

UPMC Center for Health Security

A National Survey on Health Department Capacity for Community Engagement in Emergency Preparedness

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FACULTY DISCLOSURE

Members of the study team have no financial relationships to disclose.

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 - Fred Selck, Co-author (statistical analyses)
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 - Jack Herrmann, Laura Biesiadecki, Carolyn Leep, Scott Fisher, Justin Snair
- Anonymous practitioners who piloted questionnaire
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OBJECTIVES

Upon completion of this educational activity, you will be able to

1. Describe the current state of practice as it relates to community engagement in public health emergency preparedness (CE-PHEP);
2. Identify factors that make it easier or harder for LHDs to integrate residents and faith-based, community-based, and business organizations into PHEP;
3. Outline a course of action for LHDs to intensify their CE-PHEP activity and for policymakers to strengthen the infrastructure for this work.

POLICY CONTEXT

“National health security stands on a foundation of individuals and communities that are aware of and informed about health security risks and empowered to prevent, protect against, mitigate, respond to, and recover from large-scale incidents with potentially negative health consequences.”

-- National Health Security Strategy
Implementation Plan (2012)

PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) SYSTEM



“...[A]lthough all parties share responsibility for the integration and coordination of community resources, the final accountable entity...is the local, state, tribal, and federal governmental public health infrastructure.”

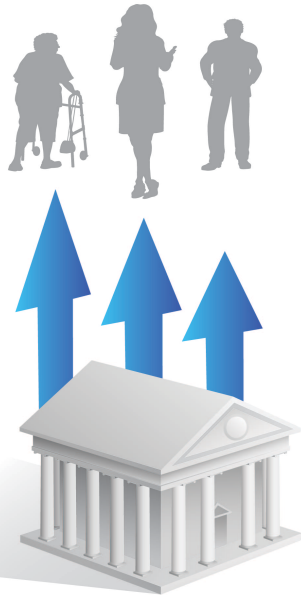
-- Institute of Medicine, 2008

NATIONAL LHD SURVEY OBJECTIVES

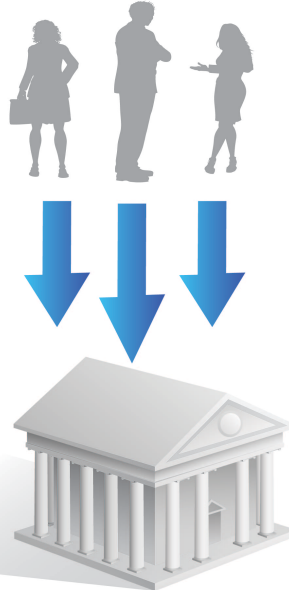
- Develop a snapshot or baseline of current LHD community engagement activities related to PHEP
 - What is happening in the field? Who is doing what right now?
- Determine which LHD characteristics are associated with more “intense” community engagement
 - What organizational factors might influence performance?

COMMUNITY ENGAGEMENT (CE)

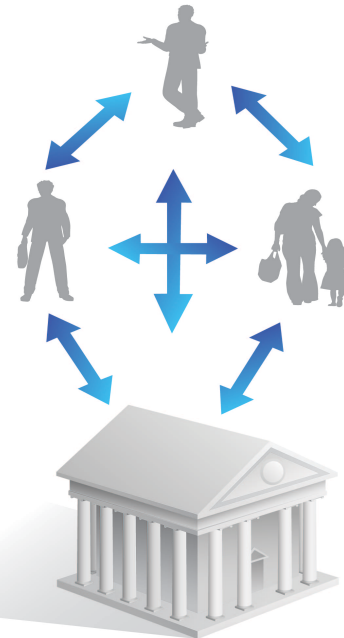
Community Engagement Continuum



Communication
Push out information as part of education & outreach campaign



Consultation
Gather input through surveys, polls, focus groups & advisory panels



Collaboration
Exchange ideas & share responsibility for making & executing policy decisions

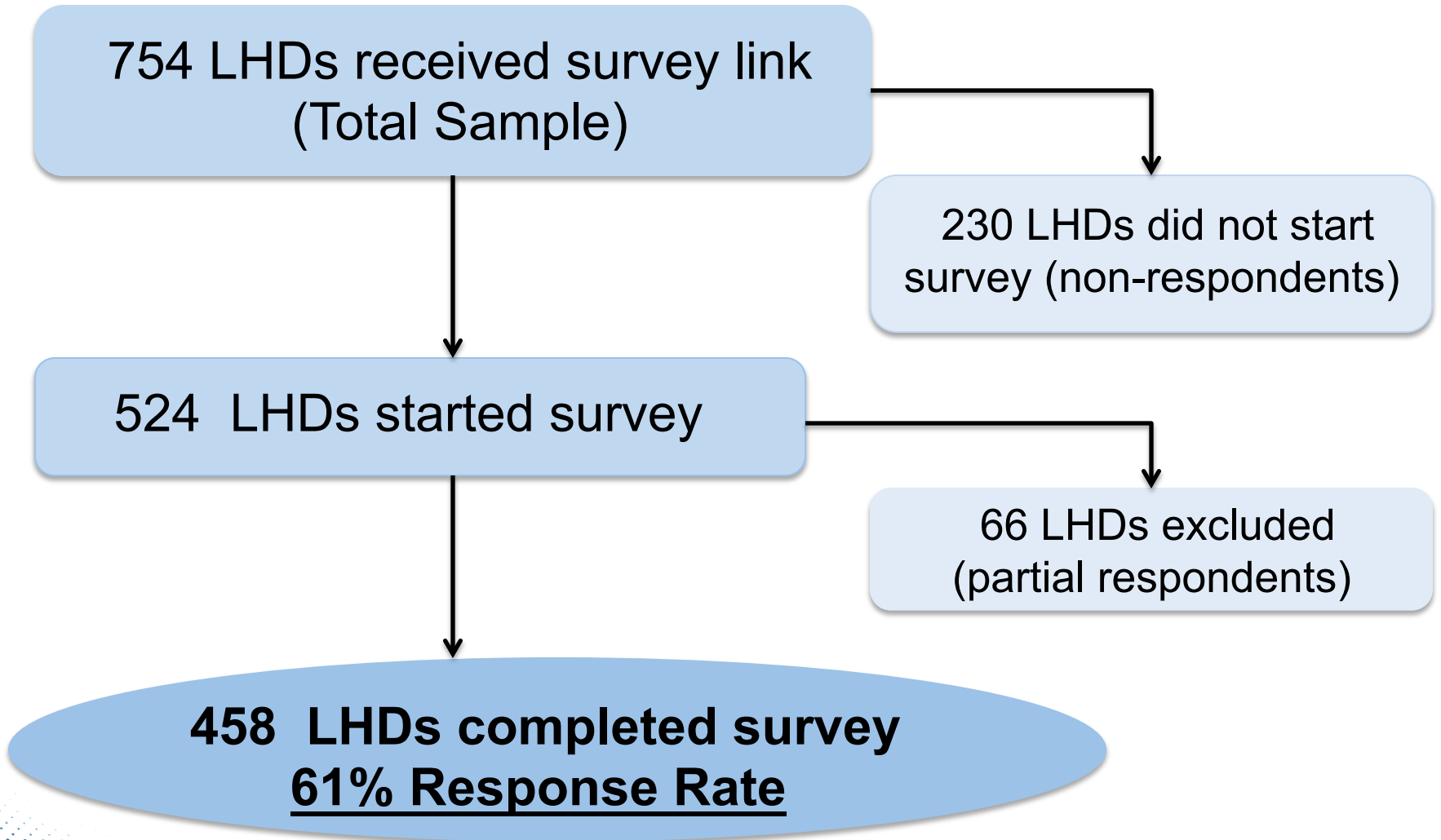
SURVEY METHODS

- Self administered online questionnaire, Aug to Sept 2012
 - Informed by case study interviews and CE-PHEP scoring system
 - Reviewed by NACCHO and piloted with case study interviewees
- Target population: US LHD Preparedness Coordinators
- Sampling frame: All LHDs invited to participate in 2010 NACCHO profile (minus HI and RI); divided into 2 strata
- Statistical analyses
 - Tabulated LHD characteristics and CE-PHEP activities by size of population served
 - Evaluated association between LHD population and CE-PHEP intensity score
 - Tested whether LHD characteristics were associated with differences in CE-PHEP intensity score

CE-PHEP “INTENSITY” SCORING SYSTEM

| 1 POINT | 2 POINTS | 3 POINTS |
|---|----------------------|------------------------|
| Communication – Personal Preparedness | | |
| Brochures | Audience Surveys | In-Person Trainings |
| Communication – Emergency Plans | | |
| Public Comment | Town Halls | Public Deliberations |
| Collaboration – CBOs, FBOs, Businesses | | |
| Contact Lists | Technical Assistance | MOUs/MOAs |
| Vulnerable Population Protection | | |
| Brochures | Needs Assessment | Organiz’l Partnerships |
| Volunteer Mobilization | | |
| Registries | Exercises | Legal Protections |

SURVEY RESPONSE



CE-PHEP ACTIVITIES IN LAST 12 MONTHS

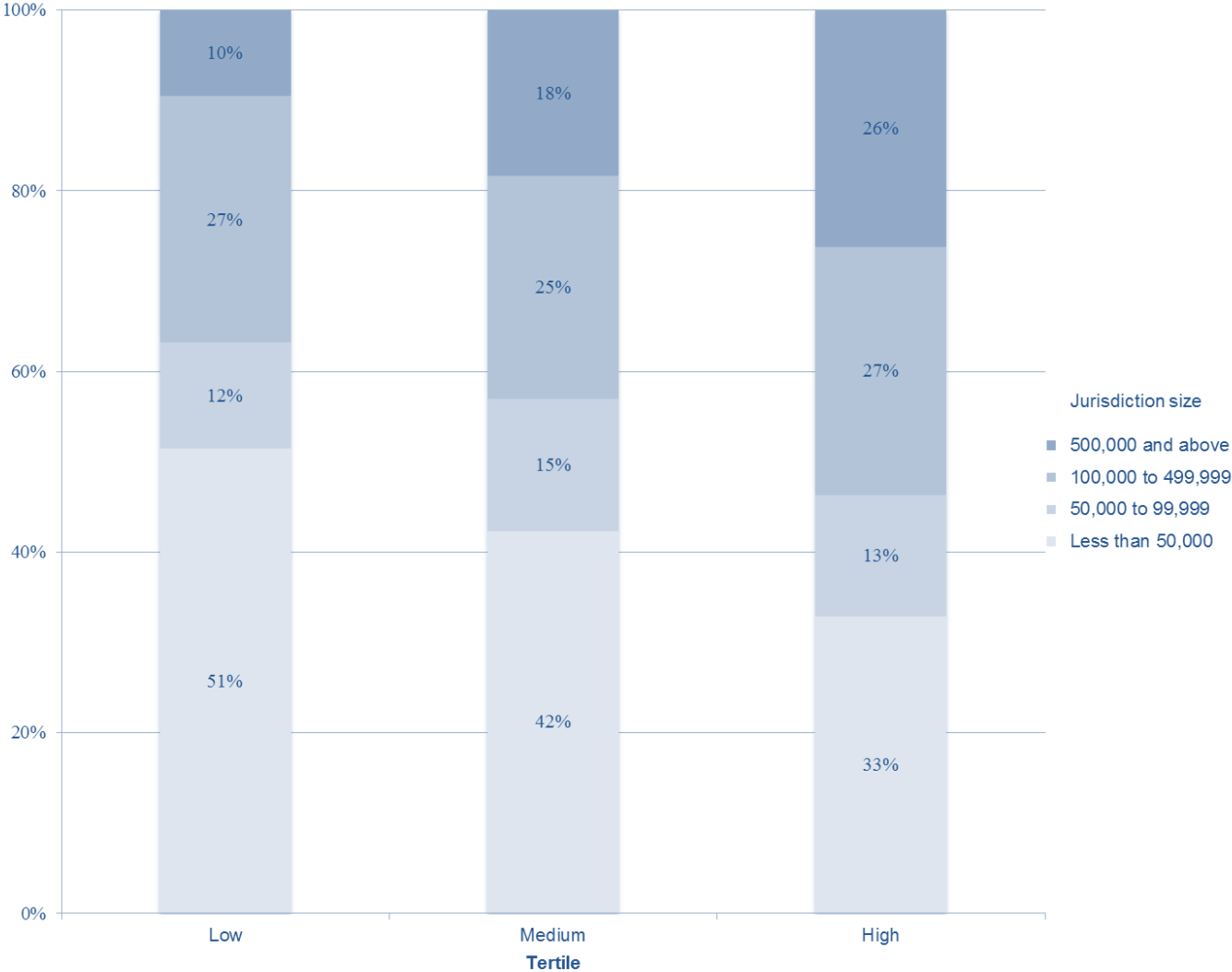
- 3 **MOST** Common CE-PHEP Activities

| | |
|---|-----|
| Distributed preparedness educational materials | 90% |
| Established basic relationships with CBOs, FBOs, businesses | 85% |
| Recruited volunteers or maintained registries | 85% |

- 3 **LEAST** Common CE-PHEP Activities

| | |
|---|-----|
| Convened town hall meetings or public forums on plans | 22% |
| Published PHEP plans for public comment | 24% |
| Conducted surveys or focus groups of residents | 30% |

PORTION OF LHDS BY TERTILE OF INTENSITY



LHD CHARACTERISTICS ASSOCIATED WITH CE-PHEP INTENSITY SCORE

- **Most Strongly Associated Characteristics**

- Formal policy for CE-PHEP
- Strong support from CBOs
- Funds allocated for CE-PHEP
- Plans to increase level of CE activities
- Coordinator has CE experience

- **Additional Characteristics**

- Support from agency leadership
- Support from other partners (FBOs, businesses, schools, EMA, DVOs, elected officials)
- Sufficient staffing levels
- Coordinator has prior training
- Coordinator is full-time employee
- Size of LHD jurisdiction served
- HHS region

REGRESSION RESULTS: CE-PHEP INTENSITY

| Lowest Tertile <=11 points | Middle Tertile 12-13 points | Highest Tertile 14-15 points |
|--------------------------------------|---------------------------------------|--|
|--------------------------------------|---------------------------------------|--|

| LHD characteristics with the strongest associations | Change in CE-PHEP point score | % LHDs had characteristic | % of LHDs did not have characteristic |
|---|-------------------------------|---------------------------|---------------------------------------|
| Has explicit CE-PHEP policy | 1.31 | 70 % | 30% |
| Has strong CBO support | 1.21 | 44 % | 66% |
| Allocated CE funds | 1.20 | 57 % | 43% |
| Intends to increase CE-PHEP | 0.98 | 60 % | 40% |
| Has CE lead w/ prior experience | 0.90 | 68 % | 32% |

IMPLICATIONS FOR POLICY AND PRACTICE

- Federal pathways to achieve strategic national aim of “informed, empowered and resilient population”:
 - Appropriate funds to support LHDs in crafting CE-PHEP policy, hiring skilled and/or training CE staff, and building partnerships
 - Develop technical guidance on CE-PHEP policy development and on CE-PHEP worker skillset
- LHD practices to strengthen CE-PHEP efforts:
 - Formalize CE-PHEP objectives
 - Set CE-PHEP milestones; maintain continuity of CE-PHEP
 - Carve out CE-PHEP operating budget
 - Hire staff with prior CE experience; train inexperienced staff
 - Strengthen CBO ties and leverage them with other partners



Thank you.
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