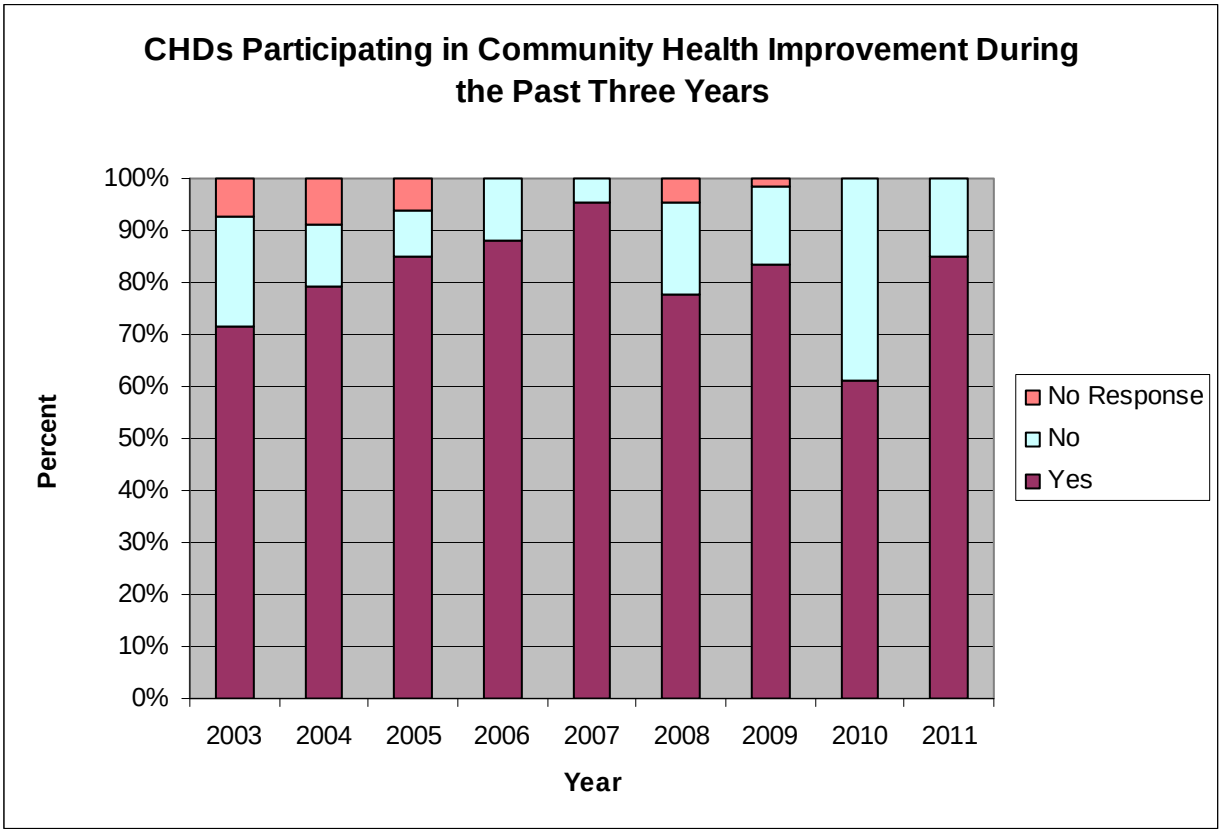
2011 County Health Department Community Health Improvement Activity

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

MANATEE 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 Responses	Yes		No or More Than 3 Years Ago		No Response	
	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%

Related Standards:

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

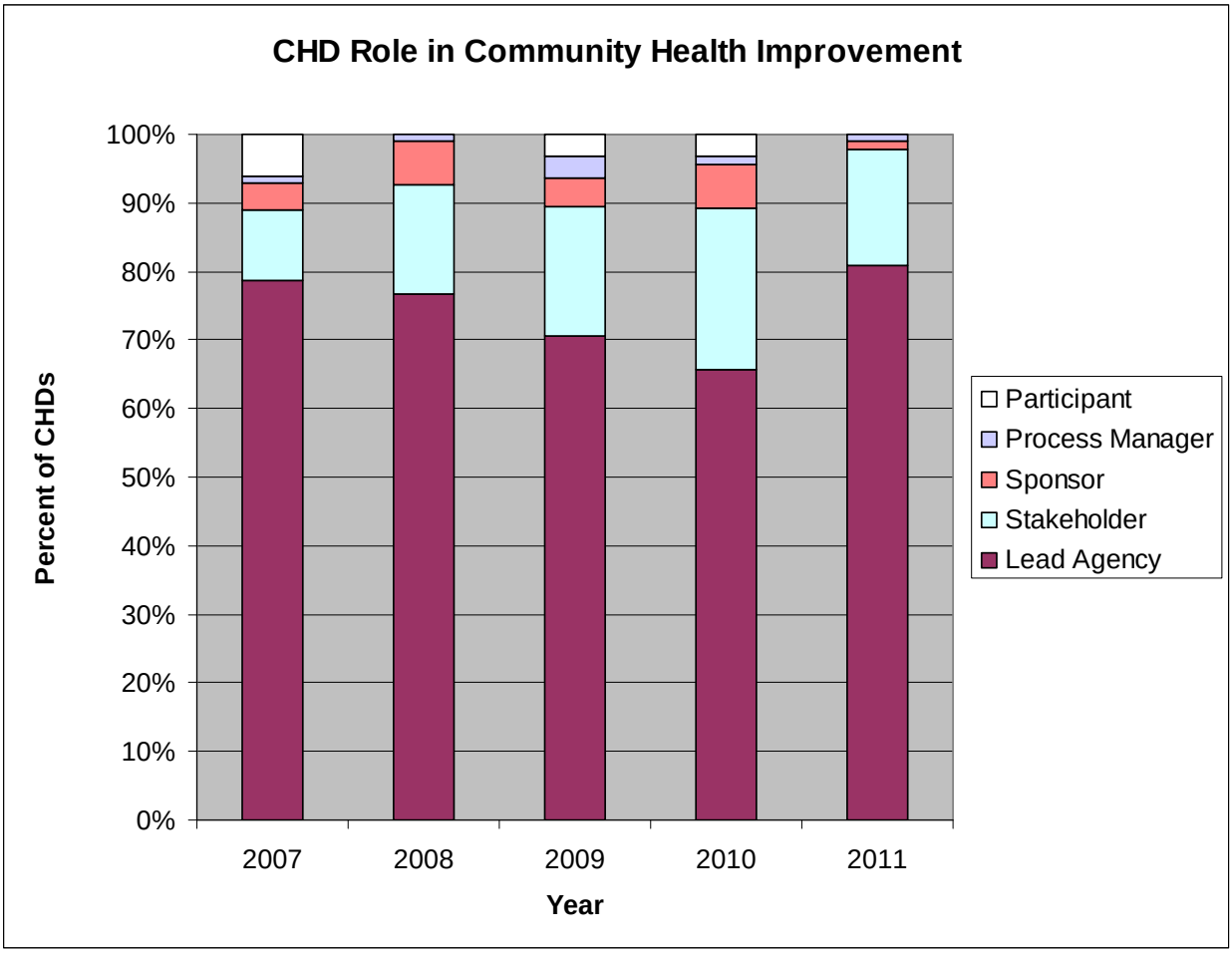
- Measure 5.2.1L Conduct a process to develop a community health improvement plan
- Measure 5.2.2L Produce a community health improvement plan as a result of the community health improvement process
- Measure 5.2.3A Implement elements and strategies of the health improvement plan in partnership with 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?

MANATEE CHD: Process Management (provide coordination, organization, facilitation)



CHD Role in Community Health Improvement

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

	Lead Agency		Stakeholder		Sponsor		Process Manager		Participant		Blank 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%

Related Standards:

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

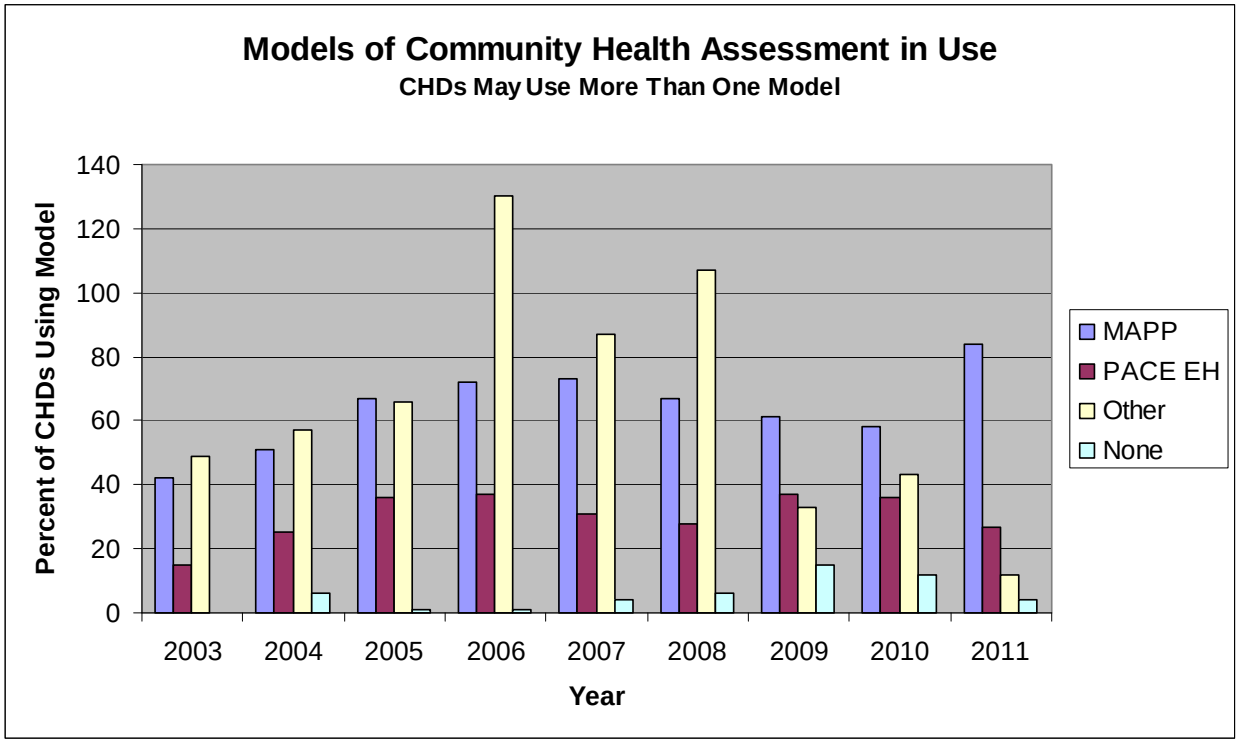
Measure 4.1.1A Establish and/or actively participate in partnerships and/or coalitions to address specific public health issues or populations

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?

MANATEE CHD: * Other Strategic Planning Model with some MAPP tools



Models of Community Health Improvement in Use

	MAPP		PACE EH		None		Other	
	No. of CHDs	**%**	**No. of CHDs**	**%**	**No. of CHDs**	**%**	**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 Mobilizing for Action through Planning and Partnerships
PACE EH Protocol for Assessing Community Excellence in Environmental Health
Other Includes CATCH, APEX PH, PATCH, Healthy People Healthy Communities
n/a not asked

Related Standards:

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

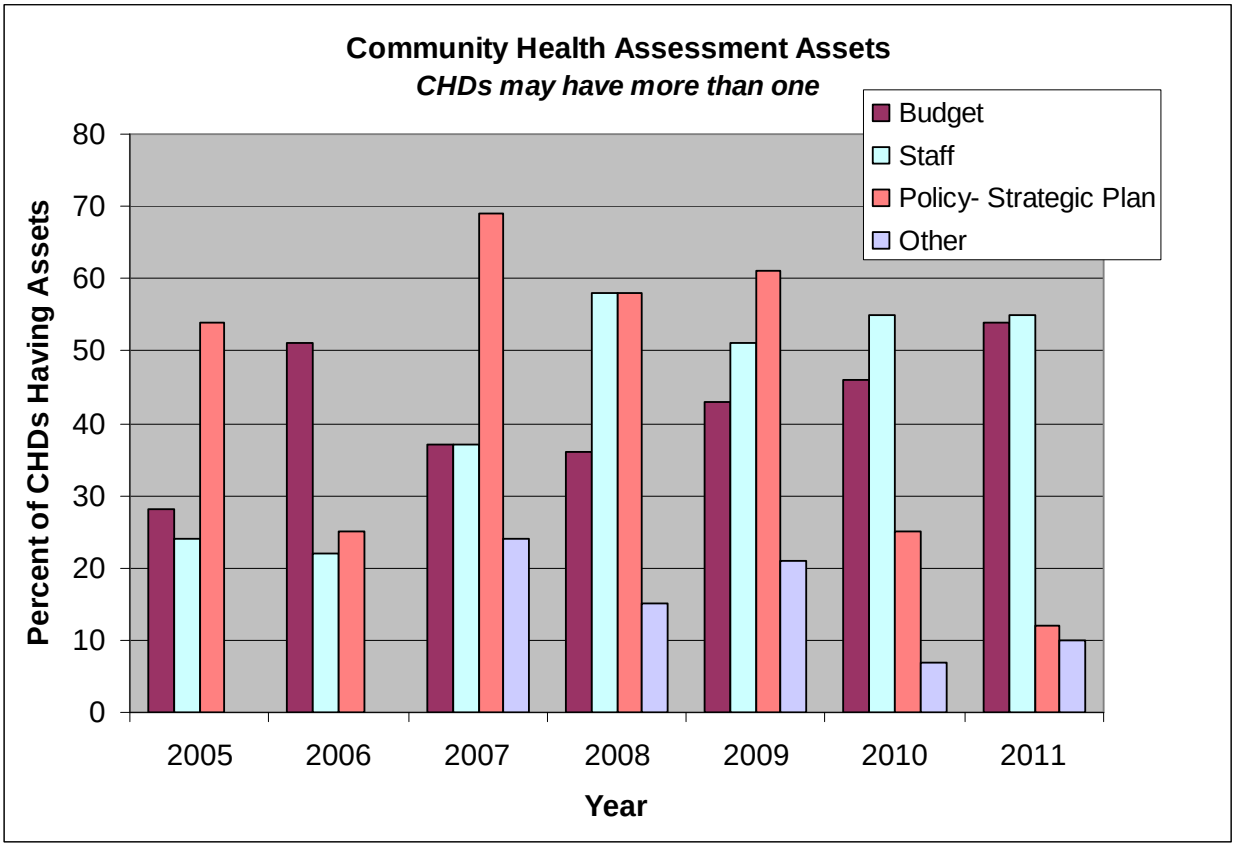
DOH Community Health Improvement:

Implements a community health assessment process that includes

1. 1A1. Identification of community themes (issues) and strengths
2. 1A2. Assessment of the local public health system
3. 1A3. Assessment of community health status resulting in the development of a community health profile document
4. 1A4. Identification of potential forces of change (threats and opportunities)

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

MANATEE CHD: * Other * Mini-grant



Community Health Assessment Assets reported by CHDs

Assets	Budget		Dedicated Staff		Written Policy-Strategic Plan		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%

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

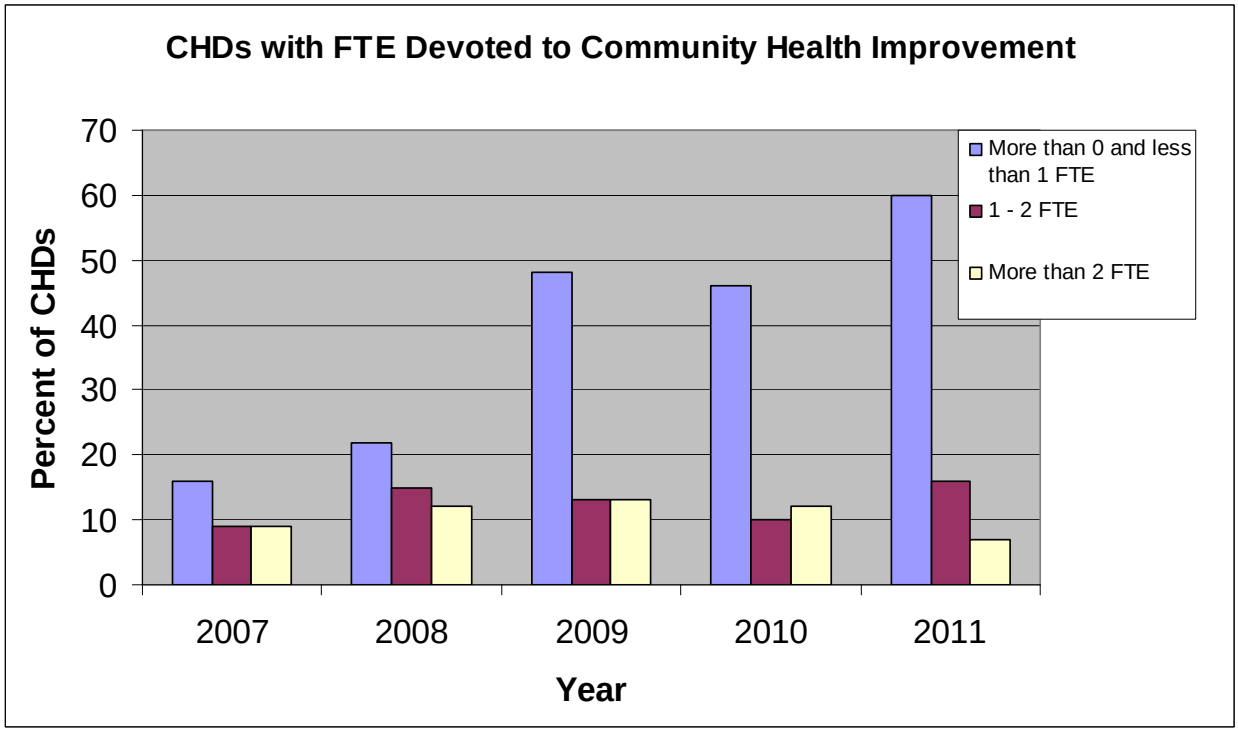
Measure 5.3.1A Conduct a department strategic planning process
Measure 5.3.2A Adopt a department strategic plan
Measure 5.3.3A Implement the department strategic plan

DOH Community Health Improvement:

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

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

MANATEE CHD: 4 or more FTEs



Number of CHDs by FTE Devoted to Community Health Assessment

Statewide Responses	More than 0 and less than 1 FTE		1 - 2 FTE		More than 2 FTE		Approximate Statewide Total FTE
	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

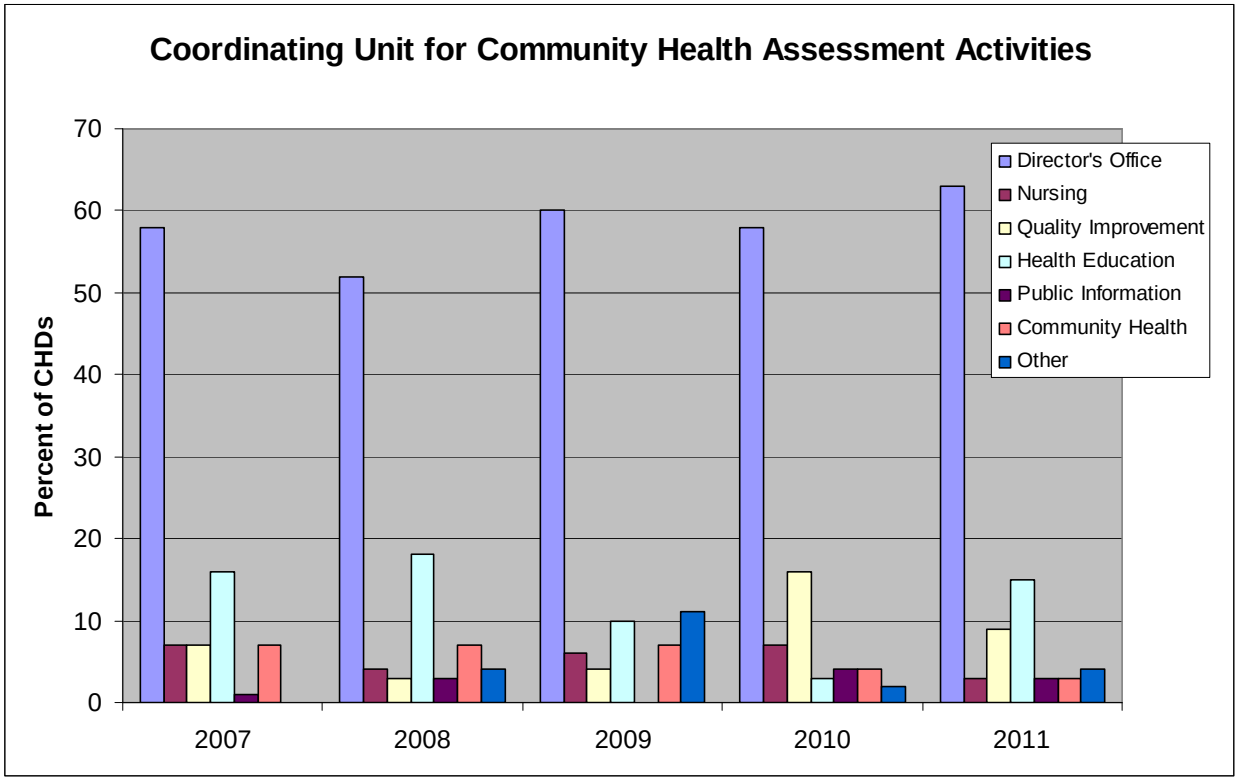
Related Standards:

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?

MANATEE CHD: Quality Improvement



Coordinating Units for Community Health Assessment Activities

Statewide Responses	2007		2008		2009		2010		2011	
	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 %

Related Standards:

National Public Health Performance System Program (NPHPSP):

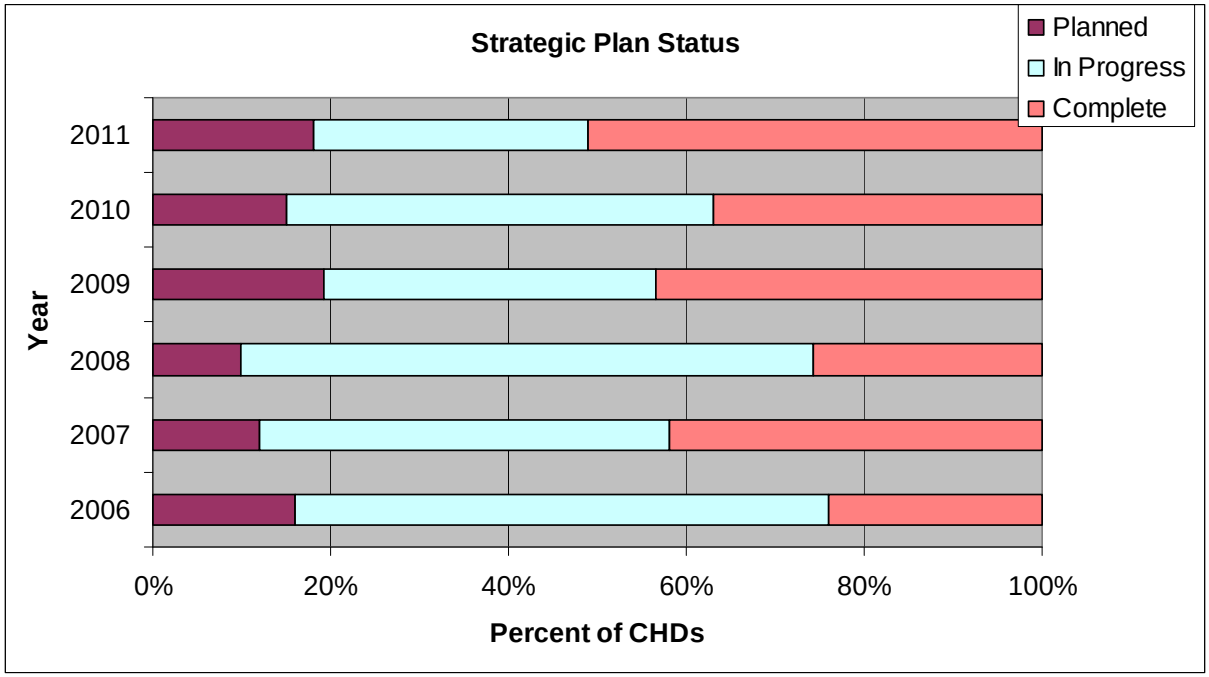
5.3.3.1 CHD reviews its organizational strategic plan to determine how it can best be aligned with the community health improvement process

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?

MANATEE: In progress (e.g., planning/implementing activities, updating written plan)



Strategic Plan Status

Statewide Response	2006		2007		2008		2009		2010		2011	
	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
Total	67	100	67	100	62	100	67	100	67	100	67	100

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

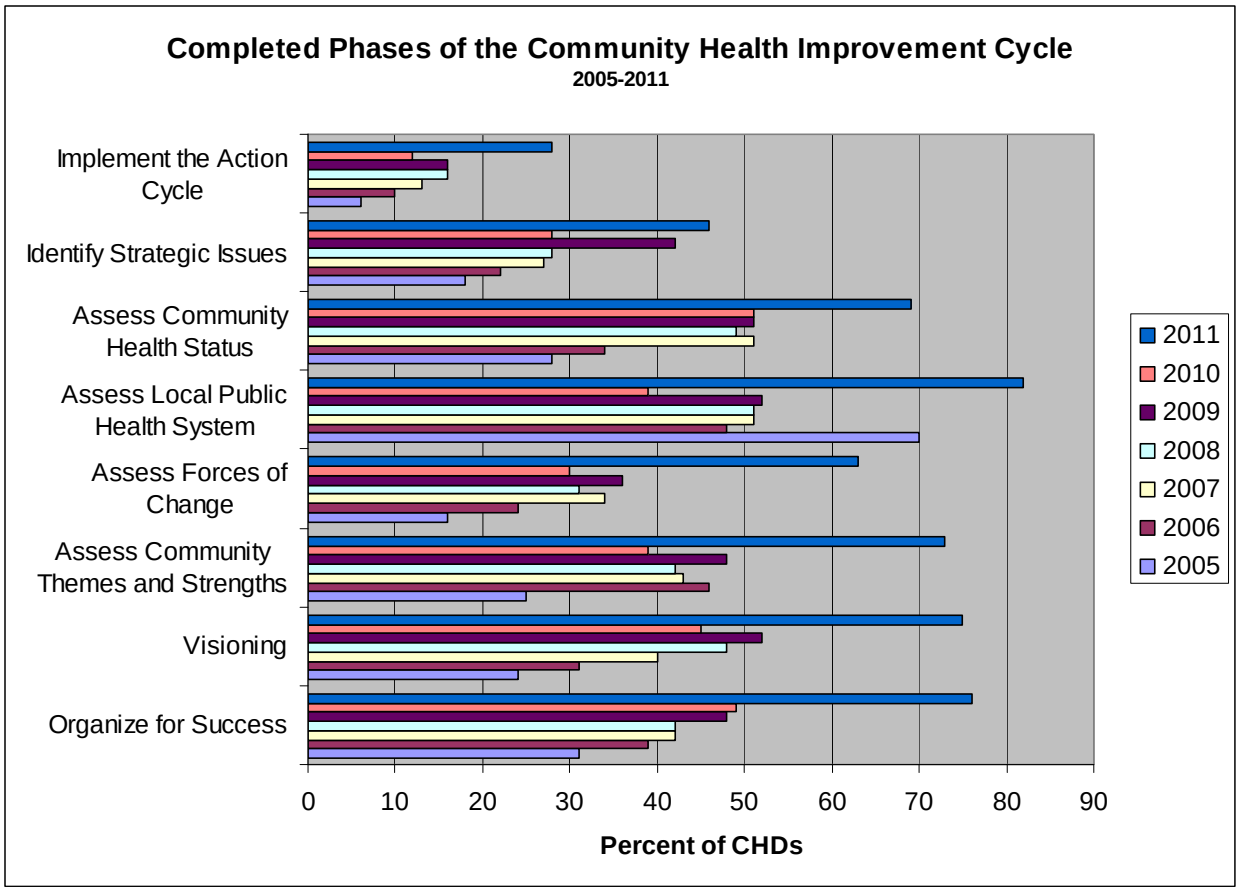
Measure 5.3.1A Conduct a department strategic planning process
Measure 5.3.2A Adopt a department strategic plan
Measure 5.3.3A Implement the department strategic plan

DOH Community Health Improvement:

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

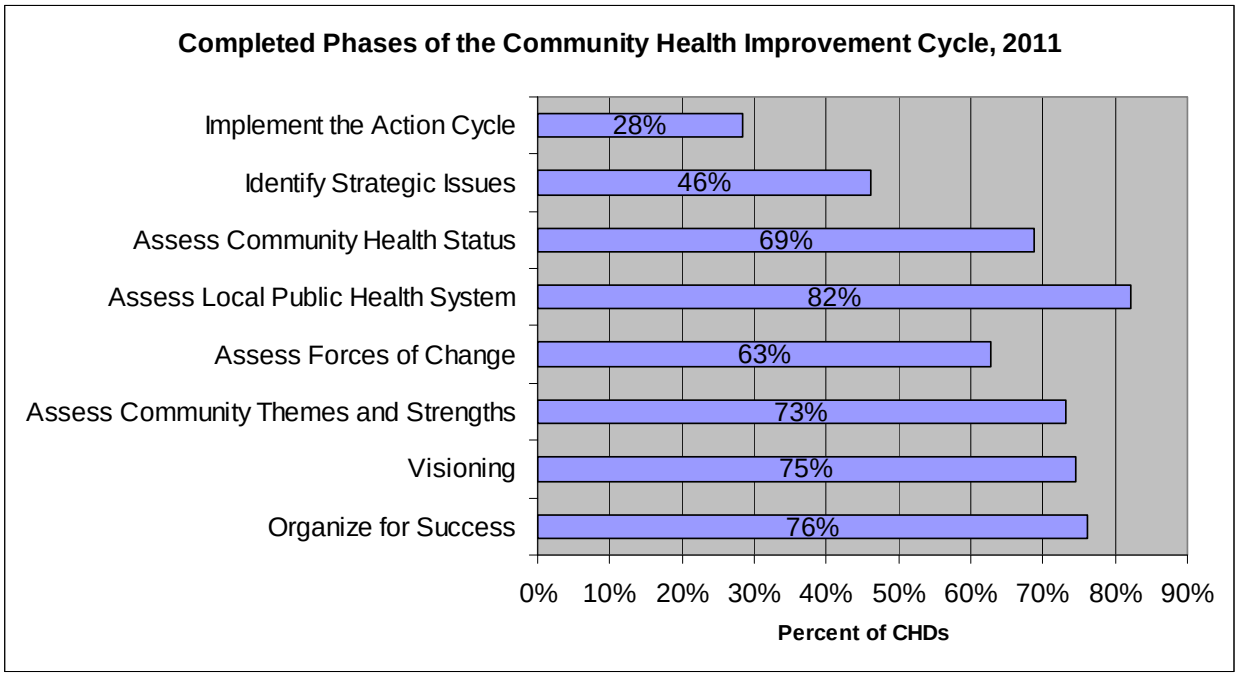
What is your CHD's schedule for implementing a community health planning process?

MANATEE CHD:
Organizing:
11/30/2010: Organizing
1/30/2012: Visioning
Assessing:
11/30/2010: Community Themes and Strengths
6/30/2012: Assessing Forces of Change
9/30/2011: Assessing the Local Public Health System
6/30/2012: Assessing the Community's Health Status
Developing Strategic Priorities and Goals
6/30/2012: Strategic Priorities and Goals
Implementing a Community Health Improvement Plan
10/30/2012: Action Cycle



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

Status	2005	Count	2006	Count	2007	Count	2008	Count	2009	Count	2010	Count	2011	Count
	Percent		Percent		Percent		Percent		Percent		Percent		Percent	
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:

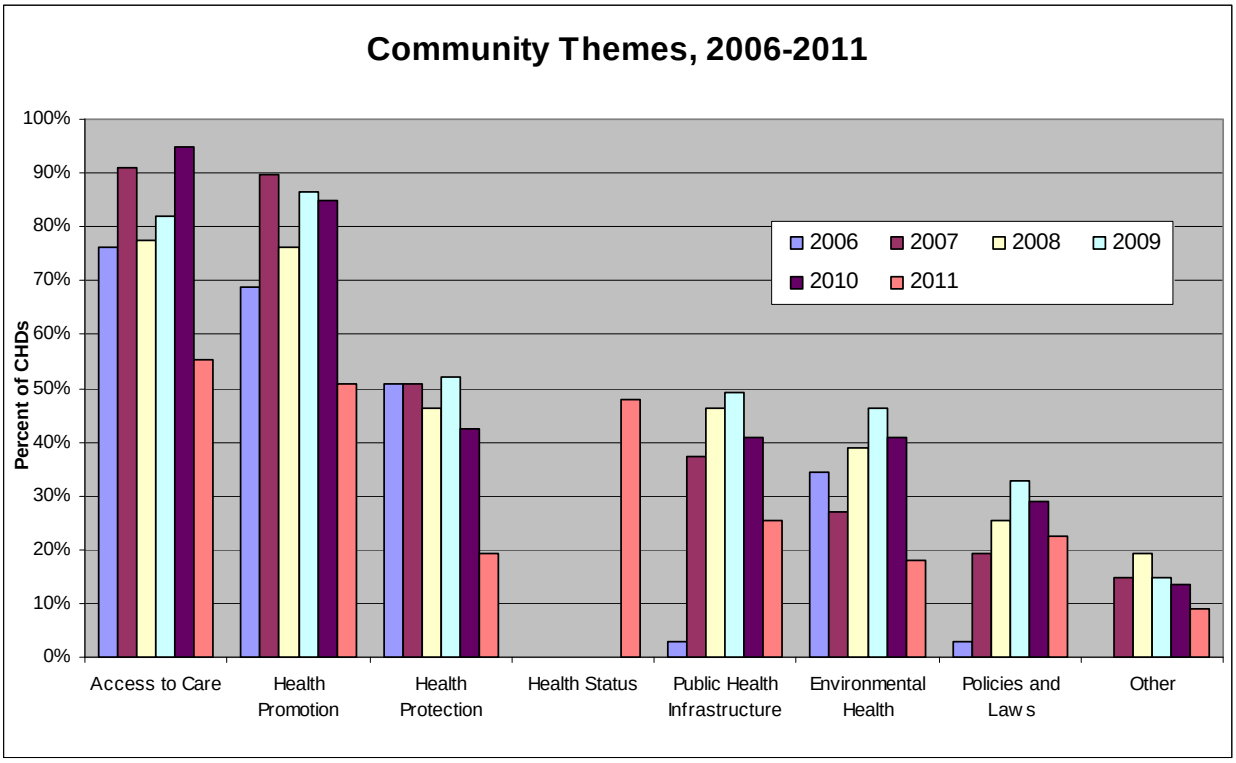
Implements a community health assessment process that includes

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?

MANATEE 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 protection (e.g., preparedness, infectious disease control) * Health status (e.g., chronic diseases, maternal and child health, injury) * Policies and laws (e.g., enforcement, enactment, policy review)* Public health infrastructure (e.g., finances, workforce) * Other * Legislation for Healthcare Reform, indigent healthcare

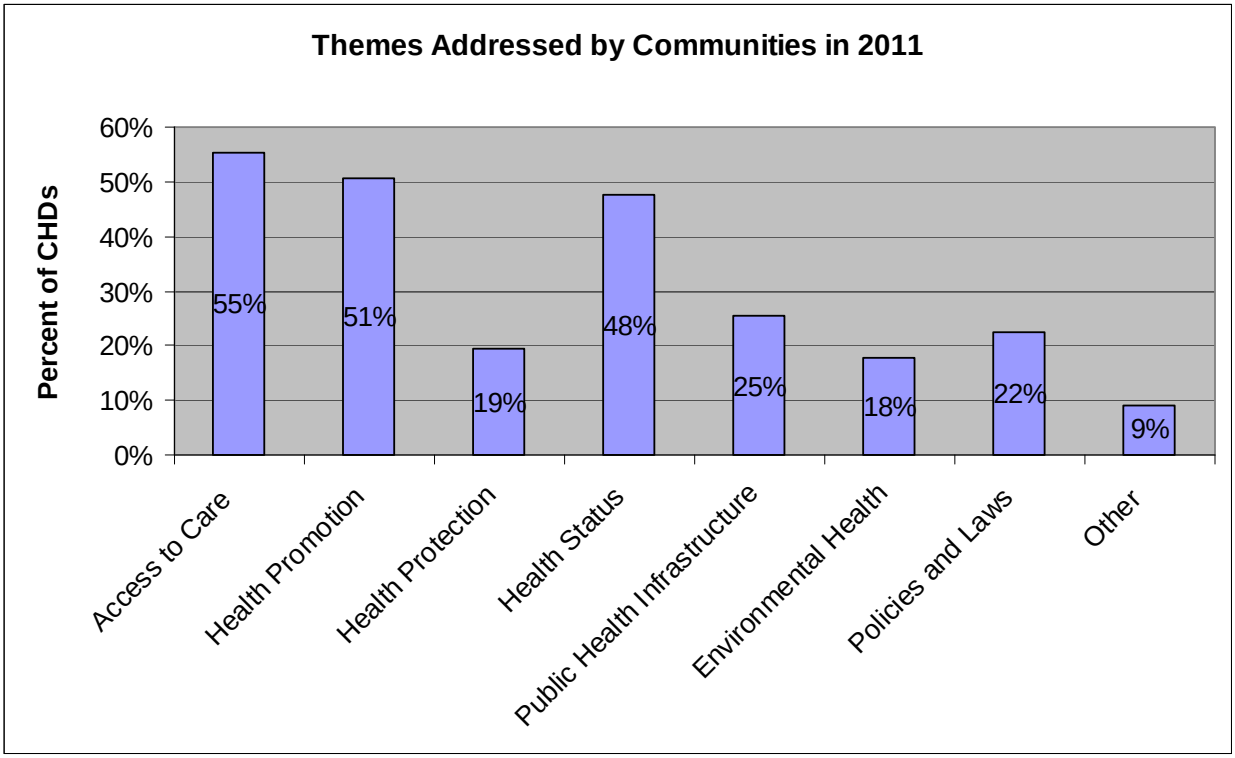


Percentage of CHDs by Themes Addressed

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

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

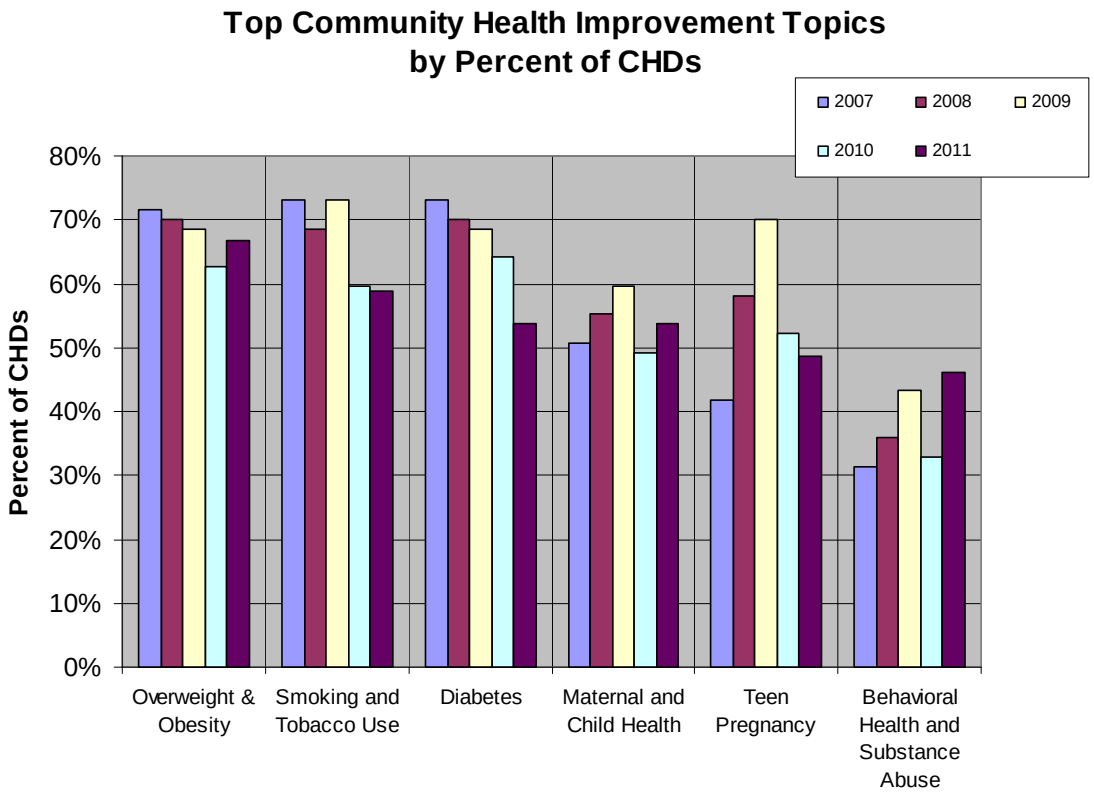
1A1. Identification of community themes (issues) and strengths

What topics are being addressed through current community-identified goals and objectives?

MANATEE County identified topics:

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

* Behavioral health and substance abuse * Cancer * Diabetes * Environmental health * Heart disease and stroke * Immunization * Infectious diseases (HIV, AIDS, STD's) * Injury and trauma * Maternal/child health/infant mortality * Nutrition and food related issues * Oral health * Overweight and obesity * Physical activity * Public health and medical preparedness * Smoking and tobacco use * Teen pregnancy * Other * Access to prenatal care



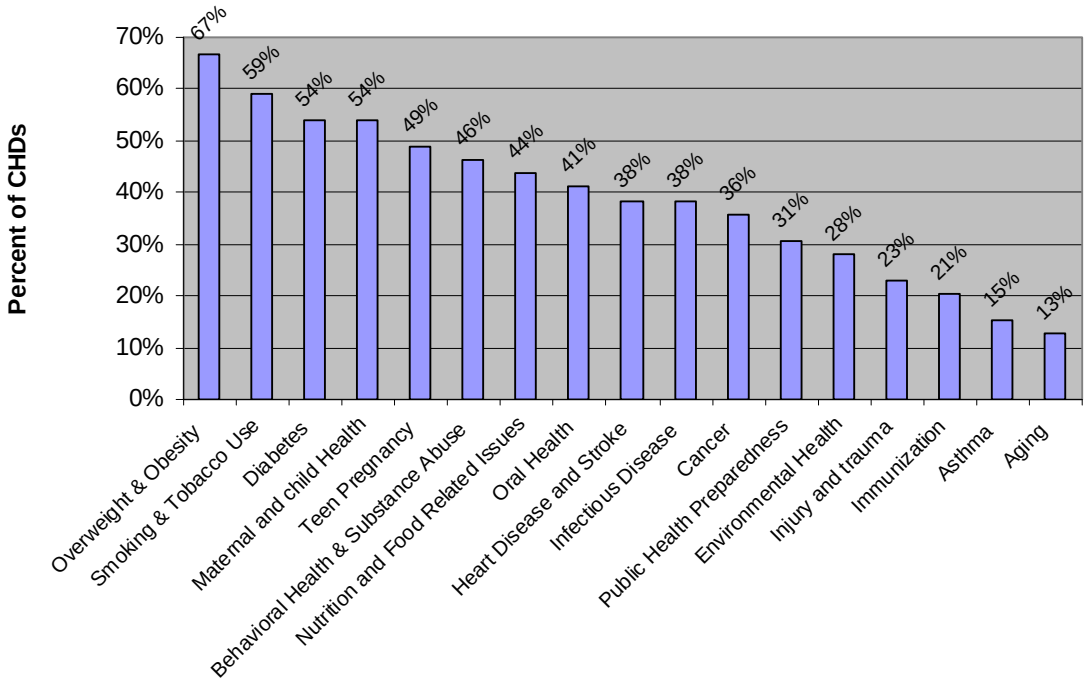
Community Health Improvement Topics by Percent of CHDs

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



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 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

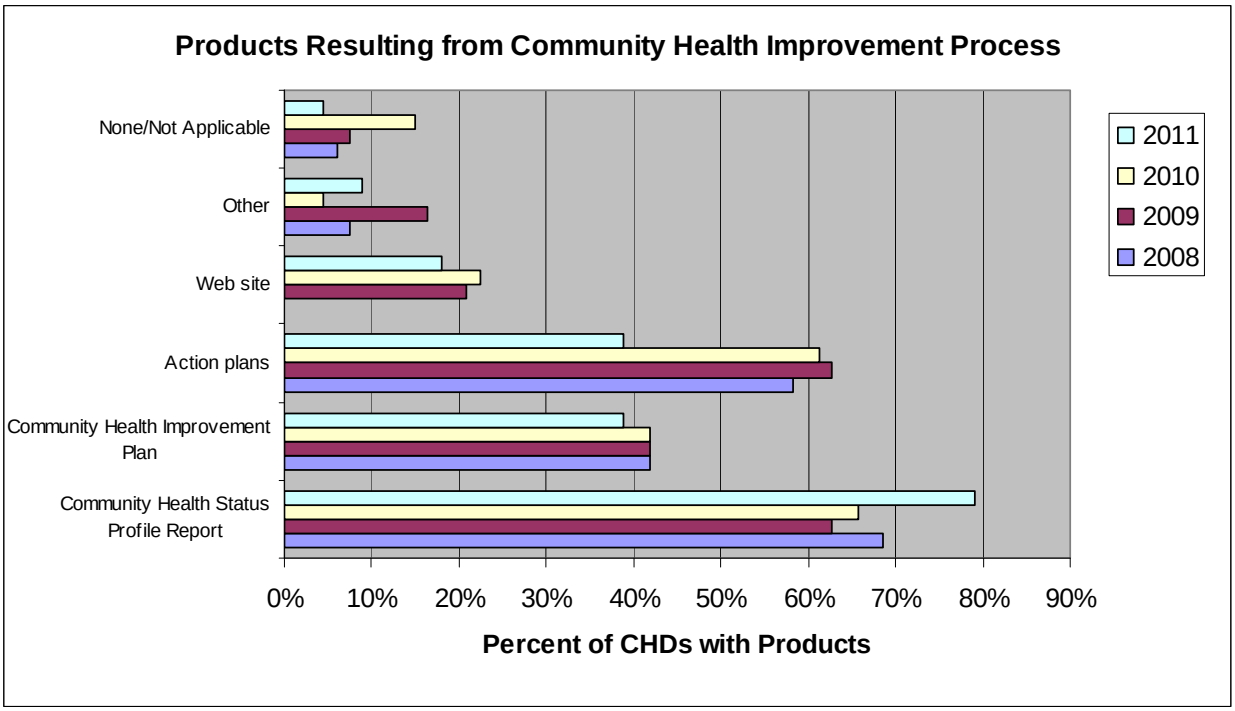
DOH Community Health Improvement:

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?

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

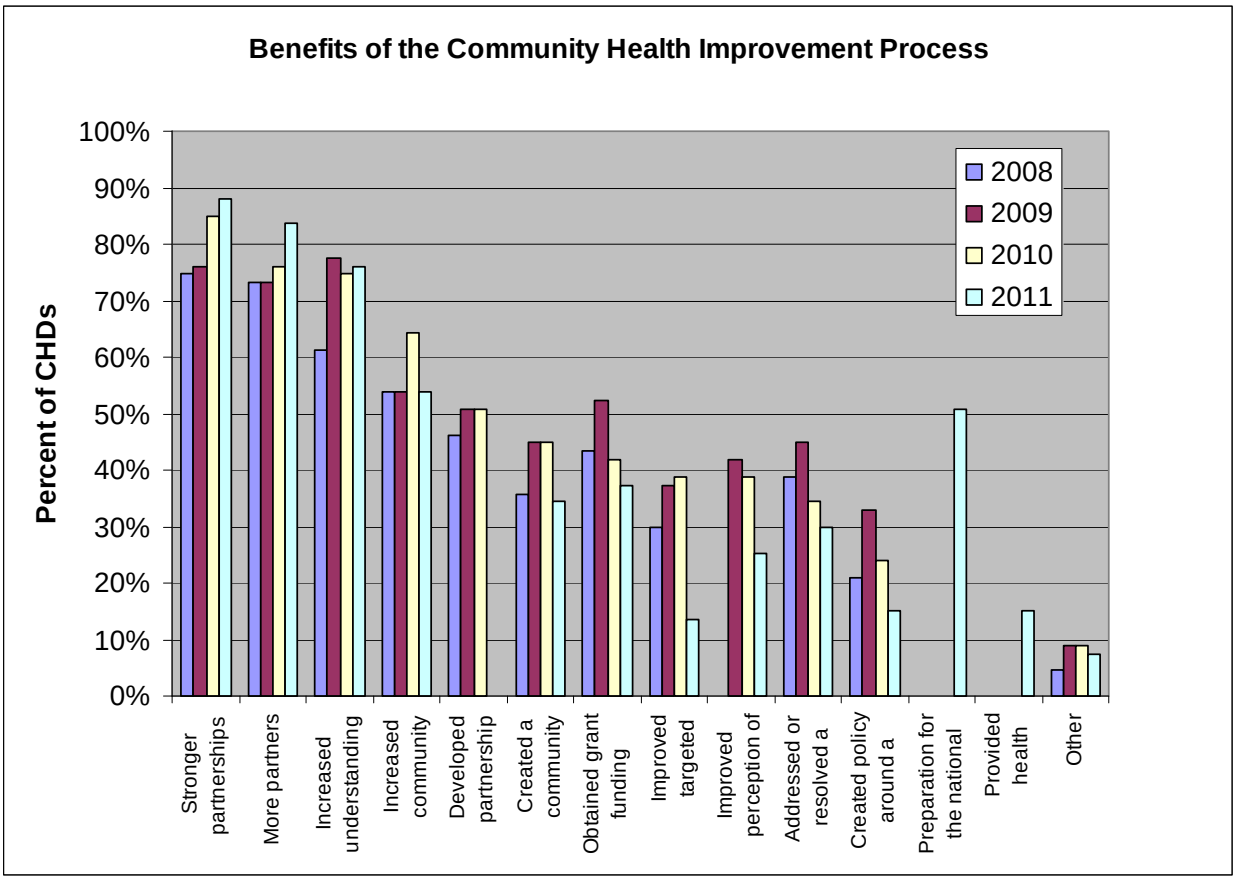


Products Resulting from the Community Health Improvement Process

Statewide	2008		2009		2010		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?

MANATEE CHD:
* More and/or new community partners * Stronger partnerships * Better understanding of public health in the community * Created a community health improvement plan * Created a policy around a community health issue * Addressed and resloved a specific strategic issue or goal * Community ownership of health issues * Improved perception of government * Preparation for the national voluntary agency accreditation * Other



Percent and Number of CHDs by Type of Benefit

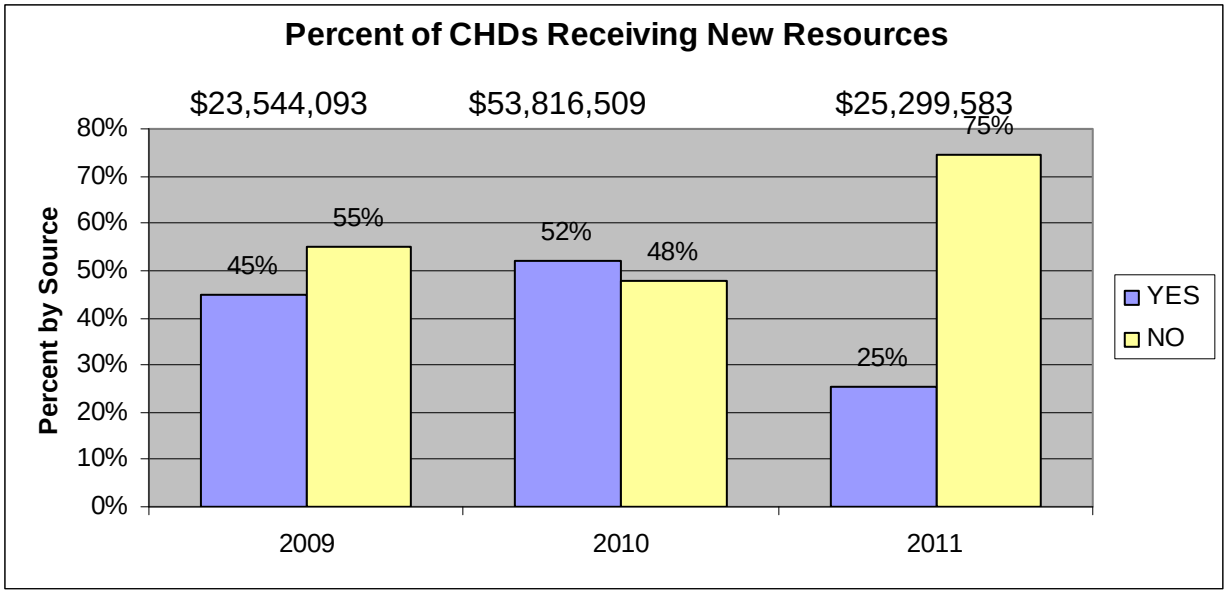
Response	2008		2009		2010		2011	
	Percent	Number	Percent	Number	Percent	Number	Percent	Number
Stronger partnerships	75%	50	76%	51	85%	57	88%	59
More partners	73%	49	73%	49	76%	51	84%	56
Increased understanding of public health	61%	41	78%	52	75%	50	76%	51
Increased community ownership of issues	54%	36	54%	36	64%	43	54%	36
Developed partnership with health planning council	46%	31	51%	34	51%	34		not 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 asked		not asked		51%	34
Provided health perspective to urban planning	not asked		not asked		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?

MANATEE 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?

	2009	2010	2011
YES	30	35	17
NO	36	31	50
Blank	1	1	0