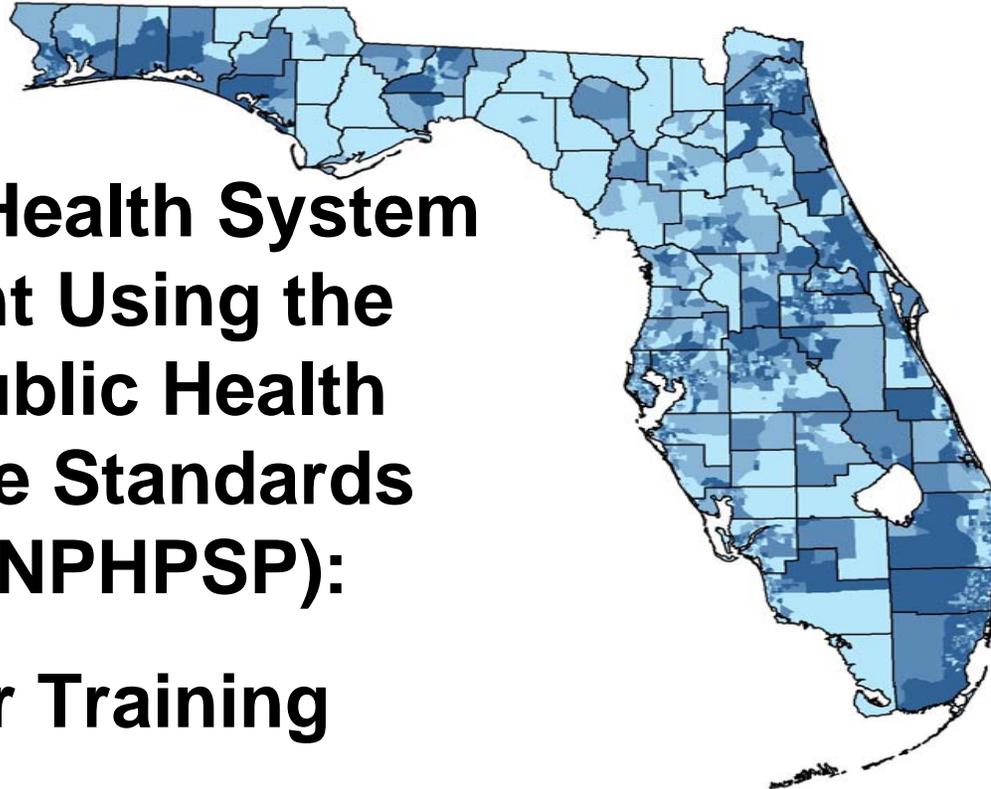


Webinar Series

**Local Public Health System
Assessment Using the
National Public Health
Performance Standards
Program (NPHPSP):
Facilitator Training**



Guest Presenters

Teresa Daub, CDC Office State, Tribal, Local and Territorial Support

Julia Joh Elligers, National Association of County and City Health Officials



Office of Health Statistics and Assessment

June 27, 2011



Today's Topic

Facilitator Training

- Series Goal: strengthen ability to assess public health system capacity and use results for planning and performance improvement efforts
- Fifth in a series of six modules

Today's Objectives:

- Plan for assessment meeting facilitation
- Understand the responsibilities and duties of the NPHPSP facilitator
- Facilitate with confidence
- Access available tools and resources

Snapshot of NPHPSP

- Four core concepts
 - Ten Essential Public Health Services
 - Focus on public health system
 - Optimal level of performance
 - Support quality improvement
- Three instruments: state, local, governance
- Support for implementation
- Reports generated
- Support for quality improvement

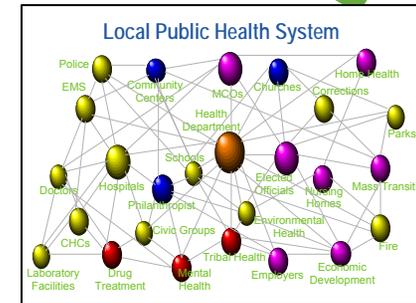
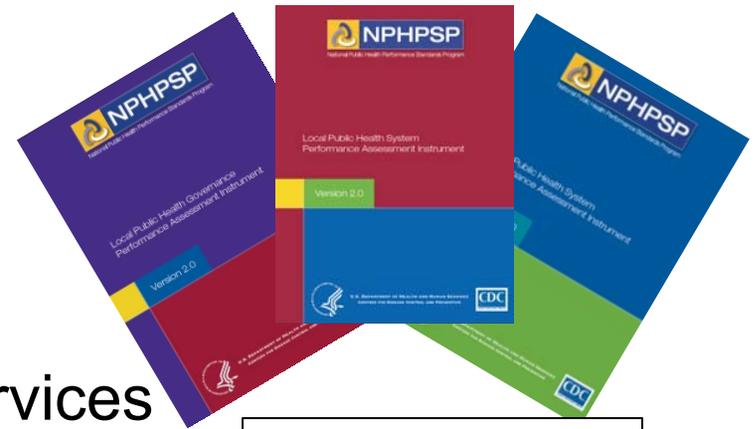
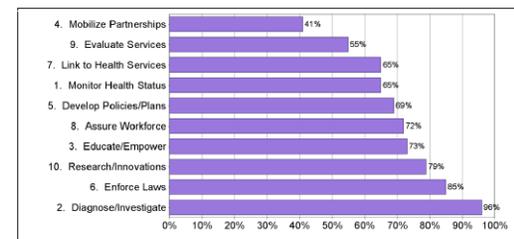


Figure 2: Rank ordered performance scores for each Essential Service



Guest Presenters

Teresa Daub

- Public Health Advisor, Centers for Disease Control and Prevention, Office of State, Tribal, Local and Territorial Support

Julia Joh Elligers

- MAPP Program Manager, National Association of County and City Health Officials (NACCHO)



NPHPS
National Public Health Performance Standards Program

Local Public Health System Assessment using the NPHPS: Facilitator Training

**Teresa Daub, CDC and
Julia Joh Elligers, NACCHO**

This session

Facilitators & Recorders

- ▲ Roles and responsibilities within NPHPSP
- ▲ Materials needed

Meeting Preparation

The Assessment Process

Dealing with Facilitation Challenges

Tips

Three Principles of Facilitation

- 🔄 Guides people through a process –
Draw out opinions and ideas
- 🔄 Focuses on HOW people participate,
not just on WHAT gets done
- 🔄 Maintains neutrality, doesn't take sides

Adapted from the Community Tool Box (<http://ctb.ku.edu/>).

Facilitating NPHPSP: Desired Outcomes

- 🌀 To complete the NPHPSP assessment
- 🌀 To enhance understanding of the public health system
- 🌀 To build relationships within the system
- 🌀 Others?

Facilitator Roles

General responsibilities

- ▲ Establish and adhere to ground rules
- ▲ Manage group process – set the pace
- ▲ Get input from everyone
- ▲ Draw out different points of view
- ▲ Reflect and check group opinion
- ▲ Be a cheerleader



NPHPSP responsibilities:

- ▲ Keep the focus on the “system”
- ▲ Review model standards and facilitate open discussion
- ▲ Review questions and gather votes
- ▲ Re-open discussion where needed
- ▲ Obtain a decision on the final response

Facilitator Tips

- 🌀 Get agreement on agenda, ground rules, and outcomes
- 🌀 Use reflective listening
- 🌀 Show respect for the experience
- 🌀 Find out the group's expectations
- 🌀 Stay in your facilitator role
- 🌀 Don't be defensive
- 🌀 “Buy-in” power players

Adapted from the Community Tool Box (<http://ctb.ku.edu/>).

Recorder Roles

Capture Quantitative (scores) and Qualitative (comments) Data



▲ Assessment scores

- Individual votes (*optional*)
- Final consensus response

▲ Key ideas and comments from the discussion

- Information that shapes group scores (reasons for high/low performance)
- System strengths and weaknesses
- Potential strategies for improvement
- Priorities

Additional Recorder Responsibilities

-  Help the facilitator count votes (if using voting cards).
-  Assist the facilitator to manage time.
-  Serve as a liaison to the meeting coordinator.

Recorder Tips

- 🔄 Two recorders per room is optimal.
- 🔄 Seat recorders together.
- 🔄 Provide a standard set of abbreviations.
- 🔄 Consider using flip charts or a laptop/projector so that participants can view recorded responses and comments.

Participant Materials

- 🔄 Local NPHPSP Instrument (Assessment)
- 🔄 Voting Cards (or Automated Response System)
- 🔄 Participant handouts
 - ▲ Local public health system diagram (egg map)*
 - ▲ Assessment process map*
 - ▲ List of 10 essential services
 - ▲ Evaluation form

* These materials may be handouts or in-room posters.

Materials for Each Meeting Room

- 🔄 Glossary
- 🔄 Flip chart list of ground rules
- 🔄 Flip charts with tape and markers
- 🔄 Paper, pens/pencils, sticky notes
- 🔄 Laptop(s) loaded with instrument score sheets/note-taking template

Optional:

- 🔄 Essential service flip chart list (from orientation exercise)
-

Different Approaches

- 🌀 One-day retreat
- 🌀 Series of meetings
- 🌀 Divide and conquer
- 🌀 Automated voter response
- 🌀 Multiple methods (e.g. survey first, discussion second)

Regardless of approach, ensure...

Selecting an Approach

- 🌀 The LHD does not dominate the process.
- 🌀 All voices are heard.
- 🌀 Cross learning about system strengths, duplication, & inefficiencies.
- 🌀 Ample opportunity to understand the reasons behind system performance—quantitative data is not enough, qualitative data gives you the details that inform improvement strategies.

Overview of Steps

- 🔄 Step 1: Preparation
- 🔄 Step 2: Welcome & Introduction
- 🔄 Step 3: Process Overview
- 🔄 Step 4: Review Model Standard
- 🔄 Step 5: Read & Discuss Questions
- 🔄 Step 6: Preliminary Vote
- 🔄 Step 7: Consensus Building
- 🔄 Essential Service Wrap-Up

Step 1: Preparation

- 🔄 Review steps involved in facilitation
- 🔄 Read & understand assigned sections
 - ▲ Anticipate & prepare for potentially problematic or confusing questions
 - ▲ Ask your colleagues for help
- 🔄 Review all supplemental materials
- 🔄 Prepare a script
- 🔄 Introduce yourself to your recorders

Step 1: Preparation

 Review who will be in attendance

 Inquire about group dynamics

▲ Ask about over & under-expressive people

▲ Ask about individuals with a lot of influence or power

▲ Think about strategies for allowing everyone to speak (e.g. round robin, individual quiet thinking, ask quiet individuals to share first.)

Step 1: Preparation

Have information on

- ▲ Location
- ▲ Agenda, including breaks and meals
- ▲ People who can serve as a technical resource
- ▲ People who can help with logistics
- ▲ Next steps after assessment is complete

Arrive on site early

- ▲ Make sure room set-up is conducive to discussion

Step 2: Welcome & Introductions

- 🔄 Welcome & thank participants
- 🔄 Introduce yourself as facilitator and explain your responsibility to guide the process so that everyone's voice is heard while keeping within the allotted timeframe.
- 🔄 Ask recorders to introduce themselves

Step 2: Welcome & Introductions

- 🔄 Ask participants to
 - ▲ Introduce themselves
 - ▲ Very briefly describe their organizations
 - ▲ Ask participants to share their expectations for the day
 - ▲ Recorders should capture this information.

Step 3: Provide an Overview

Review

- ▲ Purpose of assessment
- ▲ Goal for the day
- ▲ Timeframe
- ▲ Ground rules
- ▲ Materials

Step 3: Provide an Overview

- 🔄 Explain that the group will go through a series of consensus processes based on
 - ▲ Sharing
 - ▲ Listening
 - ▲ Learning
 - ▲ Discussion
 - ▲ Collective decision-making
- 🔄 Steps in consensus process (slides 22-34)

Step 4: Review Model Standard

🔄 For the 1st MS, read the overall ES description, then the MS



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

This service includes:

- Accurate, periodic assessment of the community's health status, including:
 - Identification of health risks, determinants of health, and determination of health service needs;
 - Attention to the vital statistics and health status indicators of groups that are at higher risk than the total population; and
 - Identification of community assets that support the local public health system (LPHS) in promoting health and improving quality of life.
- Utilization of appropriate methods and technology, such as geographic information systems (GIS), to interpret and communicate data to diverse audiences.
- Collaboration among all LPHS components, including private providers and health benefit plans, to establish and use population health registries, such as disease or immunization registries.

LPHS Model Standard 1.1: Population-Based Community Health Profile (CHP)

The community health profile (CHP) is a common set of measures for the community to prioritize the health issues that will be addressed through strategic planning and action, to allocate and align resources, and to monitor population-based health status improvement over time.

The CHP includes broad-based surveillance data and measures related to health status and health risk at individual and community levels including: demographic and socioeconomic characteristics; health resource availability; quality of life; behavioral risk factors; environmental health indicators; social and mental health; maternal and child health; death, illness, and injury; communicable disease; and sentinel events. The CHP displays information about trends in health status, along with associated risk factors and health resources. Local measures are compared with peer, state, and national benchmarks. Data and information are displayed in multiple formats for diverse audiences, such as the media and community-based organizations. Data included in the community health profile are accurate, reliable, and consistently interpreted according to the science and evidence-base for public health practice.

To accomplish this, the local public health system (LPHS):

- Conducts regular community health assessments to monitor progress towards health-related objectives.
- Compiles and periodically updates a community health profile using community health assessment data.
- Promotes community-wide use of the community health profile and/or assessment data and assures that this information can be easily accessed by the community.

Step 4: Review Model Standard

- 🔄 Address clarification questions
- 🔄 Ask participants to describe how the system contributes to the MS (round robin works well)
- 🔄 Ask probing questions to make sure all parts of the MS are discussed
- 🔄 Recorders should capture discussion

Step 4: Review Model Standard

- 🔄 Ask participants to discuss whether activities described in the MS
 - ▲ Are conducted by one entity in isolation, i.e. no one else in the system was aware
 - ▲ Conducted by one sector (e.g. hospitals) but not in others (e.g. LHDs)
 - ▲ Are conducted throughout the jurisdiction
 - ▲ Are conducted with regular frequency
 - ▲ Are of high quality

Step 5: Read & Discuss Question

- 🔄 After MS discussion, read the 1st question.
- 🔄 Given the content of the question, ask participants if they would like to add any additional information about the system performance. (Recorders should capture this information.)

Step 6: Preliminary Vote

 Based on the discussion ask participants to vote on how well the system performs

- ▲ No activity
- ▲ Minimal: 1-25%
- ▲ Moderate: 26-50%
- ▲ Significant: 51-75%
- ▲ Optimal: 76-100%
- ▲ Unsure

TIP: Ask participants to define percentages & ask recorders to capture definitions

Step7: Consensus Building

- 🔄 You will likely have a difference of opinion
- 🔄 Ask those at both ends of the spectrum what informed their vote.
 - ▲ E.g. Ask those who said minimal performance to share what informed their vote, then those that said optimal, then those who were in between (recorders should capture this information)

Step7: Consensus Building

Other helpful questions

- Why did those of you who scored low not think the system should score higher? Why did those of you who scored high not think the system deserved to score lower?
- What would make the “no” person vote moderate activity or the “optimal” person vote significant activity?
- Why do you think we have such a split on this particular Model Standard?

Step7: Consensus Building

Other helpful questions

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

Step 7: Consensus Building

 Ask participants to consider in their vote whether activities

- ▲ Are conducted by one entity in isolation, i.e. no one else in the system was aware
- ▲ Conducted by one sector (e.g. hospitals) but not in others (e.g. LHDs)
- ▲ Are conducted throughout the jurisdiction
- ▲ Are conducted with regular frequency
- ▲ Are of high quality

Step 7: Consensus Building

- 🔄 After group discussion, conduct a 2nd vote
- 🔄 Knowing that you may not have total unanimity, you can ask those that are not in total agreement with the group if they are comfortable moving forward if their comments related to system strengths & weaknesses are captured by the recorder and will inform performance improvement.

Sub-Questions & Discussion Toolbox

Local

Please answer the following questions related to Model Standard 1.1:

Stem Question → 1.1.1 Has the LPHS conducted a community health assessment?

Sub-Question → 1.1.1.1 Is the community health assessment updated at least every 3 years?
1.1.1.2 Are data from the assessment compared to data from other representative areas or populations?

1.1.1.2 Discussion Toolbox
In considering 1.1.1.2, are health status data compared with data from:

- Peer (demographically similar) communities?
- The region?
- The state?
- The nation?

1.1.1.3 Are data used to track trends over time?

1.1.1.4 Does the LPHS use data from community health assessments to monitor progress toward health-related objectives?

1.1.1.4 Discussion Toolbox
In considering 1.1.1.4, do those objectives include:

- Locally-established health priorities?
- State-established health priorities?
- Healthy People 2010 objectives?
- Measures from the Health Plan Employer Data and Information Set (HEDIS)?
- Other health-related objectives?

NO

MINIMAL

MODERATE

SIGNIFICANT

OPTIMAL

Sub-Questions & Discussion Toolbox

- 🔄 Sub-questions can be answered before stem questions. If sub-questions are answered first, read the stem question to provide context for sub-questions.
- 🔄 If stem questions are answered first, refer back to the response for the stem question after answering sub-questions.
- 🔄 Discussion toolboxes are not scored but provide detail for consideration.

Essential Service Wrap-Up

- 🌀 At the end of each ES, reflect on what was shared and capture
 - ▲ Strengths of the LPHS related to ES
 - ▲ Weaknesses of LPHS related to ES
 - ▲ Recommendations for immediate improvements of the LPHS related to this ES
 - ▲ Any priorities of LPHS related to this ES

Troubleshooting

- 🌀 If the conversation becomes all about the LHD,
 - ▲ Remind people that this is a system-not an LHD-assessment.
 - ▲ Even though the LHD might have a strong presence, it may not be aware of all the activity going on in the system.
 - ▲ Remind people there are often system duplications and inefficiencies in how the LHD works with the rest of the system that need to be uncovered.

Troubleshooting

- 🌀 When individuals become defensive about their agencies' performance
 - ▲ Use reflective listening to validate their good work while reminding them that this is a system assessment, and their strengths can be leveraged to improve the system overall.
 - ▲ Remind them there is always room for improvement, and they are rating the system against optimal, not minimal standards.

Troubleshooting

When one person dominates

- ▲ Use reflective listening to validate their point and ask others for their opinion.
 - ▲ Round robin works well to allow everyone to respond in an orderly manner. Start round robins with different people so the same person doesn't have the first or last word each time.
 - ▲ Reference ground rules.
 - ▲ Remind people this is a system assessment, not an assessment of one agency.
-

Troubleshooting

- 🌀 When the group gets off topic or in the weeds
 - ▲ Use reflective listening to validate the importance of the conversation.
 - ▲ Confirm the recorders took note of what was discussed.
 - ▲ Use a parking lot.
 - ▲ Reread the question, and remind participants of their goal.

Troubleshooting

- 🌀 When the group feels like they don't have enough information to answer a question
 - ▲ Capture what the group does & does not know.
 - ▲ Capture who is missing from the conversation
 - ▲ Vote on the question knowing the group has limited information. Lack of awareness is an indicator of system performance.
 - ▲ Flag the question and revisit after gathering more information from missing individuals.

3 Things to Keep in Mind

- 🌀 Preparation is key.
- 🌀 Reflective listening, allowing everyone to participate, and validating all points of view are critical for learning and decision making.
- 🌀 Emphasize the purpose of this assessment is to inform local public health system improvement.

Contact Information

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Tools and Tip Sheets



- Local Assessment Meeting Guide
- “Tips for an Effective Process”
- User’s Guide



www.doh.state.fl.us/COMPASS

www.cdc.gov/NPHPSP/

For More Information

- Visit COMPASS website
www.doh.state.fl.us/COMPASS
- CDC website www.cdc.gov/nphpsp
- NACCHO web site: www.naccho.org
- Contact DOH Office of Health Statistics and Assessment
 - Christine Abarca at 850-245-4444 ext 2071, e-mail: Christine_Abarca@doh.state.fl.us
 - Daphne Holden at 850-245-4444 ext. 2036, e-mail: Daphne_Holden@doh.state.fl.us

Coming Attraction

- ***Webinar Series on NPHPSP***

- **Tuesday, June 28**

- Using Results with Q & A with **Julia Gray, Public Health Foundation**

1-2 pm ET Connection info at
www.doh.state.fl.us/COMPASS/