

Local Public Health System Assessment



Jefferson County, Alabama

October 2019



Local Public Health System Assessment

Overview of the Local Public Health System Assessment

The Local Public Health System Assessment (LPHSA) was one of the four Mobilizing for Action through Planning and Partnerships (MAPP) assessments informing this document. The LPHSA is completed using the National Public Health Performance Standards (NPHPS or Performance Standards) Local Instrument. The Performance Standards Local Instrument measures how well system partners provide public health services using a nationally recognized set of optimal performance standards by answering the following questions:

- *What are the components, activities and capacities of our public health system?*
- *How well are the 10 Essential Public Health Services being provided in our public health system?*



Performance Standards Background

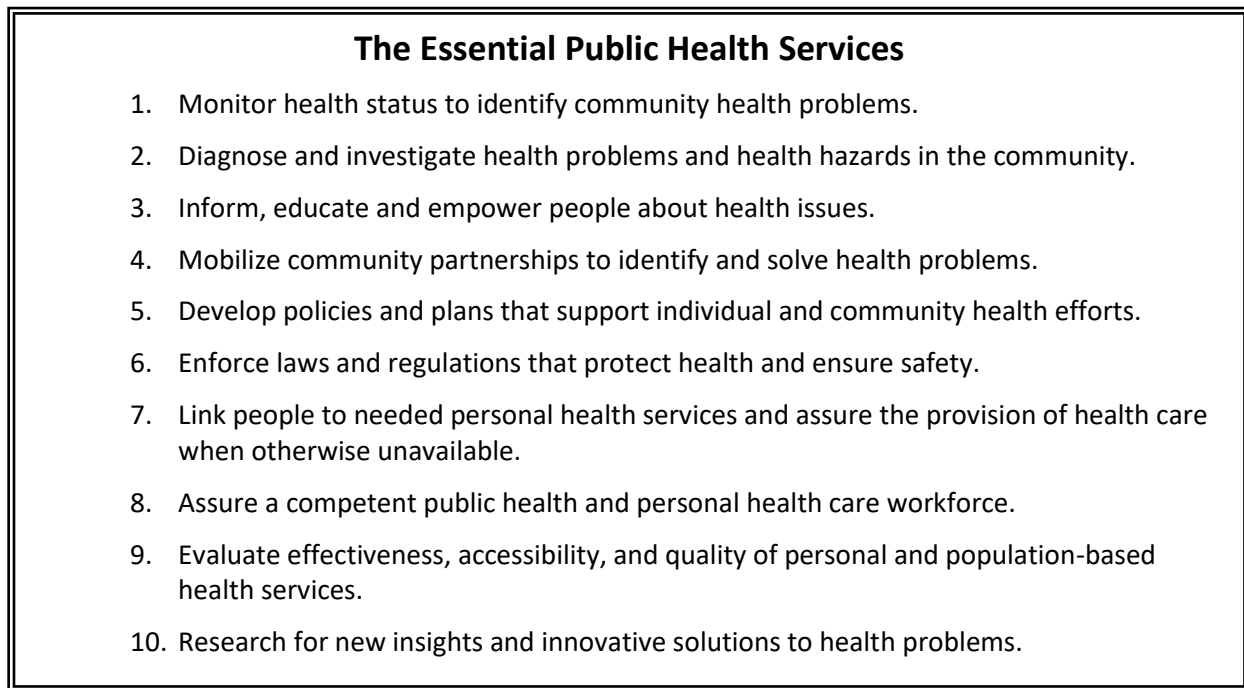
Under the leadership of the Centers for Disease

Control and Prevention and its partner organizations, the Performance Standards were developed and launched in 1997 by national, state and local experts in public health. The Performance Standards describe an optimal level of performance and capacity to which all local public health systems can aspire. The goal of the Performance Standards is to promote continuous improvement by providing benchmarks by which the local public health system can be assessed to help identify areas of strength, weakness, and short and long-term improvement opportunities. The dialogue that occurs among participants in completing the Performance Standards Local Instrument leads to a better understanding of the public health system's functioning and performance and can facilitate informed, effective policy and resource decisions to improve the public health system.

The Performance Measures use the 10 Essential Public Health Services shown in Figure 2 to provide the framework for the local instrument by describing the public health activities that should be undertaken in all local public health systems.

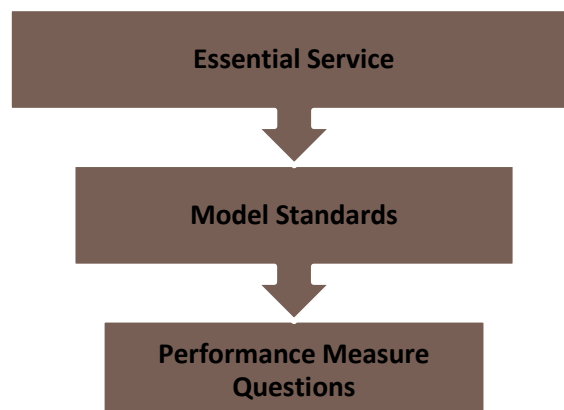
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FIGURE 2



Within the NPHPS Local Instrument, each essential service includes two to four model standards describing optimally performing public health system. Model standard include two to five performance measure questions assessing the local public health system's performance (See Figure 3).

FIGURE 3: NPHPS Local Instrument Format





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Assessment Planning

The LPHSA Sub-committee for Jefferson County, Alabama was established to direct the assessment. Members of this Sub-committee were expected to contribute to the completion of the LPHSA, recruit and train instrument facilitators and engage potential participants through recruitment, orientation, assessment and follow-up. The LPHSA Coordinator determined that the assessment would be completed through 10 independent essential service sessions. Two facilitators were recruited for each essential service assessment session, with the primary facilitator leading the group through the instrument and the secondary facilitator serving as the scribe. Several meetings identified and recruited assessment facilitators and participants for completing the overall assessment. Orientation sessions were held to prepare recruited facilitators.

Assessment Administration

The LPHSA was completed through the administration of the National Public Health Performance Standard (NPHPS) Local Instrument, which is structured using the 10 Essential Services of Public Health. Ten individual Essential Service assessment sessions were completed between October 22, 2018 and November 6, 2018 at JCDH with public health professionals and community leaders representing both public and private organizations, as well as Jefferson County community representatives.

LPHSA participants were assigned to Essential Service Sessions based on the main function(s) of the organization represented and the individual's role within that organization. Trained facilitators in each Essential Service Session guided participants through a review of Jefferson County's Local Public Health System activities via the Local Instrument's discussion questions. After a thorough discussion, participants were asked to reach consensus about the level of activity for each performance measure using voting cards with the response options provided in Table 1. Participants voted on the public health system's level of activity, not the level of activity of his or her individual organization. Final scores were determined either by consensus or by averaging the votes, when multiple attempts at gaining consensus failed.

TABLE 1: Performance Assessment Scoring

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.



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Data collected during the ten assessment sessions were electronically submitted to the Public Health Foundation for analysis of the quantitative performance measures. A review and interpretation of the

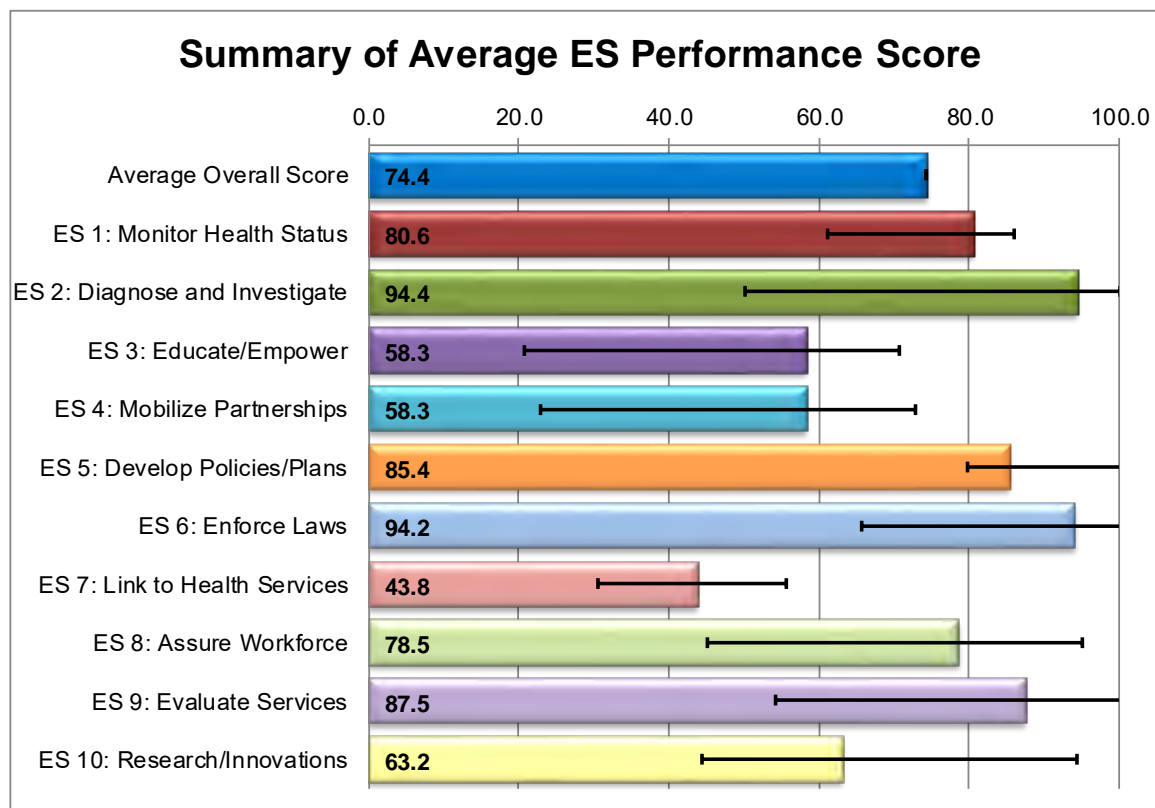
qualitative data collected during the Essential Services sessions were analyzed. Observations from the qualitative data were coded and classified into four major themes: strengths, weakness, short-term opportunities and long-term opportunities.

Executive Summary

Figure 4 provides a summary of the average mean score and the mean score from each Essential Service received using NPHPS Local Instrument. The mean overall score for Jefferson County's Local Public Health System was 74.4, which represents significant activity. Among the 10 Essential Services, Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards in the Community, with a score of 94.4, received the highest activity rating representing optimal performance. The lowest overall Essential Service score, 43.8, was from Essential Service 7: Link people to needed personal health services and assure the provision of healthcare when otherwise available. Six of the ten Essential Services were evaluated at the optimal activity level (76-100%), while three Essential Services were rated as achieving significant activity level (26-50%). None of the Essential Services were rated at the minimal (1-25%) or no activity (0%) levels.

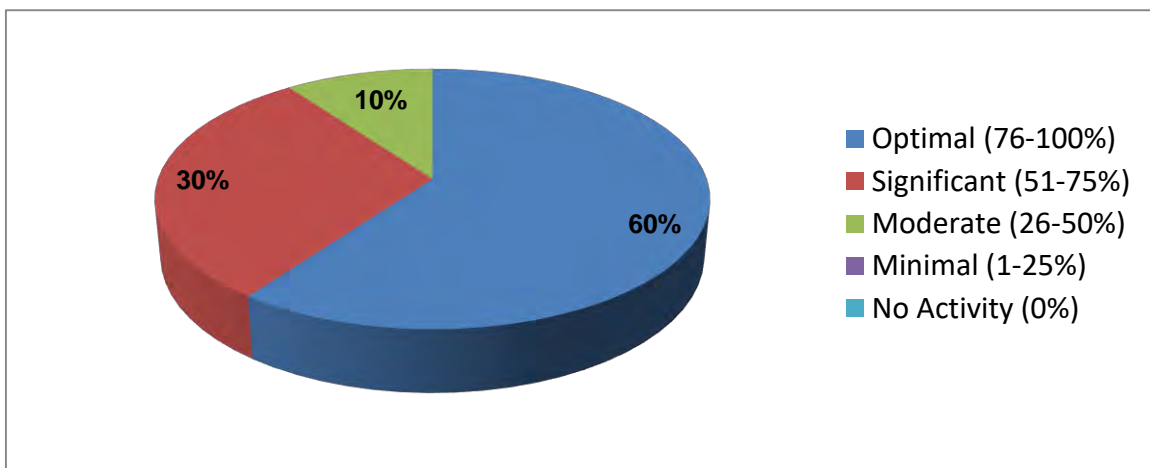
FIGURE 4: Essential Service Performance Scores

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Jefferson County Public Health System's performance in each of the 10 Essential Services fell within the highest three rating categories. Figure 5 provides the percentage of Essential Services scored within each rating category. None of the essential services were rated within the no activity or minimal categories.

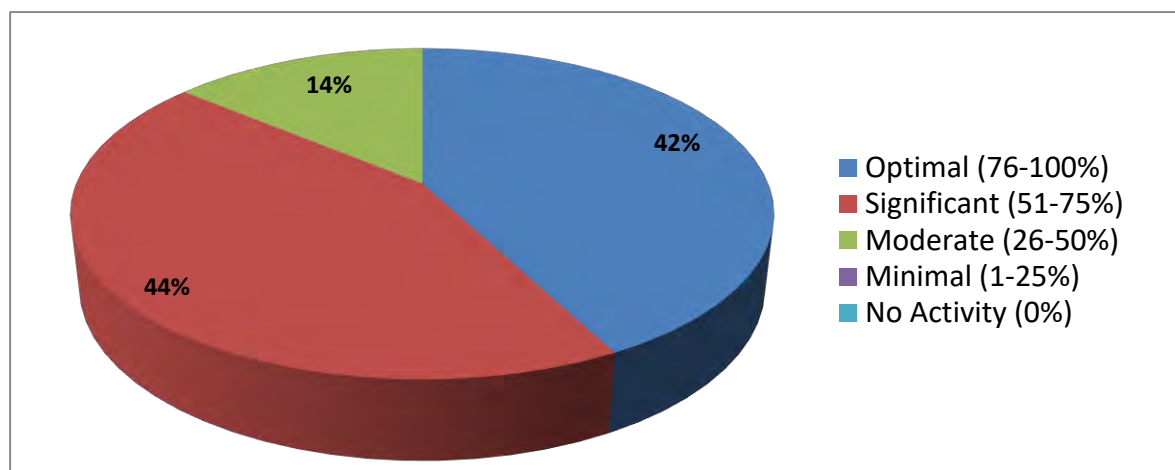
FIGURE 5: Essential Services Scores and Activity Level Categories



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Jefferson County Public Health System's performance on each of the thirty model standards scored within the optimal to moderate activity levels (Figure 6).

FIGURE 6: Model Standard Scores by Activity Level and Categories



Overall discussion analysis revealed the following strengths, weaknesses, short-term opportunities and long-term opportunities across the 10 Essential Services.

Strengths

- Established protocols (e.g., emergency preparedness), plans (Community Health Assessment and Community Health Improvement Plan) and surveillance systems
- New partnerships and initiatives provide education, technical assistance, training and resources to facilitate collaboration and linkages across organizations, communities and public health sectors

Weaknesses

- Lack of awareness among local public health system partners of community health assessments, emergency plans and environmental laws and regulations
- Lack of unavailability of chronic disease morbidity data for surveillance, planning and evaluation
- Need for increased diversity and inclusion in partnerships and collaborations

Short-term Improvement Opportunities

- Increase awareness of and participation in existing coalitions by local public health system partners across public health sectors
- Increase accessibility of public health assessments, plans and data and awareness of public health laws and regulations

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- Increase diversity in partnerships and enhance the engagement and education of community residents from diverse sub-populations.

Long-term Improvement Opportunities

- Establish a centralized research clearinghouse and state-wide hospital discharge database
- Increase funding to provide essential public health services and capacity to evaluate public health policies, procedures and outcomes
- Increase collaboration and coordination among local public health system partners in advocating for public health policy adoption at the local and state level

Individual Essential Service Scoring

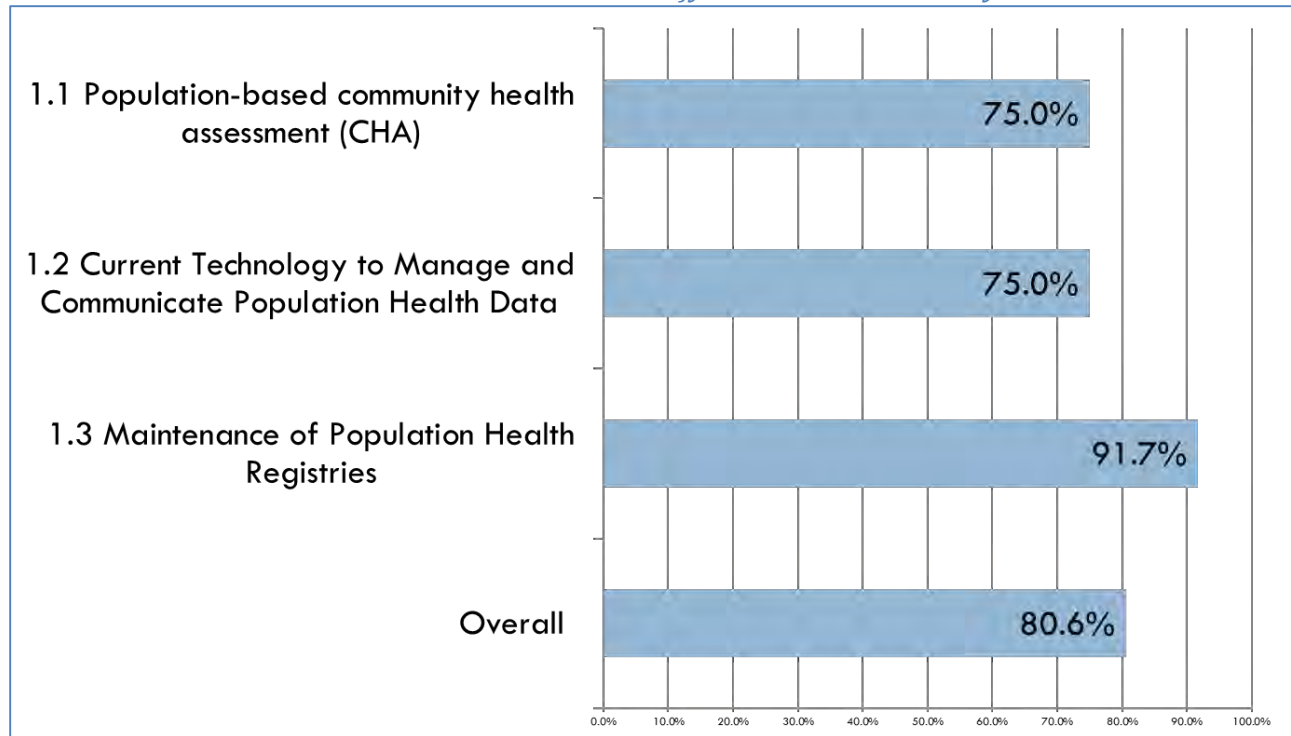
The following graphs and findings are intended to aid the local public health system serving Jefferson County in understanding its collective performance and to strengthen the local public health system. For each Essential Service and its corresponding Model Standards, a bar graph depicting the overall score for the Essential Service, as well as the scoring, expressed as a percentage, representing the degree to which the activity described in the Model Standard is conducted, followed by qualitative findings from the Essential Service breakout discussion are provided.



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FIGURE 7

Essential Service 1: Monitor Health Status to Identify and Solve Community Health Problems



The overall performance score for Essential Service 1: Monitor Health Status to Identify and Solve Community Health Problems was 80.6%, indicating optimal activity.

Strengths

- Availability of communicable disease population health registries
- Robust county Community Health Assessment and Community Health Improvement Plan
- Improved availability and usage of targeted data to inform neighborhood-level initiatives and decision making
- Increased data collection, analysis and dissemination collaboration and coordination across agencies

Weaknesses

- Lack of a comprehensive clearing house of assessment activities and reports
- Lack of awareness of community health assessments and data
- Lack of chronic disease morbidity data and registries
- Lack of understanding among some LPHS partners and residents of data nuances, including changes in data collection and coding methodologies

Short-Term Improvement Opportunities

- Increase awareness by community residents of available assessments and data
- Increase understanding about data nuances among LPHS partners and county residents
- Establishment of a hospital discharge database

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- Development of data sharing agreements and infrastructure to decrease turnaround time for accessing health-related data

Long-Term Improvement Opportunities

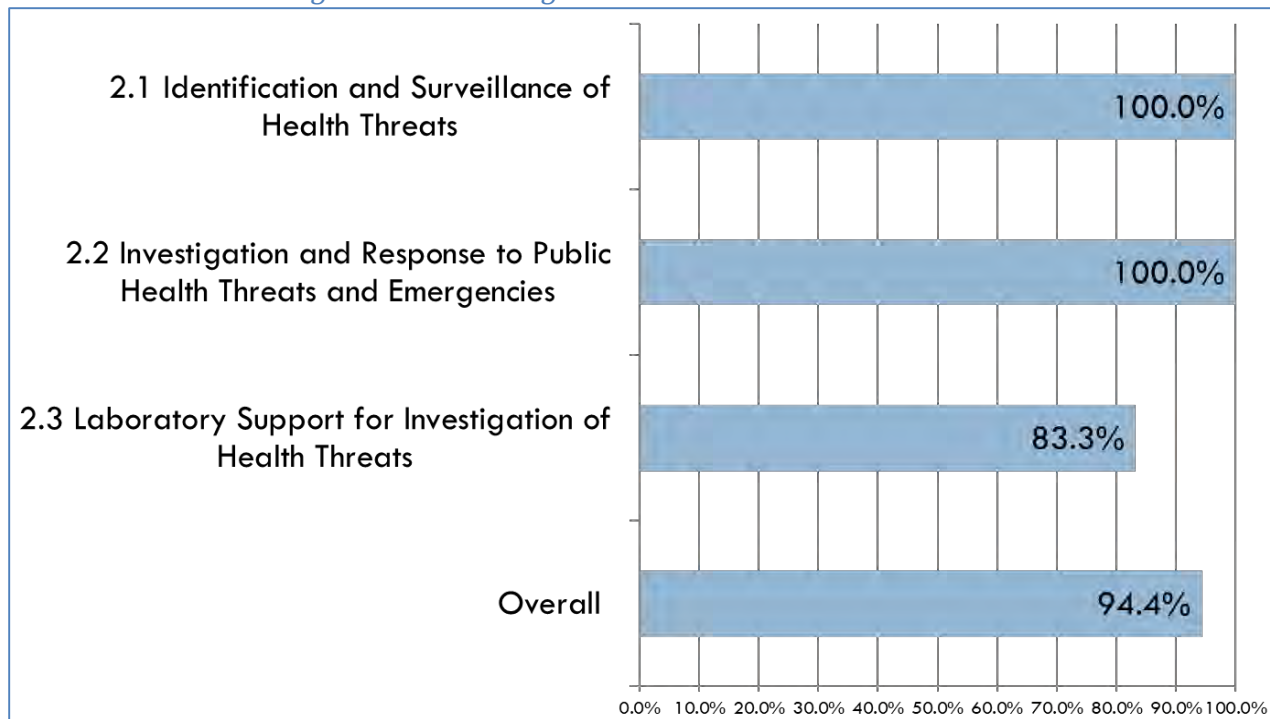
- Increase capacity among LPHS to utilize best available technology for health initiatives
- Establishment of state-wide data depository



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FIGURE 8

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



The overall performance score for Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards was 94.4%, indicating optimal activity.

Strengths

- Established emergency and disease outbreak preparedness protocols, surveillance systems and partnerships
- Presence of community-based, emergency-focused coalitions of community residents, organizations and emergency service providers
- Established county systems for recruiting general and healthcare-related personnel for emergencies

Weaknesses

- Lack of information sharing between payers and public health surveillance systems, especially for chronic diseases
- Lack of established protocols in some school districts for sharing of information and increasing cooperation between doctors, parents and schools nurses regarding student exposure from international travel-related exposures and illnesses

Short-Term Improvements

- Establish protocols and policies for increasing surveillance and reporting at the school level
- Increase communication between emergency-focused agencies and other LPHS partners (schools, payers, etc.)
- Develop state-wide system for emergency volunteer and response teams based on the type of emergency
- Share written documents on emergency management procedures with local public health system partners

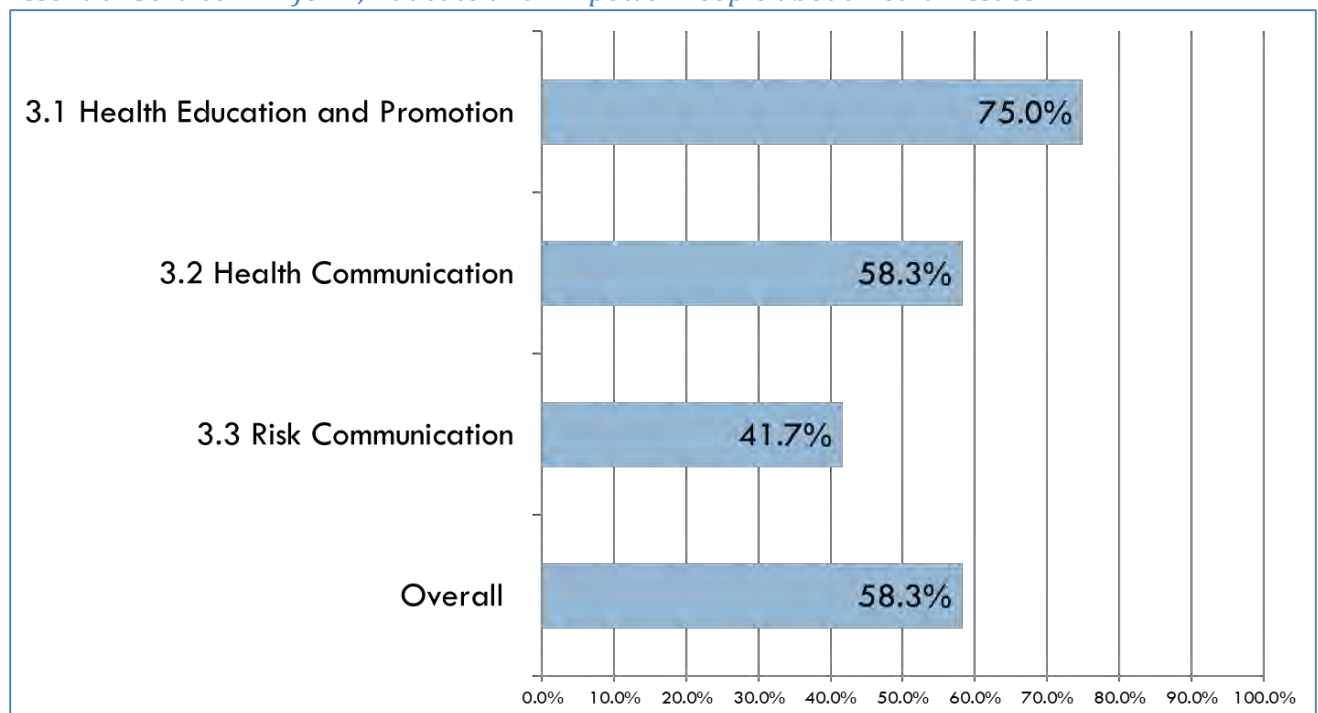
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Long-Term Improvements

- Improve the availability and accessibility of accurate state and national data
- Identify all surveillance systems at the local, state and federal levels and utilize the best surveillance systems available

FIGURE 9

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



The overall performance score for Essential Service 3: Inform, Educate and Empower People about Health Issues was 58.3%, indicating significant activity.

Strengths

- Increased use of lay health advisors to disseminate information to the community
- Individual LPHS partners maintain comprehensive health communication and education plans
- Increased use of multiple communication channels (printed materials, webcast, social media, text messaging, media coverage, etc.) to disseminate health and risk messaging

Weaknesses

- Lack of involvement of the target audience in the development of health messaging
- Lack of coordination among the LPHS in health communication
- The public unaware of risk communication and post-emergency plans



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Short-Term Improvement Opportunities

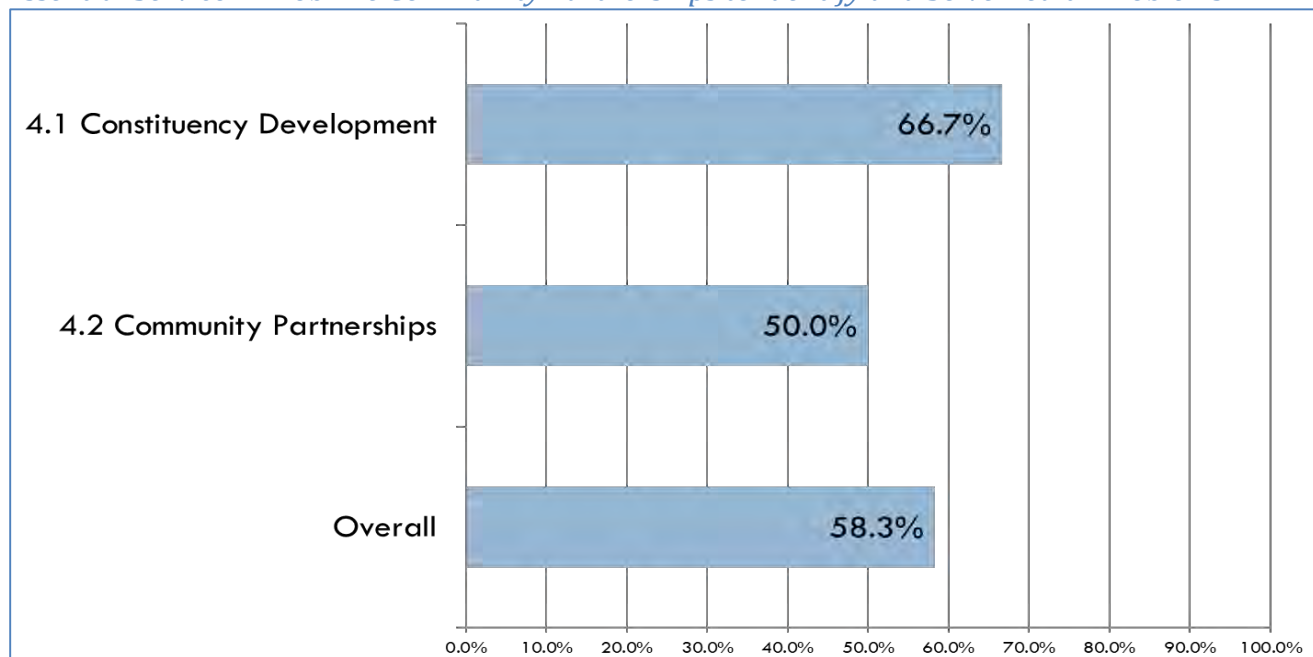
- Expand community networks to reach marginalized populations
- Evaluate communication and health education plans to measure effectiveness and degree to which information reached the intended audiences
- Increase risk communication and awareness of emergency plans prior to an emergency event

Long-Term Improvement Opportunities

- Increase coordination of health messaging and health information across LPHS partners
- Increase collaboration with non-traditional LPHS partners to expand reach of health messaging

FIGURE 10

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



The overall performance score for Essential Service 4: Mobilize Community Partnerships to Identify and Solve Health Problems was 58.3%, indicating significant activity.

Strengths

- Existing community partnerships address a plethora of public health issues (built environment, mental health, healthcare, infant mortality, financial stability, education, emergency preparedness, congregation health, etc.)
- Existing established partnerships provide technical assistance and resources to create additional partnerships and alliances reaching new geographic areas and emerging public health issues



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Weaknesses

- Lack of community engagement in community partnerships and need to broaden the spectrum of ability, race, ethnicity, sexual orientation and gender identity represented within community partnerships
- Lack of engagement of general public on public health issues
- Lack of diversity among partnership leaders

Short-Term Improvement Opportunities

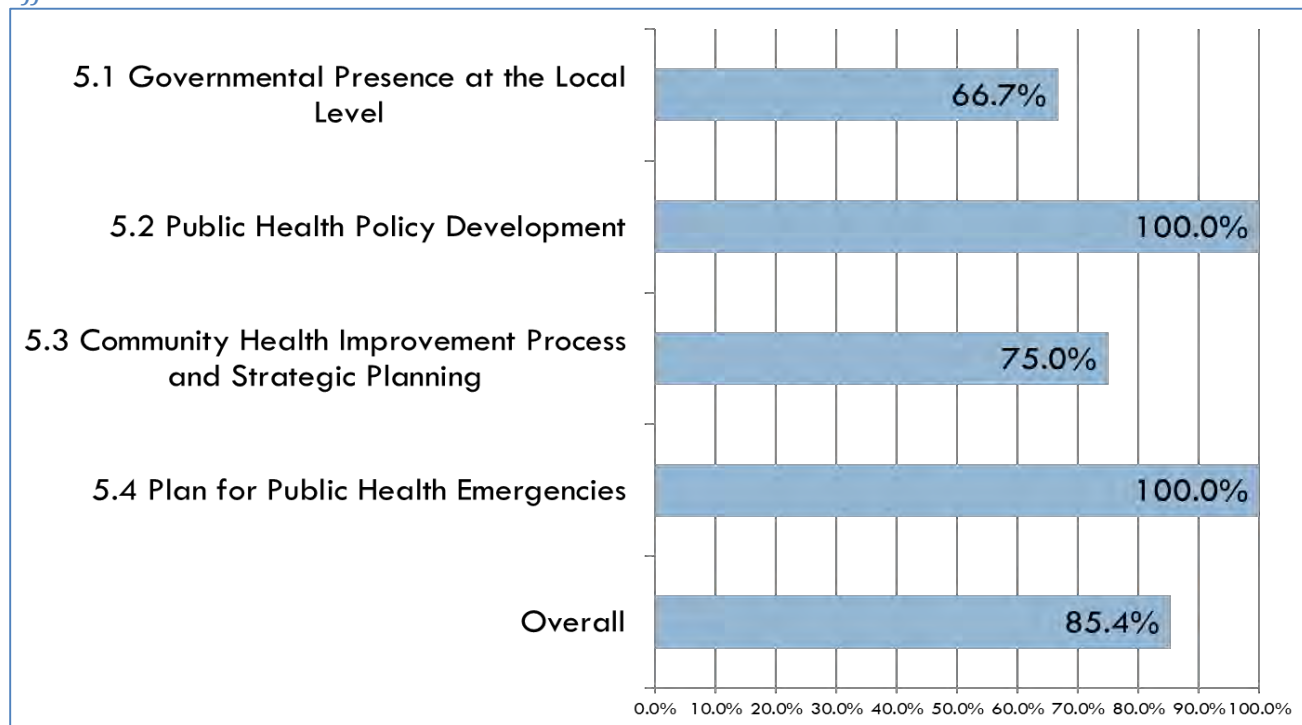
- Improved communication, data sharing and engagement with the general public
- Increase diversity in partnership membership and leadership
- Increase collaboration in advocacy activities addressing the root causes of public health issues

Long-Term Improvement Opportunities

- Increased voice in who represents public health at the state level and engagement with elected officials
- Evaluation of the effectiveness of community health partnerships in achieving stated goals
- Maintain partnership sustainability and increase capacity to solve complex problems and measure impact of interventions designed to resolve health issues

FIGURE 11

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





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The overall performance score for Essential Service 5: Develop Policies and Plans that Support Individual and Community Health Efforts was 85.4%, indicating optimal activity.

Strengths

- Robust comprehensive emergency plans with imbedded processes for continuous evaluation and plan refinement
- Jefferson County Department of Health is the first health department in the state of Alabama to receive accreditation through the Public Health Accreditation Board
- Development and maintenance of the Community Health Improvement Plan for Jefferson County, Alabama with over 100 partners

Weaknesses

- Lack of availability and accessibility of emergency plans for community members
- LPHS needs support to educate the general community on policy development, improvement and implementation
- Lack of a streamlined process for informing and receiving feedback from the LPHS on proposed policies and plans

Short-Term Improvement Opportunities

- Increase communication to general public and LPHS about the agencies regulating each area of public health (e.g., air and soil pollution, open burning, etc.)
- Increase engagement and education of community residents in policy and plan development processes

Long-Term Improvement Opportunities

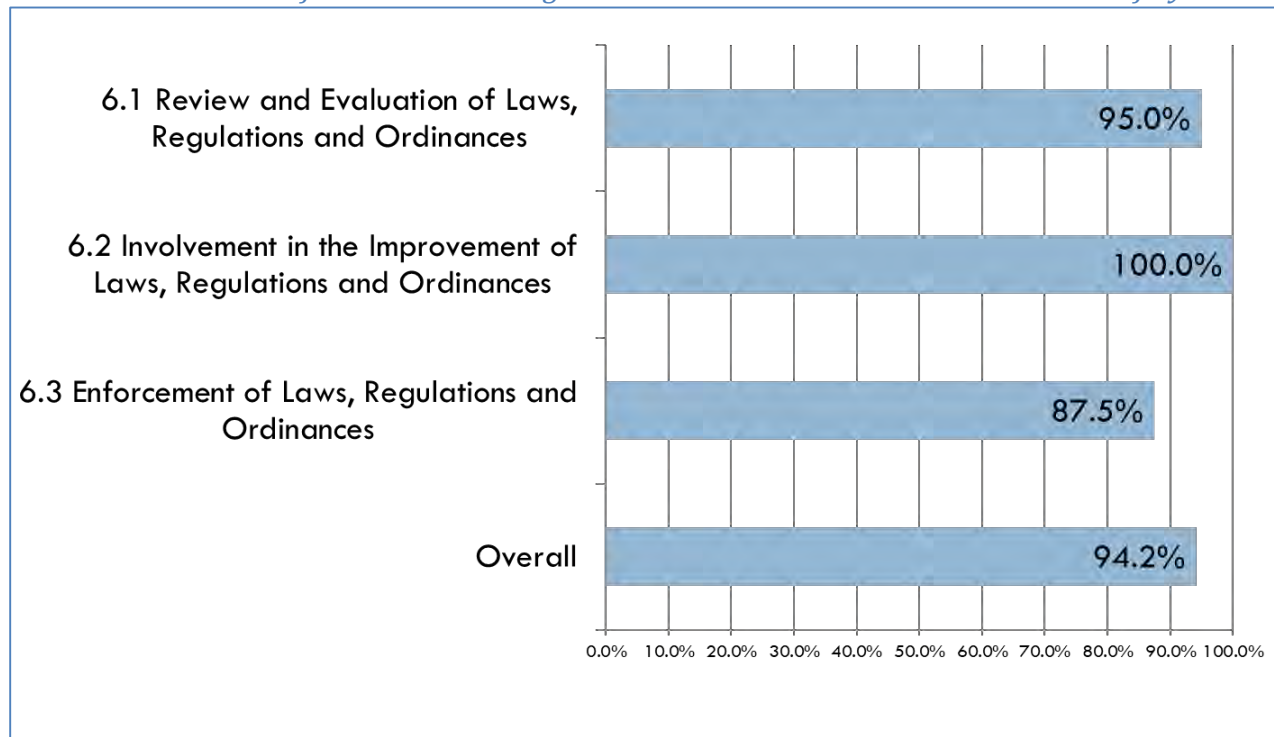
- Increase funding for the review of public health policies and identify entities to assist smaller agencies in reviewing policy
- Overcome silos in emergency response, regardless of municipality or jurisdiction and increase communication, collaboration and coordination among emergency providers

FIGURE 12



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Essential Service 6: Enforce Laws and Regulations That Protect Health and Ensure Safety



The overall performance score for Essential Service 6: Enforce Laws and Regulations That Protect Health and Ensure Safety was 94.2%, indicating optimal activity.

Strengths

- Established processes to alert the public to review and provide feedback on new and revised laws, regulations and ordinances
- Many cities and municipalities within Jefferson County have Complete Streets and Comprehensive Smoke-Free ordinances
- **Weaknesses**
- Lack of capacity to monitor and enforce boarding home regulations and to close illegal boarding homes
- Lack of willingness to prosecute regulation violations at the municipality level
- Lack of public awareness of some existing laws, regulations and ordinances

Short-Term Improvement Opportunities

- Develop strategies to disseminate information about compliance with laws and regulations to LPHS partners
- Increase prevention education regarding emerging public health issues (e.g., gun violence, rabies, dogs in restaurants, etc.)

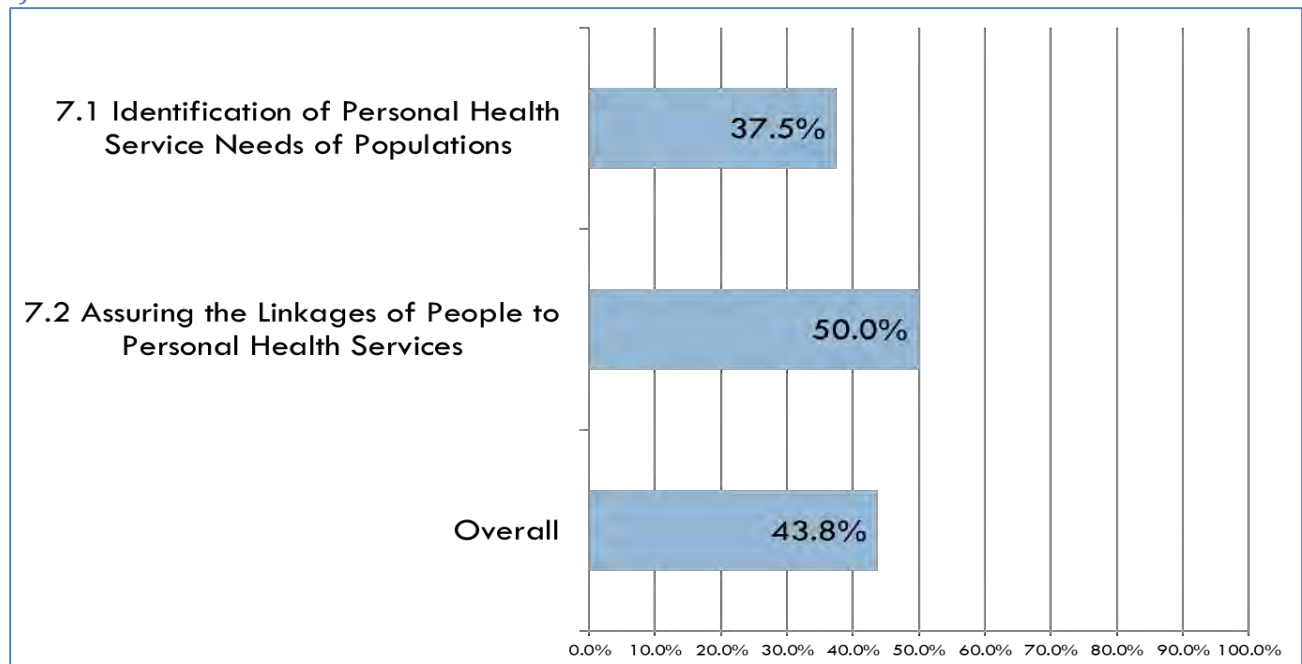
Long-Term Improvement Opportunities

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- Expand the development and implementation of Complete Street ordinances and smoke-free protections to additional municipalities within Jefferson County
- Increase capacity to enforce boarding home regulations

FIGURE 13

Essential Service 7: Link People to Needed Personal Health Services and Assure the Provision of Healthcare When Otherwise Unavailable



The overall performance score for Essential Service 7: Link People to Needed Personal Health Services and Assure the Provision of Healthcare When Otherwise Unavailable was 43.8%, indicating moderate activity.

Strengths

- Needs assessments have been conducted to identify barriers to care, including specific barriers for sub-populations
- Stakeholder groups are established and serve as mechanisms for resource sharing
- New initiatives exist linking vulnerable populations to services and providing healthcare system navigation

Weaknesses

- Lack of strategies to resolve identified barriers to care
- Lack of a centralized resource referral system to determine resource availability and the utilization
- Lack of awareness that the disabled, LGBTQIA, undocumented and HIV sub-populations have unique barriers and needs related to personal health services

Short-Term Improvement Opportunities



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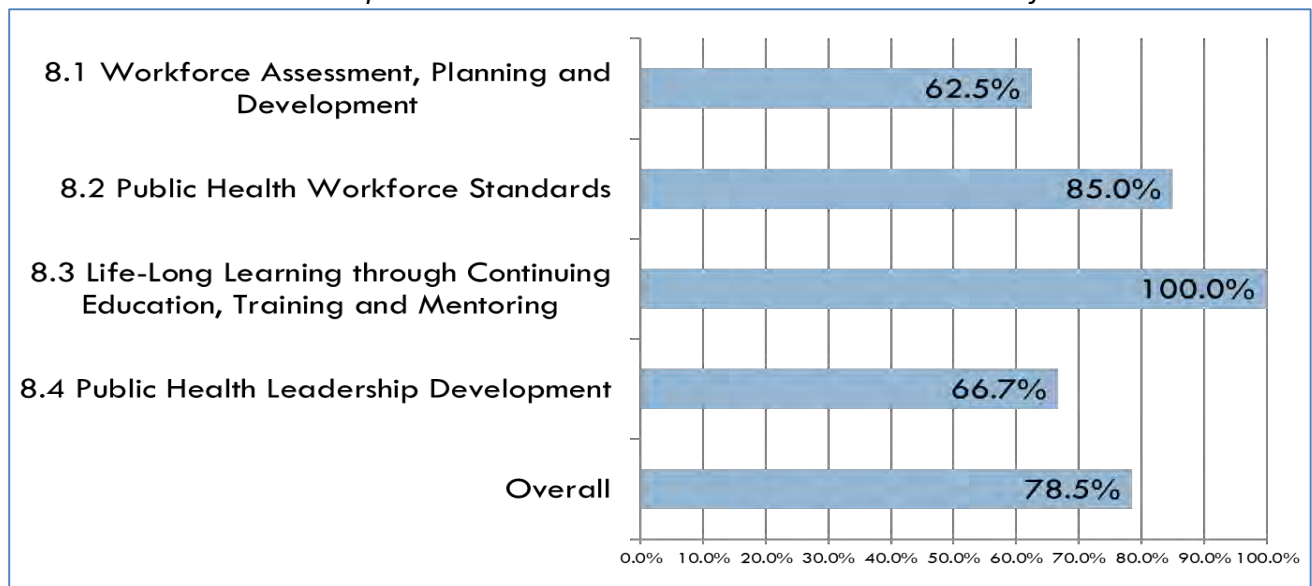
- Increase awareness of the needs assessments available and increase utilization of assessment results in planning strategies
- Assess the optimal process for reaching special populations in health promoting care utilization
- Combine community outreach efforts for efficiency and effectiveness

Long-Term Improvement Opportunities

- Conduct a targeted and relevant needs assessment focused on historically marginalized sub-populations that ask most relevant questions
- Aggregate data across agencies to inform policies

FIGURE 14

Essential Service 8: Assure a Competent Public Health and Personal Healthcare Workforce



The overall performance score for Essential Service 8: Assure a Competent Public Health and Personal Healthcare Workforce was 78.5%, indicating optimal activity.

Strengths

- Established processes for background and licensure checks including tracking licenses and continuing education units
- Availability of many emergency preparedness trainings opportunities, including those for volunteers and the general community

Weaknesses

- With no comprehensive public health workforce needs assessment, training gaps and opportunities to leverage resources are unknown



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- Lack of awareness of the social determinants of health and health equity principles beyond traditional public health partners
- Prior attempts to create collaborations in training have failed

Short-Term Improvement Opportunities

- Increase public health training opportunities and outreach to civic groups and residents
- Increase public health leadership opportunities and conduct succession planning
- Educate partners who do not recognize their role as part of the public health system on their contributions to the local public health system

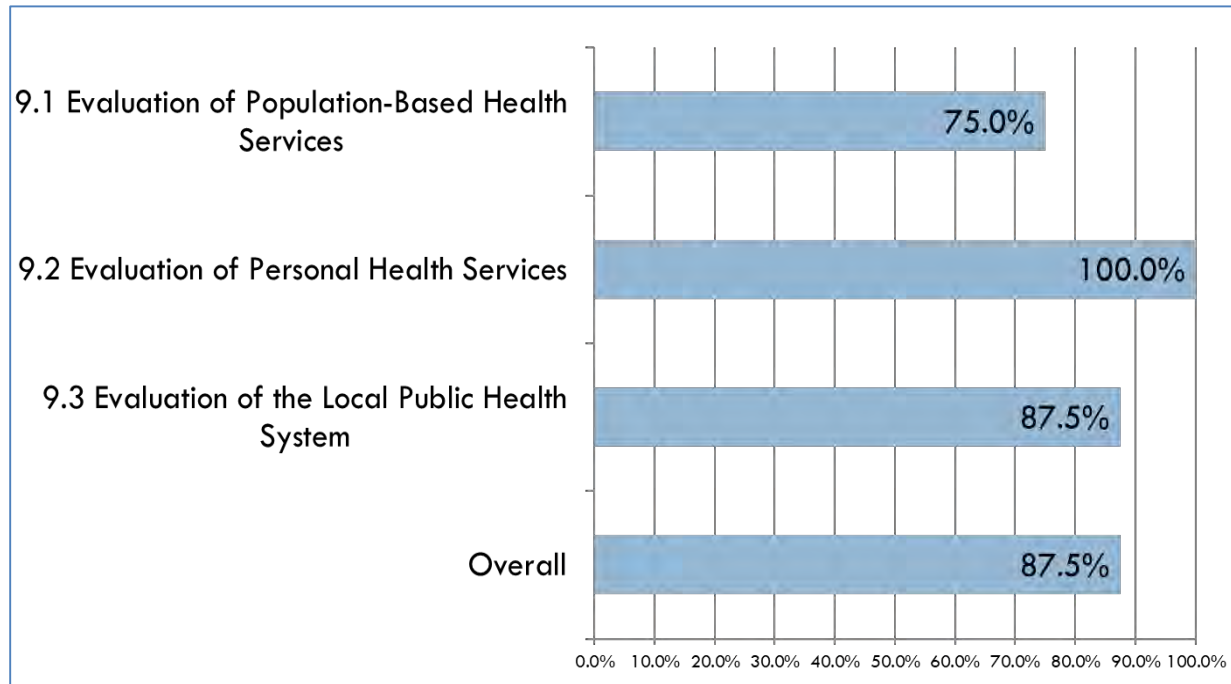
Long-Term Improvement Opportunities

- Conduct public health workforce planning across the LPHS, especially for emergency response public health sector
- Expand existing training opportunities to include additional public health professionals and community residents

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FIGURE 15

Essential Service 9: Evaluate Effectiveness, Accessibility and Quality of Personal and Population-Based Health Services



The overall performance score for Essential Service 9: Evaluate Effectiveness, Accessibility and Quality of Personal and Population-Based Health Services was 87.5%, indicating optimal activity.

Strengths

- Funders require some accountability in health outcomes
- Most organizations conduct programs and services evaluations to measure effectiveness and accessibility

Weaknesses

- Lack of consistent evaluation of the availability and accessibility of services for special populations, including seniors, adults with disabilities and young adults transitioning from child health services to adult health services
- No inclusive data sharing and communication between LPHS partners
- Barriers exist that prevent implementation of improvements identified through evaluation
- Lack of data integration across the various data systems

Short-Term Improvement Opportunities

- Create roundtables for assessing and closing gaps in personal and population-based services for select sub-populations (e.g., pediatric mental health)
- Engage a wider variety of organizations in assessment and evaluation activities

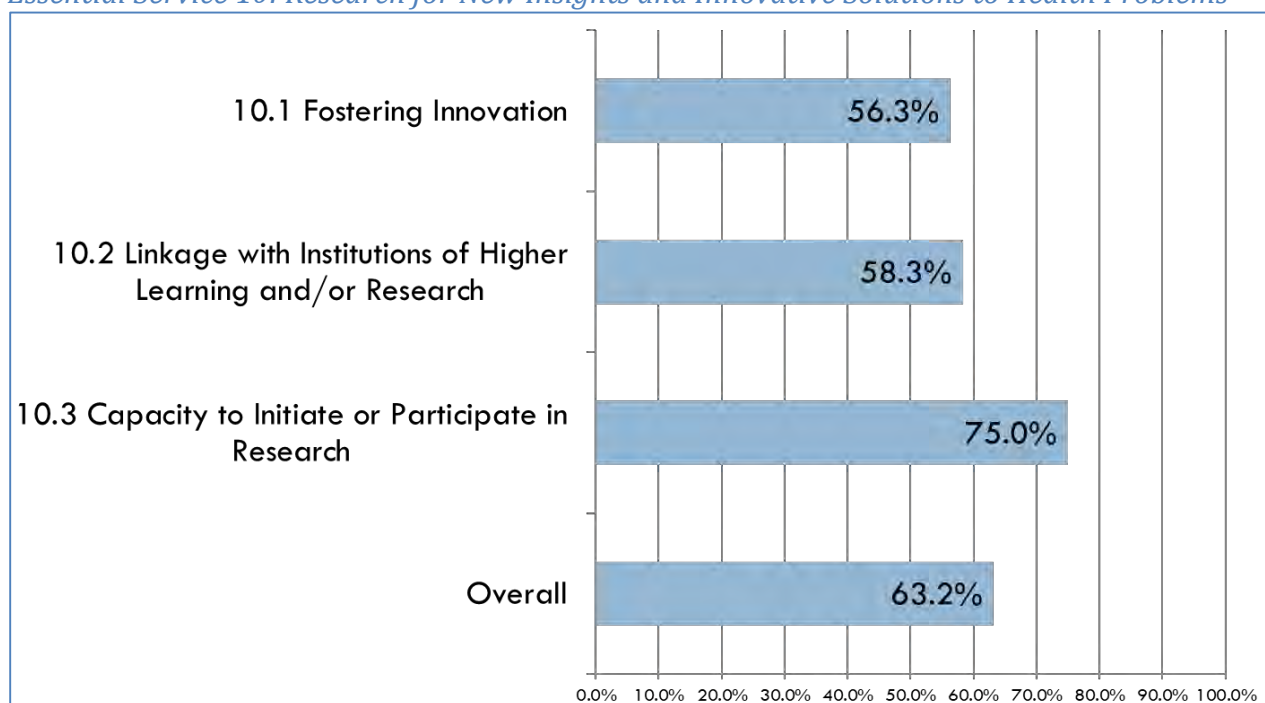
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Long-Term Improvement Opportunities

- Gather data from organizations and consolidate data to create an overall assessment of needs and resources
- Implement additional roundtables on unaddressed and emerging issues

FIGURE 16

Essential Service 10: Research for New Insights and Innovative Solutions to Health Problems



The overall performance score for Essential Service 10: Research for New Insights and Innovative Solutions to Health Problems was 63.2%, indicating significant activity.

Strengths

- Significant utilization of Community-Based Participatory Research models uniting community, university and public health partners
- Implementation of research training targeted at public health system partners, including community residents and organizations

Weaknesses

- Disconnect between interests the community, researchers and funders
- Lack of an inventory of research projects with their geographic location, resulting in oversaturation of research in some neighborhoods
- Lack of community awareness and empowerment to initiate research request



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Short-Term Improvement Opportunities

- Formation of a Local Public Health System Research Strategy group
- Continued to pursuance of individual and collaborative grant opportunities

Long-Term Improvement Opportunities

- Local Public Health System Research Strategy group to establish a research clearinghouse and guidelines for working with communities
- Evaluation of the effectiveness of existing research
- Advocacy for an Alabama hospital discharge database and identification of databases with census tract level data

Local Public Health System Assessment Conclusion

The Local Public Health System Assessment (LPHSA) provides local public health system (LPHS) partners with a snapshot of the LPHS's collective performance. The scores within the LPHSA are based upon input from diverse LPHS partners with unique experiences and perspectives and therefore are somewhat objective. Due to the limitations noted, the results and recommendations associated with the assessment report should be used for quality improvement purposes.

