

Executive Summary: Community Partner Assessment (CPA)

Overview of the Community Partner Assessment

The Community Partner Assessment (CPA) is a structured assessment tool developed by the National Association of County and City Health Officials as part of Mobilizing for Action through Planning and Partnerships (MAPP) 2.0. The CPA replaces the former Local Public Health System Assessment (LPHSA) and is designed to help communities better understand the strengths, capacities, and opportunities within their local public health system. The CPA was conducted by the Jefferson County Department of Health to identify how diverse community partners contribute to public health and community well-being, even when the organization's primary mission is not explicitly health focused.

The CPA consisted of interactive in-person sessions and an electronic survey distributed to 138 partners. CPA sessions included exercises on how partners conduct the ten Essential Public Health Services (EPHS), a SWOT analysis of the EPHS and a discussion on how partners engage the community. A structured, electronic survey was administered via Survey Monkey from May 21, 2025 through August 8, 2025 to community partners, with one response submitted per organization by a leadership or senior staff representative. The survey included closed-ended and open-ended questions addressing organizational characteristics, populations served, community engagement practices, data and evaluation capacity, policy and advocacy activities, and perceived impacts of social determinants of health. Responses from 68 organizations were aggregated and analyzed using descriptive statistics and thematic review of narrative responses.

The CPA emphasizes that public health extends beyond clinical care. Health outcomes are shaped by social, economic, environmental, and structural factors, including education, housing, employment, transportation, public safety, and civic engagement. Through this assessment, community partners reflected on the populations served, services and supports provided, how collaboration occurs, and the skills and resources brought to the collective effort to improve health.

CPA Snapshot

- *68 organizations participated in the CPA survey*
 - *Partners span nonprofit, healthcare, education, emergency response, government, and grassroots sectors*
 - *Partners collectively address healthcare access, economic stability, education, housing, and social connection*
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The goals of the CPA are to document the landscape of community partners, clarify partner roles within the local public health system, assess individual and collective strengths, identify gaps and opportunities for improvement, and inform the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). Responses to the CPA survey provide a comprehensive picture of Jefferson County’s public health ecosystem and the collaborative infrastructure that supports community health improvement.

How Community Partners Support the Local Public Health System

CPA respondents represent a broad cross-section of organizations, including nonprofit organizations, social service providers, healthcare organizations, educational institutions, grassroots and faith-based groups, emergency response agencies, governmental entities, and advocacy organizations. Together, these partners form the foundation of Jefferson County’s local public health system, contributing across multiple domains of health and well-being.

Survey results indicate that partners most frequently support the local public health system through community engagement and partnership-building, direct service provision, communication and education, assessment and data collection, and access to care (See Table 1). Many organizations also contribute to evaluation, research, workforce development, policy development, and systems coordination. While only some partners hold formal public health authority, all play a critical role in shaping conditions that influence population health.

Table 1. Public Health Activities Conducted by Partners

Public Health Function	Percent of Organizations Providing the Public Health Function
Community engagement & partnerships	89%
Communication & education	72%
Assessment & data collection	62%
Access to care & services	59%
Evaluation & research	51%
Policies, plans & laws	48%
Organizational infrastructure	46%
Workforce	39%
Investigation of hazards	30%
Legal and regulatory authority	11%

Community partners support the local public health system by meeting people where they are geographically, culturally, and socially. Organizations conduct outreach in neighborhoods, provide linguistically and culturally responsive services, build trust with historically marginalized communities, and serve as trusted messengers. These efforts expand the reach of public health beyond traditional settings and strengthen community resilience.

Unique Skills and Strengths That Improve Community Health

CPA findings highlight several core strengths that community partners bring to improving health in Jefferson County. The most frequently cited asset across organizations is people—skilled, dedicated staff, leadership, boards, and volunteers deeply committed to the community and well-being. Many partners emphasized lived experience, cultural competence, and long-standing relationships as critical to organizational effectiveness.

Another defining strength is deep community trust and engagement. Partners described credibility built through years of presence, consistent service delivery, and relational approaches that prioritize dignity, respect, and mutual accountability. This trust allows organizations to reach populations that may be disconnected from traditional systems and to respond quickly in times of crisis.

Partners also demonstrate strong capacity for comprehensive and specialized service delivery. Many provide integrated or “one-stop” service delivery models that address physical health, behavioral health, housing, food access, education, workforce development, and family support. Other partners offer specialized expertise in areas such as maternal and child health, chronic disease prevention and management, mental health, violence prevention and intervention, environmental health, emergency response, and disability services.

Collaboration and partnership-building are additional strengths. Organizations frequently work across sectors, leveraging relationships with healthcare systems, schools, governments, funders, and grassroots groups. This collaborative infrastructure enables resource sharing, coordinated referrals, and collective problem-solving.

Core Strengths Identified

- *Skilled and dedicated staff, leadership, and volunteers*
 - *Deep community trust and long-standing relationships*
 - *Comprehensive and specialized services for underserved populations*
 - *Strong cross-sector collaboration and partnerships*
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Finally, many partners contribute public health expertise, data, research, and innovation. Organizations collect and analyze data on service utilization, social determinants of health, and community needs, and use this information to inform programming, advocacy, and policy development. Others bring long-standing institutional knowledge, physical infrastructure, or statewide reach that supports sustained impact.

Collective Strengths Across the Network

Taken together, CPA results demonstrate that Jefferson County’s local public health system is people-centered, relationship-driven, and mission-focused. Collectively, partners serve low-

income and underserved populations, children and families, individuals with complex health and social needs, and communities impacted by structural inequities.

The local public health system shows strong alignment with the social determinants of health. A majority of organizations report focusing ‘a lot’ on healthcare access and quality, economic stability, education access, neighborhood and built environment, and social and community context (See Table 2). This alignment positions the network to address upstream drivers of health outcomes rather than solely downstream effects.

Table 2. Focus Areas Related to Social Determinants of Health

Focus Area	Percent Focusing “A Lot” in the Area
Healthcare access & quality	59%
Economic stability	54%
Education access	49%
Neighborhood & built environment	45%
Social & community context	39%

Another collective strength of Jefferson County’s local public health system is the breadth of strategies employed across organizations. Partners engage in direct services, community engagement, leadership development, advocacy, policy analysis, organizing, healing-centered approaches, and data-driven decision-making. This diversity of strategies enhances the system’s ability to respond to complex and evolving community needs.

Opportunities for Improvement and Future Action

While the CPA highlights significant strengths, it also reveals shared challenges and opportunities for improvement. The most commonly identified constraint across organizations is limited capacity, particularly related to funding, staffing, and physical space. Many partners reported that community needs are growing faster than available resources.

Opportunities exist to strengthen coordination and sustainability across the network. Enhanced data sharing, shared measurement frameworks, and cross-sector planning could improve alignment and reduce duplication. Additional investment in workforce development, especially for community-based and peer-led roles, would further strengthen the system.

Capacity Challenges

- *Only 38% of organizations report having sufficient capacity*
 - *41% identified unmet needs such as funding, staffing, or space*
 - *Common needs include additional staff, sustainable funding, and workforce support*
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The CPA also points to opportunities to deepen community engagement and power-building. While many organizations already involve community members through advisory boards and leadership development, expanding these practices can further center community voice in decision-making and policy development.

Finally, the CPA underscores the importance of continuing to broaden the MAPP partnership directory. Engaging additional grassroots organizations, residents, and sectors not yet fully represented will enhance collective capacity to address health disparities at individual, systemic, and structural levels.