

Title	Missouri State Health Assessment (SHA) and State Health Improvement Plan (SHIP)
Team:	<u>Research and Evaluation Solutions, Inc. (SHA-SHIP Contractor)</u> <i>Laverne Morrow Carter, Ph.D., MPH</i> –Project Director/Lead Evaluators <i>Symphony Brooks, MHS</i> –Senior Research Associate <i>Megan Terle, MPH</i> –Research Associate/Epidemiologist <i>Beverly Triana-Tremain, Ph.D.</i> –Senior Public Health Consultant <u>State of Missouri Department of Health and Senior Services (DHSS)</u> <i>Susan Thomas, Accreditation Coordinator, Office of Quality Improvement</i> <i>Sherri Homan, Ph.D., Domain One Leader</i>
Background	<p>After more than six years of exploration and investigation, the Centers for Disease Control and Prevention (CDC), in collaboration with the Robert Wood Johnson Foundation, is supporting a national voluntary accreditation program for public health agencies. The newly created non-profit Public Health Accreditation Board (PHAB) oversees the accreditation process. PHAB is working to promote and protect the health of the public by advancing the quality and performance of all public health departments in the U.S. through national public health department accreditation. PHAB’s vision is a high-performing governmental public health system that leads to a healthier nation. For a public health department to be accredited, it must meet stringent requirements for the 10 essential services of the core public health functions and demonstrate a commitment to constant improvement. The functions exclude Medicaid, mental health, substance abuse, primary care and human service programs. Thirty health departments have already tested the process of national accreditation and local officials were pleased with and support the outcomes. Health departments vary in size, organizational structure, scope of authority, resources, population served, governance, and geographic region. PHAB’s standards, measures, and guidance for documentation apply to all health departments. In September 2011, the national accreditation process was launched and in 2012, 97 health departments were at various stages in the accreditation system. The process involves 12 domains and the first ten domains address the ten Essential Public Health Services. The services are part of the three core functions of public health–1) Assessment, 2) Assurance, and 3) Policy Development. The Missouri Department of Health and Senior Services (DHSS) intends to spend 2013 engaged in activities that lead to national accreditation.</p>

	State Health Assessment	State Health Improvement Plan
AIMS AND OBJECTIVES	General Aim 1: Prepare Project Work Plan 1.1. Finalize the plan 1.2. Meet with DHSS personnel to present plan, receive feedback and get buy-in 1.3. Use project plan to track and adjust activities	
	General Aim 2: Establish a Partners' Group of 25-30 diverse members to offer Input and Feedback 2.1. Diversity includes geography, sectors, service providers across the lifespan, gender, race/ethnicity 2.2. Disseminate the current list of partners from the Quality Improvement Office along with the CDC Public Health Network Model 2.3. Receive recommendations of additional members from Domain Members and DHSS Leadership team 2.4. Prepare final list of Partners to be invited by the Director	
	SHA Aim 1: Confirm Statewide Indicators of Focus SHA1.1. Meet with Domain One Team SHA1.2. Select indicators based on the State of Missourians Health Report (2011) SHA1.3. Indicator data are prepared in excel file segregated, minimally, by Counties/City and Race SHA1.4. Data are structured and formatted using the eight regions based on Missouri BRFSS Map	SHIP Aim 1: Create Vision and Values SHIP1.1. Prepare agenda and worksheets SHIP1.2. Conduct meeting with Partners on June 19, 2013
	SHA Aim 2: State Public Health System Assessment SHA2.1. Download and review instrument SHA2.2. Prepare agenda and handouts for three-hour information meeting on March 19, 2013 SHA2.3. Prepare agenda, activities, and handouts for a one-day assessment meeting on March 20, 2013 SHA2.4. Submit final assessments for analysis	SHIP Aim 2: Use Health Assessment Data to Identify Factors that Facilitate and Inhibit the Improvement of Health Issues SHIP2.1. Conduct comprehensive literature search and review focusing on current findings related to the issues. SHIP2.2. Identify risk factors, determinants, protective factors and change strategies for the health issues

AIMS AND OBJECTIVES	State Health Assessment	State Health Improvement Plan
	<p>SHA Aim 3: Statewide Health Status Assessment SHA3.1. Organize Indicator Data by Region and Counties SHA3.2. Prepare a user-friendly presentation of data for the resident-consumer level SHA3.3. Identify outreach partners in each of the eight Regions SHA3.4. Prepare Customized Outreach Documents SHA3.5. Prepare and submit IRB documents (Exempt) SHA3.6. Recruit 12 Focus Group participants in each of the eight regions (N=96) SHA3.7. Recruit three Key Informants in each of the seven regions (N=21) SHA3.8. Conduct eight focus groups and 21 Key Informant Interviews in April 2013 SHA3.9. Prepare reports on findings</p>	<p>SHIP Aim 3: Set Health Issue Priorities SHIP3.1. Prepare agenda and worksheets SHIP3.2. Conduct meeting with Partners on June 19, 2013</p>
	<p>SHA Aim 4: Community Themes and Strengths SHA4.1. Prepare data and handouts for focus groups SHA4.2. Prepare Focus Group Discussion Guide SHA4.3. Prepare Key Informant Interviews Discussion Guide</p>	<p>SHIP Aim 4: Develop a Plan for Communicating Priorities to Stakeholders and Public SHIP4.1. Identify various audiences and characteristics SHIP4.2. Prepare an outreach communications strategy that is tailored to each audience and set of stakeholders</p>
	<p>SHA Aim 5: Forces of Change SHA5.1. Prepare agenda and worksheets for the meeting SHA5.2. Conduct Partner Meeting on May 13, 2013</p>	

<p>OVERALL APPROACH</p>	<p>REESSI uses a <i>participatory action approach</i> with assessment and evaluation engagements, which involves interactive meetings and communications with client personnel about the aims and objectives of the engagement; the data collection and analyses efforts; and the development of documents and results. Additionally, REESSI employs four management tools to guide and monitor projects - 1) information, planning, and decision making meetings, 2) written plans and reports, 3) performance goals and feedback and 4) maintaining confidentiality in data collection and interventions. Two categories of meetings are used on projects—<i>a) weekly project personnel meetings and b) at least monthly meetings with the designated staff from the client organization.</i> The meetings are structured with goals, objectives, and written agendas. Notes of meeting outcomes are standard and maintained in a database file. All project activities are managed and guided by the project work plan.</p> <p>This project involves <i>case study design</i> to determine the health status of the residents in the State of Missouri and to guide and support the DHSS in the construction of a statewide health improvement plan. Two theoretical frames for public health planning will guide the project activities—1) Mobilizing for Action Through Planning and Partnership (MAPP)¹ and the PRECEDE-PROCEED Model.² The MAPP framework is a <i>community-wide strategic planning tool for improving community health and helping communities prioritize public health issues and identify resources to address them</i> (MAPP, 2011). The PRECEDE-PROCEED frame uses an ecological and educational approach that respects context. The assessment team will follow the MAPP steps and elements of the PRECEDE-PROCEED model that focus on Social Assessment and Situational Analysis and Epidemiological, Behavioral, and Environmental Assessment.</p>
<p>OUTCOMES</p>	<ol style="list-style-type: none"> 1) A Diverse Statewide Partners Group (sustainable). 2) A regionally based group of consumers and beneficiaries of statewide public health services (sustainable). 3) Comprehensive State Health Assessment Report with justification documents and worksheets. 4) The primary elements of a State Health Improvement Plan with vision, values, and priority issues that includes justification documents and worksheets.

¹ MAPP was developed through a cooperative agreement between the National Association of County and City Health Officials (NACCHO) and the Centers for Disease Control and Prevention (CDC).

² The Precede-Proceed Model is a comprehensive framework for planning population-based health programs. It was developed by Lawrence Green and Marshall Kreuter in 1980 and adapted in 1999 and 2004.