the public's health: (Quality and Comprehensiveness)

- Collecting data on the public's health?
- Managing technology that supports storing, analyzing, and displaying public health data health?
- Integrating public health data from different sources?
- Displaying public health data?
- Sharing public health data with the community electronically?
- Other \_\_\_\_\_?

Use the list below to inquire about various types of geocoded data and their availability: (Quality and Comprehensiveness)

- County level data?
- Zip code level data?
- Census tract data?

Use the list below to inquire about ways GIS may be used: (Quality and Comprehensiveness)

- Displaying health-related information?
- Mapping health resources?
- Linking databases?
- Analyzing health issues?
- Other \_\_\_\_\_\_\_

Ask participants to think in terms of how computer-generated graphics are used to identify trends and/or compare data by relevant categories such as race, gender, age group, etc. (Quality and Comprehensiveness)

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions in Local Instrument on page 53.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

Model Standard 1.2

#### Step 5: Facilitate Summary: Model Standard 1.2



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 1.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 1.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move on to the next Model Standard.

#### **Local Instrument**

The LPHS provides the public with a clear picture of the current health of the community. Health problems are looked at over time and trends related to age, gender, race, ethnicity, and geographic distribution. Data are shown in clear ways, including graphs, charts, and maps, while the confidential health information of individuals is protected. Software tools are used to understand where health problems occur, allowing the community to plan efforts to lessen the problems and to target resources where they are most needed. The CHA is available in both hard copy and online, and is regularly updated. Links to other sources of information are provided on Web sites.

To accomplish this, members of the LPHS work together to:

- Use the best available technology and methods to combine and show data on the public's health.
- Analyze health data, including geographic information, to see where health problems exist.
- Use computer software to create charts, graphs, and maps which show trends over time and compare data for different population groups.

# Awareness (a) What technology is available to LPHS partners to combine and show data on the public's health? (b) At what level does the LPHS have access to and include geocoded health data? (c) At what level within the community are the data available? (d) How does the LPHS use geographic information systems (GIS)? (e) How does the LPHS use computer-generated graphics?

#### Performance Measures for Model Standard 1.2

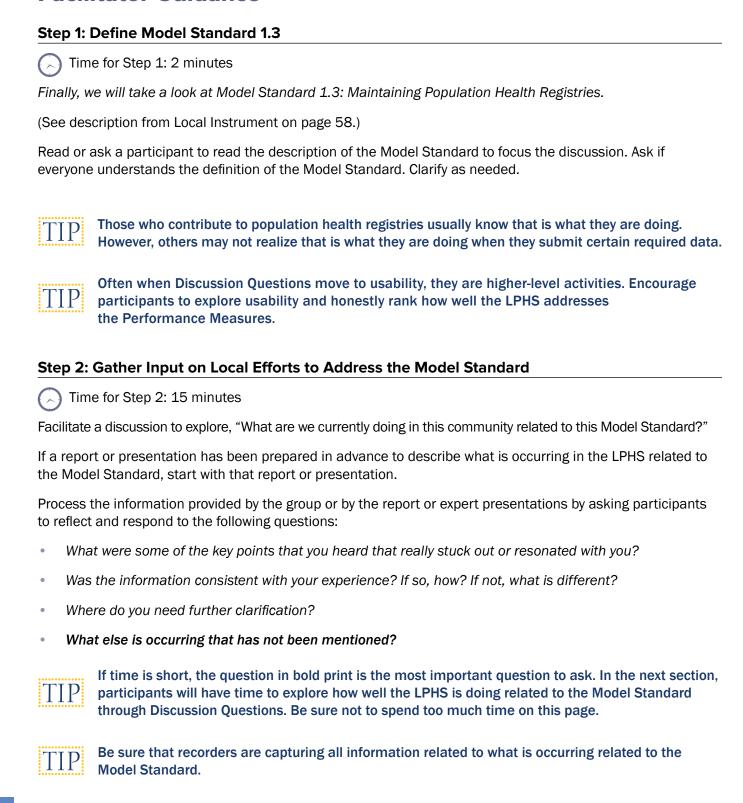
At what level does the LPHS...

1.2.1 Use the best available technology and methods to display data on the public's health? No Activity Minimal Moderate Significant Optimal  $\bigcirc$ 0 0  $\bigcirc$  $\bigcirc$ 1.2.2 Analyze health data, including geographic information, to see where health problems exist? No Activity Minimal Moderate Significant **Optimal** 1.2.3 Use computer software to create charts, graphs, and maps to display complex public health data (trends over time, sub-population analyses, etc.)?

No Activity Minimal Moderate Significant Optimal

## Model Standard 1.3: Maintaining Population Health Registries

#### **Facilitator Guidance**



#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 15 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **maintaining population health registries**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If a question was already addressed in the discussion, there is no need to ask it again.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants *do not* have these lists in the Local Instrument.

Use the list below to inquire about the types of population registries that the LPHS contributes to: (Involvement)

- Immunization status of children?
- Immunization status of adults?
- Newborn screening?
- Birth defects and developmental disabilities?
- Trauma?
- Occupational injury?
- Environmental exposures?
- Asthma?
- Cancer?
- Diabetes?
- Other chronic diseases?
- Other \_\_\_\_\_?

Use the list below to inquire about the ways population health registries may be used: (Usability)

- Informing policy decisions?
- Designing programs?
- Implementing programs?
- Conducting program evaluation?

#### **Essential Service 1**

Model Standard 1.3

•	Conducting population research?
•	Other

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### **Step 4: Scoring and Consensus Building**

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Time for Step 4: 5 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions in Local Instrument on page 58.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 1.3



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 1.3. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 1.3 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

#### **Local Instrument**

The LPHS collects data on health-related events for use in population health registries. These registries allow more understanding of major health concerns, such as birth defects and cancer, and tracking of some healthcare delivery services, such as vaccination records. Registries also allow the LPHS to give timely information to at-risk populations. The LPHS ensures accurate and timely reporting of all the information needed for health registries.

Population health registry data are collected by the LPHS according to standards, so that they can be compared with other data from private, local, state, regional, and national sources. With many partners working together to contribute complete data, population registries provide information for policy decisions, program implementation, and population research.

To accomplish this, members of the LPHS work together to:

- Collect data on specific health concerns to provide to population health registries in a timely manner and consistent with current standards.
- Use information from population health registries in CHAs or other analyses.

#### **Discussion Questions for Model Standard 1.3**

#### Involvement

- (a) Which population health registries are contributed to and/or maintained within the LPHS?
- (b) What partners contribute to and/or maintain population health registries?

#### Frequency

(a) How often are the data used by the LPHS for such activities? Have they been used in the past year?

#### Quality

- (a) What specific standards are in place for data collection?
- (b) What established processes are there for reporting health events to the registries? Are they followed?
- (c) What, if any, systems are in place to ensure accurate, timely, and unduplicated reporting?

#### **Usability**

(a) How are population health registries used by the LPHS?

#### Performance Measures for Model Standard 1.3

At what level does the LPHS...

1.3.1 Collect timely data consistent with current standards on specific health concerns in order to provide the data to population health registries?

No Activity Minimal Moderate Significant Optimal

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1.3.2 Use information from population health registries in CHAs or other analyses?

No Activity Minimal Moderate Significant Optimal

## Facilitate Summary: Monitor Health Status to Identify Community Health Problems

Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the three Model Standards and Essential Service 1 overall. Ask participants to refer back to any notes that they took, especially those in the Local Instrument Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 1. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 1.

Congratulations! We have completed Essential Service 1.



# Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards



#### **OVERVIEW**

#### **Facilitator Guidance**

#### **Facilitator Script and Tips**

(Total Time for Essential Service 2: approximately 2 hours 10 minutes-2 hours 30 minutes)

#### Step 1: State the Essential Service and Questions It Addresses



Time for Steps 1-3: 10-15 minutes

The activities in Essential Service 2 answer the following questions:

- Are we ready to respond to health problems or threats in our county?
- How quickly do we find out about problems?
- How effective is our response?

#### **Step 2: Define the Essential Service**

(See description from Local Instrument on page 65.)

In order to understand how ready and able we are to respond to health problems or threats, the following activities encompass Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

#### Step 3: Explore Partners Commonly Gathered for Essential Service 2

(See list of partners in Local Instrument on page 65.)

Let's look at the bottom of page 65 at the local public health system (LPHS) partners commonly gathered to discuss the performance of the LPHS in diagnosing and investigating health problems and health hazards.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to each partner announced as part of the assessment for Essential Service 2 today.
- Who do we have present with us that is not listed?
- Are there any other partners who contribute to this work who are not listed or are not present today?

#### Step 4: Facilitate Discussion to Explore the Essential Service Fully



Time for Step 4: 15-20 minutes

Thinking about the description we just heard regarding Essential Service 2, what are we doing specifically in our community to address such activities?

If a formal or informal report or presentation has been prepared in advance to describe what is occurring

Overview

related to the Essential Service, start the discussion by referring to that report or hearing that presentation and seeking reflections and reactions on its contents.

Process the information provided by the participants or by the report or expert by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standards through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Essential Service.

#### **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes						
Strengths	ngths Weaknesses Short-Term Improve Opportunities		Ement Long-Term Improvement Opportunities			

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 2.

#### **Local Instrument**

Are we ready to respond to health problems or health hazards in our county?

How quickly do we find out about problems?

How effective is our response?

Diagnosing and investigating health problems and health hazards in the community encompass the following:

- Accessing a public health laboratory capable of conducting rapid screening and high-volume testing.
- Establishing active infectious disease epidemiology programs.
- Creating technical capacity for epidemiologic investigation of disease outbreaks and patterns of the following: (a) infectious and chronic diseases, (b) injuries, (c) and other adverse health behaviors and conditions.

Partners gathered to discuss the performance of the local public health system (LPHS) in diagnosing and investigating health problems and health hazards include, but are not limited to:

The local health department or other governmental public health agency.

The local board of health or other local governing entity.

Hospitals.

Long-term care facilities.

Preschool and day care programs.
Public and private schools.
Colleges and universities.
Employers.

Managed care organizations.

Primary care clinics, including Federally Qualified Health Centers (FQHCs).

☐ Physicians.

□ Public safety and emergency response organizations.

Public health laboratories.

# Model Standard 2.1: Identifying and Monitoring Health Threats

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 2.1



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 2.1: Identifying and Monitoring of Health Threats

(See description from Local Instrument on page 69.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?

Ask, "In thinking about the description we just heard regarding this Model Standard, what are we doing specifically in our community to address such activities?" (If no report or presentation has been prepared, start the group discussion with this question).



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20–25 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **identifying and monitoring for health threats**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If a question was already addressed in the discussion, there is no need to ask it again.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Use the following list to inquire about the various data sets in the surveillance system: (Quality and Comprehensiveness)

- Infectious diseases?
- Chronic diseases?
- Intentional and unintentional injury?
- Environmental hazards?
- Maternal and child health?
- Bioterror threats?
- Social and mental health?

Use the list below to inquire about the two national/state health information guidelines: (Quality and Comprehensiveness)

- Public Health Information Network (PHIN) guidelines?
- Health Insurance Portability and Accountability Act (HIPPA)?

Ask about both information technology resources such as GIS and database analysis and expertise such as epidemiologists and statisticians.

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity in specific ways, it's time to score the Performance Measures. When thinking about the score, remember that we are scoring based on the level to which the LPHS (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about what **score best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Model Standard 2.1

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS...(ask question for the Performance Measure).

(See questions on page 70 - Local Instrument.)

#### **General Tips**

Make sure everyone understands the definition for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 2.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 2.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 2.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- · LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move on to the next Model Standard.

#### **Local Instrument**

The LPHS conducts surveillance to watch for outbreaks of disease, disasters and emergencies (both natural and manmade), and other emerging threats to public health. Surveillance data include information on reportable diseases, potential disasters and emergencies, or emerging threats. The LPHS uses surveillance data to notice changes or patterns right away, determine the factors that influence these patterns, investigate the potential dangers, and find ways to lessen the effect on public health. The best available science and technologies are used to understand the problems, determine the most appropriate solutions, and prepare for and respond to identified public health threats. To ensure the most effective and efficient surveillance, the LPHS connects its surveillance systems with state and national systems. To provide a complete monitoring of health events, all parts of the system work together to collect data and report findings.

To accomplish this, members of the LPHS work together to:

- Participate in a comprehensive surveillance system with national, state, and local partners to identify, monitor, and share information and understand emerging health problems and threats.
- Provide and collect timely and complete information on reportable diseases, potential disasters and emergencies, and emerging threats (natural and manmade).
- Ensure that the best available resources are used to support surveillance systems and activities, including information technology, communication systems, and professional expertise.

#### **Discussion Questions for Model Standard 2.1**

#### **Awareness**

(a) How many of you are aware of the LPHS contributions to surveillance system(s) designed to monitor health problems and identify health threats?

#### Frequency

(a) What is the time-frame for submitting reportable disease information to the state or the LPHS?

#### **Quality and Comprehensiveness**

- (a) Which data sets are included in the surveillance system?
- (b) How well is the surveillance system integrated with national and/or state surveillance systems?
- (c) Is the surveillance system compliant with national and/or state health information exchange guidelines?
- (d) What types of resources are available to support health problem and health hazard surveillance and investigation activities within the LPHS?

#### **Usability**

(a) How does the LPHS use the surveillance system(s) to monitor changes in the occurrence of health problems and hazards?

#### **Performance Measures for Model Standard 2.1**

At what level does the LPHS...

2.1.1 Participate in a comprehensive surveillance system with national, state, and local partners to identify, monitor, and share information and understand emerging health problems and threats?								
No Activity	Minimal	Moderate	Significant	Optimal				
0	0	0	0	0				
2.1.2 Provide and collect timely and complete information on reportable diseases and potential disasters, emergencies, and emerging threats (natural and manmade)?								
No Activity	Minimal	Moderate	Significant	Optimal				
0	0	0	0	0				
2.1.3 Ensure that the best available resources are used to support surveillance systems and activities, including information technology, communication systems, and professional expertise?								
No Activity	Minimal	Moderate	Significant	Optimal				
0	0	0	0	0				

# Model Standard 2.2: Investigating and Responding to Public Health Threats and Emergencies

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 2.2



Time for Step 1: 2 minutes

Let's take a closer look at Model Standard 2.2: Investigating and Responding to Public Health Threats and Emergencies.

(See description from Local Instrument on page 75.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Time for Step 2: 20-25 minutes

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?

Ask, "In thinking about the description we just heard regarding this Model Standard, what are we doing specifically in our community to address such activities?" (If no report or presentation has been prepared, start the group discussion with this question).



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 2.2

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20–25 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **investigating and responding to public health threats and emergencies**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If a question was already addressed in the discussion, there is no need to ask it again.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants *do not* have these lists in the Local Instrument.



Ensure you have adequate expertise regarding emergency preparedness to answer the technical questions for this Model Standard.

As participants discuss the involvement of various personnel, ensure that the following personnel are involved: (Involvement)

- Emergency management?
- State epidemiologists?
- Hazardous material response teams?
- Infectious disease specialists?
- Law enforcement?
- Medical examiners/coroner?
- Microbiologists?
- State public health laboratory director?
- Toxicologists?
- Veterinarians?
- Mental health professionals?
- Nurses?
- Pharmacists?
- Health educators?
- Environmental health specialists?

•	Mental health specialis	ts?
•	Physicians?	
	Other 2	

Use the list below to inquire if the protocols are in place for the following: (Quality and Comprehensiveness)

- Animal control?
- Vector control?
- Exposure to food-borne illness?
- Exposure to water-borne illness?
- Excessive lead levels?
- Exposure to asbestos?
- Exposure to other toxic chemicals?
- Communicable diseases?



Written processes and standards may also be referred to as "protocols." The lists provided here are used to ensure the discussion is broad and comprehensive. Use the lists to ask about specific items as needed.

Ensure various types of public health emergencies are discussed: (Quality and Comprehensiveness)

- Infectious disease outbreaks?
- Environmental health hazards and emergencies?
- Chemical threats and incidents?
- Biological agent threats?
- Radiological threats?
- Large-scale natural disasters?
- Intentional incidents?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Model Standard 2.2

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 76 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 2.2



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 2.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 2.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move on to the next Model Standard.

# **Local Instrument**

The LPHS stays ready to handle possible threats to public health. As a threat develops—such as an outbreak of a communicable disease, a natural disaster, or a biological, chemical, nuclear, or other environmental event—a team of LPHS professionals works closely together to collect and understand related data. Many partners support the response, with communication networks already in place among health-related organizations, public safety, rapid response teams, the media, and the public. In a public health emergency, a jurisdictional Emergency Response Coordinator leads LPHS partners in the local investigation and response. The response to an emergent event is in accordance with current emergency operations coordination guidelines.

To accomplish this, members of the LPHS work together to:

- Maintain written instructions on how to handle communicable disease outbreaks and toxic exposure incidents, including details about case finding, contact tracing, and source identification and containment.
- Develop written rules to follow in the immediate investigation of public health threats and emergencies, including natural and manmade disasters.
- Designate a jurisdictional Emergency Response Coordinator.
- Rapidly and effectively respond to public health emergencies according to emergency operations coordination guidelines.
- Identify personnel with the technical expertise to rapidly respond to possible biological, chemical, or nuclear public health emergencies.
- Evaluate emergency response exercises and incidents for effectiveness and opportunities for improvement (e.g., using hot washes, After Action Reports, and Improvement Plans).

#### **Discussion Questions for Model Standard 2.2**

#### Involvement

- (a) Who is the LPHS designee serving as the Emergency Response Coordinator within the jurisdiction?
- (b) How does the Emergency Response Coordinator coordinate emergency activities within the LPHS?
- (c) Does the LPHS maintain a current list of personnel with the technical expertise to respond to natural and intentional emergencies and disasters?
- (d) How does the LPHS ensure a timely response from emergency personnel, including sufficient numbers of trained professionals?
- (e) How does the LPHS mobilize volunteers during a disaster?

#### **Quality and Comprehensiveness**

- (a) How does the LPHS use written processes and standards for implementing a program of case finding, contact tracing, source identification, and containment for communicable diseases or toxic exposures?
- (b) How are LPHS personnel prepared to rapidly respond to natural and intentional disasters?

#### **Usability**

- (a) How does the LPHS evaluate public health emergency response incidents for effectiveness and opportunities for improvement (e.g., After Action Reports, Improvement Plans)?
- (b) How are the findings used to improve emergency plans and response?

### **Performance Measures for Model Standard 2.2**

At what level does the LPHS...

			nicable disease outbro act tracing, and sourc		
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	
2.2.2 Develop writte emergencies, includ			gation of public healt	h threats and	
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	
2.2.3 Designate a ju	risdictional Emerge	ncy Response Coordii	nator?		
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	
2.2.4 Prepare to rap coordination guideling	•	ic health emergencie	s according to emerge	ency operations	
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	
2.2.5 Identify personnel with the technical expertise to rapidly respond to possible biological, chemical, or and nuclear public health emergencies?					
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	
2.2.6 Evaluate incide Reports, Improveme		ss and opportunities f	or improvement (such	as After Action	
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	

# Model Standard 2.3: Laboratory Support for Investigating Health Threats

# **Facilitator Guidance**

#### Step 1: Define Model Standard 2.3



Time for Step 1: 2 minutes

Finally, we will take a look at Model Standard 2.3: Laboratory Support for Investigating Health Threats.

(See description from Local Instrument on page 81.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Time for Step 2: 15-20 minutes

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?

Ask, "In thinking about the description we just heard regarding this Model Standard, what are we doing specifically in our community to address such activities?" (If no report or presentation has been prepared, start the group discussion with this question).



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 2.3

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20-25 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **laboratory support for investigating health threats**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If a question was already addressed in the discussion, there is no need to ask it again.



Ensure you have adequate expertise regarding laboratories to answer the technical questions for this Model Standard.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Inquire as to whether lab services include analysis of clinical and environmental specimens: (Quality and Comprehensiveness)

- Identifying pathogenic microorganisms (including mycobacteria, parasites, STDs, HIV, and other viruses)?
- Identifying anti-microbial resistant infections?
- Newborn testing?
- Testing on water, air, and soil?

Laboratory services include analysis of clinical and environmental specimens, including: (Quality and Comprehensiveness)

- Biological agents?
- Chemical agents?
- Radiological agents?
- Infectious agents that are rarely encountered?
- Environmental agents that are rarely encountered?

As discussion takes place, ensure participants discuss guidelines for the following activities: (Quality and Comprehensiveness)

- Collecting samples?
- Labeling samples?

- Storing samples?
- Transporting or delivering samples?
- Determining the chain of custody with respect to the handling of laboratory samples?
- Requirements for reporting findings to the local health department having jurisdiction for specimen collection?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 82 in Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Model Standard 2.3

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

### **Step 5: Facilitate Summary: Model Standard 2.3**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 2.3. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 2.3 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

# **Local Instrument**

The LPHS has the ability to produce timely and accurate laboratory results for public health concerns. Whether a laboratory is public or private, the LPHS sees that the correct testing is done and that the results are made available on time. Any laboratory used by public health meets all licensing and credentialing standards.

To accomplish this, members of the LPHS work together to:

- Have ready access to laboratories that can meet routine public health needs for finding out what health problems are occurring.
- Maintain constant (24/7) access to laboratories that can meet public health needs during emergencies, threats, and other hazards.
- Use only licensed or credentialed laboratories.
- Maintain a written list of rules related to laboratories, for handling samples (including receiving, collecting, labeling, storing, transporting, and delivering), determining who is in charge of the samples at what point, and reporting the results.

#### **Discussion Questions for Model Standard 2.3**

#### **Quality and Comprehensiveness**

- (a) Where does the LPHS maintain ready access to laboratories able to meet routine diagnostic and surveillance needs including analysis of clinical and environmental specimens?
- (b) How does the LPHS use laboratory services to support time-sensitive investigations of public health threats, hazards, and emergencies?
- (c) What mechanisms are in place to ensure the laboratories used are all licensed and/or credentialed?
- (d) What current guidelines or protocols are in place for the handling of laboratory samples?
- (e) Are the current procedures able to stand up in a court of law, (e.g., chain of custody, coordination with law enforcement officials, Health Insurance Portability and Accountability Act (HIPAA)?) if the health event is part of a criminal act?

### **Performance Measures for Model Standard 2.3**

At what level does the LPHS...

2.3.1 Have ready acc what health problem		that can meet routine	e public health needs	for finding out	
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	
2.3.2 Maintain const	ant (24/7) access t	o laboratories that ca	n meet public health	needs during	
emergencies, threats	s, and other hazard	s?			
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	
2.3.3 Use only licens	ed or credentialed	laboratories?			
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	
2.3.4 Maintain a written list of rules related to laboratories, for handling samples (including collecting, labeling, storing, transporting, and delivering), determining who is in charge of the samples at what point, and reporting the results?					
No Activity	Minimal	Moderate	Significant	Optimal	
0	0	0	0	0	

# Facilitate Summary: Diagnose and Investigate Health Problems and Health Hazards

Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the three Model Standards and Essential Service 2 overall. Ask participants to refer back to any notes that they took, especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 2. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 2.

Congratulations! We have completed Essential Service 2.



# **Essential Service 3: Inform, Educate, and Empower People about Health Issues**



# **OVERVIEW**

# **Facilitator Guidance**

# **Facilitator Script and Tips**

(Total Time for Essential Service 3: approximately 2 hours 30 minutes – 3 hours)

Note: This Essential Service tends to take longer to facilitate because the group is often larger. Plan accordingly.

#### Step 1: State the Essential Service and Questions It Addresses



Time for Steps 1-3: 15-20 minutes

The activities in Essential Service 3 answer the following question:

How well do we keep all segments in our community informed about health issues?

#### **Step 2: Define the Essential Service**

(See description from Local Instrument on page 89.)

In order to understand how well do we keep all segments of our community informed about health issues, the following activities encompass Essential Service 3: Inform, Educate, and Empower People about Health Issues.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

#### Step 3: Explore Partners Commonly Gathered for Essential Service 3

(See list of partners in Local Instrument on page 89.)

Let's look at the bottom of page 89 at the partners commonly gathered to discuss the performance of the local public health system (LPHS) in informing, educating, and empowering people about health issues.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to each partner announced as part of the assessment for Essential Service 3 today.
- Who do we have present with us that is not listed?
- Are there any other partners who contribute to this work who are not listed or are not present today?

#### Step 4: Facilitate Discussion to Explore the Essential Service Fully



Time for Step 4: 20 minutes

Thinking about the description we just heard regarding Essential Service 3, what are we doing specifically in our community to address such activities?

Overview

If a presentation or document has been prepared in advance to describe what is occurring related to the Model Standard, start with that presentation or document.

Process the information provided by the group sharing or by the expert presentation/ documents by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

# **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes					
Strengths	Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities		

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 3.

# **Local Instrument**

Media.

How well do we keep all segments of our community informed about health issues?

Informing, educating, and empowering people about health issues encompass the following:

- Creating community development activities.
- Establishing social marketing and targeted media public communication.
- Providing accessible health information resources at community levels.
- Collaborating with personal healthcare providers to reinforce health promotion messages and programs.
- Working with joint health education programs with schools, churches, worksites, and others.

Partners gathered to discuss the performance of the local public health system (LPHS) in informing, educating, and empowering people about health issues include:

The local health department or other governmental public health agency.
The local board of health or other local governing entity.
Hospitals.
Public and private schools.
Colleges and universities.
Health educators.
Local businesses and employers.
Managed care organizations.
Faith-based organizations.
Non-profit organizations/advocacy groups.
Civic organizations.
Neighborhood organizations.
Other community/grassroots organizations.
Public Information Officers.

# Model Standard 3.1: Health Education and Promotion

# **Facilitator Guidance**

#### **Step 1: Define Model Standard 3.1**



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 3.1: Health Education and Promotion.

(See description from Local Instrument on page 94.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20-30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **health education and promotion**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If a question was already addressed in the discussion, there is no need to ask it again.



Because health promotion is something that is part of almost all programs, the discussion can be quite lengthy. Be careful on time and ensure that the discussion is in regard to overall system work in all public health areas, not just one or two topic areas by a few agencies/organizations.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Inquire as to which of the following types of information are provided and to whom: (Involvement)

- Community health status data, such as heart disease rates, cancer rates, environmental risks, etc.?
- Prevention and risk factor data, such as obesity, smoking, etc.?
- Community health needs, such as those identified through a needs assessment?

Ensure that organizations discussed include the following: (Involvement)

- Public agencies?
- Private agencies?
- Volunteer organizations?
- Non-profit organizations?
- Community groups?
- Businesses?

Use the list below for examples of health education theories: (Involvement)

- Health Belief Model.
- Stages of Change Model.
- Theory of Planned Behavior.
- Precaution Adoption Process Model.
- Social Cognitive Theory.
- Community Organization.
- Diffusion of Innovations.
- Communication Theory.

Model Standard 3.1

Use the list below to ensure that healthy behaviors are supported at all levels in a social ecological approach: (Quality and Comprehensiveness)

- Individuals?
- Interpersonal networks (e.g., families, friends, social networks)?
- Communities?

Use the list below to be sure that participants discuss several factors to identify sub-populations: (Quality and Comprehensiveness)

- Culture?
- Age?
- · Language?
- Gender?

- Socioeconomic status?
- Race/ethnicity?
- Sexual orientation?

Inquire about various settings shown in the list below: (Quality and Comprehensiveness)

- Personal healthcare delivery locations (e.g., doctor's offices, clinics, hospitals)?
- Work sites?
- Schools?
- Neighborhoods?

- Recreational facilities (e.g., public parks, health clubs)?
- Places of worship?
- Correctional facilities?

Ask about various evaluation considerations using the list below: (Quality and Comprehensiveness)

- By health issues addressed?
- By populations served?
- By LPHS partners involved?
- By settings for health education activity (e.g., school, worksite, religious institution, or community-at-large)?
- By communication mechanisms used (e.g., print, radio, television, Internet, or face-toface group encounters)?
- By program quality?
- By achievement of intended outcomes?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### **Step 4: Scoring and Consensus Building**



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in

order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 94 in Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)  Greater than 50% but no more than 75% of the activity described within the question	
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 3.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 3.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 3.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move on to the next Model Standard.

# **Local Instrument**

The LPHS designs and puts in place health promotion and health education activities to create environments that support health. These promotional and educational activities are coordinated throughout the LPHS to address risk and protective factors at the individual, interpersonal, community, and societal levels. The LPHS includes the community in identifying needs, setting priorities, and planning health promotional and educational activities. The LPHS plans for different reading abilities, language skills, and access to materials.

To accomplish this, members of the LPHS work together to:

- Provide policymakers, stakeholders, and the public with ongoing analyses of community health status and related recommendations for health promotion policies.
- Coordinate health promotion and health education activities at the individual, interpersonal, community, and societal levels.
- Engage the community in setting priorities, developing plans, and implementing health education and health promotion activities.

#### **Discussion Questions for Model Standard 3.1**

#### Involvement

- (a) How many of you provide information on community health to the general public, policymakers, and public and private stakeholders?
- (b) How do your organizations work together to plan, conduct, and implement health education and promotion activities?
- (c) How do your organizations work with others beyond your usual LPHS partners on specific health promotion activities (e.g., supermarkets and nutrition interventions)?
- (d) How do LPHS entities work with community advocates and local media outlets to publicize health promotion activities (e.g., campaigns about the public health effects of laws, media campaigns)?

#### **Quality and Comprehensiveness**

- (a) Are the health education and health promotion campaigns based on sound theory, evidence of effectiveness, and/or best practice?
- (b) How do organizations in the LPHS support healthy behavior?
- (c) How do organizations in the LPHS tailor campaigns for populations with higher risk of negative health outcomes?
- (d) How do organizations in the LPHS design campaigns to reach populations in specific settings?
- (e) How are the health education programs and health promotion campaigns evaluated?

#### **Usability**

(a) How are evaluation results used to revise and strengthen the programs?

0

#### **Performance Measures for Model Standard 3.1**

0

At what level does the LPHS...

0

3.1.1 Provide policymakers, stakeholders, and the public with ongoing analyses of community health status and related recommendations for health promotion policies? No Activity Minimal Moderate Significant **Optimal** 0 0 0 0 0 3.1.2 Coordinate health promotion and health education activities at the individual, interpersonal, community, and societal levels? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 3.1.3 Engage the community throughout the process of setting priorities, developing plans, and implementing health education and health promotion activities? Minimal Moderate Optimal No Activity Significant

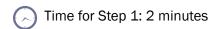
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# **Model Standard 3.2: Health Communication**

# **Facilitator Guidance**

#### Step 1: Define Model Standard 3.2



Let's take a closer look at Model Standard 3.2: Health Communication.

(See description from Local Instrument on page 99.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully

Time for Step 3: 20-25 minutes

Given the description of this Model Standard, let's explore further your LPHS's work in health communication.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If a question was already addressed in the discussion, there is no need to ask it again.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Be sure participants address guidance and policies for activities in Quality and Comprehensiveness by asking the following detail questions: (Quality and Comprehensiveness)

- Does the guidance include policies and procedures for creating, sharing, and disseminating information with partners and key stakeholders?
- Is there guidance for identifying different sectors of the population in order to create targeted public health messages for various audiences?
- Is there guidance for developing content and materials appropriate to the type of dissemination channel?
- Is there guidance for creating targeted public health messages using various channels?

Inquire as to how the LPHS monitors the following activities related to leveraging the media: (Quality and Comprehensiveness)

- The media's use of information?
- Whether or not press releases generate stories or follow-up inquiries from media outlets?
- If public health stories generate inquiries from the public?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Model Standard 3.2

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 100 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### **Step 5: Facilitate Summary: Model Standard 3.2**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 3.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 3.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move on to the next Model Standard.

# **Local Instrument**

The LPHS uses health communication strategies to contribute to healthy living and healthy communities that include the following: increasing awareness of risks to health; ways to reduce health risk factors and increase health protective factors; promoting healthy behaviors; advocating organizational and community changes to support healthy living; increasing demand and support for health services; building a culture where health is valued; and creating support for health policies, programs, and practices. Health communication efforts use a broad range of strategies, including print, radio, television, the Internet, media campaigns, social marketing, entertainment education, and interactive media. The LPHS reaches out to the community through efforts ranging from one-on-one conversations to small group communication, to communications within organizations and the community, and to mass media approaches. The LPHS works with many groups to understand the best ways to present health messages in each community setting and to find ways to cover the costs.

To accomplish this, members of the LPHS work together to:

- Develop health communication plans for media and public relations and for sharing information among LPHS organizations.
- Use relationships with different media providers (e.g., print, radio, television, and the Internet) to share health information, matching the message with the target audience.
- Identify and train spokespersons on public health issues.

#### **Discussion Questions for Model Standard 3.2**

#### Involvement

- (a) How many of your organizations have developed health communication plans?
- (b) How do your organizations work collaboratively to link the communication plans to one another?

#### **Usability**

(a) What policies and procedures are in place to coordinate responses and public announcements related to public health issues?

#### **Quality and Comprehensiveness**

- (a) Do the communications plans include policies and procedures for creating, approving, sharing, and disseminating information with partners and key stakeholders?
- (b) How are different sectors of the population identified in order to create targeted public health messages for various audiences?
- (c) How does the LPHS coordinate with local media to develop information or features on health issues?
- (d) What mechanism is are in place to document and respond to public inquiries?
- (e) Who, if anyone, has been designated as Public Information Officers (PIOs) to provide important health information and answers to public and media inquiries?
- (f) How are designated spokespersons trained in providing accurate, timely, and appropriate information on public health issues for different audiences?

#### **Performance Measures for Model Standard 3.2**

At what level does the LPHS...

3.2.1 Develop health communication plans for media and public relations and for sharing information among LPHS organizations?						
No Activity	Minimal	Moderate	Significant	Optimal		
0	0	0	0	0		
3.2.2 Use relationships with different media providers (e.g., print, radio, television, the Internet) to share health information, matching the message with the target audience?						
No Activity	Minimal	Moderate	Significant	Optimal		
0	0	0	0	0		
3.2.3 Identify and train spokespersons on public health issues?						
No Activity	Minimal	Moderate	Significant	Optimal		
0	0	0	0	0		

# **Model Standard 3.3: Risk Communication**

# **Facilitator Guidance**

#### Step 1: Define Model Standard 3.3



Time for Step 1: 2 minutes

Let's take a closer look at Model Standard 3.3: Risk Communication.

(See description from Local Instrument on page 104.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Time for Step 2: 10 minutes

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 15-20 minutes

Given the description of this Model Standard, let's explore further your LPHS's work in risk communication.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.

Model Standard 3.3

Note: Model Standard 3.3 does not have any detail lists like in the previous two Model Standards that are used to further explore the Discussion Questions.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 104 in Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 3.3



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 3.3. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 3.3 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

# **Local Instrument**

The LPHS uses health risk communications strategies to allow individuals, groups and organizations, or an entire community to make optimal decisions about their health and well-being in emergency events. The LPHS recognizes a designated Public Information Officer (PIO) for emergency public information and warning. The LPHS organizations work together to identify potential risks (crisis or emergency) that may affect the community and develop plans to effectively and efficiently communicate information about these risks. The plans include pre-event, event, and post-event communication strategies for different types of emergencies.

To accomplish this, members of the LPHS work together to:

- Develop an emergency communications plan for each stage of an emergency to allow for the
  effective creation and dissemination of information.
- Make sure that systems and mechanisms are in place and enough resources are available for a rapid emergency communication response.
- Provide crisis and emergency communication training for employees and volunteers.

#### **Discussion Questions for Model Standard 3.3**

#### Involvement

- (a) Who is involved in or aware of the LPHS emergency communications plans?
- (b) How do multiple agencies coordinate emergency communication planning within the LPHS?

#### **Quality and Comprehensiveness**

- (a) Can the emergency communication plans be adapted to different types of emergencies (e.g., disease outbreaks, natural disasters, bioterrorism)?
- (b) Do the plans include established lines of authority, reporting, and responsibilities for emergency communications teams in accordance with the National Incident Management System (NIMS)?
- (c) How do the plans alert communities, including special populations, about possible health threats or disease outbreaks?

- (d) How do the plans provide information from emergency operation center situation reports, health alerts, and meeting notes to stakeholders, partners, and the community?
- (e) What type of technology is in place to ensure rapid communication response? (e.g., local Health Alert Network, reverse 911 warning system, local public service announcements (PSAs), broadcast text, email, and fax, social networks, etc. )
- (f) What staff persons are available to develop or adapt emergency communications materials and to provide communications for all stakeholders and partners in the event of an emergency?
- (g) What type of crisis and emergency communications training is available within the LPHS for new and current staff?
- (h) How does the LPHS maintain a directory of emergency contact information for media liaisons, partners, stakeholders, and Public Information Officers?

#### **Performance Measures for Model Standard 3.3**

At what level does the LPHS...

3.3.1 Develop an emeffective disseminat	•	ations plan for each	stage of an emergenc	y to allow for the			
No Activity	Minimal	Moderate	Significant	Optimal			
0	0	0	0	0			
3.3.2 Make sure resources are available for a rapid emergency communication response?							
No Activity	Minimal	Moderate	Significant	Optimal			
0	0	0	0	0			
3.3.3 Provide risk communication training for employees and volunteers?							
No Activity	Minimal	Moderate	Significant	Optimal			
0	0	0	0	0			

# Facilitate Summary: Inform, Educate, and Empower People about Health Issues

Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the three Model Standards and Essential Service 3 overall. Ask participants to refer back to any notes that they took, especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 3. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 3.

Congratulations! We have completed Essential Service 3.



# Essential Service 4: Mobilize Community Partnerships to Identify and Solve Health Problems



#### **OVERVIEW**

#### **Facilitator Guidance**

#### **Facilitator Script and Tips**

(Total Time for Essential Service 4: approximately 1 hour 45 minutes – 2 hours 15 minutes)

#### **Step 1: State the Essential Service and Questions It Addresses**



Time for Steps 1-3: 15-20 minutes

The activities in Essential Service 4 answer the following question:

How well do we truly engage in local health issues?

#### **Step 2: Define the Essential Service**

(See description from Local Instrument on page 111.)

In order to understand what's going on in our community and how healthy we are as a community, the following activities encompass Essential Service 4: Mobilize Community Partnerships to Identify and Solve Health Problems.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

#### Step 3: Explore Partners Commonly Gathered for Essential Service 4

(See list of partners in Local Instrument on page 111.)

Let's look at the bottom of page 111 at the partners commonly gathered to discuss the performance of the LPHS in mobilizing community partnerships to identify and solve health problems.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to each partner announced as part of the assessment for Essential Service 4 today.
- Who do we have present with us that is not listed?
- Are there any other partners who contribute to this work who are not listed or are not present today?

#### Step 4: Facilitate Discussion to Explore the Essential Service Fully



Time for Step 4: 20 minutes

Thinking about the description we just heard regarding Essential Service 4, what are we doing specifically in our community to address such activities?

If a presentation or document has been prepared in advance to describe what is occurring related to the Model Standard, start with that presentation or document.

Overview

Process the information provided by the group sharing or by the expert presentation/ documents by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes				
Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities		
	Weaknesses			

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 4.

#### **Local Instrument**

#### How well do we truly engage people in local health issues?

Mobilizing community partnerships to identify and solve health problems encompasses the following:

- Convening and facilitating partnerships among groups and associations (including those not typically considered to be health related).
- Undertaking defined health improvement planning process and health projects, including preventive, screening, rehabilitation, and support programs.
- Building a coalition to draw on the full range of potential human and material resources to improve community health.

Partners gathered to discuss the performance of the local public health system (LPHS) in mobilizing community partnerships to identify and solve health problems include, but is not limited to:

The local health department or other governmental public health agency.	Other community/grassroots organizations.
The local board of health or other local	Public Information Officers.
governing entity.	Media.
Hospitals and clinics.	Community members.
Public and private schools.	Substance abuse or mental health
Colleges and universities.	organizations.
Health educators.	City and county governmental agencies.
Local businesses and employers.	Ministerial alliances.
Managed care organizations.	United Way.
Faith-based organizations.	Worksite wellness councils.
Non-profit organizations/advocacy groups.	Local chambers of commerce.
Civic organizations.	State and federal programs.
Neighborhood organizations.	Health-related coalition leaders.

#### **Model Standard 4.1: Constituency Development**

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 4.1



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 4.1: Constituency Development.

(See description from Local Instrument on page 116.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20–30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work with **constituency development**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.

TIP

If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Inquire about the specific communication strategies by asking the questions below: (Awareness)

- Include councils, newsletters, community/town hall meetings, and/or email list services?
- Occur on a regular basis?
- Effectively inform community constituents about public health issues and services?
- Receive an evaluation of effectiveness?
- Provide a consistent message about public health issue?

Ensure that the list is comprehensive by asking participants if it includes the organizations listed below: (Involvement)

- The local health department?
- The local governing entity (e.g., board of health)?
- Other governmental entities (e.g., state agencies, other local agencies)?
- Hospitals?
- Managed care organizations?
- Primary care clinics and physicians?
- Social service providers?
- Civic organizations?
- Professional organizations?
- Local businesses and employers?

- Neighborhood organizations?
- Faith-based institutions?
- Transportation providers?
- Educational institutions?
- Public safety and emergency response organizations?
- Environmental health agencies?
- Non-profit organizations/advocacy groups?
- Local officials who impact policy and fiscal decisions?
- Other community organizations?

Offer the following methods to spur discussion from participants: (Involvement)

- Online surveys and data collection?
- Community/town hall meetings?
- Ballot votes?
- Community surveys?

- Focus groups?
- Interviews?
- Other \_\_\_\_\_\_\_?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

Model Standard 4.1

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 117 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 4.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 4.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 4.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move on to the next Model Standard.

#### **Local Instrument**

The LPHS actively identifies and involves community partners—the individuals and organizations (constituents) with opportunities to contribute to the health of communities. These stakeholders may include health, transportation, housing, environmental, and non-health related groups, and community members. The LPHS manages the process of establishing collaborative relationships among these and other potential partners. Groups within the LPHS communicate well with one another, resulting in a coordinated, effective approach to public health, so that the benefits of public health are understood and shared throughout the community.

To accomplish this, members of the LPHS work together to:

- Follow an established process for identifying key constituents related to overall public health interests and particular health concerns.
- Encourage constituents to participate in CHA, planning, and improvement efforts.
- Maintain a complete and current directory of community organizations.
- Create forums for communication of public health issues.

#### **Discussion Questions for Model Standard 4.1**

#### **Awareness**

(a) How is awareness regarding the importance of public health issues developed with the community-at-large and organizations within the LPHS?

#### Involvement

- (a) What organizations are active parts of the LPHS?
- (b) How are new individuals/groups identified for constituency building?
- (c) How are constituents encouraged to participate in improving community health?
- (d) How are community members engaged to improve health?

#### **Quality and Comprehensiveness**

- (a) Does the LPHS maintain a current and accessible directory of organizations that comprise it?
- (b) What is the LPHS' process for identifying key constituents or stakeholders?
- (c) How does the LPHS maintain names and contact information for individuals and key constituent groups?

#### **Usability**

- (a) How accessible is the directory of LPHS organizations?
- (b) How does the LPHS create forums for communication of public health issues?

0

#### Performance Measures for Model Standard 4.1

0

At what level does the LPHS...

0

4.1.1 Maintain a complete and current directory of community organizations? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 4.1.2 Follow an established process for identifying key constituents related to overall public health interests and particular health concerns? No Activity Minimal Moderate Significant **Optimal** 0 0 0 0 0 4.1.3 Encourage constituents to participate in activities to improve community health? Minimal Significant No Activity Moderate **Optimal** 0 0 0 0 0 4.1.4 Create forums for communication of public health issues? No Activity Minimal Moderate Significant Optimal

0

0

#### **Model Standard 4.2: Community Partnerships**

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 4.2



Let's take a closer look at Model Standard 4.2: Community Partnerships.

(See description from Local Instrument on page 122.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Given the description of this Model Standard, let's explore further your LPHS's work with community partnerships.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Use the list of questions below to solicit further detail about specific ways partnerships may interact: (Involvement)

- Exchange information?
- Alter or align activities related to the Essential Public Health Services?
- Conduct collaborative decision-making and action?
- Optimize resources to deliver Essential Public Health Services?
- Share responsibilities to deliver Essential Public Health Services?
- Include a broad representation of the community?

Use the list below to foster discussion about various types of activities of the committee: (Quality and Comprehensiveness)

- Participate in the CHA process?
- Participate in the implementation of a CHIP?
- Monitor and evaluate progress toward prioritized goals?
- Leverage community resources?
- Meet regularly?

Foster dialogue by asking if the review of effectiveness includes the components listed below: (Quality and Comprehensiveness)

- Effectiveness of partnership participation in solving health problems?
- Satisfaction of constituents with partnership efforts?
- Expertise and system capacity needed to conduct partnership building activities?
- Identification of actions to improve the partnership process and capacity?
- Implementation of actions recommended to improve the partnership process and capacity?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

Model Standard 4.2

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 122 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### **Step 5: Facilitate Summary: Model Standard 4.2**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 4.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 4.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

#### **Local Instrument**

The LPHS encourages individuals and groups to work together so that community health may be improved. Public, private, and voluntary groups—through many different levels of information sharing, activity coordination, resource sharing, and in-depth collaborations—strategically align their interests to achieve a common purpose. By sharing responsibilities, resources, and rewards, community partnerships allow each member to share its expertise with others and strengthen the LPHS as a whole. A community group follows a collaborative, dynamic, and inclusive approach to community health improvement; it may exist as a formal partnership, such as a community health planning council or as a less formal community group.

To accomplish this, members of the LPHS work together to:

- Establish community partnerships and strategic alliances to provide a comprehensive approach to improving health in the community.
- Establish a broad-based community health improvement committee.
- Assess how well community partnerships and strategic alliances are working to improve community health.

# Involvement (a) What types of partnerships exist in the community to maximize public health improvement activities? (b) How do organizations within these partnerships interact? (c) If there is a broad-based community health improvement committee, what does the committee do? Quality and Comprehensiveness (a) In what types of activities does the LPHS engage? (b) How does the LPHS review the effectiveness of community partnerships and strategic alliances?

#### Performance Measures for Model Standard 4.2

At what level does the LPHS...

4.2.1 Establish comr to improving health i	• •	and strategic allianc	es to provide a compi	rehensive approach
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
4.2.2 Establish a bro	ad-based communi	ty health improveme	nt committee?	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
4.2.3 Assess how well community partnerships and strategic alliances are working to improve community health?				
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

### Facilitate Summary: Mobilize Community Partnerships to Identify and Solve Health Problems

Time

Time for Summary: 5 minutes

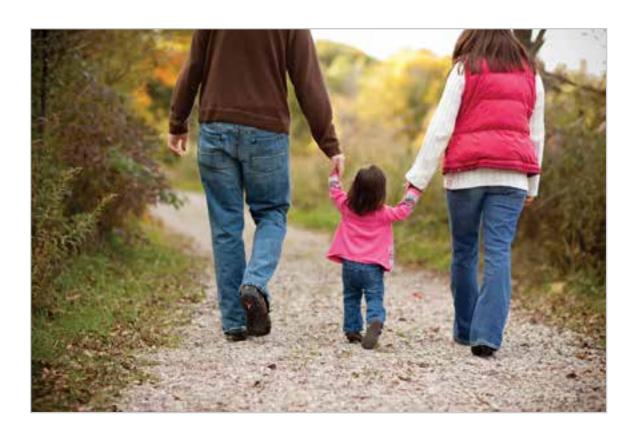
Facilitate a wrap-up summary discussion of the two Model Standards and Essential Service 4 overall. Ask participants to refer back to any notes that they took, especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 4. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 4.

Congratulations! We have completed Essential Service 4.



## Essential Service 5: Develop Policies and Plans That Support Individual and Community Health Efforts



#### **OVERVIEW**

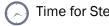
#### **Facilitator Guidance**

#### Facilitator Script and Tips

(Total Time for Essential Service 5: approximately 2 hours and 45 minutes – 3 hours and 10 minutes)

Note: This Essential Service has four Model Standards and thus takes longer to facilitate. Plan accordingly.

#### Step 1: State the Essential Service and Questions It Addresses



Time for Steps 1-3: 15-20 minutes

The activities in Essential Service 5 answer the following questions:

- What local policies in both the government and private sector promote health in my community?
- How well are we setting healthy local policies?

#### **Step 2: Define the Essential Service**

(See description from Local Instrument on page 129.)

In order to understand what's going on in our community and how healthy we are as a community, the following activities encompass Essential Service 5: Develop Policies and Plans That Support Individual and Community Health Efforts.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

#### Step 3: Explore Partners Commonly Gathered for Essential Service 5

(See list of partners in Local Instrument on pages 129-130.)

Let's look at pages 129–130 at the partners commonly gathered to discuss the performance of the local public health system (LPHS) in developing policies and plans that support individual and community health efforts.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to
  each partner announced as part of the assessment for Essential Service 5 today.
- Who do we have present with us that is not listed?
- Are there any other partners who contribute to this work who are not listed or are not present today?

#### Step 4: Facilitate Discussion to Explore the Essential Service Fully



Time for Step 4: 20 minutes

Thinking about the description we just heard regarding Essential Service 5, what are we doing specifically in our community to address such activities?

Overview

If a formal or informal report or presentation has been prepared in advance to describe what is occurring related to the Essential Service, start with that presentation or document.

Process the information provided by the group sharing or by the expert presentation/ documents by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 5.

#### **Local Instrument**

Civic organizations.

What local policies in both the government and private sector promote health in my community?

How well are we setting healthy local policies?

Developing policies and plans that support individual and community health efforts encompasses the following:

- Ensuring leadership development at all levels of public health.
- Ensuring systematic community-level and state-level planning for health improvement in all jurisdictions.
- Developing and tracking measurable health objectives from the community health improvement plan (CHIP) as a part of a continuous quality improvement plan.
- Establishing joint evaluation with the medical healthcare system to define consistent policies regarding prevention and treatment services.
- Developing policy and legislation to guide the practice of public health.

tners gathered to discuss the performance of the local public health system (LPHS) in developing policies I plans that support individual and community health efforts include, but are not limited to:
The local health department or other governmental public health agency.
The local board of health or other local governing entity.
Hospitals.
Health officer/public health director.
Elected officials and policymakers.
Public health attorneys.
Community health planners.
Law enforcement agencies and emergency services personnel.
Healthcare providers.
Colleges and universities.
Local businesses and employers.
Managed care organizations.
Faith-based organizations.
Non-profit organizations/advocacy groups.

Neighborhood organizations and other community/grassroots organizations.

#### Essential Service 5

#### Overview

Media.
Indian Health Service.
Community development organizations.
Community residents.
Department of transportation.
City planners.
Mental health and substance abuse organizations.
Department of Parks and Recreation.
Local foundations.
Public interest law groups.
Professional associations.

#### Model Standard 5.1: Governmental Presence at the Local Level

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 5.1

Time for Steps 1–2: 10 minutes

(See description from Local Instrument on page 134.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.



Many of the Discussion Questions focus on the local public health government authority and then the LPHS. Be clear to the group that scoring will be based on the entire LPHS even if some questions focus only on the local health department of local public health government.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully

Time for Step 3: 20–25 minutes

Given the description of this Model Standard, let's explore further your LPHS's work with government at the local level.

Model Standard 5.1

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Foster discussion regarding the type of support for accreditation preparation by asking about the activities below: (Involvement)

- Participating in completing the pre-requisites (community health assessment (CHA), CHIP, and strategic plan)?
- Allocating funding for application fees?

Inquire about whether the following resources are available: (Quality and Comprehensiveness)

- Legal counsel on issues related to providing Essential Public Health Services?
- Funding for mandated public health programs?
- Funding for needed public health programs, as identified by the community?
- The personnel required to deliver Essential Public Health Services, including a designated local health official?
- The facilities, equipment, and supplies required to deliver EPHS?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### **Step 4: Scoring and Consensus Building**



Time for Step 4: 10-15 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 135 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 5.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 5.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 5.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

#### **Local Instrument**

The LPHS includes a local health department (which could also be another governmental entity dedicated to public health). The LPHS works with the community to make sure a strong local health department exists and that it is doing its part in providing 10 Essential Public Health Services. The local health department may be a regional health agency with more than one local area (e.g., city, county, etc.) under its jurisdiction. The local health department is accredited through the PHAB's national voluntary public health department accreditation program.

To accomplish this, members of the LPHS work together to:

- Support the work of the local health department to ensure the 10 Essential Public Health Services are provided.
- See that the local health department is accredited through PHAB's voluntary, national public health department accreditation program.
- Ensure that the local health department has enough resources to do its part in providing Essential Public Health Services.

#### **Discussion Questions for Model Standard 5.1**

#### Involvement

- (a) What type of governmental local public health presence (i.e., local health department) within the LPHS is available to *ensure* the provision of the 10 Essential Public Health Services to the community?
- (b) How is the local health department being supported to prepare for and obtain voluntary, national public health department accreditation?

#### Frequency

(a) How often does the LPHS ensure that the local health department has enough resources to do its part in providing the 10 Essential Public Health Services?

#### **Quality and Comprehensiveness**

- (a) How does the local health department document its statutory, chartered, and/or legal responsibilities?
- (b) How does the local health department assess its functions against national standards for public health departments as defined by the Public Health Accreditation Board (PHAB)?
- (c) What types of services does the local health department provide?
- (d) How does the LPHS ensure the availability of resources for the local health department's contributions to the 10 Essential Public Health Services?
- (e) How does the local health department work with the state health department (or public health agency) and other state partners to ensure the provision of public health services?

#### **Performance Measures for Model Standard 5.1**

At what level does the LPHS...

0

5.1.1 Support the work of the local health department (or other governmental local public health entity) to make sure the 10 Essential Public Health Services are provided? No Activity Minimal Moderate Significant **Optimal** 0 0 0 0 0 5.1.2 See that the local health department is accredited through the PHAB's voluntary, national public health department accreditation program? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 5.1.3 Ensure that the local health department has enough resources to do its part in providing **Essential Public Health Services?** Moderate Significant Optimal No Activity Minimal 0 0 0 0

#### **Model Standard 5.2: Public Health Policy Development**

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 5.2



(See description from Local Instrument on page 139.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully

Time for Step 3: 20-30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work with **public health policy development**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Use the list below to foster discussion about specific types of activities to influence or inform the public health policy process: (Involvement)

- Preparation of informational materials, (e.g., issue briefs, media statements, talking points, fact sheets)?
- Public testimony?
- Participation on local boards or advisory panels responsible for health policy advisement?
- Participation on state and/or national boards or advisory panels responsible for health policy advisement?

Ask if the reviews include the activities listed below: (**Frequency**)

- Input from community constituents, including those affected by the policy?
- An assessment of outcomes and/or consequences?
- An examination of potential community health impact of other policy areas (e.g., fiscal, social, environmental)?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 140 – Local Instrument.)

Model Standard 5.2

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### **Step 5: Facilitate Summary: Model Standard 5.2**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 5.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 5.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

#### **Local Instrument**

The LPHS develops policies that will prevent, protect, or promote the public's health. Public health problems, possible solutions, and community values are used to inform the policies and any proposed actions, which may include new laws or changes to existing laws. Additionally, current or proposed policies that have the potential to affect the public's health are carefully reviewed for consistency with public health policy through health impact assessments (HIAs).

The LPHS and its ability to make informed decisions are strengthened by community member input. The LPHS, together with community members, works to identify gaps in current policies and needs for new policies to improve the public's health. The LPHS educates the community about policies to improve public health and serves as a resource to elected officials who establish and maintain public health policies.

To accomplish this, members of the LPHS work together to:

- Contribute to new or modified public health policies by engaging in activities that inform the policy development process and facilitate community involvement.
- Alert policymakers and the community of the possible public health effects (both intended and unintended) from current and/or proposed policies.
- Review existing policies at least every three to five years.

#### **Discussion Questions for Model Standard 5.2**

#### **Awareness**

(a) How does the LPHS alert policymakers and the general public of public health impacts from current and/or proposed policies?

#### Involvement

- (a) How does the LPHS contribute to the development of public health policies?
- (b) How does the LPHS engage constituents in identifying and analyzing issues?
- (c) How does the LPHS engage in conducting health impact assessments (HIAs)?
- (d) Within the past year, how has the LPHS been involved in activities that influenced or informed the public health policy process?

#### **Quality and Comprehensiveness**

- (a) How does the LPHS support prevention and protection policies related to health inequities within the community?
- (b) How does the LPHS work together to see that public health considerations become a part of all policies?

#### **Frequency**

- (a) Does the LPHS conduct reviews of public health policies at least every three to five years?
- (b) How often are HIAs developed and used?

At what level does the LPHS...

#### Performance Measures for Model Standard 5.2

5.2.1 Contribute to public health policies by engaging in activities that inform the policy development process?

No Activity

Minimal

Moderate

Significant

Optimal

5.2.2 Alert policymakers and the community of the possible public health effects (both intended and unintended) from current and/or proposed policies?

No Activity Minimal Moderate Significant Optimal

5.2.3 Review existing policies at least every three to five years?

No Activity Minimal Moderate Significant Optimal

#### Model Standard 5.3: Community Health Improvement Process and Strategic Planning

#### **Facilitator Guidance**

#### **Step 1: Define Model Standard 5.3**

Time for Step 1: 2 minutes

(See description from Local Instrument on page 145.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully

Time for Step 3: 20–25 minutes

Given the description of this Model Standard, let's explore further your LPHS's work with the **community** health improvement process and strategic planning.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.

Model Standard 5.3



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

To ensure broad-based involvement of all LPHS partners, use the list below to determine which organizations have been involved: (Involvement)

- Community residents?
- Local health department?
- The local health department's governing entity (e.g., board of health)?
- Other governmental entities?
- Hospitals?
- Managed care organizations?
- Primary care clinics and physicians?
- Social service providers?
- Civic organizations?
- Professional organizations?
- Local businesses and employers?
- Neighborhood organizations?
- Faith institutions?
- Transportation providers?
- Educational institutions?
- Public safety and emergency response organizations?
- Environmental or environmental-health agencies?
- Non-profit organizations/advocacy groups?
- Local officials who impact policy and fiscal decisions?

Use the list below to ask about activities that may be included: (Quality and Comprehensiveness)

- Information from CHAs?
- Issues and themes identified by the community?
- Identification of community assets and resources?

- Prioritization of community health issues?
- Development of measurable health objectives?

Ask participants about specific accountability activities: (Usability)

- Agreed to defined responsibilities and timetables for activities?
- Started to implement these strategies?
- Determined how to effectively use the community assets and resources that were identified?

Wrap-up question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 146 – Local Instrument.)

Model Standard 5.3

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### **Step 5: Facilitate Summary: Model Standard 5.3**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 5.3. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 5.3 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

The LPHS seeks to improve community health by looking at it from many sides, such as environmental health, healthcare services, business, economic, housing, land use, health equity, and other concerns that impact public health. The LPHS leads a community-wide effort to improve community health by gathering information on health problems, identifying the community's strengths and weaknesses, setting goals, and increasing overall awareness of and interest in improving the health of the community. This community health improvement process provides ways to develop a community-owned community health improvement plan (CHIP) that will lead to a healthier community. With the community health improvement effort in mind, each organization in the LPHS makes an effort to include strategies related to community health improvement goals in their own organizational strategic plans.

To accomplish this, members of the LPHS work together to:

- Establish a CHIP, with broad-based and diverse participation that uses information from a community health (needs) assessment, including the perceptions of community members.
- Develop strategies to achieve community health improvement objectives, including a description of organizations accountable for specific steps.
- Connect organizational strategic plans with the CHIP.

#### Discussion Questions for Model Standard 5.3

#### **Awareness**

(a) What CHA and planning tools are used by the LPHS (e.g., Mobilizing for Action through Planning and Partnerships (MAPP), Protocol for Assessing Community Excellence in Environmental Health (PACE EH))?

#### Involvement

(a) What organizations are involved in CHA and improvement planning processes?

#### **Frequency**

(a) Does the LPHS have plans to revisit CHA and improvement planning processes in three to five years?

#### **Quality and Comprehensiveness**

- (a) What types of activities are involved in CHA and improvement planning processes?
- (b) Does the process result in the development of a CHIP?
- (c) How is the CHIP linked to a state health improvement plan?
- (d) How are the strategic plans of LPHS partner organizations, including the local health department, aligned with the CHIP?

#### **Usability**

- (a) How has the LPHS developed strategies to address community health objectives?
- (b) How are the individuals or organizations accountable for implementing the identified strategies?

#### **Performance Measures for Model Standard 5.3**

At what level does the LPHS...

E 2 1 Fotoblish a CH	ID with broad book	diverse perticipation	n that was information	on from the CUA
including the percep		-	n, that uses information	on from the ChA,
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
5.3.2 Develop strate description of organi	~	•	vement objectives, inc	cluding a
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
5.3.3 Connect organ	izational strategic p	lans with the CHIP?		
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

## Model Standard 5.4: Planning for Public Health Emergencies

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 5.4



Time for Step 1: 2 minutes

Finally, we will take a look at Model Standard 5.4: Planning for Public Health Emergencies.

(See description from Local Instrument on page 151.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Time for Step 2: 15 minutes

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20-25 minutes

Given the description of this Model Standard, let's explore further your LPHS's work with **planning for public health emergencies**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.

Model Standard 5.4



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Use the list below to ask about broad representation from the LPHS for the task force: (Involvement)

- Local health department?
- State public health agency?
- State laboratory (if separate from agency)?
- City/County/State government (other than the state public health agency)?
- Schools (i.e., public education)?
- Emergency management agency?
- Environmental agencies with responsibilities for fire, health, water, air quality, and consumer safety?
- Health organizations (including urgent care centers, private physicians' offices, nursing homes, custodial care facilities, home healthcare provider agencies, hospitals, poison centers, pharmacies, primary and community health centers, mental health, and occupational health)?
- Local emergency planning committee?
- National Guard?
- Private sector (i.e., trade and business organizations, industry and labor)?
- Public information office for local jurisdiction?
- Public safety (i.e., fire, police)?
- Public works/sanitation?
- Transportation systems?
- Volunteer organizations (e.g., Red Cross)?
- Veterinarians?
- Coroner's office?

Does the LPHS have an all-hazards emergency preparedness and response plan which includes the following: (Quality and Comprehensiveness?)

- Description of public health disasters and emergencies that might trigger its implementation?
- Alignment with existing plans such as:
  - State/local emergency management plans?
  - Hospital disaster plans?

- Pre-hospital triage protocols?
- Surge capacity plans?
- National Incident Management System (NIMS)?
- Risk communication plans and protocols?
- Mental health plans?
- Vulnerability assessment plans?
- Clear protocols and standard operating procedures for emergency response that include:
  - Descriptions of the organizational responsibilities and roles of all plan participants?
  - Established chain-of-command among plan participants?
  - Protocols for all Emergency Support Functions (e.g., FEMA system)?
  - Protocols to alert affected populations?
  - Protocols for alerting disabled persons and vulnerable populations?
  - Evacuation plan?
  - Plans for mass casualty care?
- Community assets that could be mobilized by plan participants to respond to an emergency?
- Procedures for receipt and deployment of assets from the Strategic National Stockpile?
- Plans for remediation and long-term recovery?

Ask which of the following activities are included in testing: (Quality and Comprehensiveness)

- Tabletop drills?
- Functional drills?
- Full scale drills?
- Other \_\_\_\_\_?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### **Step 4: Scoring and Consensus Building**



Time for Step 4: 5 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in

Model Standard 5.4

order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 152 - Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### **Step 5: Facilitate Summary: Model Standard 5.4**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 5.4. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 5.4 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

The LPHS adopts an emergency preparedness and response plan that describes what each organization in the system should be ready to do in a public health emergency. The plan describes community interventions necessary to prepare, mitigate, respond, and recover from all types of emergencies, including both natural and intentional disasters. The plan also looks at challenges of possible events, such as biological, chemical, or nuclear events. Practicing for possible events takes place through regular exercises or drills. A workgroup sees that the necessary organizations and resources are included in the planning and practicing for all types of emergencies. The workgroup uses national standards (e.g., CDC's Public Health Emergency Preparedness Capabilities) to advance local preparedness planning efforts.

To accomplish this, members of the LPHS work together to:

- Support a workgroup to develop and maintain preparedness and response plans.
- Develop a plan that defines when it would be used, who would do what tasks, what standard
  operating procedures would be put in place, and what alert and evacuation protocols would
  be followed.
- Test the plan through regular drills and revise the plan as needed, at least every two years.

#### Discussion Questions for Model Standard 5.4

#### Involvement

(a) Which LPHS organizations participate in a task force or coalition of community partners to develop and maintain local and/or regional emergency preparedness and response plans?

#### **Frequency**

(a) How often is the All-Hazards Emergency Preparedness and Response Plan reviewed and, if appropriate, revised?

#### **Quality and Comprehensiveness**

- (a) Does the LPHS have an All-Hazards Emergency Preparedness and Response Plan? What is included?
- (b) Does the plan follow national standards?
- (c) How does the LPHS test the plan through simulations or "mock events"?

#### **Usability**

(a) How is the plan evaluated? Are opportunities for improvement identified and implemented?

At what level does the LPHS...

#### **Performance Measures for Model Standard 5.4**

5.4.1 Support a work	kgroup to develop a	nd maintain emerger	ncy preparedness and	response plans?
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
	asks, what standar	d operating procedur	n that defines when it es would be put in pla	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
5.4.3 Test the plan the	hrough regular drills	and revise the plan	as needed, at least ev	ery two years?
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

# Facilitate Summary: Develop Policies and Plans That Support Individual and Community Health Efforts

Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the four Model Standards and Essential Service 5 overall. Ask participants to refer back to any notes that they took, especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 5. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 5.

Congratulations! We have completed Essential Service 5.



# Essential Service 6: Enforce Laws and Regulations That Protect Health and Ensure Safety



#### **OVERVIEW**

#### **Facilitator Guidance**

#### **Facilitator Script and Tips**

(Total Time for Essential Service 6: approximately 2 hours 40 minutes – 3 hours)

#### Step 1: State the Essential Service and Questions It Addresses



Time for Steps 1-3: 15-20 minutes

The activities in Essential Service 6 answer the following question:

When we enforce health regulations are we technically competent, fair, and effective?

#### **Step 2: Define the Essential Service**

(See description from Local Instrument on page 159.)

In order to understand what's going on in our community and how healthy we are as a community, the following activities encompass Essential Service 6: Enforce Laws and Regulations That Protect Health and Ensure Safety.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

#### Step 3: Explore Partners Commonly Gathered for Essential Service 6

(See list of partners in Local Instrument on page 159.)

Let's look at the bottom of page 159 at the partners commonly gathered to discuss the performance of the local public health system (LPHS) in enforcing laws and regulations that protect health and ensure safety.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to each partner announced as part of the assessment for Essential Service 6 today.
- Who do we have present with us that is not listed?
- Are there any other partners who contribute to this work who are not listed or are not present today?

#### Step 4: Facilitate Discussion to Explore the Essential Service Fully



Time for Step 4: 20 minutes

Thinking about the description we just heard regarding Essential Service 6, what are we doing specifically in our community to address such activities?

If a formal or informal report or presentation has been prepared in advance to describe what is occurring related to the Essential Service, start with that report or presentation.

Overview

Process the information provided by the group sharing or by the reports or presentation by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Essential Service through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Essential Service.

#### **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes				
Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities		
	Weaknesses			

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 6.

#### When we enforce health regulations are we technically competent, fair, and effective?

Enforcing laws and regulations that protect health and ensure safety encompasses the following:

- Enforcing sanitary codes, especially in the food industry.
- Protecting drinking water supplies.
- Enforcing clean air standards.

advocacy groups, etc.).

- Initiating animal control activities.
- Following-up hazards, preventable injuries, and exposure-related diseases identified in occupational and community settings.
- Monitoring quality of medical services (e.g., laboratories, nursing homes, and home healthcare providers).
- Reviewing new drug, biologic, and medical device applications.

Partners gathered to discuss the performance of the local public health system (LPHS) in developing policies and plans that support individual and community health efforts include:

	The local health department or other governmental public health agency.	Media.
		Public and private schools.
	The local board of health or other local governing entity.	Animal control authorities.
	Hospitals.	Fire department.
	Health officer/public health director.	District attorney and public defender.
	Public health attorneys.	Environmental health agencies.
	Law enforcement agencies and	Waste management facilities.
	emergency services personnel.	Department of transportation.
	Healthcare providers.	City planner.
	Local businesses and employers.	Corrections facilities.
	Managed care organizations.	Public housing.
	Non-profit organizations/advocacy groups (e.g., youth, human rights, etc.).	State licensing boards.
	Civic and neighborhood organizations.	Civil and human rights groups.
	Other community/grassroots organizations	Oil and gas industry representatives.
_	(e.g., tattoo shops, tanning booths, anti-	Elected officials.
	vaccine coalitions, utilities, environmental	Economists.

## Model Standard 6.1: Reviewing and Evaluating Laws, Regulations, and Ordinances

#### **Facilitator Guidance**

#### **Step 1: Define Model Standard 6.1**



Time for Steps 1-2: 10 minutes

(See description from Local Instrument on page 163.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20–30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work with **reviewing and evaluating laws**, **regulations**, **and ordinances**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

There are many different areas of public health protection laws, regulations, and ordinances. Use this list to be sure participants are thinking broadly when they respond: (**Awareness**)

- Food safety, protection and/or handling?
- Water quality?
- Air quality?
- Emergency preparedness and response?
- Quarantine and isolation?
- Injury prevention?
- Handling and disposal of toxic and chemical waste?
- Exposure-related diseases (including communicable and environmental exposures)?
- Regulations of health and social service facilities (e.g., nursing homes, home healthcare providers, and other long-term providers)?
- Day care centers and schools?
- Housing and property maintenance?
- Sanitation?
- Promotion of healthy behavior (e.g., regulations for alcohol and tobacco use, seat belt use, etc.?

Foster discussion about the reviews by asking if the reviews include the following activities: (Frequency)

- Determine whether authority is provided to carry out the Essential Public Health Services?
- Assess compliance with public health laws, regulations, and ordinances?
- Determine the effect of existing laws, regulations, and ordinances on the health of the community?
- Determine whether public health laws, regulations, and ordinances require updating?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Model Standard 6.1

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 164 - Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 6.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 6.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 6.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

The LPHS reviews existing laws, regulations, and ordinances related to public health, including laws that prevent health problems, promote, and protect public health. The LPHS looks at federal, state, and local laws to understand the authority provided to the system and the potential effect of laws, regulations, and ordinances on the health of the community. The LPHS also looks at any challenges involved in complying with laws, regulations, or ordinances, whether community members have any opinions or concerns, and whether any laws, regulations, or ordinances need to be updated.

To accomplish this, members of the LPHS work together to:

- Identify public health issues that can be and should be addressed through laws, regulations, or ordinances.
- Stay up-to-date with current laws, regulations, and ordinances that prevent, promote, or protect public health on the federal, state, and local levels.
- Review existing public health laws, regulations, and ordinances at least once every three to five years.
- Have access to legal counsel for technical assistance when reviewing laws, regulations, or ordinances.
- Involve the local public health governing entity and other local government in reviewing and developing of laws, regulations, or ordinances related to public health.

#### **Discussion Questions for Model Standard 6.1**

#### **Awareness**

(a) What has the LPHS identified that can best be addressed through laws, regulations, and ordinances?

#### **Frequency**

(a) Are the reviews conducted at least once every three to five years?

#### **Quality and Comprehensiveness**

- (a) How do LPHS organizations stay-up-to-date regarding federal, state, and local laws; regulations; and ordinances that protect public health?
- (b) Do governmental entities within the LPHS have access to legal counsel to assist with the review of laws, regulations, and ordinances related to the public's health?

#### **Usability**

(a) How are laws, regulations, and ordinances that protect the public's health reviewed by the LPHS ensure appropriate compliance?

#### **Performance Measures for Model Standard 6.1**

At what level does the LPHS...

6.1.1 Identify public	health issues that of	an be addressed thro	ough laws, regulations	s, or ordinances?
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
• •		regulations, and ordi the federal, state, ar	nances that prevent had local levels?	ealth problems or
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
6.1.3 Review existing five years?	g public health laws	, regulations, and ord	linances at least once	every three to
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
6.1.4 Have access to ordinances?	legal counsel for to	echnical assistance w	rhen reviewing laws, re	egulations, or
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

### Model Standard 6.2: Involvement in Improving Laws, Regulations, and Ordinances

#### **Facilitator Guidance**

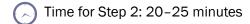
#### **Step 1: Define Model Standard 6.2**

Time for Step 1: 2 minutes

(See description from Local Instrument on page 168.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully

Time for Step 3: 15–20 minutes

Given the description of this Model Standard, let's explore further your LPHS's work with **improving laws**, **regulations**, **and ordinances**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.

Model Standard 6.2



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Ask about the following types of technical assistance: (Involvement)

- Communicating with legislators, regulatory officials, or other policymakers regarding proposed legislation, regulations, or ordinances?
- Participating in public hearings regarding proposed legislation, regulations, or ordinances?

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•	otner	2

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 168 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 6.2



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 6.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 6.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

The LPHS works to change existing laws, regulations, or ordinances—or to create new ones—when they have determined that changes or additions would better prevent health problems or protect or promote public health. To promote public health, the LPHS helps to draft the new or revised legislation, regulations, or ordinances; takes part in public hearings; and talks with lawmakers and regulatory officials.

To accomplish this, members of the LPHS work together to:

- Identify local public health issues that are inadequately addressed in existing laws, regulations, and ordinances.
- Participate in changing existing laws, regulations, and ordinances, and/or creating new laws, regulations, and ordinances to protect and promote public health.
- Provide technical assistance in drafting the language for proposed changes or new laws, regulations, and ordinances.
- Evaluate the effect of policies, laws, regulations, and ordinances

#### Discussion Questions for Model Standard 6.2

#### **Awareness**

(a) What examples are there of identified local public health issues that are not adequately addressed through existing laws, regulations, and ordinances?

#### Involvement

(a) How have LPHS organizations provided technical guidance or support to legislative, regulatory, or advocacy groups drafting proposed legislation, regulations. or ordinances?

#### Frequency

Significant

 $\bigcirc$ 

(a) How have LPHS organizations participated in developing or modifying laws, regulations, or ordinances for those public health issues in the past three to five years?

**Optimal** 

 $\bigcirc$ 

#### Performance Measures for Model Standard 6.2

Minimal

0

At what level does the LPHS...

 $\bigcirc$ 

6.2.1 Identify local public health issues that are inadequately addressed in existing laws,	regulations,
and ordinances?	

Moderate

No Activity 6.2.2 Participate in changing existing laws, regulations, and ordinances, and/or creating new laws, regulations, and ordinances to protect and promote public health? No Activity Minimal Moderate Significant Optimal

6.2.3 Provide technical assistance in drafting the language for proposed changes or new laws, regulations, and ordinances?

No Activity Minimal Moderate Significant **Optimal** 0 0 0 0 0

 $\bigcirc$ 

## Model Standard 6.3: Enforcing Laws, Regulations, and Ordinances

#### **Facilitator Guidance**

#### **Step 1: Define Model Standard 6.3**

Time for Step 1: 2 minutes

(See description from Local Instrument on page 172.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard



Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully

Time for Step 3: 15-20 minutes

Given the description of this Model Standard, let's explore further your LPHS's work with **enforcing laws**, **regulations**, **and ordinances**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.

Model Standard 6.3



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Ask if the local health department is empowered to implement the following community interventions if called upon: (Quality and Comprehensiveness)

- Implementing quarantine and isolation?
- Implementing mass immunization and dispensing clinics?

Ask the following questions regarding the LPHS activities to ensure enforcement is conducted: (Quality and Comprehensiveness)

- Does the LPHS have the appropriate power and ability to prevent, detect, manage, and contain emergency health threats?
- Does the LPHS conduct enforcement activities within the time frame stipulated in laws, regulations, or ordinances?
- Does the LPHS conduct enforcement activities in compliance with due process and civil rights protections?

Listen to be sure the following are included or ask participants if they are included in the assessment: (Quality and Comprehensiveness)

- Input from the regulated institutions and businesses regarding their perceived difficulties with enforcement?
- The extent of resistance to, or support for, enforcement activities by regulated institutions and businesses?
- Input from key stakeholders (other than regulated institutions and businesses) of those laws, regulations, and ordinances regarding the extent of their support for enforcement efforts?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### Step 4: Scoring and Consensus Building



Time for Step 4: 5 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-

quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 173 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 6.3



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 6.3. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 6.3 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

The LPHS sees that public health laws, regulations, and ordinances are followed. The LPHS knows which governmental agency or other organization has the authority to enforce any given public health-related requirement within its community, supports all organizations tasked with enforcement responsibilities, and ensures that the enforcement is conducted within the law. The LPHS has sufficient authority to respond in an emergency event. The LPHS also makes sure that individuals and organizations understand the requirements of relevant laws, regulation, and ordinances. The LPHS communicates the reasons for legislation and the importance of compliance.

To accomplish this, members of the LPHS work together to:

- Identify organizations that have the authority to enforce public health laws, regulations, and ordinances.
- Ensure that a local health department (or other governmental public health entity) has the authority to act in public health emergencies.
- Ensure that all enforcement activities related to public health codes are done within the law.
- Inform and educate individuals and organizations about relevant laws, regulations, and ordinances.
- Evaluate how well local organizations comply with public health laws.

#### **Discussion Questions for Model Standard 6.3**

#### Awareness

- (a) What authority does the local health department (i.e., governmental public health entity) within the LPHS have to enforce laws, regulations, or ordinances related to the public's health?
- (b) How are the roles and responsibilities related to the authority documented?

#### Involvement

(a) Does the LPHS provide information to the individuals and organizations that are required to comply with certain laws, regulations, or ordinances?

#### **Frequency**

(a) How often does the LPHS assess the compliance of institutions and businesses with laws, regulations, and ordinances?

#### **Quality and Comprehensiveness**

- (a) How are those responsible for enforcement activities trained on compliance and enforcement?
- (b) How is the local health department empowered through laws and regulations to implement necessary community interventions in the event of a public health emergency?
- (c) How does the LPHS ensure that all enforcement activities are conducted in accordance with laws, regulations, and ordinances?
- (d) How has the LPHS assessed the compliance of institutions and businesses in the community (e.g., schools, food establishments, day care facilities) with laws, regulations, and ordinances designed to promote and protect public health?
- (e) What information is gathered?

#### **Usability**

(a) Is dissemination of information on public health laws, regulations, and ordinances integrated with other public health activities (e.g., health education, communicable disease control, health assessment, planning)?

#### Performance Measures for Model Standard 6.3

0

At what level does the LPHS...

0

6.3.1 Identify organizations that have the authority to enforce public health laws, regulations, and ordinances? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 6.3.2 Ensure that a local health department (or other governmental public health entity) has the authority to act in public health emergencies? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 6.3.3 Ensure that all enforcement activities related to public health codes are done within the law? No Activity Minimal Moderate Significant Optimal 0  $\bigcirc$ 0 0 0 6.3.4 Educate individuals and organizations about relevant laws, regulations, and ordinances? Minimal No Activity Moderate Significant Optimal 0 0 0 0 0 6.3.5 Evaluate how well local organizations comply with public health laws? No Activity Minimal Moderate Significant Optimal

0

0

0

## Facilitate Summary: Enforce Laws and Regulations That Protect Health and Ensure Safety

Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the three Model Standards and Essential Service 6 overall. Ask participants to refer back to any notes that they took, especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 6. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 6.

Congratulations! We have completed Essential Service 6.



## Essential Service 7: Link People to Needed Personal Health Services and Assure the Provision of Healthcare When Otherwise Unavailable



#### **OVERVIEW**

#### **Facilitator Guidance**

#### **Facilitator Script and Tips**

(Total Time for Essential Service 7: approximately 2 hours - 2 hours 30 minutes)

#### Step 1: State the Essential Service and Questions It Addresses



The activities in Essential Service 7 answer the following question:

Are people in my community receiving the health services they need?

#### **Step 2: Define the Essential Service**

(See description from Local Instrument on page 179.)

In order to understand what's going on in our community and how healthy we are as a community, the following activities encompass Essential Service 7: Link People to Needed Personal Health Services and Assure the Provision of Healthcare When Otherwise Unavailable.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

#### Step 3: Explore Partners Commonly Gathered for Essential Service 7

(See list of partners in Local Instrument on page 179.)

Let's look at the bottom of page 179 at the partners commonly gathered to discuss the performance of the local public health system (LPHS) in linking people to needed personal health services and assuring the provision of healthcare when otherwise unavailable.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to
  each partner announced as part of the assessment for Essential Service 7 today.
- Who is present today but not listed here?
- Are there any other partners who contribute to this work who are not listed or are not present today?

#### Step 4: Facilitate Discussion to Explore the Essential Service Fully

Time for Step 4: 20 minutes

Thinking about the description we just heard regarding Essential Service 7, what are we doing specifically in our community to address such activities?

If a formal or informal report or presentation has been prepared in advance to describe what is occurring related to the Essential Service, start with that report or presentation.

Overview

Process the information provided by the group sharing or by the report or presentation by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes							
Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities					
	Weaknesses						

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 7.

#### Are people in my community receiving the health services they need?

Linking people to needed personal health services and assuring the provision of healthcare when otherwise unavailable (sometimes referred to as outreach or enabling services) encompass the following:

- Ensuring effective entry for socially disadvantaged and other vulnerable persons into a coordinated system of clinical care.
- Providing culturally and linguistically appropriate materials and staff to ensure linkage to services for special population groups.
- Ensuring ongoing care management.
- Ensuring transportation services.

transportation services.

Orchestrating targeted health education/promotion/disease prevention to vulnerable population groups.

Partners gathered to discuss the performance of the local public health system (LPHS) in linking people to needed personal health services and ensuring the provision of healthcare when otherwise unavailable include:

Ш	governmental public health agency.	Ш	community health centers or look-alikes.
	The local board of health or other local		Law enforcement agencies.
	governing entity.		Elected officials.
	Hospitals.  Health service providers.		Tribal and cultural leaders.
			United Way.
	ealth service recipients.		Public assistance programs (e.g., public
	Managed care organizations.		housing).
	Non-profit organizations/advocacy groups.  Nursing homes.		Lesbian, gay, bisexual, transgender (LGBT
			organizations.
	Department of Veterans' Affairs.		Social services.
	Faith-based organizations.		Public and private schools.
			Colleges and universities.
	Mental health and substance abuse organizations.		Employment assistance organizations.
	Department of transportation and other		

## Model Standard 7.1: Identifying Personal Health Service Needs of Populations

#### **Facilitator Guidance**

#### Step 1: Define Model Standard 7.1



Time for Steps 1–2: 10 minutes

Let's take a closer look at Model Standard 7.1: Identifying Personal Health Service Needs of Populations.

(See description from Local Instrument on page 183.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20–30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **identifying personal health service needs of populations**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants *do not* have these lists in the Local Instrument.

Use the list below to determine which populations the LPHS takes into account in the identification of personal health service needs: (Quality and Comprehensiveness)

- Children (less than 18 years of age)?
- Persons 65 years of age and older?
- Persons who may encounter barriers due to lack of education?
- Persons with low income?
- Persons with cultural or language barriers?
- Persons who may encounter barriers because of their race or ethnicity?
- Persons with physical disabilities?
- Persons with mental illness?
- Uninsured or under-insured persons?

- Persons who may encounter barriers due to geographic location?
- Persons with religious barriers?
- Lesbian, gay, bisexual, and transgender (LGBT) individuals?
- Persons with addictions?
- Persons coming out of correctional institutions?
- Homeless persons?
- Undocumented immigrants?

Use the list below to determine the types of personal health services that the LPHS considers: (Quality and Comprehensiveness)

- Outreach services to link people to care?
- Primary medical care (including clinical preventive services)?
- Care (case) management?
- Hospital care?
- Tertiary medical care?

- Restorative or rehabilitative care?
- Social services?
- Mental health services?
- Substance abuse treatment services?
- Oral health services?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

## Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Model Standard 7.1

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on adjacent page in Local Instrument.)

## **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

## Step 5: Facilitate Summary: Model Standard 7.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 7.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 7.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

The LPHS identifies the personal health service needs of the community and identifies the barriers to receiving these services, especially among particular groups that may have particular difficulty accessing personal health services. The LPHS has defined roles and responsibilities for the local health department (or other governmental public health entity) and other partners (e.g., hospitals, managed care providers, and other community health agencies) in relation to overcoming these barriers and providing services.

To accomplish this, members of the LPHS work together to:

- Identify groups of people in the community who have trouble accessing or connecting to personal health services.
- Identify all personal health service needs and unmet needs throughout the community.
- Defines roles and responsibilities for partners to respond to the unmet needs of the community
- Understand the reasons that people do not get the health services and healthcare they need.

## Discussion Questions for Model Standard 7.1 **Quality and Comprehensiveness** Awareness (a) What does the (a) How does the LPHS identify populations that may experience barriers to LPHS do to personal health services? understand which (b) Which populations are taken into account? personal health services are used (c) How has the LPHS identified the personal health service needs of by populations who populations in its jurisdiction, including the needs of populations who may experience may experience barriers to care? barriers to care? (d) Which types of personal health services has the LPHS assessed?

## **Performance Measures for Model Standard 7.1**

At what level does the LPHS...

At what level does the	LI 110			
7.1.1 Identify groups of personal health service	• •	mmunity who have tr	ouble accessing or co	nnecting to
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
7.1.2 Identify all person	onal health service	needs and unmet ne	eeds throughout the c	ommunity?
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
7.1.3 Defines partner	roles and respons	ibilities to respond to	the unmet needs of t	he community?
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
7.1.4 Understand the	reasons that peop	le do not get the care	they need?	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

## Model Standard 7.2: Ensuring People Are Linked to Personal Health Services

## **Facilitator Guidance**

## Step 1: Define Model Standard 7.2



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 7.2: Ensuring People Are Linked to Personal Health Services.

(See description from Local Instrument on page 188.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

## Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

## Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20–30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **ensuring people** are linked to personal health services.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Use the list below to ask participants if the LPHS links the various populations to needed health services: (Quality and Comprehensiveness)

- Children (less than 18 years of age)?
- Persons 65 years of age and older?
- Persons who may encounter barriers due to lack of education?
- Persons with low income?
- Persons with cultural or language barriers?
- Persons who may encounter barriers because of their race or ethnicity?
- Persons with physical disabilities?
- Persons with mental illness?

- Uninsured or under-insured persons?
- Persons who may encounter barriers due to geographic location?
- Persons with religious barriers?
- Lesbian, gay, bisexual, and transgender (LGBT) individuals?
- Persons with addictions?
- Persons coming out of correctional institutions?
- Homeless persons?
- Undocumented immigrants?

Ask participants if the assistance includes the services listed below: (Quality and Comprehensiveness)

- Culturally and linguistically appropriate staff?
- Culturally and linguistically appropriate materials?
- Transportation services for those with special needs?

Foster discussion about how services might be coordinated to optimize services by asking about the items below: (Usability)

- Are services targeting the same populations co-located to optimize access?
- Are services targeting the same populations coordinated among providers to optimize access?

Model Standard 7.2

- Does the coordination of services include the following providers?
- The local health department?
- Other governmental agencies providing services (e.g., social services)?
- Hospitals providing services?
- Active Managed care plans?
- Active charitable organizations?
- Organizations representing populations within the community?
- FQHCs?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

## Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 189 – Local Instrument.)

## **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

## Step 5: Facilitate Summary: Model Standard 7.2



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 7.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 7.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

The LPHS partners work together to meet the diverse needs of all populations. Partners see that persons are signed up for all benefits available to them and know where to refer people with unmet personal health service needs. The LPHS develops working relationships between public health, primary care, oral health, social services, and mental health systems and organizations that are not traditionally part of the personal health service system, such as housing, transportation, and grassroots organizations.

To accomplish this, members of the LPHS work together to:

- Connect (or link) people to organizations that can provide the personal health services they may need.
- Help people access personal health services, in a way that takes into account the unique needs of different populations.
- Help people sign up for public benefits that are available to them (e.g., Medicaid or medical and prescription assistance programs).
- Coordinate the delivery of personal health and social services so that everyone has access to the care they need.

## **Discussion Questions for Model Standard 7.2**

### Involvement

(a) How does the LPHS coordinate the delivery of personal health and social services to optimize access to services for populations who may encounter barriers to care?

## **Usability**

(a) How does the LPHS coordinate the delivery of personal health and social services to optimize access to services for populations who may encounter barriers to care?

## **Quality and Comprehensiveness**

- (a) How does the LPHS link populations to needed personal health services?
- (b) How does the LPHS ensure the provision of services to populations who may encounter barriers to care?
- (c) How does the LPHS provide assistance to vulnerable populations in accessing needed health services?
- (d) What types of initiatives does the LPHS have available to enroll eligible individuals in public benefit programs, such as Medicaid and/or other medical or prescription assistance programs?

## **Performance Measures for Model Standard 7.2**

At what level does the LPHS...

7.2.1 Connect or link people to organizations that can provide the personal health services they may need? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 7.2.2 Help people access personal health services in a way that takes into account the unique needs of different populations? No Activity Minimal Moderate Significant Optimal 0 0 0 0 7.2.3 Help people sign up for public benefits that are available to them (e.g., Medicaid or medical and prescription assistance programs)? No Activity Moderate Significant Optimal Minimal 0  $\bigcirc$ 0 0 0 7.2.4 Coordinate the delivery of personal health and social services so that everyone in the community has access to the care they need? No Activity Minimal Significant Optimal Moderate 0 0 0 0 0

## Facilitate Summary: Link People to Needed Personal Health Services and Assure the Provision of Healthcare When Otherwise Unavailable

Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the two Model Standards and Essential Service 7 overall. Ask participants to refer back to any notes that they took, especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 7. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 7.

Congratulations! We have completed Essential Service 7.



# Essential Service 8: Assure a Competent Public Health and Personal Healthcare Workforce



## **OVERVIEW**

## **Facilitator Guidance**

## Facilitator Script and Tips

(Total Time for Essential Service 8: approximately 2 hours 30 minutes – 2 hours 55 minutes)

Note: There are four Model Standards for this Essential Service. However, it usually moves along well unless there is a lot of activity going on related to this Essential Service in the local community. Plan accordingly.

## Step 1: State the Essential Service and Questions It Addresses



Time for Steps 1-3: 15-20 minutes

The activities in Essential Service 8 answer the following questions:

- Do we have a competent public health staff?
- Do we have competent healthcare staff?
- How can we be sure that our staff stays current?

## **Step 2: Define the Essential Service**

(See description from Local Instrument on page 196.)

In order to understand what's going on in our community and how healthy we are as a community, the following activities encompass Essential Service 8: Assure a Competent Public Health and Personal Healthcare Workforce.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

## Step 3: Explore Partners Commonly Gathered for Essential Service 8

(See list of partners in Local Instrument on page 196.)

Let's look at the bottom of page 196 at the partners commonly gathered to discuss the performance of the local public health system (LPHS) in assuring a competent public health and personal healthcare workforce.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to
  each partner announced as part of the assessment for Essential Service 8 today.
- Who is present today but not listed here?
- Are there any other partners who contribute to this work who are not listed or are not present today?

Overview

## Step 4: Facilitate Discussion to Explore the Essential Service Fully



Time for Step 4: 15 minutes

Thinking about the description we just heard regarding Essential Service 8, what are we doing specifically in our community to address such activities?

If a formal or informal report or presentation has been prepared in advance to describe what is occurring related to the Model Standard, start with that report or presentation.

Process the information provided by the group sharing or by the expert presentation/ documents by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

## **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes			
Strengths	Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

Overview

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 8.

Do we have competent public health staff?

Do we have competent healthcare staff?

How can we be sure that our staff stays current?

Ensuring a competent public and personal healthcare workforce encompasses the following:

- Educating, training, and assessing personnel (including volunteers and other lay community health workers) to meet community needs for public and personal health services.
- Establishing efficient processes for professionals to acquire licensure.
- Adopting continuous quality improvement and lifelong learning programs.
- Establishing active partnerships with professional training programs to ensure community-relevant learning experiences for all students.
- Continuing education in management and leadership development programs for those charged with administrative/executive roles.

Partners gathered to discuss the performance of the local public health system (LPHS) in ensuring a competent public and personal healthcare workforce include:

The local health department or other governmental public health agency.

The local board of health or other local governing entity.

Hospitals.

Colleges and universities.

Employers.

Managed care organizations.

Foundations.

Human resources departments.

Advocacy organizations.

Federally Qualified Health Centers (FQHCs) or community health centers.

Professional associations.

Local chamber of commerce.

Emergency Medical Services.

Public Health Training Centers.

## Model Standard 8.1: Workforce Assessment, Planning, and Development

## **Facilitator Guidance**

## **Step 1: Define Model Standard 8.1**



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 8.1: Workforce Assessment, Planning, and Development.

(See description from Local Instrument on page 200.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.

## Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

## Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 15-20 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around workforce assessment, planning, and development.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.

Model Standard 8.1



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Use the list below to foster discussion about the components of the workforce assessment: (Quality and Comprehensiveness)

- Include participation from multiple organizations within the LPHS?
- Determine the composition (i.e., job titles and demographics) of the workforce by occupational categories?
- Determine the size of the workforce by enumerating the number of workers in workforce categories?
- Determine existing workforce skills and experience?
- Address the role of volunteers and other lay community health workers?
- Identify areas for improvement?

Foster discussion about the types of gaps identified by asking about the following potential gaps: (Quality and Comprehensiveness)

- Workforce composition identified?
- Workforce size identified?
- Workforce skills and/or experience identified?
- Recruitment and retention shortfalls identified?

Ask participants to identify whether the results were shared with the following LPHS stakeholders: (Usability)

- Community leaders?
- Governing bodies?
- Public agencies?
- Elected officials?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

## Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 201 - Local Instrument.)

## **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

## Step 5: Facilitate Summary: Model Standard 8.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 8.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 8.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

The LPHS assesses the local public health workforce—all who contribute to providing the 10 Essential Public Health Services for the community. Workforce assessment looks at what knowledge, skills, and abilities the local public health workforce needs and the numbers and kinds of jobs the system should have to adequately prevent health problems and protect and promote health in the community. The LPHS also looks at the training that the workforce needs to keep its knowledge, skills, and abilities up to date. After the workforce assessment determines the number and types of positions the local public health workforce should include, the LPHS identifies gaps and works on plans to fill the gaps.

To accomplish this, members of the LPHS work together to:

- Assess over time the numbers and types of LPHS jobs in the public or private sector and the knowledge, skills, and abilities that they require.
- Review the information from the workforce assessment and use it to find and address gaps in the local public health workforce.
- Provide information from the workforce assessment to other community organizations and groups, including governing bodies and public and private agencies, for use in their organizational planning.

## **Discussion Questions for Model Standard 8.1**

### **Awareness**

(a) What type of public health workforce assessments have been conducted within the community?

## **Frequency**

(a) Within the past three years, has an assessment of the LPHS workforce been conducted?

## **Quality and Comprehensiveness**

- (a) What components were included in the workforce assessment?
- (b) Whether or not a formal assessment has been conducted, have shortfalls and/or gaps within the LPHS workforce been identified? If so, what are they?
- (c) How have the organizations within the LPHS implemented plans for addressing these shortfalls or gaps?
- (d) Is there a formal process to evaluate the effectiveness of plans to address workforce gaps?

## **Usability**

- (a) How is the knowledge from the workforce assessment used to develop plans to address workforce gaps?
- (b) How are results from formal or informal workforce assessments and/or gap analyses shared with LPHS organizations for use in strategic or operational plans?

## **Performance Measures for Model Standard 8.1**

At what level does the LPHS...

8.1.1 Complete a workforce assessment, a process to track the numbers and types of LPHS jobs—both public and private sector—and the associated knowledge, skills, and abilities required of the jobs?

No Activity

Minimal

Moderate

Significant

Optimal

O

Standard of the public and private assessment and use it to identify and address of

8.1.2 Review the information from the workforce assessment and use it to identify and address gaps in the LPHS workforce?

No Activity Minimal Moderate Significant Optimal

8.1.3 Provide information from the workforce assessment to other community organizations and groups, including governing bodies and public and private agencies, for use in their organizational planning?

No Activity Minimal Moderate Significant Optimal

## Model Standard 8.2: Public Health Workforce Standards

## **Facilitator Guidance**

## Step 1: Define Model Standard 8.2



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 8.2: Public Health Workforce Standards

(See description from Local Instrument on page 205.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

## Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

## Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 15-20 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **public health workforce standards**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.



If the participants have trouble beginning this discussion, ask specifically about their jobs and coworkers by asking what types of required certifications or licensures are needed.

Note: There are no lists to use to further explore the Discussion Questions for Model Standard 8.2.

## Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 206 – Local Instrument.)

Model Standard 8.2

## **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

## **Step 5: Facilitate Summary: Model Standard 8.2**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 8.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 8.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

The LPHS maintains standards to see that workforce members are qualified to do their jobs, with the certificates, licenses, and education that are required by law or by local, state, or federal guidance. Information about the knowledge, skills, and abilities that are needed to provide the 10 Essential Public Health Services are used in personnel systems, so that position descriptions, hiring, and performance evaluations of workers are based on public health competencies.

To accomplish this, members of the LPHS work together to:

- Ensure that all members of the local public health workforce have the required certificates, licenses, and education needed to fulfill their job duties and meet all legal obligations.
- Develop and maintain job standards and position descriptions based in the core knowledge, skills, and abilities needed to provide the 10 Essential Public Health Services.
- Base the hiring and performance review of members of the local public health workforce in public health competencies.

## **Discussion Questions for Model Standard 8.2**

## **Quality and Comprehensiveness**

- (a) What types of guidelines, licensure, and/or certification requirements are required for positions within the LPHS organizations that deliver the 10 Essential Public Health Services?
- (b) How do organizations within the LPHS make sure they comply with those guidelines, licensure, and/or certification requirements?
- (c) Do most or all organizations within the LPHS have written job standards and/or position descriptions for all personnel delivering the 10 Essential Public Health Services? Are these job standards tied to public health competencies?
- (d) Do most or all organizations within the LPHS conduct annual performance evaluations?
- (e) What type of performance evaluations are conducted within LPHS organizations?

## **Performance Measures for Model Standard 8.2**

At what level does the LPHS...

8.2.1 Ensure that all	members of the lo	cal public health work	xforce have the require	ed certificates.
		-	comply with legal requ	· ·
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
8.2.2 Develop and m skills, and abilities n	•	•	riptions based in the o	ore knowledge,
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
8.2.3 Base the hiring health competencies	-	review of members o	f the public health wo	rkforce in public
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

## Model Standard 8.3: Life-Long Learning through Continuing Education, Training, and Mentoring

## **Facilitator Guidance**

## Step 1: Define Model Standard 8.3



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 8.3: Life-Long Learning through Continuing Education, Training, and Mentoring.

(See description from Local Instrument on page 211.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

## Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 8.3

## Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20-30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **life-long learning through continuing education**, **training**, **and mentoring**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Ask participants about any of the following that they do not mention in discussion: (Involvement)

- Distance learning technology?
- National, state, local, and regional conferences?
- Staff cross-training?
- Coaching, mentoring and modeling?
- Other \_\_\_\_\_?

Use the list below to ask participants about whether there are opportunities to develop specific core competencies: (Quality and Comprehensiveness)

- Analytic skills/assessment skills?
- Basic public health science skills?
- Cultural competency skills?
- Communications skills?
- Community dimensions of practice skills?
- Leadership and systems thinking skills?
- Financial planning and management skills?
- Policy development/program planning skills?

Ask participants whether or not training opportunities include the following: (Quality and Comprehensiveness)

- An understanding of the Essential Public Health Services?
- Cultural competence to interact with colleagues and community members?
- An understanding of the multiple determinants of health to develop more effective public health interventions such as:

- Culture?
- · Race/ethnicity?
- Gender?
- Economic status?
- Educational attainment?
- Genetic predisposition?
- Environmental influences (natural and built)?

Ask about the specific incentives using the list below: (Quality and Comprehensiveness)

- Career advancement?
- Time off for coursework or conferences?
- Tuition reimbursement?
- Recognition by supervisors?
- Registration and paid attendance to conferences and meetings?
- Other \_\_\_\_\_\_?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

## Step 4: Scoring and Consensus Building



Time for Step 4: 10-15 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 212 - Local Instrument.)

Model Standard 8.3

## **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

## **Step 5: Facilitate Summary: Model Standard 8.3**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 8.3. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 8.3 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

The LPHS encourages life-long learning for the local public health workforce. Both formal and informal opportunities in education and training are available to the workforce, including workshops, seminars, conferences, and online learning. Experienced staff persons are available to coach and advise newer employees. Interested workforce members have the chance to work with academic and research institutions, particularly those connected with schools of public health, public administration, and population health. As the academic community and the local public health workforce collaborate, the LPHS is strengthened.

The LPHS trains its workforce to recognize and address the unique culture, language, and health literacy of diverse consumers and communities and to respect all members of the community. The LPHS also educates its workforce about the many factors that can influence health, including interpersonal relationships, social surroundings, physical environment, and individual characteristics (such as economic status, genetics, behavioral risk factors, and healthcare).

To accomplish this, members of the LPHS work together to:

- Identify education and training needs and encourage the workforce to participate in available education and training.
- Provide ways for workers to develop core skills related to the 10 Essential Public Health Services.
- Develop incentives for workforce training, such as tuition reimbursement, time off for attending class, and pay increases.
- Create and support collaborations between organizations within the LPHS for training and education
  (e.g., practice and academic collaborations between public health workforce members and/or
  healthcare professionals and the faculty and students of academic institutions). Continually train
  the public health workforce to deliver services in a culturally competent manner and understand
  social determinants of health.

## Discussion Questions for Model Standard 8.3

## Involvement

(a) What type of opportunities are there for interaction between staff of LPHS organizations and faculty from academic and research institutions, particularly those connected with schools of public health?

## **Usability**

(a) Do organizations within the LPHS dedicate resources, such as a budget and personnel, for training and education?

## **Quality and Comprehensiveness**

- (a) How does the LPHS identify education and training needs for workforce development? What types of workforce development opportunities are encouraged and/or provided?
- (b) How are updates and refresher courses delivered within the LPHS for key public health issues (e.g., HIPAA, nondiscrimination, and emergency preparedness)?
- (c) How does the LPHS provide opportunities for all personnel to develop core public health competencies?
- (d) How comprehensive are the training opportunities?
- (e) What types of incentives are provided to the workforce to participate in educational and training experiences?

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## **Performance Measures for Model Standard 8.3**

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At what level does the LPHS... 8.3.1 Identify education and training needs and encourage the public health workforce to participate in available education and training? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 8.3.2 Provide ways for public health workers to develop core skills related to the 10 Essential Public **Health Services?** No Activity Minimal Moderate Significant Optimal 0 0 0 0 8.3.3 Develop incentives for workforce training, such as tuition reimbursement, time off for attending class, and pay increases? No Activity Minimal Moderate Significant **Optimal** 0 0 0 0 8.3.4 Create and support collaborations between organizations within the LPHS for training and education? No Activity Minimal Moderate Significant Optimal 0 8.3.5 Continually train the public health workforce to deliver services in a cultural competent manner and understand the social determinants of health? No Activity Minimal Significant Moderate Optimal

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0

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## Model Standard 8.4: Public Health Leadership Development

## **Facilitator Guidance**

## Step 1: Define Model Standard 8.4



Time for Steps 1-2: 10 minutes

Finally, we will take a look at Model Standard 8.4: Public Health Leadership Development.

(See description from Local Instrument on page 216.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

## Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 8.4

## Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 15-20 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **public health leadership development**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Are potential leaders encouraged to attend formal leadership training such as: (Quality and Comprehensiveness)

- National Public Health Leadership Institute?
- Regional or state public health leadership institutes?
- Executive management seminars or programs?
- Graduate programs in leadership/management?
- Mentoring personnel in middle management/supervisory positions?
- Promoting leadership at all levels within organizations that comprise the LPHS?
- Establishing financial resources to support leadership development on an ongoing basis?

•	Other	•

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

## Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the **score that best describes the current level of activity within the system** shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 217 – Local Instrument.)

## **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

## Step 5: Facilitate Summary: Model Standard 8.4



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 8.4. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 8.4 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Leadership within the LPHS is demonstrated by organizations and individuals that are committed to improving the health of the community. Leaders work to continually develop the LPHS, create a shared vision of community health, find ways to achieve the vision, and ensure that local public health services are delivered. Leadership may come from the local health department, from other governmental agencies, non-profits, the private sector, or from several LPHS partners. The LPHS encourages the development of leaders that represent the diversity of the community and respect community values.

To accomplish this, members of the LPHS work together to:

- Provide access to formal and informal leadership development opportunities for employees at all organizational levels.
- Create a shared vision of community health and the LPHS, welcoming all leaders and community members to work together.
- Ensure that organizations and individuals have opportunities to provide leadership in areas where they have knowledge, skills, or access to resources.
- Provide opportunities for the development of leaders that reflect the diversity of the community.

## **Discussion Questions for Model Standard 8.4**

### **Awareness**

- (a) Have leaders within the LPHS and community collaborated to create a shared vision for the community?
- (b) How have leaders within the LPHS and community collaborated for participatory decision-making?

### Involvement

(a) How does the LPHS recruit and retain new leaders who represent the diversity of the community?

## **Quality and Comprehensiveness**

- (a) How do organizations within the LPHS promote the development of leadership skills?
- (b) How do organizations across the LPHS communicate to ensure informed participation in decision-making? (e.g., community forums, email lists)?
- (c) How does the LPHS provide leadership opportunities for individuals and/or organizations in areas where their expertise or experience can provide insight, direction, or resources?

## **Usability**

(a) How are coaching and mentoring used within the LPHS to develop community leadership?

### Performance Measures for Model Standard 8.4

At what level does the LPHS...

8.4.1 Provide access to formal and informal leadership development opportunities for employees at all organizational levels? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 8.4.2 Create a shared vision of community health and the LPHS, welcoming all leaders and community members to work together? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 8.4.3 Ensure that organizations and individuals have opportunities to provide leadership in areas where they have knowledge, skills, or access to resources? No Activity Minimal Moderate Significant Optimal  $\bigcirc$  $\bigcirc$ 0 0 8.4.4 Provide opportunities for the development of leaders who represent the diversity of the community? No Activity Moderate Significant Optimal Minimal 0 0 0 0 0

## Facilitate Summary: Assure a Competent Public Health and Personal Healthcare Workforce

Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the four Model Standards and Essential Service 8 overall. Ask participants to refer back to any notes that they took, especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 8. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 8.

Congratulations! We have completed Essential Service 8.



## Essential Service 9: Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services



### **OVERVIEW**

### **Facilitator Guidance**

### **Facilitator Script and Tips**

(Total Time for Essential Service 9: approximately 2 hours and 15 minutes-2 hours 45 minutes)

### Step 1: State the Essential Service and Questions It Addresses



Time for Steps 1-3: 15-20 minutes

The activities in Essential Service 9 answer the following questions:

- Are we meeting the needs of the population we serve?
- Are we doing things right?
- Are we doing the right things?

### Step 2: Define the Essential Service

(See description from Local Instrument on page 224.)

In order to understand what's going on in our community and how healthy we are as a community, the following activities encompass Essential Service 9: Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

### Step 3: Explore Partners Commonly Gathered for Essential Service 9

(See list of partners in Local Instrument on page 224.)

Let's look at the bottom of page 224 at the partners commonly gathered to discuss the performance of the local public health system (LPHS) in evaluating effectiveness, accessibility, and quality of personal and population-based health services.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to
  each partner announced as part of the assessment for Essential Service 9 today.
- Who is present today but not listed here?
- Are there any other partners who contribute to this work who are not listed or are not present today?

Overview

### Step 4: Facilitate Discussion to Explore the Essential Service Fully



Time for Step 4: 20 minutes

Thinking about the description we just heard regarding Essential Service 9, what are we doing specifically in our community to address such activities?

If a presentation or document has been prepared in advance to describe what is occurring related to the Model Standard, start with that presentation or document.

Process the information provided by the group sharing or by the expert presentation/ documents by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

### **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes				
Strengths	Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities	

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

Overview

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 9.

### **Local Instrument**

# Are we meeting the needs of the population we serve? Are we doing things right? Are we doing the right things?

Evaluating effectiveness, accessibility, and quality of personal and population-based health services encompasses the following:

- Assessing program effectiveness through monitoring and evaluating implementation, outcomes, and effect.
- Providing information necessary for allocating resources and reshaping programs.

Partners gathered to discuss the performance of the local public health system (LPHS) in evaluating effectiveness, accessibility, and quality of personal and population-based health services include:

The local health department or other governmental public health agency.
The local board of health or other local governing entity.
Hospitals.
Service providers.
Service recipients.
Managed care organizations.
Non-profit organizations/advocacy groups.
Consultants.
Public and private schools.
Faith-based organizations.
Foundations.
Federally Qualified Health Centers or community health centers.

# Model Standard 9.1: Evaluating Population-Based Health Services

### **Facilitator Guidance**

### **Step 1: Define Model Standard 9.1**



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 9.1: Evaluating Population-Based Health Services.

(See description from Local Instrument on page 229.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 9.1

### Step 3: Facilitate Discussion to Explore the Model Standard Fully

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Time for Step 3: 20–30 minutes

Given the description of this Model Standard, let's explore further your LPHSs work around **evaluating population-based health services**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Ask participants if the evaluations include the following services: (Quality and Comprehensiveness)

- Physical activity promotion?
- Overweight and obesity prevention?
- Tobacco use prevention?
- Substance abuse prevention?
- STD prevention?

- Injury prevention?
- Environmental health?
- Immunization programs?
- Other \_\_\_\_\_\_

Refer to the list below to ask participants if the defined criteria include the following: (Quality and Comprehensiveness)

- Established goals for access to population-based health services (e.g., access to immunizations started by two months of age)?
- Quality standards for population-based health services (e.g., multi-component interventions that include education to increase vaccine coverage)?
- Established targets for the effectiveness of population-based health services (e.g., rates of immunization by six months)?

Ask participants if the assessment regarding community satisfaction includes the following: (Quality and Comprehensiveness)

- Gather input from residents representing a cross-section of the community?
- Determine if residents' needs are being met, including those groups at increased risk of negative health outcomes?
- Determine residents' satisfaction with the responsiveness to their complaints or concerns regarding population-based health services?
- Identify areas where population-based health services can be improved?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 230 – Local Instrument.)

### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

Model Standard 9.1

### Step 5: Facilitate Summary: Model Standard 9.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 9.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 9.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

### **Local Instrument**

The LPHS evaluates population-based health services, which are aimed at disease prevention and health promotion for the entire community. Many different types of population-based health services are evaluated for their quality and effectiveness in targeting underlying risks. The LPHS uses nationally recognized resources to set goals for their work and identify best practices for specific types of preventive services (e.g., *Healthy People 2020* or *The Guide to Community Preventive Services*). The LPHS uses data to evaluate whether population-based services are meeting the needs of the community and the satisfaction of those they are serving. Based on the evaluation, the LPHS may make changes and may reallocate resources to improve population-based health services.

To accomplish this, members of the LPHS work together to:

- Evaluate how well population-based health services are working, including whether the goals that were set for programs and services were achieved.
- Assess whether community members, including vulnerable populations, are receiving services and are satisfied with the approaches to promoting health and preventing disease, illness, and injury.
- Identify gaps in providing population-based health services.
- Use evaluation findings to improve plans and services.

### **Discussion Questions for Model Standard 9.1**

### Frequency

(a) How often is each of the population-based health services evaluated?

### **Quality and Comprehensiveness**

- (a) How does the LPHS evaluate population-based health services?
- (b) What are the service elements to be evaluated?
- (c) How does the LPHS determine community satisfaction with population-based health services?

### **Usability**

- (a) How are the results of population-based health services evaluations used by LPHS organizations in developing strategic and operational plans?
- (b) How does the LPHS identify gaps in health service delivery?
- (c) Do evaluations look at the extent to which program goals are achieved for population-based health services (i.e., access, quality, and effectiveness of population-based health services)?

### **Performance Measures for Model Standard 9.1**

At what level does the LPHS...

			e working, including w	hether the goals
that were set for prog	grams and services	were achieved?		
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
9.1.2 Assess whethe	r community meml	bers, including vulner	able populations, are	satisfied with the
approaches taken to	ward promoting he	alth and preventing d	isease, illness, and in	jury?
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
9.1.3 Identify gaps ir	the provision of po	pulation-based healt	h services?	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
9.1.4 Use evaluation	findings to improve	e plans, processes, ar	nd services?	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

### Model Standard 9.2: Evaluating Personal Health Services

### **Facilitator Guidance**

### Step 1: Define Model Standard 9.2



Time for Steps 1-2:10 minutes

Let's take a closer look at Model Standard 9.2: Evaluating Personal Health Services.

(See description from Local Instrument on page 235.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 9.2

### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20–30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **evaluating personal health services**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Ask if the following were evaluated in the past: (Awareness)

- Access to personal health services?
- The quality of personal health services?
- The effectiveness of personal health services?

Use the list below to ensure participants discuss all types of personal health services: (Quality and Comprehensiveness)

- Clinical preventive services?
- Primary healthcare services?
- Specialty care services?
- Oral health services?
- Mental health services?
- Outpatient surgery services?

- Emergency care services?
- Hospital care services?
- Rehabilitative care services?
- Home healthcare services?
- Long-term care services?
- Hospice care services?

Ask participants if the assessments include the following activities: (Quality and Comprehensiveness)

- Determine the adequacy of the scope of personal health services offered?
- Examine how well services meet personal health needs of clients, including those at increased risk of negative health outcomes?
- Identify areas for improvement?
- Determine client satisfaction with the responsiveness to their complaints or concerns regarding personal health services?
- Determine client satisfaction with systems related to payment for personal health services (e.g., Medicaid, Medicare, managed care plans, preferred provider plans)?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 236 – Local Instrument.)

### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

Model Standard 9.2

### **Step 5: Facilitate Summary: Model Standard 9.2**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 9.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 9.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

### **Local Instrument**

The LPHS regularly evaluates the accessibility, quality, and effectiveness of personal health services. These services range from preventive care, such as mammograms or other preventive screenings or tests, to hospital care, to care at the end of life. The LPHS sees that the personal health services in the area match the needs of the community, with available and effective care for all ages and groups of people. The LPHS works with communities to measure satisfaction with personal health services through multiple methods, including surveys with persons who have received care and others who might have needed care or who may need care in the future. The LPHS uses findings from the evaluation to improve services and program delivery, using technological solutions, such as electronic health records, when indicated, and modifying organizational strategic plans, as needed.

To accomplish this, members of the LPHS work together to:

- Evaluate the accessibility, quality, and effectiveness of personal health services.
- Compare the quality of personal health services to established guidelines.
- Measure satisfaction with personal health services.
- Use technology, like the Internet or electronic health records, to improve quality of care or communication among healthcare providers.
- Use evaluation findings to improve services and program delivery and modify organizational strategic plans, as needed.

#### **Discussion Questions for Model Standard 9.2**

#### Awareness

(a) How have organizations within the LPHS evaluated personal health services for the community? What has been evaluated in the past?

### **Usability**

- (a) How is information technology used by the LPHS to ensure quality of personal health services?
- (b) How is information technology used to facilitate communication among healthcare providers (e.g., Health Information Exchange or Regional Health Information Organizations) and improve quality of care?
- (c) How are the results of the evaluation used by organizations in the LPHS in developing strategic and operational plans?

### **Quality and Comprehensiveness**

- (a) Which personal health services in the community are evaluated against established clinical standards (e.g., The Joint Commission, State licensure, Healthcare Effectiveness Data and Information Set (HEDIS))?
- (b) How is client satisfaction with personal health services determined? What opportunities are there for clients to comment on the effectiveness of health services? Do the clients who provide input represent past, current, and potential users of services?

### Frequency

(a) How often are accessibility, quality, and effectiveness of personal health services evaluated?

### **Performance Measures for Model Standard 9.2**

At what level does the LPHS...

9.2.1 Evaluate the a	ccessibility, quality,	and effectiveness of	personal health service	es?
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
9.2.2 Compare the o	quality of personal h	ealth services to esta	ablished guidelines?	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
9.2.3 Measure user	satisfaction with pe	rsonal health service	s?	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
9.2.4 Use technolog	y, like the Internet o	r electronic health re	cords, to improve qua	lity of care?
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
9.2.5 Use evaluation	findings to improve	e services and progra	m delivery?	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

# Model Standard 9.3: Evaluating the Local Public Health System

### **Facilitator Guidance**

### Step 1: Define Model Standard 9.3



Time for Steps 1-2: 10 minutes

Finally, we will take a look at Model Standard 9.3: Evaluating the Local Public Health System.

(See description from Local Instrument on page 241.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 9.3

### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 15–20 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **evaluating the local public health system**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants *do not* have these lists in the Local Instrument.

Check in with participants to ensure they are considering various different LPHS entities using the list below: (Awareness)

- The local governmental public health agency (i.e., local health department)?
- The local governing entity (i.e., board of health)?
- Other governmental entities (e.g., state agencies, other local agencies)?
- Hospitals?
- Managed care organizations?
- Primary care clinics and physicians?
- Social service providers?
- Mental health providers?
- Civic organizations?
- Professional organizations?

- Local businesses and employers?
- Neighborhood organizations?
- Faith-based organizations?
- Educational institutions?
- Public safety and emergency response organizations?
- Environmental or environmental-health agencies?
- Non-profit organizations?
- Advocacy groups?
- Local officials who affect policy and fiscal decisions?
- Other community organizations?

Use the list below to inquire about how the results are used: (Usability)

- To refine existing community health programs?
- To establish new community health programs?
- To redirect resources?
- To inform the community health improvement process?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 242 – Local Instrument.)

### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

Model Standard 9.3

### **Step 5: Facilitate Summary: Model Standard 9.3**



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 9.3. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 9.3 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

### **Local Instrument**

The LPHS evaluates itself to see how well it is working as a whole. Representatives from all groups (public, private, and voluntary) that provide all or some of the 10 Essential Public Health Services gather to conduct a systems evaluation. Together, using guidelines (such as this Local Instrument) that describe a model LPHS, participants evaluate LPHS activities and identify areas of the LPHS that need improvement. The results of the evaluation are also used during a community health improvement process.

To accomplish this, members of the LPHS work together to:

- Identify all public, private, and voluntary organizations that contribute to providing the 10 Essential Public Health Services.
- Evaluate how well the LPHS activities meet the needs of the community at least every five years, using guidelines that describe a model LPHS and involving all entities contributing to the 10 Essential Public Health Services.
- Assess how well the organizations in the LPHS are communicating, connecting, and coordinating services.
- Use results from the evaluation process to improve the LPHS.

### **Discussion Questions for Model Standard 9.3**

#### **Awareness**

(a) Have all the community organizations or entities that contribute to the delivery of the 10 Essential Public Health Services been identified as part of the community's LPHS?

### **Frequency**

(a) Is a comprehensive evaluation of the LPHS, such as this assessment, conducted every three to five years?

### **Quality and Comprehensiveness**

- (a) Has a partnership assessment been conducted that evaluates the relationships among organizations that comprise the LPHS?
- (b) How is the exchange of information among the organizations in the LPHS assessed?
- (c) How are linkage mechanisms among the providers of population-based services and personal health services assessed (e.g., referral systems, memoranda of understanding)?

### **Usability**

- (a) How is the use of resources (e.g., staff, communication systems) to support the coordination among LPHS organizations assessed?
- (b) How does the LPHS use results from the evaluation process to guide community health improvements?

No Activity

0

### **Performance Measures for Model Standard 9.3**

Minimal

0

At what level does the LPHS... 9.3.1 Identify all public, private, and voluntary organizations that contribute to the delivery of the 10 **Essential Public Health Services?** No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 9.3.2 Evaluate how well LPHS activities meet the needs of the community at least every five years, using guidelines that describe a model LPHS and involving all entities contributing to the delivery of the 10 Essential Public Health Services? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 9.3.3 Assess how well the organizations in the LPHS are communicating, connecting, and coordinating services? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 9.3.4 Use results from the evaluation process to improve the LPHS?

Moderate

0

**Optimal** 

0

Significant

0

### Facilitate Summary: Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services



Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the three Model Standards and Essential Service 9 overall. Ask participants to refer back to any notes that they took especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 9. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 9.

Congratulations! We have completed Essential Service 9.



# Essential Service 10: Research for New Insights and Innovative Solutions to Health Problems



### **OVERVIEW**

### **Facilitator Guidance**

### **Facilitator Script and Tips**

(Total Time for Essential Service 10: approximately 2 hours 5 minutes – 2 hours 35 minutes)

### Step 1: State the Essential Service and Questions It Addresses



The activities in Essential Service 10 answer the following question:

Are we discovering and using new ways to get the job done?

### **Step 2: Define the Essential Service**

(See description from Local Instrument on page 249.)

In order to understand what's going on in our community and how healthy we are as a community, the following activities encompass Essential Service 10: Research for New Insights and Innovative Solutions to Health Problems.

Read or ask a participant to read the description of the Essential Service to focus the discussion. Having a participate read the description of the activities will add another voice and will may help keep participants engaged.

### Step 3: Explore Partners Commonly Gathered for Essential Service 10

(See list of partners in Local Instrument on page 249.)

Let's look at the bottom of page 249 at the partners commonly gathered to discuss the performance of the local public health system (LPHS) in researching new insights and innovative solutions to health problems.

Facilitate a brief dialogue based on the following questions. Be sure recorders are capturing the information.

- Based on this list, who do we have present in our group today? Feel free to check the boxes next to
  each partner announced as part of the assessment for Essential Service 10 today.
- Who is present today but not listed here?
- Are there any other partners who contribute to this work who are not listed or are not present today?

### Step 4: Facilitate Discussion to Explore the Essential Service Fully



Thinking about the description we just heard regarding Essential Service 10, what are we doing specifically in our community to address such activities?

If a presentation or document has been prepared in advance to describe what is occurring related to the Model Standard, start with that presentation or document.

Overview

Process the information provided by the group sharing or by the expert presentation/documents by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

### **General Tips**

Encourage participants to capture notes (i.e., new potential partner, community resource previously unaware of, feedback specific to work their organization is involved in, etc.) as the discussion takes place for each Model Standard. Notes may be specific to their organization and/or the LPHS. There is a table like the following for Discussion Notes along with each Model Standard to capture notes in the categories shown:

Discussion Notes				
Strengths	Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities	

There is also a space at the end of each Essential Service section for capturing Summary Notes for the Essential Service as a whole (e.g., across all of an Essential Service's related Model Standards).

The recorder for the session should also be capturing notes on each of the categories listed above. One way to ensure groups identify this information is to record the categories on a flip chart or a white board. As discussions occur and a potential strength, weakness, or improvement opportunity is discussed, ask the group if you should list it under the appropriate header on the flip chart or white board. If a large group summary session or full group meeting is planned, solicit a volunteer from the workgroup to serve as the reporter and share this information for the entire Essential Service.

Let's look at the first Model Standard for Essential Service 10.

### **Local Instrument**

### Are we discovering and using new ways to get the job done?

Researching for new insights and innovative solutions to health problems encompasses the following:

- Establishing full continuum of innovation, ranging from practical field-based efforts to fostering change in public health practice to more academic efforts that encourage new directions in scientific research.
- Continually linking with institutions of higher learning and research.
- Creating internal capacity to mount timely epidemiologic and economic analyses and conduct health services research.

Partners gathered to discuss the performance of the local public health system (LPHS) in researching for new insights and innovative solutions to health problems may include:

The local health department or other governmental public health agency.
The local board of health or other local governing entity.
Hospitals.
Colleges and universities.
Employers.
Managed care organizations.
Foundations.
Human resources departments.
Advocacy organizations.

### **Model Standard 10.1: Fostering Innovation**

### **Facilitator Guidance**

### **Step 1: Define Model Standard 10.1**



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 10.1: Fostering Innovation.

(See description from Local Instrument on page 253.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



When facilitating a Model Standard with very technical information and skills, not all participants may have contributions right away or at all. Allow those who have the technical expertise to share and then ask others how they benefit, interact, or use this work. It will help bring them into the discussion in a meaningful way and add a different perspective.

### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20-30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around fostering innovation.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Ask participants if the LPHS engages in any of the following: (Quality and Comprehensiveness)

- Develop solutions that consider broad issues affecting the public's health (i.e., race/gender/ age discrimination, lack of affordable/quality housing and education, locating waste facilities in residential neighborhoods, transportation)?
- Identify barriers to implementing innovative solutions to health problems within the community?
- Implement those innovations most likely to improve public health practice?

Ask participants if any of the following are used to identify best practices: (Quality and Comprehensiveness)

- Scientific publications?
- Professional associations?
- National and state conferences?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

### Step 4: Scoring and Consensus Building



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Model Standard 10.1

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 254 – Local Instrument.)

### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

### Step 5: Facilitate Summary: Model Standard 10.1



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 10.1. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 10.1 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

#### **Local Instrument**

LPHS organizations try new and creative ways to improve public health practice. In both academic and practice settings, such as universities and local health departments, new approaches are studied to see how well they work.

To accomplish this, members of the LPHS work together to:

- Provide staff with the time and resources to pilot test or conduct studies that test new solutions to public health problems and see how well they actually work.
- Suggest ideas to organizations that conduct research about what currently needs to be studied in public health.
- Keep up with information from other agencies and organizations at the local, state, and national levels about current best practices in public health.
- Encourage community participation in research, including deciding what will be studied, conducting research, and sharing results.

#### **Discussion Questions for Model Standard 10.1**

#### **Frequency**

(a) During the past two years, have LPHS organizations proposed one or more public health issues for inclusion in a research organization's agenda?

#### **Usability**

- (a) How do LPHS organizations encourage community participation in developing or conducting research?
- (b) How do LPHS organizations document and share results, lessons learned, and success stories?

#### **Quality and Comprehensiveness**

- (a) How do LPHS organizations encourage staff to develop new solutions to health problems in the community?
- (b) How do LPHS organizations provide time and/or resources for staff to pilot test or conduct studies to determine new solutions?
- (c) How do LPHS organizations identify and stay current with best practices?
- (d) How do LPHS organizations evaluate innovation, document success, and build an evidence base?

At what level does the LPHS...

#### **Performance Measures for Model Standard 10.1**

10.1.1 Provide staff with the time and resources to pilot test or conduct studies to test new solutions

		•	or conduct studies to	test new solutions
to public health prob	olems and see how	well they actually wor	k?	
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
10.1.2 Suggest idea conduct research?	s about what currer	ntly needs to be studio	ed in public health to	organizations that
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
		ther agencies and or ces in public health?	ganizations at the loca	al, state, and
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
10.1.4 Encourage co	ommunity participat	tion in research, inclu	ding deciding what wi	ill be studied,
conducting research	n, and sharing result	s?		
No Activity	Minimal	Moderate	Significant	Optimal
$\circ$				$\circ$

## Model Standard 10.2: Linking with Institutions of Higher Learning and/or Research

#### **Facilitator Guidance**

#### **Step 1: Define Model Standard 10.2**



Time for Steps 1-2: 10 minutes

Let's take a closer look at Model Standard 10.2: Linking with Institutions of Higher Learning and/or Research.

(See description from Local Instrument on page 258.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



Often when Discussion Questions move to usability, they are higher level activities. Encourage participants to explore usability and honestly rank how well they address the optimal Performance Measures.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

Model Standard 10.2

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 15–20 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around **linking with institutions of higher learning and/or research**.

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants *do not* have these lists in the Local Instrument.

Inquire about the type of relationships with institutions of higher learning and/or research organizations: (Awareness)

- Consultations?
- Formal affiliations?
- Informal affiliations?
- Technical assistance?

Ask about the specific types of research: (Quality and Comprehensiveness)

- Community-based participatory research?
- Public health systems research?
- Interdisciplinary research?

Ask if the collaborative activities include any of the following: (Quality and Comprehensiveness)

- Exchange of faculty and public health workforce members?
- Field training or work-study experiences for their students or interns?
- Co-sponsored continuing education for the public health workforce?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### **Step 4: Scoring and Consensus Building**



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 258 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 10.2



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 10.2. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 10.2 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

Let's move onto the next Model Standard.

Model Standard 10.2

#### **Local Instrument**

The LPHS establishes relationships with colleges, universities, and other research organizations. The LPHS is strengthened by ongoing communication between academic institutions and LPHS organizations. They freely share information and best practices and set up formal or informal arrangements to work together. The LPHS connects with other research organizations, such as federal and state agencies, associations, private research organizations, and research departments or divisions of business firms. The LPHS does community-based participatory research that includes community members and those organizations representing community members as full partners from selection of the topic of study, to design, to sharing of findings. The LPHS works with one or more colleges, universities, or other research organizations to co-sponsor continuing education programs.

To accomplish this, members of the LPHS work together to:

- Develop relationships with colleges, universities, or other research organizations to create formal and informal arrangements to work together.
- Partner with colleges, universities, or other research organizations to conduct public health research, including community-based participatory research.
- Encourage colleges, universities, and other research organizations to work together with LPHS
  organizations to develop projects, including field training and continuing education.

#### **Discussion Questions for Model Standard 10.2**

#### **Awareness**

(a) Do any of your organizations or others within the LPHS have relationships with institutions of higher learning and/or research organizations?

#### **Quality and Comprehensiveness**

- (a) Does any LPHS organization partner with at least one institution of higher learning and/or research organization to conduct research related to the public health? What are the results of these efforts, if any?
- (b) How does the LPHS encourage collaboration between the academic and practice communities?

#### Performance Measures for Model Standard 10.2

At what level does the LPHS

ic while for or doos and	2			
•		, , , , , , , , , , , , , , , , , , ,	her research organiza ents to work together?	•
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
		s, or other research o articipatory research?	organizations to condu	ct public health
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
•	•		organizations to work to continuing education	•
No Activity	Minimal	Moderate	Significant	Optimal

## Model Standard 10.3: Capacity to Initiate or Participate in Research

#### **Facilitator Guidance**

#### **Step 1: Define Model Standard 10.3**



Time for Steps 1-2: 10 minutes

Finally, we will take a look at Model Standard 10.3: Capacity to Initiate or Participate in Research.

(See description from Local Instrument on page 262.)

Read or ask a participant to read the description of the Model Standard to focus the discussion. Ask if everyone understands the definition of the Model Standard. Clarify as needed.



Often when Discussion Questions move to usability, they are higher level activities. Encourage participants to explore usability and honestly rank how well they address the optimal Performance Measures.

#### Step 2: Gather Input on Local Efforts to Address the Model Standard

Facilitate a discussion to explore, "What are we currently doing in this community related to this Model Standard?"

If a report or presentation has been prepared in advance to describe what is occurring in the LPHS related to the Model Standard, start with that report or presentation.

Process the information provided by the group or by the report or expert presentations by asking participants to reflect and respond to the following questions:

- What were some of the key points that you heard that really stuck out or resonated with you?
- Was the information consistent with your experience? If so, how? If not, what is different?
- Where do you need further clarification?
- What else is occurring that has not been mentioned?



If time is short, the question in bold print is the most important question to ask. In the next section, participants will have time to explore how well the LPHS is doing related to the Model Standard through Discussion Questions. Be sure not to spend too much time on this page.



Be sure that recorders are capturing all information related to what is occurring related to the Model Standard.

#### Step 3: Facilitate Discussion to Explore the Model Standard Fully



Time for Step 3: 20-30 minutes

Given the description of this Model Standard, let's explore further your LPHS's work around capacity to initiate or participate in research.

Model Standard 10.3

Refer participants to the Discussion Questions in the Local Instrument and facilitate discussion on the Model Standard by asking each question in a conversational manner.



Be sure to include all participants by asking those group members who are quieter or not actively participating for their thoughts and experiences.



If questions were already addressed in the discussion, there is no need to ask the question.

State a summary of what has already been shared and ask if that is accurate.

Use the following lists to spur further exploration. Participants do not have these lists in the Local Instrument.

Help participants explore various types of expertise available through researchers by using the list below: (Quality and Comprehensiveness)

- Epidemiology?
- Health policy?
- Health economics?
- Health services?
- Public health systems?
- Community-based participatory research?

Ask the group to consider the following resources: (Quality and Comprehensiveness)

- Databases?
- Technical libraries?
- Distance learning?
- Online resources?
- Other\_\_\_\_\_?

Ask the group if any of the following are evaluated: (Quality and Comprehensiveness)

- Development of research activities?
- Implementation of research activities?
- Impact of research activities on public health practice?
- Involvement of community representatives in collaborative research efforts (i.e., community-based participatory research)?

Wrap-up Question: Is there anything else anyone would like to contribute regarding how the LPHS is addressing this Model Standard?

#### **Step 4: Scoring and Consensus Building**



Time for Step 4: 10 minutes

Now that we have thoroughly discussed how the LPHS engages in this activity, it's time to score the Performance

Measures for this Model Standard. When thinking about the score, remember that we are scoring based on the level to which the local public health **system** (not your individual organization or the local health department, rather all the public and private entities contributing to public health) meets the Performance Measure.

Think about the score that best describes the current level of activity within the system shared during the discussion. Remember that the Performance Measures are all defined as optimal standards. Therefore, in order for a measure to be scored optimal, the LPHS would have provided comprehensive examples of high-quality work across all public health areas and the jurisdiction under any one standard to look similar to, and function consistently with, the Model Standard.

Everyone must use their voting cards and vote at the same time. If you need further discussion, please show your white card. Is everyone ready to vote? Based on the discussion and sharing that we just heard, at what level does the LPHS... (ask question for the Performance Measure).

(See questions on page 263 – Local Instrument.)

#### **General Tips**

Make sure everyone understands the definitions for each voting card.

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Refer to the section on page 39 of the Implementation Guide on consensus building. The goal is to identify the score that best represents the discussion in the room and that everyone in the room "can live with."

#### Step 5: Facilitate Summary: Model Standard 10.3



Time for Step 5: 5 minutes

Facilitate a wrap-up summary discussion of Model Standard 10.3. Ask participants to refer back to any notes that they took and reflect on items for the categories listed below. Use the Discussion Notes table for Model Standard 10.3 in the Local Instrument and if possible, draw a grid on a white board or flip chart to capture notes in the following categories:

- LPHS Strengths.
- LPHS Weaknesses.
- LPHS Short-Term Improvement Opportunities.
- LPHS Long-Term Improvement Opportunities.

#### **Local Instrument**

The LPHS takes part in research to help improve the performance of the LPHS. This research includes the examination of how well LPHS organizations provide the 10 Essential Public Health Services in the community (public health systems and services research) and studying what influences healthcare quality and service delivery in the community (health services research). The LPHS has access to researchers with the knowledge and skills to design and conduct health-related studies, supports their work with funding and data systems, and provides ways to share findings. Research capacity includes access to libraries and information technology, the ability to analyze complex data, and ways to share research findings with the community and use them to improve public health practice.

To accomplish this, members of the LPHS work together to:

- Collaborate with researchers who offer the knowledge and skills to design and conduct healthrelated studies.
- Support research with the necessary infrastructure and resources, including facilities, equipment, databases, information technology, funding, and other resources.
- Share findings with public health colleagues and the community broadly, through journals, Web sites, community meetings, etc.
- Evaluate public health systems' research efforts throughout all stages of work from planning to effect on local public health practice.

#### Discussion Questions for Model Standard 10.3

#### **Awareness**

(a) Does the LPHS have access to research support (either on staff or through other organizations)?

#### **Usability**

(a) How is the LPHS sharing findings from its research?

#### **Quality and Comprehensiveness**

- (a) What types of research expertise and/or experience are available to the LPHS?
- (b) What types of resources are available within the LPHS to facilitate research?
- (c) How does the LPHS evaluate its research activities?

#### **Performance Measures for Model Standard 10.3**

At what level does the LPHS...

10.3.1 Collaborate with researchers who offer the knowledge and skills to design and conduct health-related studies? No Activity Minimal Moderate Significant Optimal 0 0 0 0 0 10.3.2 Support research with the necessary infrastructure and resources, including facilities, equipment, databases, information technology, funding, and other resources? No Activity Minimal Moderate Significant Optimal 0 0 0 0 10.3.3 Share findings with public health colleagues and the community broadly, through journals, Web sites, community meetings, etc.? No Activity Minimal Moderate Significant Optimal 0 0 0 0 10.3.4 Evaluate public health systems research efforts throughout all stages of work from planning to effect on local public health practice? No Activity Significant Optimal Minimal Moderate 0 0 0 0 0

### Facilitate Summary: Research for New Insights and Innovative Solutions to Health Problems

Time for Summary: 5 minutes

Facilitate a wrap-up summary discussion of the three Model Standards and Essential Service 10 overall. Ask participants to refer back to any notes that they took, especially those in the Discussion Notes tables for each Model Standard. Ask participants to consider the similarities and differences in the strengths, weaknesses, short-term improvement opportunities, and long-term improvement opportunities discussed for each Model Standard in Essential Service 10. Use the notes as a summary and capture them in the Summary Notes section of the Local Instrument.

If a large group summary session or meeting is planned, solicit a volunteer from the group to serve as the reporter and share a summary of the discussion and performance assessment for Essential Service 10.

Congratulations! We have completed Essential Service 10.



# Optional and Supplemental Questionnaire— Priority of Model Standards

#### **Overview**

This questionnaire is made available so that sites may consider the priority of each Model Standard to their system. Sites choosing to complete this optional and supplemental questionnaire will receive an additional component to their reports that will depict their performance scores in relation to how they have prioritized Model Standards. This information may serve to catalyze or strengthen the performance improvement activities resulting from the assessment process.

#### **Instructions**

Using a scale of 1 to 10 (with 1 being the lowest and 10 being the highest), please rate the priority of each Model Standard without regard to performance scores or rank order. In considering this questionnaire, the following questions may be helpful for participants. Example A: "On a scale of 1 to 10, what is the priority of this Model Standard to our local public health system (LPHS)?" Example B: "On a scale of 1 to 10, how important is it to improve our LPHS's performance in this activity (e.g., through a quality improvement process, increased emphasis or resources)?"

Sites may complete this questionnaire in a single group, either at the same time of the assessment or shortly thereafter, so that there is a consistent approach to responding to the questions across the Model Standards.

Refer to pages 89–91 in the Local Instrument to see the actual questionnaire.

#### Step 1: Facilitate Brief Discussion Regarding Priority of a Model Standard

After the group discusses a full Essential Service or at the end of each Model Standard within an Essential Service, ask participants to turn to Priority of Model Standards Questionnaire in their Local Instrument.

Remind participants that...

We have been looking at the performance of each Essential Service and Model Standard in our LPHS. For this questionnaire, we will come to consensus on how important it is to improve each Model Standard is to improve the overall performance of the LPHS.

Read the first Model Standard and ask participants to use a scale of 1 to 10 (with 1 being the lowest and 10 being the highest), and to please rate the priority of each Model Standard without regard to performance scores or rank order.

#### **Step 2: Consensus Scoring**

Facilitate discussion to reach a consensus priority rating based on the collective thoughts regarding the priority of a Model Standard to improving the overall performance of the LPHS.



This is usually fairly easy to facilitate consensus. However, there may be disagreement in priorities. Ask for specifics and explanations to help increase understanding among participants.



Remind participants that the rating is related to how much of a priority a particular Model Standard is to improving the LPHS's performance overall.



Ensure recorders also take notes related to this discussion and the various perceptions. Ratings should also be documented.



### Optional and Supplemental Questionnaire— Local Health Department Contribution

Time varies based on process, usually an additional 5-10 minutes per Essential Service.

#### **Overview**

This optional questionnaire is made available so that sites may consider the contribution that the local health department has to each Model Standard. This information may serve to catalyze or strengthen the performance improvement activities resulting from the assessment process.

#### Instructions

Using a similar scale used to assess the Model Standards in the assessment, use the following scale:

- 0-for no contribution to the Model Standard
- 25-for agency contribution of 0-25%
- 50-for agency contribution of 26-50%
- 75-for agency contribution of 51-75%
- 100-for agency contribution of 76-100%

Sites may complete this questionnaire in a single group, either at the same time of the assessment or shortly thereafter, so that there is a consistent approach to responding to the questions across the Model Standards.

Refer to pages 92–94 in the Local Instrument to see the actual questionnaire.

#### Step 1: Facilitate Brief Discussion Regarding Local Health Department Contribution

After the group discusses a full Essential Service or at the end of each Model Standard within an Essential Service, ask participants to turn to the Local Health Department Contribution Questionnaire in their Local Instrument.

Remind participants that...

We have been looking at each Essential Service and Model Standard as a local public health system (LPHS) and how we have collectively been addressing or fulfilling this work. For this local health department contribution questionnaire, we will come to a consensus on the percentage of the work for each Model Standard that is contributed directly by the local health department.

Read the first Model Standard and ask participants to score based on the following scoring (Participants will use the same score cards, eliminating the red "no activity card" as 0% is part of the 0–25% orange card.):

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

#### **Step 2: Consensus Scoring**

Facilitate discussion to reach a consensus score based on the collective thoughts regarding the percentage of all Model Standard activity attributed to the local health department.



This is usually fairly easy to facilitate consensus. However, there may be disagreement in perception about how much the local health department is doing. Ask for specifics and explanations to help increase understanding among participants.



Remind participants that the percentage is related to the amount of *contribution* from the local health department, not a performance score.

This information is useful as local health departments look at their role in the LPHS, their strengths and weaknesses, and LPHS member perceptions.



Ensure recorders also take notes related to this discussion and the various perceptions. Scores should also be documented.



We will periodically update the NPHPS materials as sites gain experience in using them. Additional comments and suggestions for improving the document, and quotes, tips, or descriptions to enrich its content are always welcome. Please send all comments to performancestandards@naccho.org.