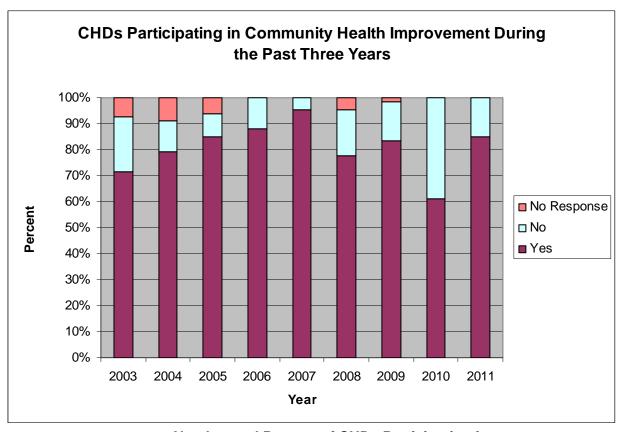
2011 County Health Department Community Health Improvement Activity

Has your CHD participated within the last three years or are you currently participating in a community health improvement process?

LEE CHD: Yes, we participated within the past three years (2009, 2010, 2011)



Number and Percent of CHDs Participating in Community Health Improvement (2009-2011)

Statewide	,	Yes		ore Than 3 rs Ago	No Response		
Responses	No. of CHDs	Percent	No. of CHDs	Percent	No. of CHDs	Percent	
2003	48	72%	14	21%	5	7%	
2004	53	79%	8	12%	6	9%	
2005	57	85%	6	9%	4	6%	
2006	59	88%	8	12%	0	0%	
2007	64	96%	3	4%	0	0%	
2008	52	78%	12	18%	3	4%	
2009	56	84%	10	15%	1	1%	
2010	41	61%	26	39%	0	0%	
2011	57	85%	10	15%	0	0%	

National Public Health Performance System Program (NPHPSP):

5.3.1 An established community health improvement process is in place

National Accreditation:

Standard 5.2 Conduct a health improvement planning process

Measure 5.2.1L Conduct a process to develop a community health improvement plan

Measure 5.2.2L Produce a community health improvement plan as a result of the community health improvement process

Measure 5.2.3A Implement elements and strategies of the health improvement plan in partnership with others

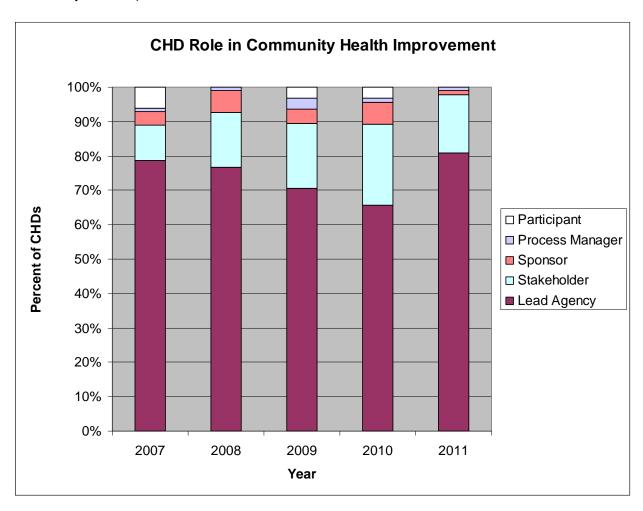
Measure 5.2.4A Monitor progress on implementation strategies in the community health improvement plan in collaboration with broad participation from stakeholders and partners

DOH Community Health Improvement:

1.1. Utilizes a systematic process for community health improvement planning

What is your CHD's role in the community health improvement process?

LEE CHD: Stakeholder (agency, organization, or individual who has a "stake" in the community's health)



CHD Role in Community Health Improvement

(data from 2003 - 2006 is not comparable to later years)

								110111 2003	2000 15 1	ioi compa	arable to later ye	
	Lead	d Agency	Stak	ceholder	S	ponsor	Proces	s Manager	Pa	rticipant	Blan	k or N/A
	No. of CHDs	Percent	No. of CHDs	Percent	No. of CHDs	Percent	No. of CHDs	Percent	No. of CHDs	Percent	No. of CHDs	Percent
2003	32	48%		0%		0%		0%		0%		0%
2004	28	42%		0%		0%		0%		0%		0%
2005	48	72%		0%		0%		0%		0%		0%
2006	51	76%		0%		0%		0%		0%		0%
2007	52	78%	7	10%	3	4%	1	1%	4	6%	0	0%
2008	48	72%	10	15%	4	6%	1	1%	0	0%	4	6%
2009	45	67%	12	18%	3	4%	2	3%	2	3%	3	4%
2010	41	61%	15	22%	4	6%	1	1%	2	3%	4	6%

2011	51	76%	11	16%	1	1%	1	1%	0	0%	3	4%
2011	ગ 1	10%		10%	I	170		170	l U	0%	3	4%

National Public Health Performance System Program (NPHPSP):

- 4.1 Constituency Development
- 4.1.1 Process for identifying key constituents or stakeholders
- 4.1.2 Encourage participation of constituents in improving community health

National Accreditation:

Standard 4.1 Engage with the public health system and community in identifying and addressing public health problems through collaborative processes

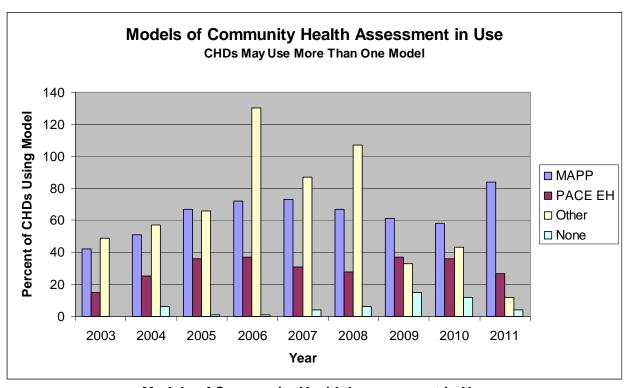
Measure 4.1.1A Establish and/or actively participate in partnerships and/or coalitions to address specific public health issues or populations

DOH Community Health Improvement:

1B. Organizes effective partnerships that include diverse memberships, a vision, and partnerships management processes

What community health improvement models are currently used by the CHD?

LEE CHD: * MAPP (Mobilizing for Action through Planning and Partnerships)



Models of Community Health Improvement in Use

	MA	PP	PACE	EH	Noi	ne	Oth	ner
	No. of CHDs	%						
2003	28	42%	10	15%	0	0%	39	58%
2004	34	51%	17	25%	4	6%	41	61%
2005	45	67%	24	36%	1	1%	40	60%
2006	48	72%	25	37%	1	1%	73	109%
2007	49	73%	21	31%	3	4%	57	85%
2008	45	67%	19	28%	4	6%	63	94%
2009	41	61%	25	37%	10	15%	8	12%
2010	39	58%	24	36%	8	12%	11	16%
2011	56	84%	18	27%	3	4%	8	12%

MAPP PACE EH Other n/a Mobilizing for Action through Planning and Partnerships Protocol for Assessing Community Excellence in Environmental Health Includes CATCH, APEX PH, PATCH, Healthy People Healthy Communities not asked

National Public Health Performance System Program (NPHPSP):

5.3.1.1 Communty health improvement process use of established tool such as MAPP or PACE-EH

National Accreditation:

Standard 5.2 Conduct a health improvement planning process

Measure 5.2.1L Conduct a process to develop community health improvement plan

Measure 5.2.2L Produce a community health improvement plan as a result

of the community health improvement process

Measure 5.2.3A Implement elements and strategies of the health improvement plan in partnership with others

Measure 5.2.4A Monitor progress on implementation strategies in the

community health improvement plan in collaboration with

broad participation from stakeholders and partners

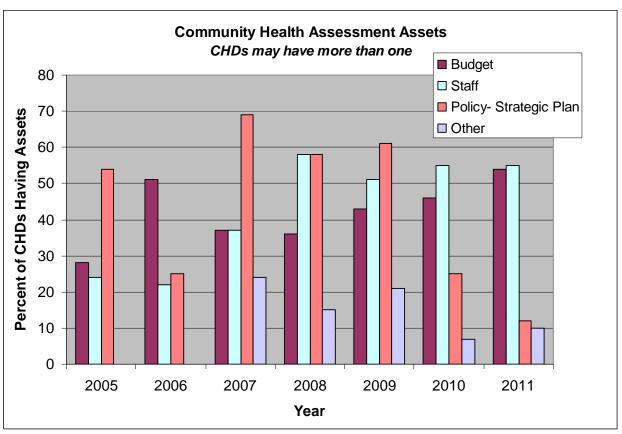
DOH Community Health Improvement:

Implements a community health assessment process that includes

- 1A1. Identification of community themes (issues) and strengths
- 1A2. Assessment of the local public health system
- 1A3. Assessment of community health status resulting in the development of a community health profile document
- 1A4. Identification of potential forces of change (threats and opportunities)

What assets does the community health improvement process include that provide for sustainability?

LEE CHD: * Staff dedicated for community health assessment/improvement planning process



Community Health Assessment Assets reported by CHDs

Assets	Budget		Dedicate	ed Staff	Written Strategio	•	Other	
	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%
2005	19	28%	16	24%	36	54%	0	0%
2006	34	51%	15	22%	17	25%	0	0%
2007	25	37%	25	37%	46	69%	16	24%
2008	24	36%	39	58%	39	58%	10	15%
2009	29	43%	34	51%	41	61%	14	21%
2010	31	46%	37	55%	17	25%	5	7%
2011	36	54%	37	55%	8	12%	7	10%

National Public Health Performance System Program (NPHPSP):

5.3.3 CHD conducts a strategic planning process

National Accreditation:

Standard 5.3 Develop and implement a health department organizational strategic plan

Measure 5.3.1A Conduct a department strategic planning process

Measure 5.3.2A Adopt a department strategic plan

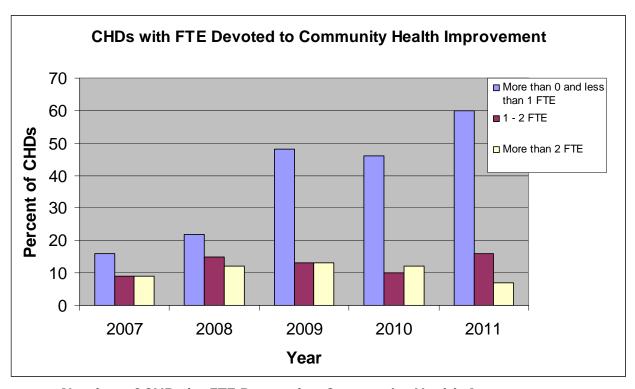
Measure 5.3.3A Implement the department strategic plan

DOH Community Health Improvement:

1D. Demonstrates linkage of strategic plan with community health improvement planning

How many staff (FTE) are dedicated to your community health improvement process?

LEE CHD: < 1.00 FTE



Number of CHDs by FTE Devoted to Community Health Assessment

Nullibe	EL OL CUDS	Dyrill	bevoted to	o Commu	ility ri c ali	111 H22C22	MICHE		
Statewide	More tha		1 - 2	FTE	More tha	ın 2 FTE	Approximate Statewide Total FTE		
Responses	Number of CHDs Percent		Number of CHDs	Percent	Number of CHDs	Percent			
2007	11	16%	6	9%	6	9%	35.15		
2008	15	22%	10	15%	8	12%	54.7		
2009	32	48%	9	13%	9	13%	63		
2010	31	46%	7	10%	8	12%	71		
2011	40	60%	11	16%	5	7%	73		

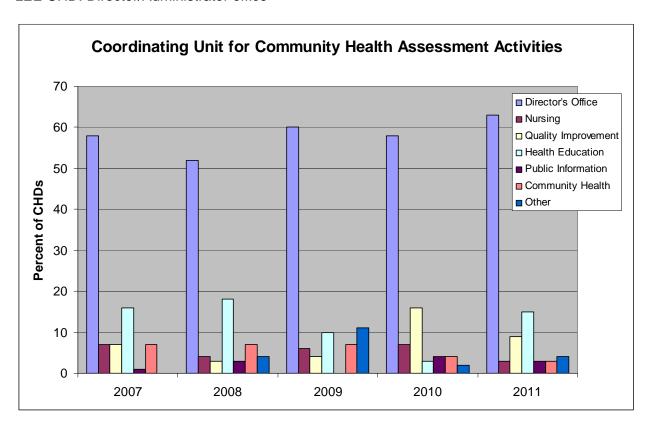
Related Standards:

National Accreditation:

Standard 11.1 Develop and maintain an operational infrastructure to support the performance of public health functions

What unit coordinates community health improvement planning?

LEE CHD: Director/Administrator office



Coordinating Units for Community Health Assessment Activities

Statewide	20	07	200	8	20	09	20	10	2011	
Responses	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%
Director's Office/ Agency Leadership team	39	58%	35	56 %	40	61%	39	58%	42	63%
Nursing	5	7%	3	5%	4	6%	5	7%	2	3%
Epidemiology	not asked		not asked		1	2%	1	1%	0	0%
Environmental Health	1	1%	1	2%	0	0%	1	1%	1	1%
Quality Improvement	5	7%	2	3%	3	5%	2	3%	6	9%
Health Education	11	16%	12	19 %	7	11%	11	16%	10	15%
Public Information	1	1%	2	3%	0	0%	2	3%	2	3%
Community Health	5	7%	5	8%	5	8%	3	4%	2	3%
Other	0	0%	3	5%	6	9%	3	4%	2	3%
Total	67	100%	63	100 %	66	100%	67	100%	67	100 %

National Public Health Performance System Program (NPHPSP):

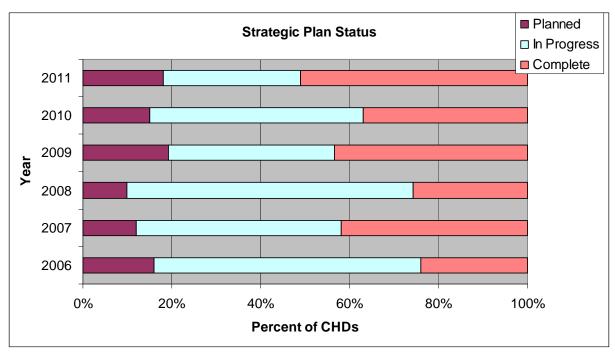
5.3.3.1 CHD reviews its organizational strategic plan to determine how it can best be aligned with the community health improvement process

National Accreditation:

Standard 11.1 Develop and maintain an operational infrastructure to support the performance of public health functions

What is the status of the CHD's strategic plan?

LEE: Complete (e.g., ongoing implementation, monitoring progress towards goals)



Strategic Plan Status

Statewide	2006			2006		2007			2008		2009		2010		2011	
Response	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%	No. of CHDs	%				
Planned	11	16	8	12	6	10	13	19	10	15	12	18				
In																
Progress	40	60	31	46	40	65	25	37	32	48	21	31				
Complete	16	24	28	42	16	26	28	43	25	37	34	51				
		10		10		10		10				10				
Total	67	0	67	0	62	0	67	0	67	100	67	0				

Related Standards:

National Public Health Performance System Program (NPHPSP):

5.3.3 CHD conducts a strategic planning process

National Accreditation:

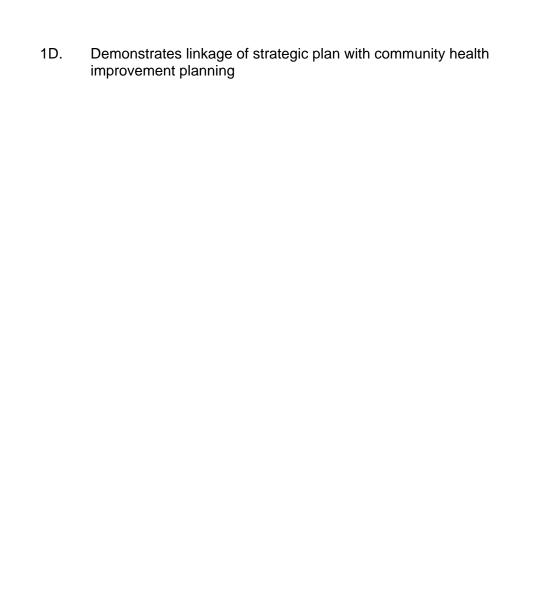
Standard 5.3 Develop and implement a health department organizational strategic plan

Measure 5.3.1A Conduct a department strategic planning process

Measure 5.3.2A Adopt a department strategic plan

Measure 5.3.3A Implement the department strategic plan

DOH Community Health Improvement:



What is your CHD's schedule for implementing a community health planning process?

LEE CHD: Organizing:

2/1/2011: Organizing 7/27/2011: Visioning

Assessing:

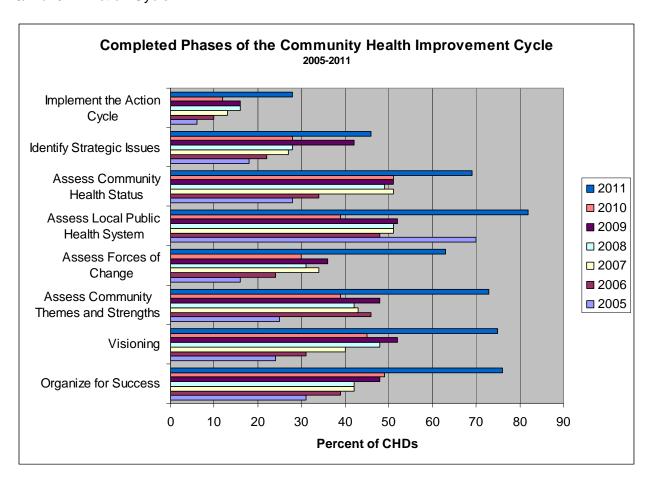
5/2/2011: Community Themes and Strengths 5/2/2011: Assessing Forces of Change

9/1/2011: Assessing the Local Public Health System 9/1/2011: Assessing the Community's Health Status

Developing Strategic Priorities and Goals 7/27/2011: Strategic Priorities and Goals

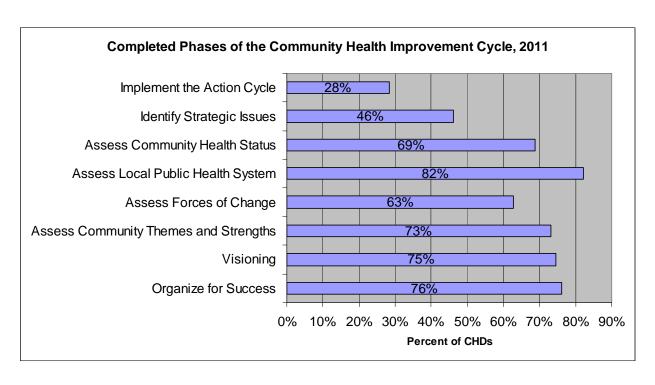
Implementing a Community Health Improvement Plan

9/22/2011: Action Cycle



Percent of CHDs by the Completed Phases of the Community Health Improvement Cycle

Status	2005	ount	2006	unt	2007	ınt	2008	ount	2009	unt	2010	ınt	2011	ınt
	Percent	Cou	Percent	noo	Percent	Count	Percent	noo	Percent	Cou	Percent	Count	Percent	Cou
Organize for Success	31%	21	39%	26	42%	28	42%	28	48%	32	49%	33	76%	51
Visioning	24%	16	31%	21	40%	27	48%	32	52%	35	45%	30	75%	50
Assess Community Themes and Strengths	25%	17	46%	31	43%	29	42%	28	48%	32	39%	26	73%	49
Assess Forces of Change	16%	11	24%	16	34%	23	31%	21	36%	24	30%	20	63%	42
Assess Local Public Health System	70%	47	48%	32	51%	34	51%	34	52%	35	39%	26	82%	55
Assess Community Health Status	28%	19	34%	23	51%	34	49%	33	51%	34	51%	34	69%	46
Identify Strategic Issues	18%	12	22%	15	27%	18	28%	19	42%	28	28%	19	46%	31
Implement the Action Cycle	6%	4	10%	7	13%	9	16%	11	16%	11	12%	8	28%	19



Related Standards:

National Public Health Performance System Program (NPHPSP):

- 4.2.1 Partnerships exist in the community to maximize public health improvement activities (organize for success)
- 5.3.1.2 Broad participation in the community health improvement process (organize for success, visioning)

- 5.3.1.3 Process includes information from community health assessments (health status assessment)
- 5.3.1.4 Process includes issues and themes identified by the community (community themes, strengths, forces of change)
- 5.3.1.5 Process includes identification of community assets and resources (local public health system assessment)
- 5.3.1.6 Process includes priorization of community health issues (identify strategic issues)
- 5.3.1.7 Process includes development of measurable health objectives (implement action cycle)

National Accreditation:

Standard 4.1 Engage with the public health system and the community in identifying and addressing health problems through collaborative processes

- Measure 4.1.1A Establish and/or actively participate in partnerships and/or coalitions to address specific public health issues or populations
- Measure 4.1.2T/L Link stakeholders and partners to technical assistance regarding models of engaging with the community

Standard 4.2 Promote the community's understanding of and support for policies and strategies that will improve the public's health

Standard 4.2.1A Engage with the community about policies and/or strategies that will promote the public's health

Standard 4.2.2A Engage with governing entities, advisory boards and elected officials about policies and/or strategies that will promote the public's health

Standard 5.2 Conduct a health improvement planning process

- Measure 5.2.1L Conduct a process to develop community health improvement plan
- Measure 5.2.2L Produce a community health improvement plan as a result of the community health improvement process
- Measure 5.2.3A Implement elements and strategies of the health improvement plan in partnership with others
- Measure 5.2.4A Monitor progress on implementation strategies in the community health improvement plan in collaboration with broad participation from stakeholders and partners

DOH Community Health Improvement:

Implements a community health assessment process that includes

- 1A1. Identification of community themes (issues) and strengths
- 1A2. Assessment of the local public health system
- 1A4. Identification of potential forces of change (threats and opportunities)

What themes do your community identified strategic issues and priorities address?

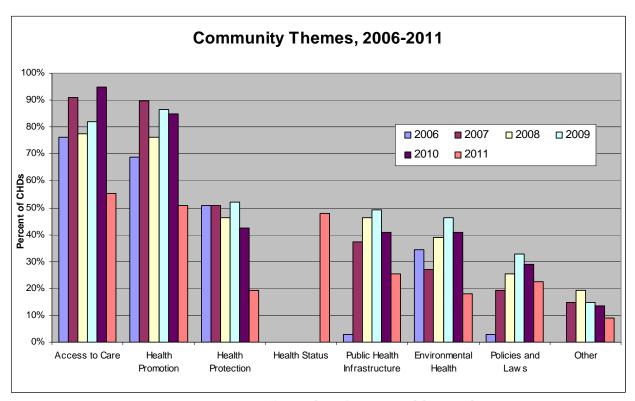
LEE CHD:

Has your community identified strategic issues and priorities? Yes:

If so, what themes have been identified as priorities?

(This section is left blank if the community has not yet identified strategic issues and priorities.)

* Access to care, services (e.g., service utilization, insurance) * Health promotion and health education (e.g., primary prevention, wellness) * Health status (e.g., chronic diseases, maternal and child health, injury)

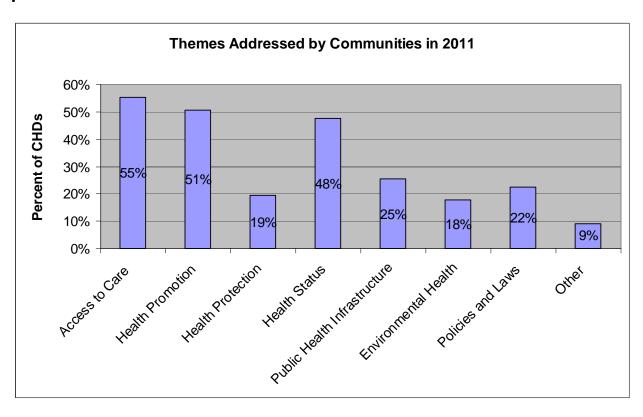


Percentage of CHDs by Themes Addressed

1 0100	mage or	••• ••	Herries Ma			
Themes	2006	2007	2008	2009	2010	2011
Access to Care	76%	91%	78%	82%	95%	55%
Health Promotion & Primary						
Prevention	69%	90%	76%	87%	85%	51%
Health Protection & Preparedness	51%	51%	46%	52%	42%	19%
Health Status (MCH, Chronic						
Disease, infectious disease, etc.)	not asked	not asked	not asked	not asked	not asked	48%
Public Health Infrastructure	3%	37%	46%	49%	41%	25%
Environmental Health	34%	27%	39%	46%	41%	18%
Policies and Laws	3%	19%	25%	33%	29%	22%
Other	0%	15%	19%	15%	14%	9%

Counties may address more than one theme.

What themes do your community identified strategic issues and priorities address?



Related Standards:

National Public Health Performance System Program (NPHPSP):

5.3.1.6 Community health improvement process includes prioritization of community health issues

National Accreditation:

Standard 4.1 Engage with the public health system and the community in identifying and addressing health problems through collaborative processes

Measure 4.1.1A Establish and/or actively participate in partnerships and/or

coalitions to address specific public health issues or populations Engage with the community about policies and/or strategies

Measure 4.2.1A Engage with the community about policies and/or strategies that will promote the public's health

Standard 5.2 Conduct a comprehensive planning process resulting in a community health improvement plan

Standard 5.2 Conduct a comprehensive planning process resulting in a community health improvement plan

Measure 5.2.2 L Produce a community health improvement plan as a result of the community health improvement process

DOH Community Health Improvement:

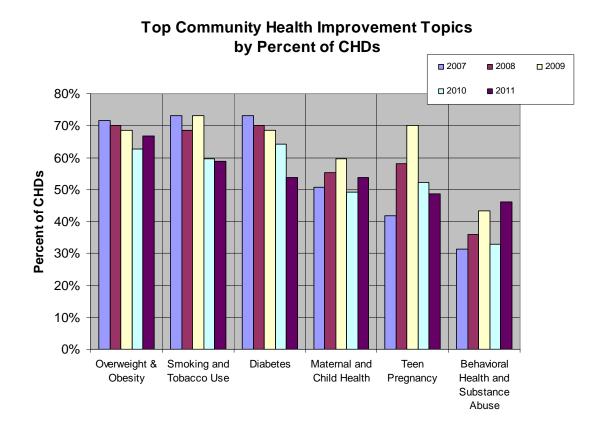
Implements a community health assessment process that includes 1A1. Identification of community themes (issues) and strengths

What topics are being addressed through current communityidentified goals and objectives?

LEE County identified topics:

(This section is left blank if the community has not yet developed goals and objectives.)

* Behavioral health and substance abuse * Diabetes * Heart disease and stroke * Injury and trauma * Maternal/child health/infant mortality * Nutrition and food related issues * Overweight and obesity * Physical activity * Smoking and tobacco use * Teen pregnancy * Built Environment (e.g. alternative transportation, bicycle/pedestrian plans)



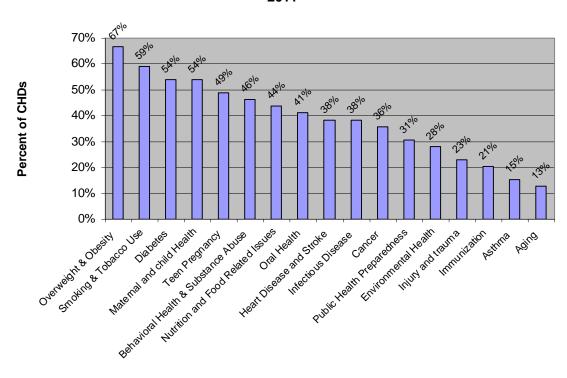
Community Health Improvement Topics by Percent of CHDs

	• •		ı	1	
Topics	2007	2008	2009	2010	2011
Overweight & Obesity	72%	70%	69%	63%	67%
Smoking & Tobacco Use	73%	69%	73%	60%	59%
Diabetes	73%	70%	69%	64%	54%
Maternal and child Health	51%	55%	60%	49%	54%
Teen Pregnancy	42%	58%	70%	52%	49%
Behavioral Health & Substance Abuse	31%	36%	43%	33%	46%
Nutrition and Food Related Issues					44%
Oral Health				55%	41%
Heart Disease and Stroke	55%	63%	51%	45%	38%
Infectious Disease	39%	49%	48%	37%	38%
Cancer	39%	31%	45%	28%	36%
Public Health Preparedness	48%	42%	46%	39%	31%
Environmental Health	39%	45%	45%	36%	28%
Injury and trauma	27%	31%	34%	16%	23%
Immunization	42%	43%	55%	42%	21%
Asthma	25%	24%	21%	19%	15%
Aging	13%	22%	28%	15%	13%
Not Yet Identified	12%	1%	12%	12%	0%
Workforce	31%	31%	33%		

blank areas indicate this question was not asked

CHDs selected multiple topics

Topics being Addressed by Community Identified Goals 2011



National Public Health Performance System Program (NPHPSP):

5.3.1.6 Community health improvement process includes prioritization of community health issues

National Accreditation:

Standard 5.2 Conduct a health improvement planning process

Measure 5.2.1L Conduct a process to develop community health improvement

plan

Measure 5.2.2L Produce a community health improvement plan as a result of

the community health improvement process

Measure 5.2.3A Implement elements and strategies of the health improvement

plan in partnership with others

Measure 5.2.4A Monitor progress on implementation strategies in the community

health improvement plan in collaboration with broad

participation from stakeholders and partners

DOH Community Health Improvement:

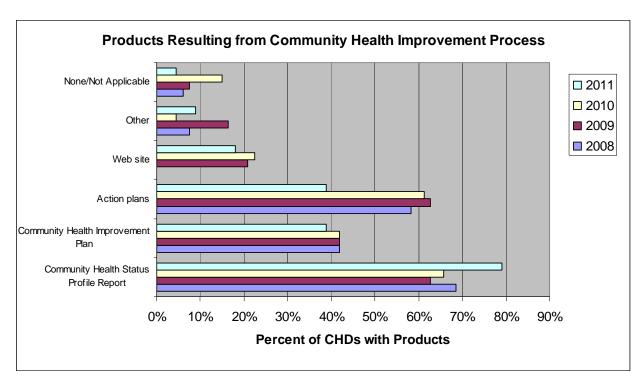
Implements a community health assessment process that includes

1C. Produces action plans including the identification of strategic issues, goals and strategies, a continuous action cycle with evaluation components

What products has the CHD helped produce as a result of community health improvement planning activities?

LEE CHD:

* Community health assessment or health status profile report * Community health improvement plan * Action plans



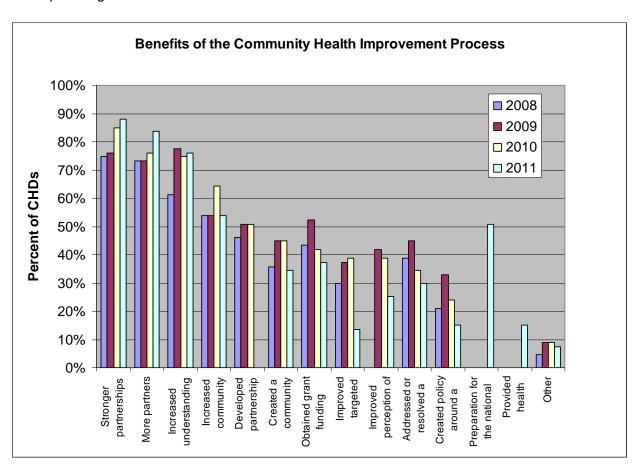
Products Resulting from the Community Health Improvement Process

1100000	1000	•	• • • • • • • • • • • • • • • • • • • •	,			10000		
Statewide	200	08	200	9	201	10	2011		
Responses	Percent	Count	Percent	Count	Percent	Count	Percent	Count	
Community Health									
Status Profile Report	69%	46	63%	42	66%	44	79%	53	
Community Health									
Improvement Plan	42%	28	42%	28	42%	28	39%	26	
Action plans	58%	39	63%	42	61%	41	39%	26	
Web site	0%		21%	14	22%	15	18%	12	
Other	7%	5	16%	11	4%	3	9%	6	
None/Not Applicable	6%	4	7%	5	15%	10	4%	3	

What are some of the benefits the CHD has experienced from participating in community health improvement activities?

LEE CHD:

* More and/or new community partners * Stronger partnerships * Better understanding of public health in the community * Created a policy around a community health issue * Preparation for the national voluntary agency accreditation * Provided health perspective to urban planning



Percent and Number of CHDs by Type of Benefit

	referred and Number of Cribs by Type of Benefit							
Response	20	2008 2009		2010		2011		
	Percent	Number	Percent	Number	Percent	Number	Percent	Number
Stronger partnerships	75%	50	76%	51	85%	57	88%	59
More partners	73%	49	73%	49	76%	51	84%	56
Increased understanding								
of public health	61%	41	78%	52	75%	50	76%	51
Increased community								
ownership of issues	54%	36	54%	36	64%	43	54%	36
Developed partnership								
with health planning								not
council	46%	31	51%	34	51%	34		asked
Created a community								
health improvement plan	36%	24	45%	30	45%	30	34%	23
Obtained grant funding	43%	29	52%	35	42%	28	37%	25
Improved targeted								
indicators (based on data)	30%	20	37%	25	39%	26	13%	9
Improved perception of								
government	0%	0	42%	28	39%	26	25%	17
Addressed or resolved a								
strategic issue	39%	26	45%	30	34%	23	30%	20
Created policy around a								
community health issue	21%	14	33%	22	24%	16	15%	10
Preparation for the								
national voluntary agency								
accreditation	not asked		not aske	d	not aske	d	51%	34
Provided health								
perspective to urban								
planning	not asked		not aske		not asked		15%	10
Other	4%	3	9%	6	9%	6	7%	5

Has the CHD secured new resources as a result of the community health improvement planning process?

LEE CHD: No

The following section will be blank if new resources were not received in 2011.

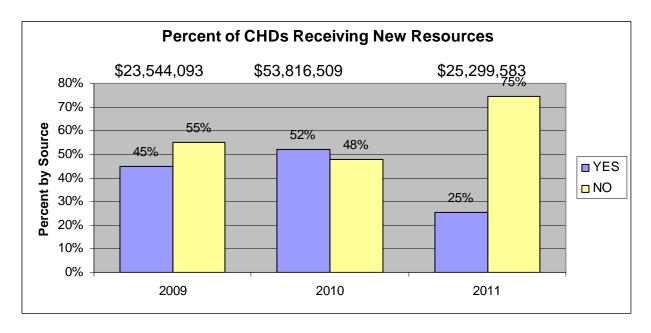
If yes, what is the source of the resources:

Type:

Duration:

Topic addressed:

Dollar value:



2009: The total value of the new resources received by 30 CHDs was \$23,544,903.

2010: The total value of the new resources received by 35 CHDs was \$53,816,509.

2011: The total value of the new resources received by 17 CHDs was \$25,309,583.

Some funding reported covers multiple years.

Number of CHDs Receiving Resources

Have new resources been received?

nave new researces been received.							
	2009	2010	2011				
YES	30	35	17				
NO	36	31	50				
Blank	1	1	0				