

Geauga County Local Public Health System Assessment Report April 2014

Report provided by:
The Geauga County Health District



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INTRODUCTION

This report provides a summary of the Local Public Health System Assessment (LPHSA) conducted in Geauga County, Ohio. The main body of the report provides a summary of the LPHSA project and processes, highlights of assessment findings, and recommendations. Appendix A is the Center for Disease Control and Prevention's full assessment report which provides a detailed, comprehensive overview of findings. Appendix B contains the discussion notes from the LPHSA which may provide additional context to the quantitative data presented in this report.

The results of this report are important to the PHGC as they look to improve the overall health and wellbeing of Geauga County residents. The PHGC has a role in interpreting and assigning meaning to the results as part of the overall community health assessment project. Four recommendations are provided at the end of this report for guidance and consideration moving forward.

PROJECT DESCRIPTION

In the Fall of 2013 the Partnership for a Healthy Geauga County (PHGC), with support from the Geauga County Health District (GCHD), undertook an initiative to conduct an assessment of the public health system in Geauga County. This Local Public Health System Assessment (LPHSA) utilizes the Mobilizing Action through Planning and Partnerships (MAPP) process as a framework. The LPHSA is one of four assessments conducted as part of the MAPP process and is a component of the National Public Health System Performance Standards Program (NPHPSP). The PHGC serves as the steering committee for the 2014 Geauga County MAPP project. The Geauga County Health District was the primary agency responsible for the implementation and facilitation of the LPHSA. Sixty members of the PHGC who collectively represented over 37 different public health system contributors participated in the assessment on April 24, 2014.

METHODS & IMPLEMENTATION

Planning

The planning phase for the Geauga LPHSA began in September 2013. The assessment was conducted using NPHPSP guidelines. Additional factors considered during planning included anticipated schedules of participants, overall project deadlines, and PHGC member expectations. Stakeholders and public health partners were listed and targeted for recruitment. Participants were also recruited from PHGC membership. A venue for the assessment was selected in November 2013 with the event date and time. Notices regarding the assessment were disbursed in February with a save the date to the PHGC membership and additional targeted stakeholders. Recruitment continued until the day of the assessment April 24, 2014 with the actual invitation sent March and follow-up phone calls and emails sent two weeks prior to the event.

Assessment

The assessment was held on April 24, 2014 from 9:00 A.M. to 2 P.M. at the Geauga County Library Administration Building in Chardon, Ohio. The day began at 9am with an introduction and briefing of the days schedule and events with members being assigned to particular breakout rooms. Each group consisted of 15-20 people and ran simultaneously throughout the day; each group focused on a different EPHS. The GCHD assigned PHGC members to small groups based on NPHPSP guidelines, and on participant preference and availability. At the start of each session, the facilitator briefly introduced participants to the assessment purpose and process. Once familiar with the process, the group began the assessment of their assigned Essential Service. Consensus responses were the goal; when consensus was not reached readily, a majority vote was taken. Discussion was encouraged and final votes and comments were recorded for all groups. (See Figure 1 on next page for a summary of performance scores by EPHS.) Each small group was facilitated by a GCHD staff member. The GCHD also provided scribes for each group who were responsible for capturing the performance scores as well as discussion notes. Participant evaluations were conducted to gauge satisfaction with the assessment experience. Figure 1, shown below, displays the average performance score for each EPHS, along with an overall average score across all 10 EPHS. (Note: Performance scores for each model standard within the EPHS is provided in the CDC-generated report located in Appendix A.) Examination of these performance scores provides an immediate sense of the local public health system's greatest strengths and weaknesses. Caution should be taking when reviewing these scores. A low performance score does not necessarily indicate that improvement is warranted. Conversely, a high performance score does not indicate that improvements are not necessary. System partners should review and discuss these performance scores, along with the associated priority ratings (presented in the next section), to make meaning of the results and identify potential strategies for system-level improvements.

Prioritization

Priority rating has been determined and is listed in table 2 on page 10 in the Local Assessment Report. Below is Summary table for priority ratings for Geauga County.

Model Standard	Priority
5.1 Governmental Presence	Very High
5.2 Policy Development	
5.3 CHIP/Strategic Planning	
5.4 Emergency Plan	
3.2 Health Communication	High
3.3 Risk Communication	
6.1 Review Laws	
6.2 Improve Laws	

6.3 Enforce Laws	
7.1 Personal Health Service Needs	
7.2 Assure Linkage	
2.1 Identification/surveillance	Mid-Level
2.2 Emergency Response	
2.3 Laboratories	
3.1 Health Education/Promotion	
4.1 Constituency Development	
4.2 Community Partnerships	
8.1 Workforce Assessment	
8.2 Workforce Standards	
8.3 Continuing Education	
8.4 Leadership Development	
9.1 Evaluation of Population Health	
9.2 Evaluation of Personal Health	
9.3 Evaluation of LPHS	
10.1 Foster Innovation	
10.2 Academic Linkages	
10.3 Research Capacity	

Priority levels were selected based on the following:

1. Perception of strength or weakness within the agency, if an agency felt they were strong or weak in that particular model standard it affected the priority level.
2. Comfort level of the model standard, inexperience that agencies have dealing with model standards can also affect the priority level that they issue.
3. Baseline information; participating agencies were told that being this is the initial LPHSA for Geauga County the priorities can and will change as we continue the assessment process in the years to come.

Also worth mentioning agency contribution scores from table 2. This column represents the Local Health Department (LHD) contribution dealing with each model standard, for instance a score of 100 would indicate the highest level of contribution to that model standard. Out of the 30 model standards the average contribution score was 57.5%. The performance score represents the consensus of participating agencies toward the model standard, the average overall score was 59.1%

Table 3 page 14 illustrates the model standards with the highest rankings by lowest performance score and highest priority rating. Quadrant A (highlighted in yellow) is the highest priority model standards followed by Quadrant B, C, and D. Referring to these quadrants in the improvement plan will be important.

Table 4 page 15 is a summary of contribution and performance scores by the model standard with quadrant A indicating the highest LHD contribution with a low performance score.

RECOMMENDATIONS for Geauga County

The following four recommendations are provided for guidance and consideration.

1) Consider the LPHSA performance scores in conjunction with the priority ratings. Those model standards with low performance scores and priority rating scores ≥ 7 may provide the greatest and most immediate opportunity for improvement. These include:

- a. Model Standard 8.1 Workforce Assessment
- b. Model Standard 5.1 Governmental Presence
- c. Model Standard 5.3 CHIP/Strategic Planning
- d. Model Standard 7.1 Personal Health Service Needs
- e. Model Standard 7.2 Assure Linkage
- f. Model Standard 8.4 Leadership Development
- g. Model Standard 8.3 Continuing Education
- h. Model Standard 8.2 Workforce Standards

2) Compare LPHSA priorities with the data collected through the other three MAPP assessments. Cross walking the priorities from each assessment may reveal themes that could become priorities for the overall Community Health Improvement Plan.

3) Review the discussion notes generated during the system assessment and subsequent prioritization meeting. These discussion notes (Appendix B) will provide additional context to the quantitative data presented in this report and may also reveal specific strengths, weaknesses, and opportunities for improvement related to identified LPHSA priorities. This information may also be useful as the PHGC identifies specific action steps to address Community Health Improvement Plan priorities.

4) Share this report with PHGC members, other system partners, and the community at large. Participants invested their time and best thinking to this assessment process; many expressed enthusiasm for the process, networking, and opportunities that were identified. These results can be used to identify system level improvements and inform Community Health Improvement Plan priorities, but can also be used by individual system contributors when considering their own agency's performance and contributions to the public health system.

In Summary

The Geauga County Local Public Health Systems Assessment 2014 had 60 participants from 37 different Geauga County Agencies represented. These agencies included: The Geauga County Public Library, Geauga County Health District, Geauga County Medical Reserve Corp, Geauga County Mental Health Board, Humane Society, Geauga County Department of Emergency Services, Department on Aging, Job and Family Services, Sheriff's Dept, West Geauga Schools, Starting Point, Family Planning, Middlefield Care Center, Metro Housing Authority, Village of South Russell, Kent State University,

American Red Cross, Ravenwood, Care Corp, Kenston Schools, Chardon Schools, County Home, Family First Council, Dog Warden, Geauga Medical Center, DDC Clinic, Lake Geauga Recovery, Chardon Fire Dept, , CASA for Kids, Big Brothers and Sisters, Help Me Grow, Woman's Safe, Newbury Schools, Middlefield Police, and United Way.

The Geauga County 2014 LPHSA is the initial assessment which is a baseline for future measures. The overall score for the Geauga County 2014 LPHSA was 59.1%. The lowest score is represented in ES8 Assure Workforce at 36.8% followed by ES10 Research/Innovations at 41.7%, ES1 Monitor Health Status at 45.8%, ES7 Link to Health Services at 46.9%, ES3 Educate/Empower at 52.8%, and ES4 Mobilize Partnerships at 53.1%. The highest score is represented in ES6 Enforce Laws at 90.0% followed by ES2 Diagnose and Investigate at 81.9%, ES9 Evaluate Services at 77.5%, and ES5 Develop Policies/Plans at 64.6%.