# Assessing the chronic disease capacity of a State Health Department using PHFAST

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# Acknowledgements

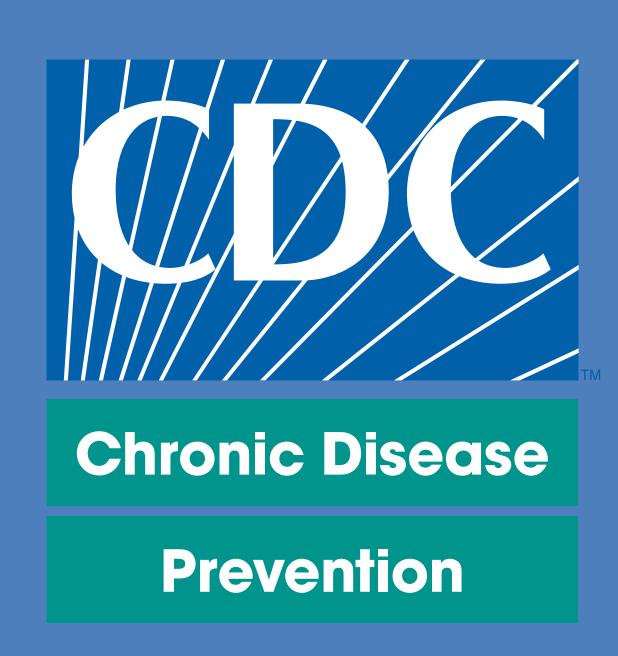
- Ginny Furshong
- Heather Zimmerman
- Todd Harwell
- John Robitscher



## Learning Objectives

- Describe eight elements of the PHFAST framework.
- Compare the utility of quantitative versus qualitative applications of the PHFAST framework.
- Discuss the implications of PHFAST assessment on chronic disease capacity building within the state health department





## Promising Practices in Chronic Disease Prevention and Control







A Public Health Framework for Action



2003
DEPARTMENT OF HEALTH AND HUMAN SERVICES

US Department of Health and Human Services & CDC, 2003



## State Technical Assistance Review Project

- Combines self study, on-site expert review, and recommendations to increase program effectiveness and efficiency
- Assesses the overall chronic disease prevention and control program, not its categorical program elements
- Leadership, informatics, state plans, evaluation, integration, epidemiology & surveillance, partnerships, interventions, management



### PHFAST

#### Public Health Framework ASsessment Tool



Graphic source: iamdigital

- Based on the Public Health
   Framework for Action
- Consistent with preparation for STAR
  - Quickly actionable a few hours instead of a few months



## PHFAST Elements

- Epidemiology & surveillance
- Evaluation
- Interventions
- Leadership

- Partnerships
- Program coordination
- Program management
   & administration
- State plans



#### PHFAST – Public Health Framework ASsessment Tool

Adapted from the Public Health Framework for Action and STAR

Domain/Indicator		Status	Opportunity	Follow-up
			What can you build on? Where might you act? Who could take the lead?	What information is missing? What do you need to do or know before you can act?
LS1	The unit is a key contact for others both inside and outside the state health department who are interested in chronic disease prevention and control.			
	The unit informs decision-makers and partners (including media, governor, legislature, other state agencies, community coalitions and consumer and advocacy groups) about the units's value and accomplishments.			

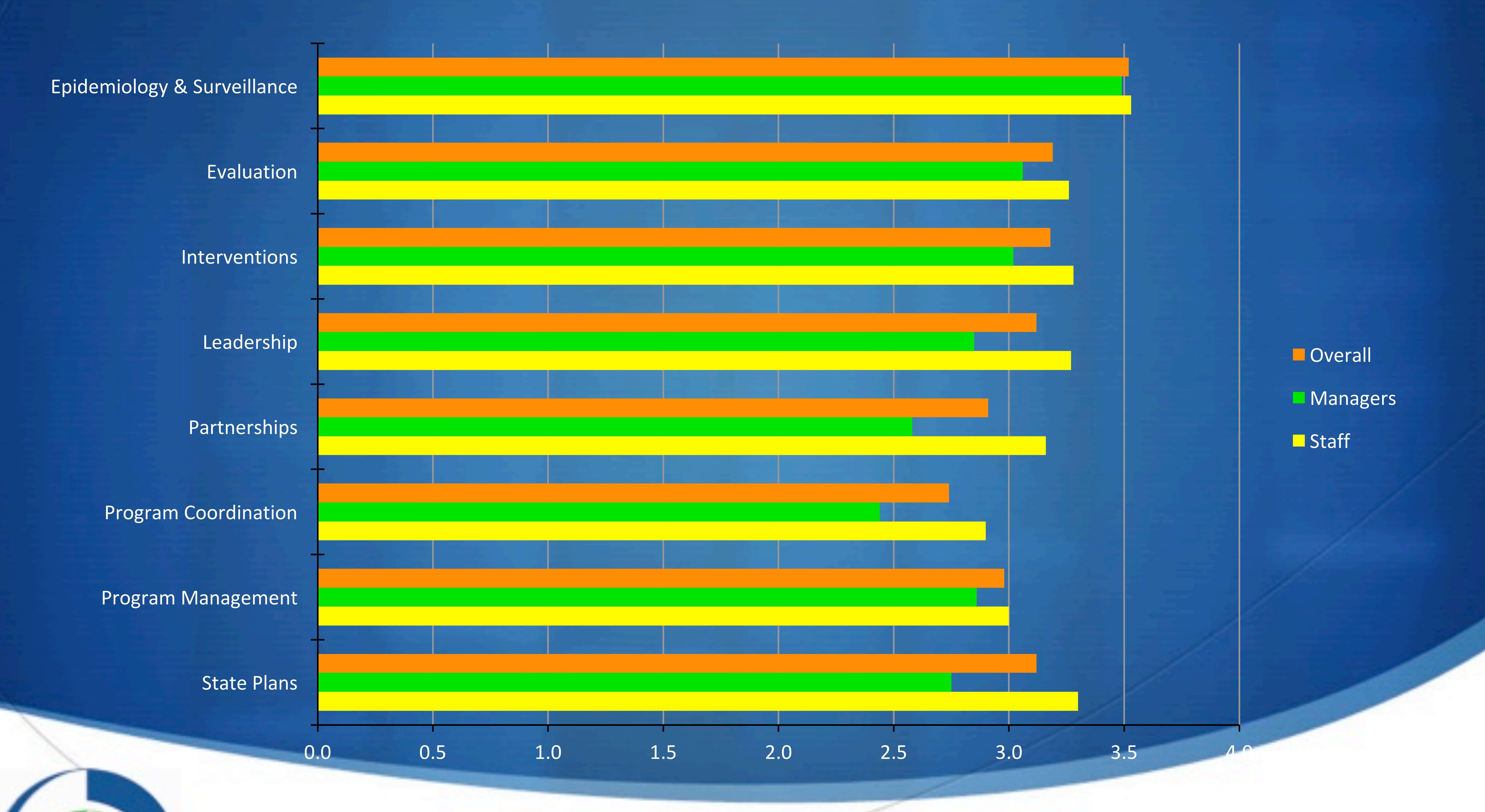


## Quantitative Approach

- SurveyMonkey used for data collection
- Two respondent categories:
  - Management team
  - Program/administrative staff
- Ratings assigned numerical value
   Not present=1, Present-weak=2,
   Present-adequate=3, Present-strong=4



## Montana's Results



## Montana's Experience

- Staff and management agreement about strengths and weaknesses
  - Epidemiology & surveillance identified as a strength
  - Coordination and State plans identified as areas in need of improvement.
- Capacity building plan developed
- Reassessment completed and in analysis



## Discussion

#### Qualitative approach

- Strengths
   Allows for exploratory conversations on the model elements
- Limitations
   Difficult to systematically compare changes over time

#### Quantitative approach

- Strengths
  - Allows for comparable data collection over time
  - Allows for input from a large number of stakeholders
- Limitations
   Ratings may be difficult to assign



# Thank you!

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