### Welcome to CHA's Webinar – Community Benefit: Setting Priorities: Linking Assessment to Planning

April 3, 2012 | Noon – 1:30 p.m. ET

The webinar will start shortly. Thank you for joining us.



A Passionate Voice for Compassionate Care

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#### **Reflection for Today's Program**

Creator, in this time of longer, warmer days, soft rains, and gradual greening, we recognize anew that we are surrounded by your gifts. Winter gives way to spring, darkness gives way to light, and dormancy gives way to new life. Hear our prayer of praise and gratitude, remembering especially those who cultivate the land, those who plant and gather, who feed our vast nation and peoples.

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#### Your Presenter for Today's Program



Leslie Beitsch, MD, JD

Dr. Beitsch joined the faculty at the Florida State University College of Medicine in November 2003 as professor of health policy and director of the Center for Medicine and Public Health. He has held past positions as the Commissioner of the Oklahoma State Department of Health and as the Deputy Secretary and Assistant State Health Officer for the Florida Department of Health. Prior to these appointments, Dr. Beitsch served as the Assistant State Health Officer and Division Director for Family Health Services and the Medical Director of the Broward County Health Department in Ft. Lauderdale. He has participated as a member of committees representing the Association of State and Territorial Health Officials and committees advising the Centers for Disease Control and Prevention. In addition, he is past chair of the board of directors for the Public Health Foundation and the past chair of the Public Health Leadership Society.

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# Best Practices for Community Health Needs Assessment and Implementation Strategy Development: Prioritization

Leslie M. Beitsch
Catholic Hospital Assoc. Webinar
April 3, 2012

#### Treasury Dept.-IRS Notice 2011-52

Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals

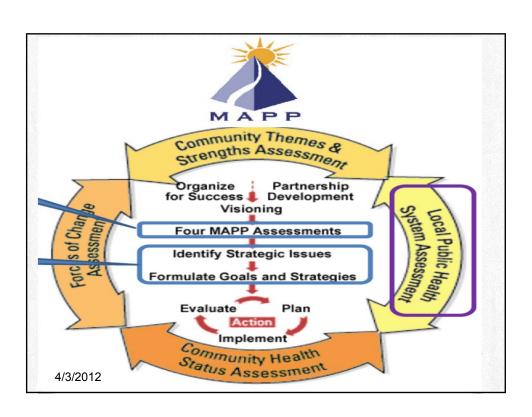
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# SECTION 3. ANTICIPATED REGULATORY PROVISIONS

- 3.08 Implementation Strategy
  - ▲ Implementation strategy must be adopted
  - ▲ Written plan
  - ▲ Address health needs identified via CHA
  - ▲ Plan may incl. collaboration with others
  - ▲ Prioritization?????

#### **PHAB Prerequisites**

- Community Health Assessment
- Community Health Improvement Plan
- Agency Strategic Plan
- See <u>www.PHABoard.org</u>



#### **Public Health CHA/CHIPs**

- PHAB beta test
- ASTHO survey
- NACCHO profile
- Opportunities for synergy/collaboration

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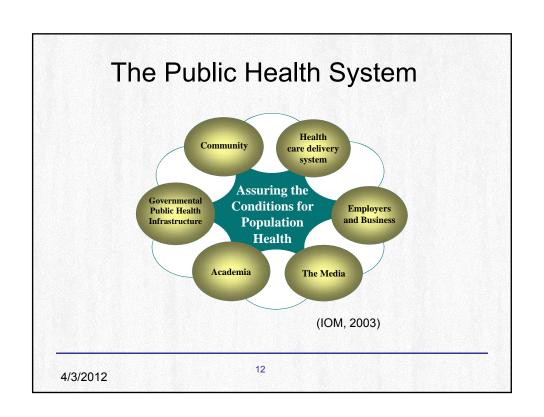
#### **Overview**

- What, who, why, and when do you prioritize?
- Select a method
  - ▲ Tools
  - ▲ Examples
- Summary/questions

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#### **CHA and Prioritization**

- Health should be defined broadly
  - **▲** WHO
  - **▲ IOM**
  - ▲ Not merely absence of disease
- Method(s) less critical than process
- Meaningful community engagement/involvement critical
- Meaningful community collaboration
  - ▲ Public health system



#### What is Prioritization?

- Placing a number of items in rank order based on perceived or measured importance or significance
- Assists organizations and groups in focusing limited resources
- We all do priority setting routinely (even if we do call it that)
- If everything is a priority, then...

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#### Why Prioritize?

- Leadership direction
- Limited resources
- Urgency
- Competing health issues to address
- Program effectiveness/efficacy
- Program efficiency
- Performance improvement/quality improvement project identification

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#### When Do You Do Priority-Setting?

- Prioritization occurs at many stages of program and project planning and implementation
  - ▲ Developing vision, mission, goals, etc.
- Have you done this before?
  - ▲ In a public health setting?
  - ▲ How different is priority setting for QI vs. other reasons (i.e., assessment and planning)?

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#### **Selecting a Method**

- How rigorously objective do you want the process to be?
- What level of participation/ number of participants is ideal?
  - ▲ Balance high participation / buy-in with manageability
  - ▲ Maintain awareness of biases
- How time/energy-intensive a process are you committed to?

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#### **Priority-Setting Methods**

- 'Dotmocracy' method (aka 'Quick and colorful' approach)
- Nominal group planning
- Strategy map
- Simplex method
- Hanlon (PEARL) method
- Criteria weighting
- Prioritization matrix



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# 'Dotmocracy' (aka 'Quick and Colorful') Method: Nuts and Bolts

- Group voting process
- Options identified and posted on wall, etc.
- Participants get selected number of votes ('dots'/stickers)
- Review criteria for voting with participants
- Participants place 'dots' by their choices based on criteria discussed

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#### **Nominal Group Planning: Nuts and Bolts**

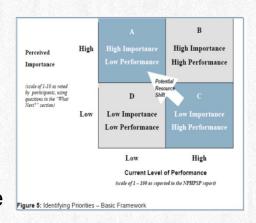
- Through facilitated group process, brainstorm ideas
- List all items
- Review, organize, categorize, clarify
- Review final list
- Each participant votes or ranks
- Tally the ranking or votes
- Discuss and refine, if needed

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#### **Strategy Map: Nuts and Bolts**

- Select criteria
- Create a grid with four quadrants
- Label quadrants
- Categorize and prioritize
- NPHPSP example

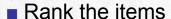


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#### **Simplex Method: Nuts and Bolts**

- Develop a small set of close-ended survey questions
- Ensure all participants understand the options, the questions, and the process
- Ask participants to respond to the questions for each problem/ intervention





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#### **Hanlon Method: Nuts and Bolts**

- Rate Item based on:
  - ▲ Magnitude of problem (prevalence)
  - ▲ Seriousness of problem
  - ▲ Effectiveness of available interventions
- Apply "PEARL"
  - ▲ Propriety, Economics, Acceptability, Resources, and Legality
- Calculate Scores
- Rank based on Scores

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#### **Criteria Weighting: Nuts and Bolts**

- Identify criteria
- Determine significance / value of criteria
- Score issues according to each criteria (e.g., 0-10, or low, med., high)
- Multiply significance by score
- Sum and divide by number of criteria
- Rank, discuss, and refine

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#### **Prioritization Matrix: Nuts and Bolts**

- Identify decision criteria
- Weight each criterion against others
- Compare all options relative to each weighted criterion
  - ▲ Develop a different matrix for each criterion
- Develop a summary matrix
- Compare each option based on all criteria combined.
- For example...

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				Criterio	n W	eight (1-10)		
	Alternatives (1-10)	<u>Cost</u> (8)		Effectiveness (10)	<u>s</u>	Acceptability (5)	Implement in 12 months (6)	Total
	Improve existing		6		5	8	2	150
	playgrounds	48		50		40	12	150
	Remove soda from school vending		3		9	3	6	165
	machines	24		90		15	36	100
	Restrict use of food stamps for unhealthy		9		7	2	3	170
	foods	72		70		10	18	170
	Offer healthy lunch	1	7		10	4	4	200
1	options in schools	56		100		20	21	200
	Increase number of playgrounds from three		1		4	5	1	63
	to five	8		40		25	6	03

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#### **Priority-Setting**

- Use priority-setting methods creatively
- Ordering priorities
  - ▲ Logical
  - ▲ Temporal
  - ▲ Impact
- Consider barriers to implementation
- Use data from assessments wisely
- Use within the context of a planning process

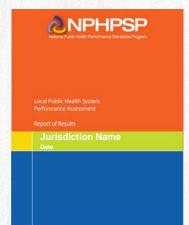
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# NPHPSP Example

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#### **NPHPSP Reports – Optional Assessments**



## Optional Priority Rating Results (All 3 Assessments):

What are potential areas for attention, based on the priority ratings and performance scores?

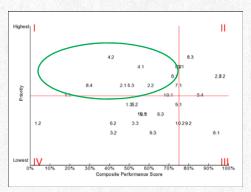
## Optional Agency Contribution Results (State and Local only):

How much does the (Local Health Department/State Public Health Agency) contribute to the system's performance, as perceived by assessment participants?

	Essential Service	Priority Rating	Performance Score (Level of Activity)		
Table 4: Model standard	Quadrant I (High Priority/Low Performance) These important activities may need increased attention.				
	5.2 Public Health Policy Development	9	25 (Minimal)		
by priority and	5.3 Community Health Improvement Process	10	25 (Minimal)		
performance 	Quadrant II (High Priority/High Performance) These activities are being done well, and it is important to maintain efforts.				
score, with areas	1.3 Maintenance of Population Health Registries	9	100 (Optimal)		
for attention	6.3 Enforce Laws, Regulations and Ordinances	9	100 (Optimal)		
	Quadrant III (Low Priority/High Performance These activities are being done well, but the system can shift or reduce some resources attention to focus on higher priority activities.				
	3.1 Health Education and Promotion	7	100 (Optimal)		
	3.3 Risk Communication	6	100 (Optimal)		
	Quadrant IV (Low Priority/Low Performance)  These activities could be improved, but are of low priority. They may need little or no attention a this time.				
	8.1 Workforce Assessment, Planning, & Development	4	25 (Minimal)		
	8.2 Public Health Workforce Standards	6	25 (Minimal)		

#### **Priority Rating Results** (Example cont.)

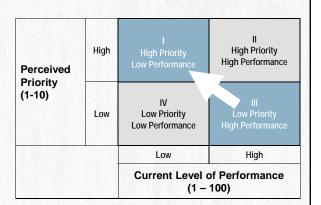
- Quadrant I (High Priority/Low Performance) — May need increased attention
- Quadrant II (High Priority/High Performance) — May be important to maintain efforts
- Quadrant III (Low Priority/High Performance) — May shift or reduce some resources or attention to focus on higher priority activities
- Quadrant IV (Low Priority/Low Performance) — May need little or no attention at this time



**Figure 9:** Scatter plot of Model Standard scores and priority ratings

#### **Priority Rating vs. Performance**

- Quadrant I —
   May need increased attention
- Quadrant II —
   May be important to maintain efforts
- Quadrant III —
   May shift or reduce some resources or attention to focus on higher priority activities
- Quadrant IV —
   May need little or no attention at this time



Source: NPHPSP User Guide

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#### **Summary Points for Priority Setting**

- Collect background data and documentation
- Clarify goals and objectives at outset
- Establish criteria for 'judging' potential options
- Determine participants for the prioritization process
- Select appropriate method
- Have needed materials for the prioritization method selected
- Implement process, follow-up and followthrough!

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#### **Questions/Comments/Diatribes???**

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