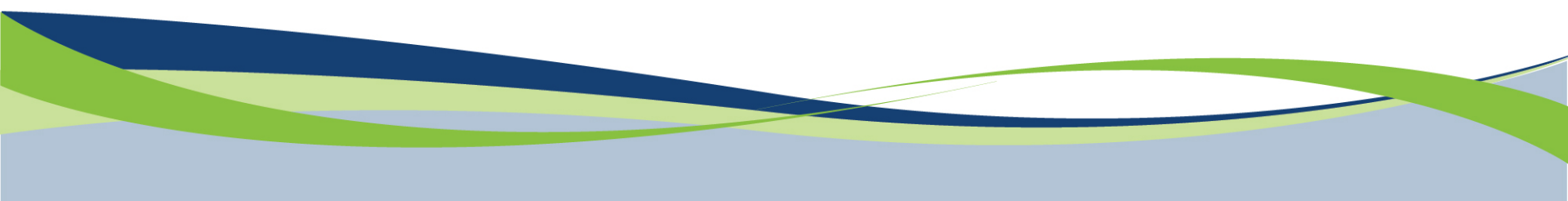


Public Health PBRN Monthly Virtual Meeting June 21, 2012



Use and Impact of the County Health Rankings: Results from the Florida PH-PBRN Study

Florida Public Health Practice-based
Research Network

June 21, 2012

Acknowledgements

- Dennis Cookro, MD, MPH
- Meade Grigg
- Winifred Holland
- Rebecca Keyes
- Michael Morris, PhD
- Ben Tidwell, MPH (Project Director)
- Niketa Walawalkar, MD, MPH
- Bonita Sorensen, MD (Co-Principal Investigator)
- Nancy Winterbauer, PhD (Co-Principal Investigator)



Public Health
Prevent. Promote. Protect.

Volusia County Health Department

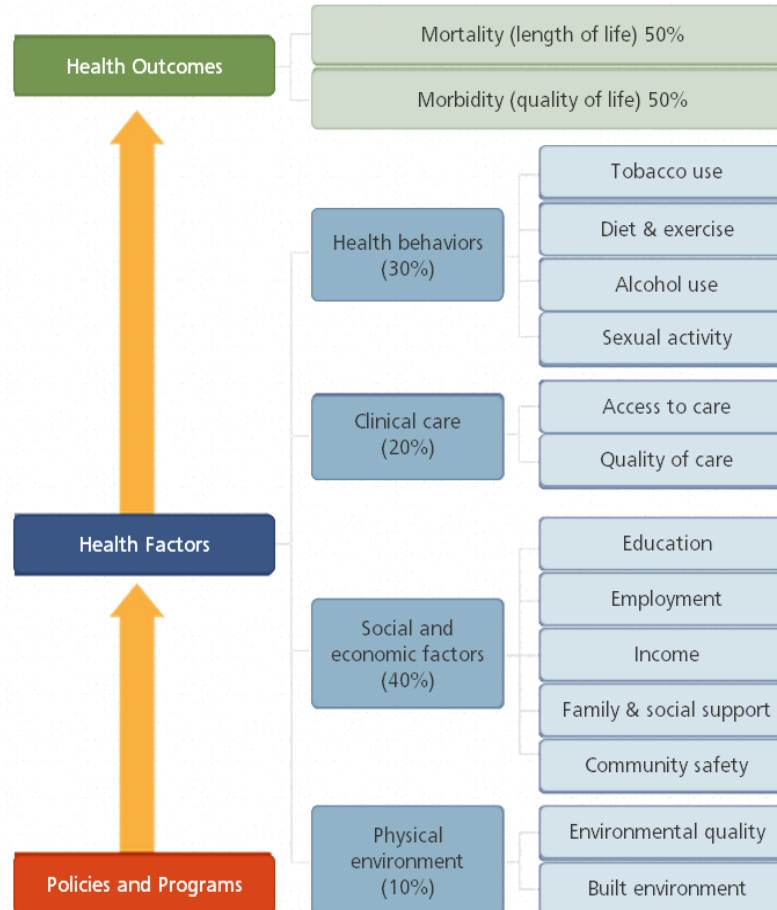
Funding for this research was provided by
the Robert Wood Johnson Foundation

Study Objectives

1. Describe the ways counties have **used** the Rankings
2. Describe the **impact** of the Rankings in communities
3. Describe **contextual factors** influencing use and impact
4. Describe change **over time**

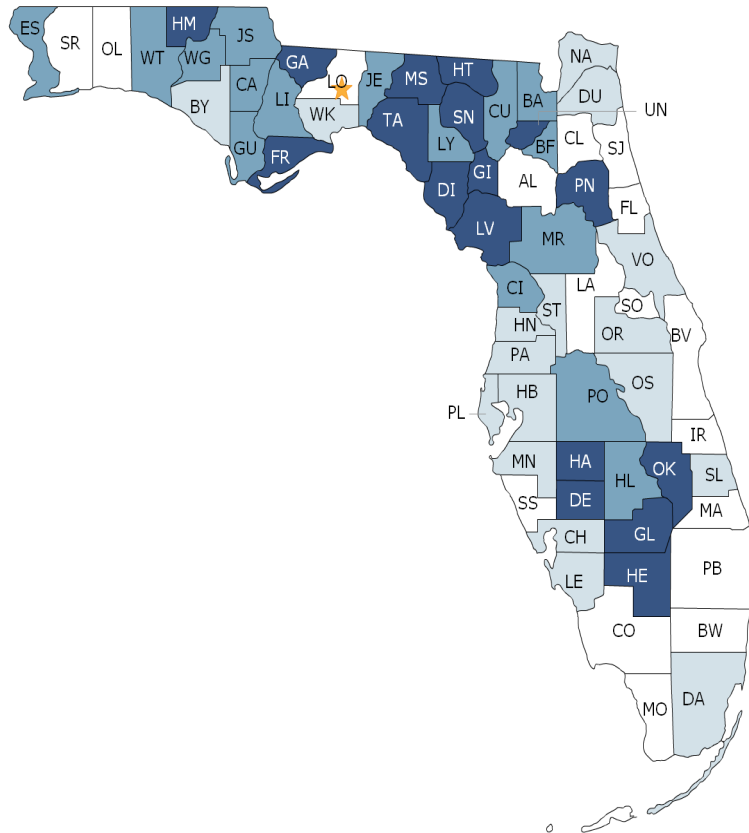


Background: Rankings



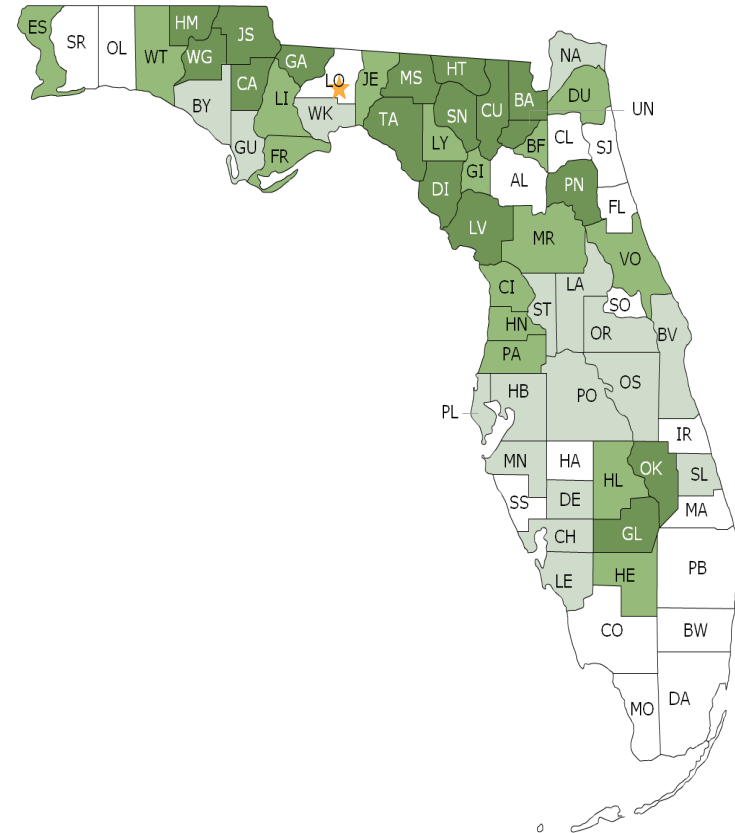
2011 Florida Rankings

2011 Health Factors - Florida



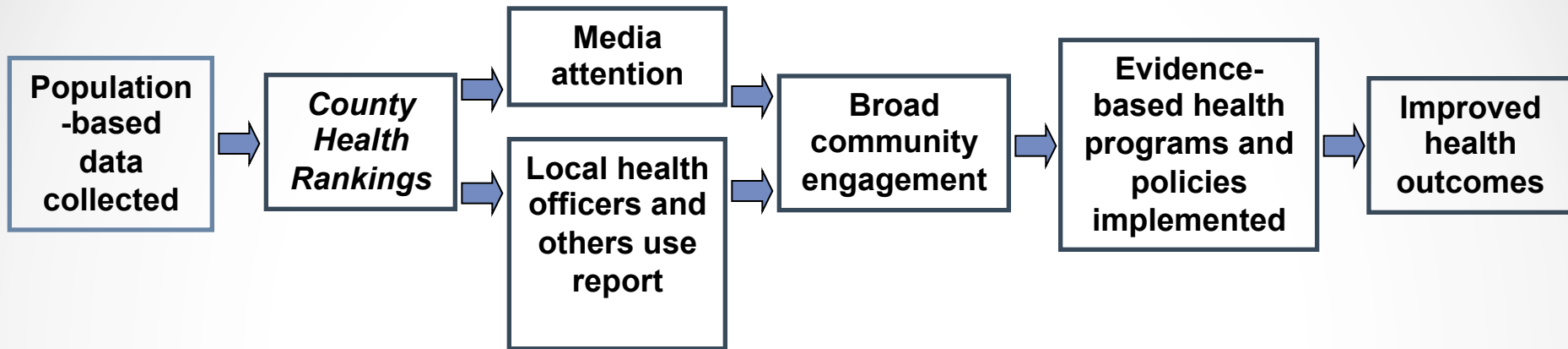
Rank 1-17 Rank 18-34 Rank 35-50 Rank 51-67

2011 Health Outcomes - Florida



Rank 1-17 Rank 18-34 Rank 35-50 Rank 51-67

CHR Logic Model



Products:

- CHR model and metrics
- CHR website

Process:

- Stakeholder preparation

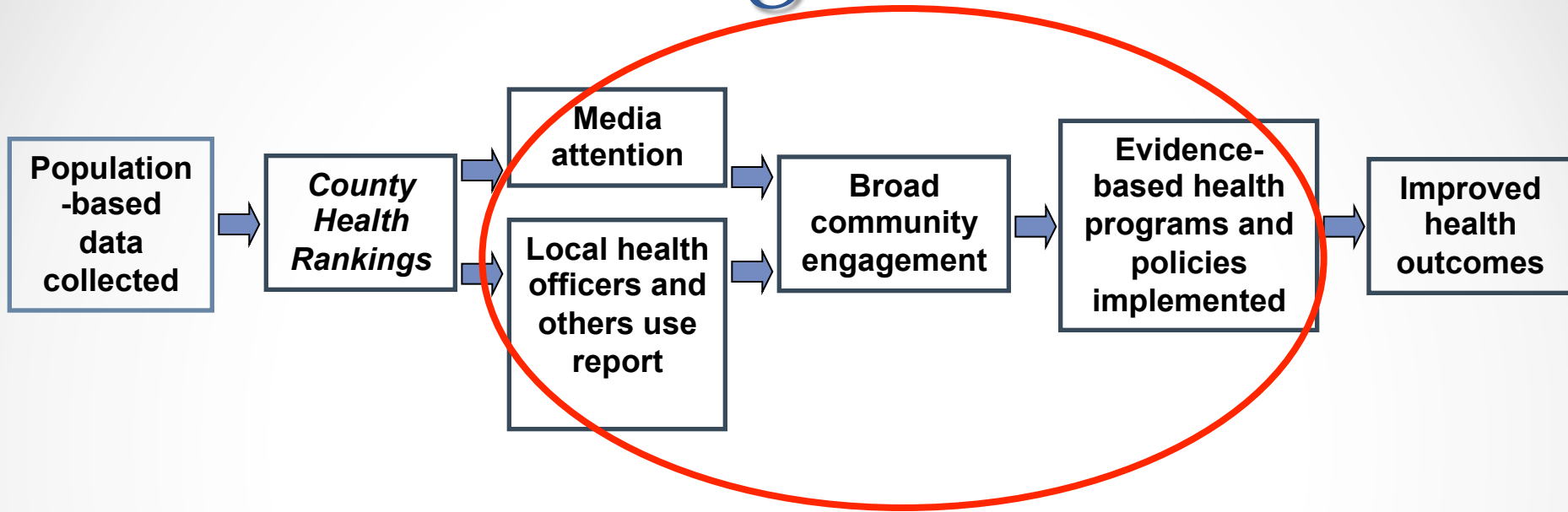
Short-term outcomes:

- Media attention
- Awareness
- Use of CHR
- Broad community engagement

Long-term outcomes:

- Informed decision-making
- Implementation of evidence-based programs and policies
- Improved health outcomes

CHR Logic Model



Products:

- CHR model and metrics
- CHR website

Process:

- Stakeholder preparation

Short-term outcomes:

- Media attention
- Awareness
- Use of CHR
- Broad community engagement

Long-term outcomes:

- Informed decision-making
- Implementation of evidence-based programs and policies
- Improved health outcomes

Methods

- On-line survey administered to LHD directors in all 67 Florida counties
 - **December 2011 – January 2012**
 - **100% response rate**
- 23 close-ended questions; 5 open-ended questions(20, 21, 26, 27, 28)
- Questions derived from existing instruments (UWI evaluation, NACCHO)and developed for survey purposes
 - Survey Advisory Group
 - Cognitive interviewing
- **Domains:**
 - **Use – 10 questions**
 - **Impact – 7 questions, Achieved & Perceived**
 - Value, Staffing, Knowledge, Community Partners, Outreach, Attention
 - 2010 v 2011

How have LHDs *used* the
Rankings?

...

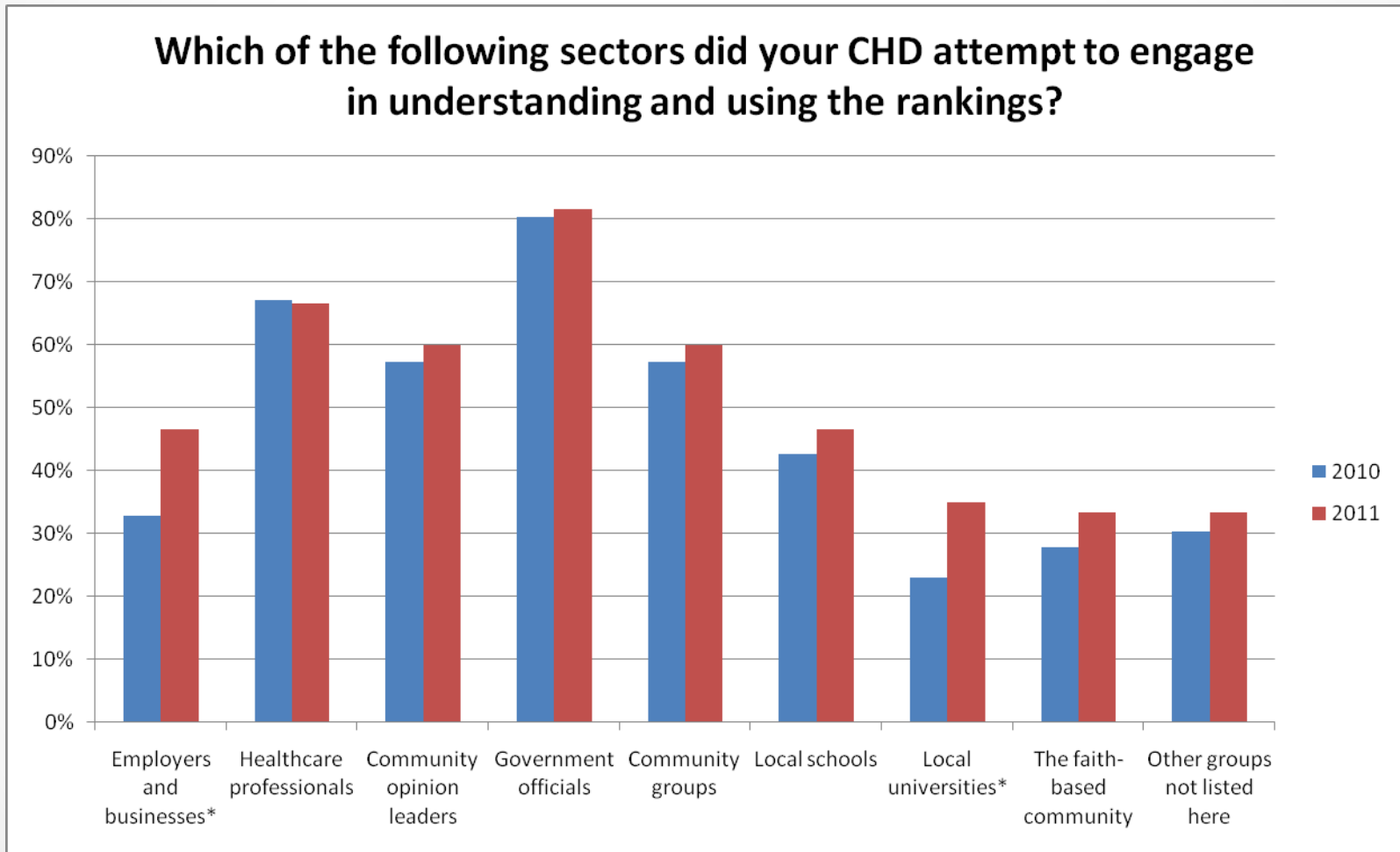
Use 2010 - 2011

Percentage of CHDs using the County Health Rankings, 2010-2011



*Statistically Significant Change ($p < .05$)

Community Engagement



*Statistically Significant Change ($p < .05$)

Community Health Assessment / Improvement

Has your CHD incorporated results from the RANKINGS into your most recent Community Health Assessment (CHA)?

Yes: 59.4%

No: 14.1

If your CHD has not completed a CHA since the RANKINGS were released, do you intend to incorporate results from the RANKINGS into your next CHA?

Yes: 23.4%

No: 1.6%



Additional Uses

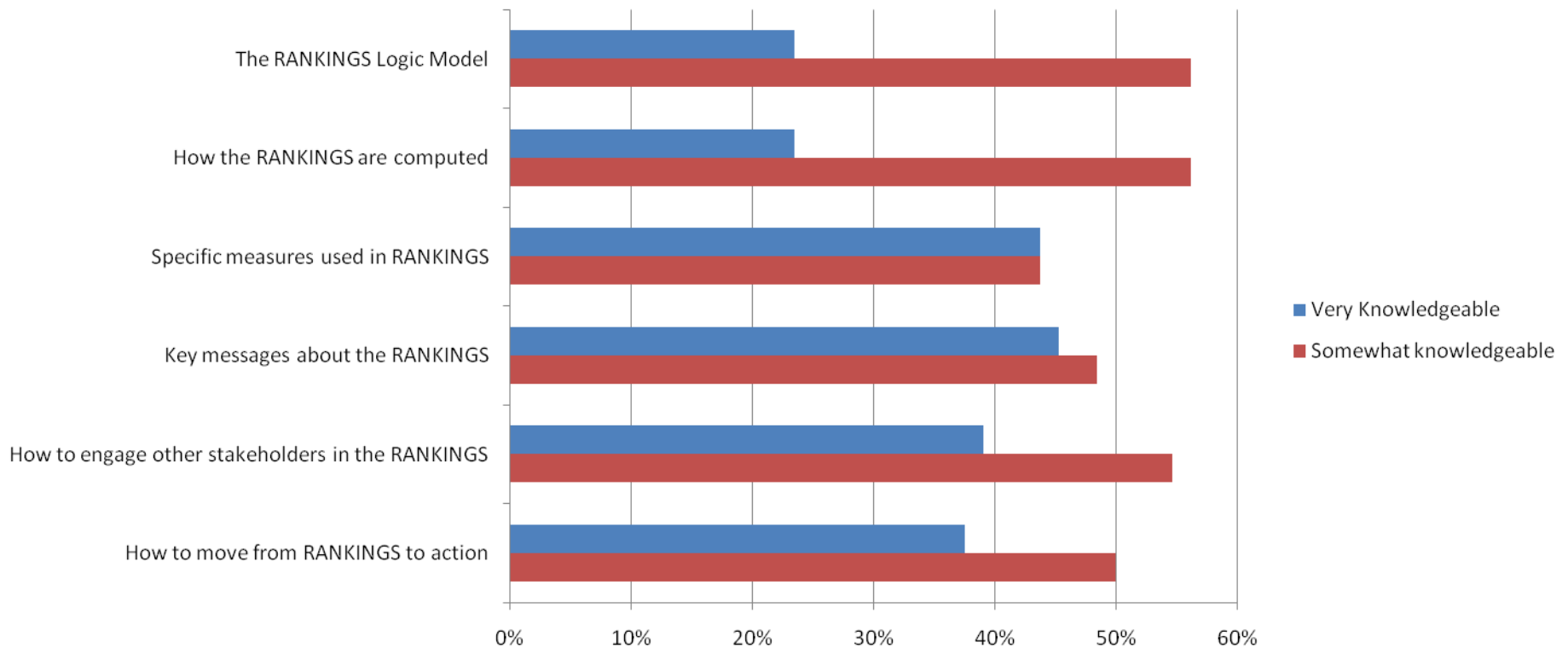
- Explain our mission to employees
- Shared our rankings with our internal staff via newsletter and internet
- Op Eds in local newspaper
- Dialogue with legislators
- Discussion points with specific partners
- In the development of a Community Balanced Scorecard
- Budget discussion with county commissioners and other county leaders
- New education and well promotion programs being developed around life style factors
- [Our low ranking] in terms of healthiness was communicated to county government, city governments, and county school board.

What *influences* the use of
the Rankings?

...

Knowledge

How knowledgeable are you, or the most knowledgeable member of the staff about components of the rankings?



Staffing

- Staff time:
 - Understand, interpret, plan response, respond:
 - Substantial: 3.1%
 - Moderate: 45.3%
 - Minimal: 45.3%
 - None: 4.7%
 - Staff time, UWI website
 - Moderate: 15.6%
 - Minimal: 73.4%
 - None: 10.9%
 - Staff time, FL DOH Rankings assistance:
 - Substantial: 1.6%
 - Moderate: 10.9%
 - Minimal: 71.9%
 - None: 14.1%



Public Health
Prevent. Promote. Protect.

Value

- 58 LHDs (90%) reported that the Rankings describe county health status “very well” or “somewhat well”
- 47 (73%) “strongly agreed” or “agreed” the Rankings are a valuable resource
- 47 (73%) “strongly agreed” or “agreed” the Rankings improved their ability to garner attention



Positive Value

- Ranking
- Communications Tool
 - Public health *system*
 - Social determinants of health
- Call to Action
- External/respected source
- Resource, especially for small counties

Ranking

- “Rankings provide a concise snapshot of county's population health.”
- “It showed how low (bad) our county was relative to the rest of the state.”

Communications Tool

- “Increases awareness of the broad scope of the public health system -- far beyond what the local health department does.”
- “Much of what influences how healthy we are and how long we live happens outside the doctor’s office. Some factors are improving in our county, while others are clearly warning us of future health problems.”



Call to Action

- “The County Health Rankings are a “call to action” for communities to work together to develop programs and policies that address the multiple influences on health. The rankings let counties see where they are doing well and where they need to improve.”
- “Enabled us to focus on zip codes in our county suffering socioeconomic deprivation in order to lead the community in assessing and developing improvements”



External / Respected Source

- “Conducted by well respected research entities outside the arena of county health departments.”
- “It was an independent document not generated within the department – credible.”

Resource for Small Counties

- Useful for small, rural counties without resources to generate this type of document.
- Attention was called to Public Health even in small, rural communities.

Negative Value

- Data
 - Data is old
 - Better, local data available
 - Obscures pockets of need
- Lack capacity to use
- Lack of community interest

Data

- “I do not find the Rankings useful. The data are at least one, and often more, years old. I find similar data in Florida CHARTS and use it regularly. It lacks comparison but is more timely and more easily digested by my audiences.”
- “From year 2010 to year 2011 some of the indicators changed which made the changes more difficult to explain to the community groups and media. It would be beneficial to use the same indicators from year to year.”



Capacity

- “We are a very small CHD and have experienced significant funding cuts over the past 4 years. We have no capacity to address this issue.”
- “State and county budget cuts, depressed economy. These financial factors will inhibit options for changes in environment and available materials to educate and incorporate new healthier options to community.”
- “Very small CHD with no ability to use the rankings. The funding situation is so dire we can barely deliver core programs.”



Lack of Community Interest

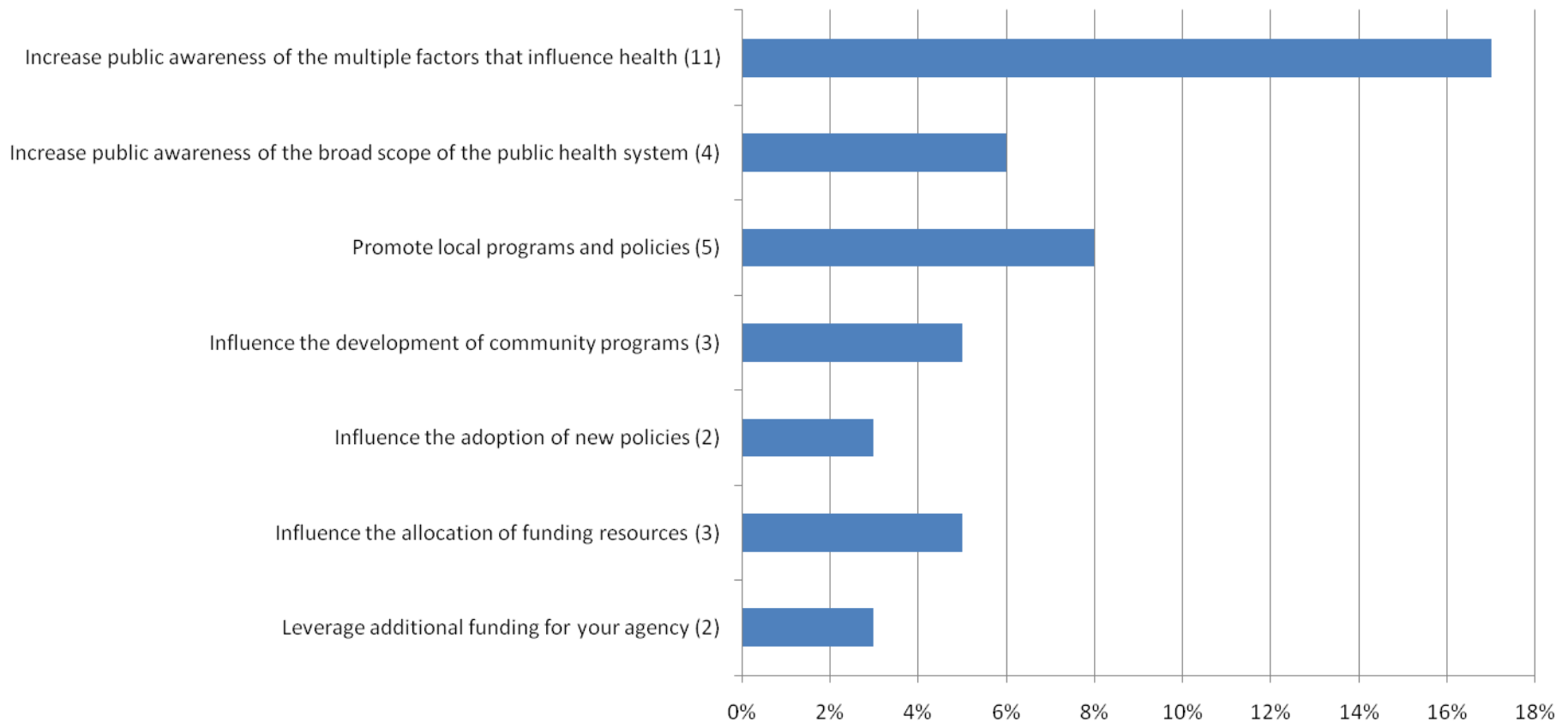
- “There are no barriers to using the rankings. Getting attention and generating action are two different items.”
- “We tried very hard to get the Chamber of Commerce and the business community interested... “
- “Largest barrier is lack of community focus on public health issues.”
- “Community partners and stakeholders give only a cursory glance to data.”



How have the Rankings
impacted communities and
community health
promotion efforts?

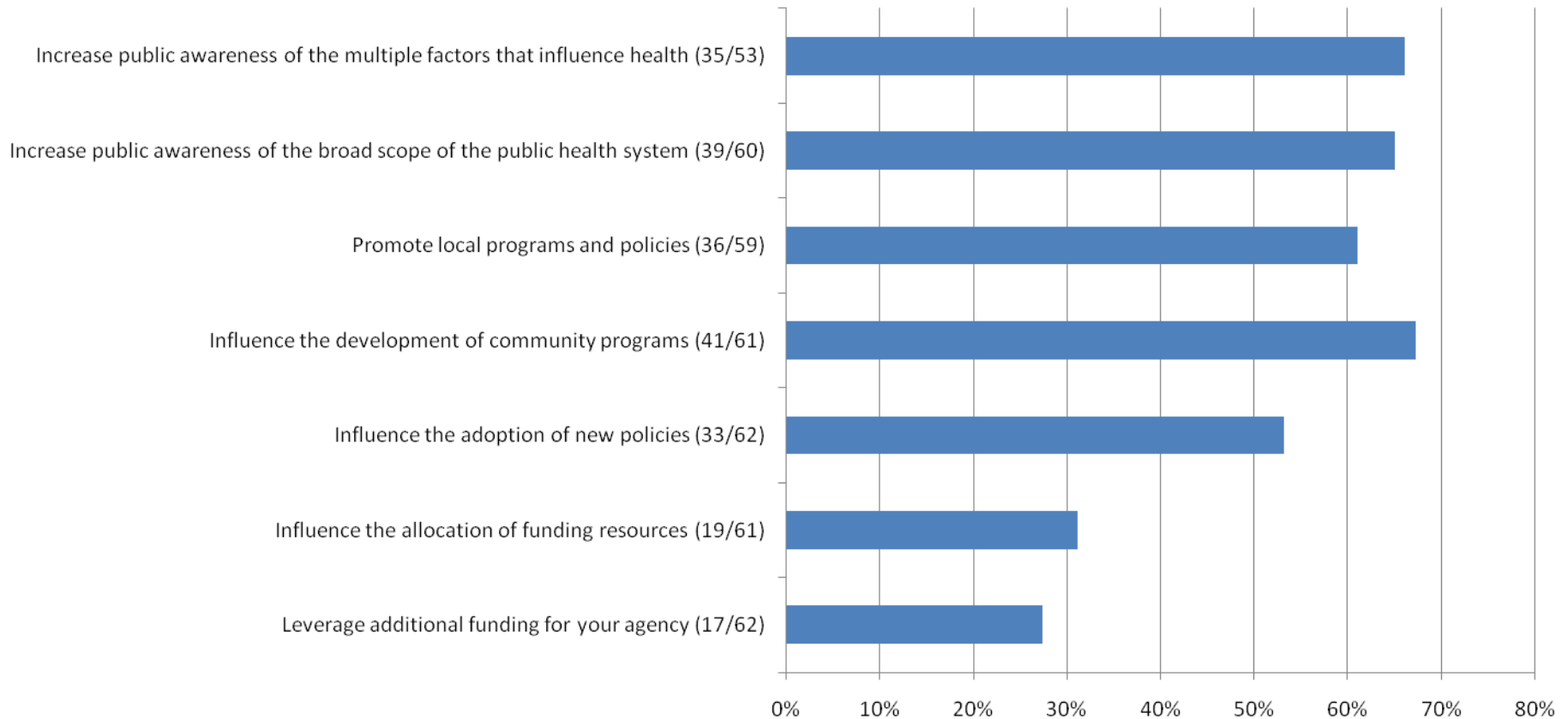
Already Impacted

Have the County Health Rankings already produced the following outcomes in your county? (n=64)



Likelihood of Impact

Are the County Health Rankings "very likely" or "somewhat likely" to produce the following outcomes in your county in the future?

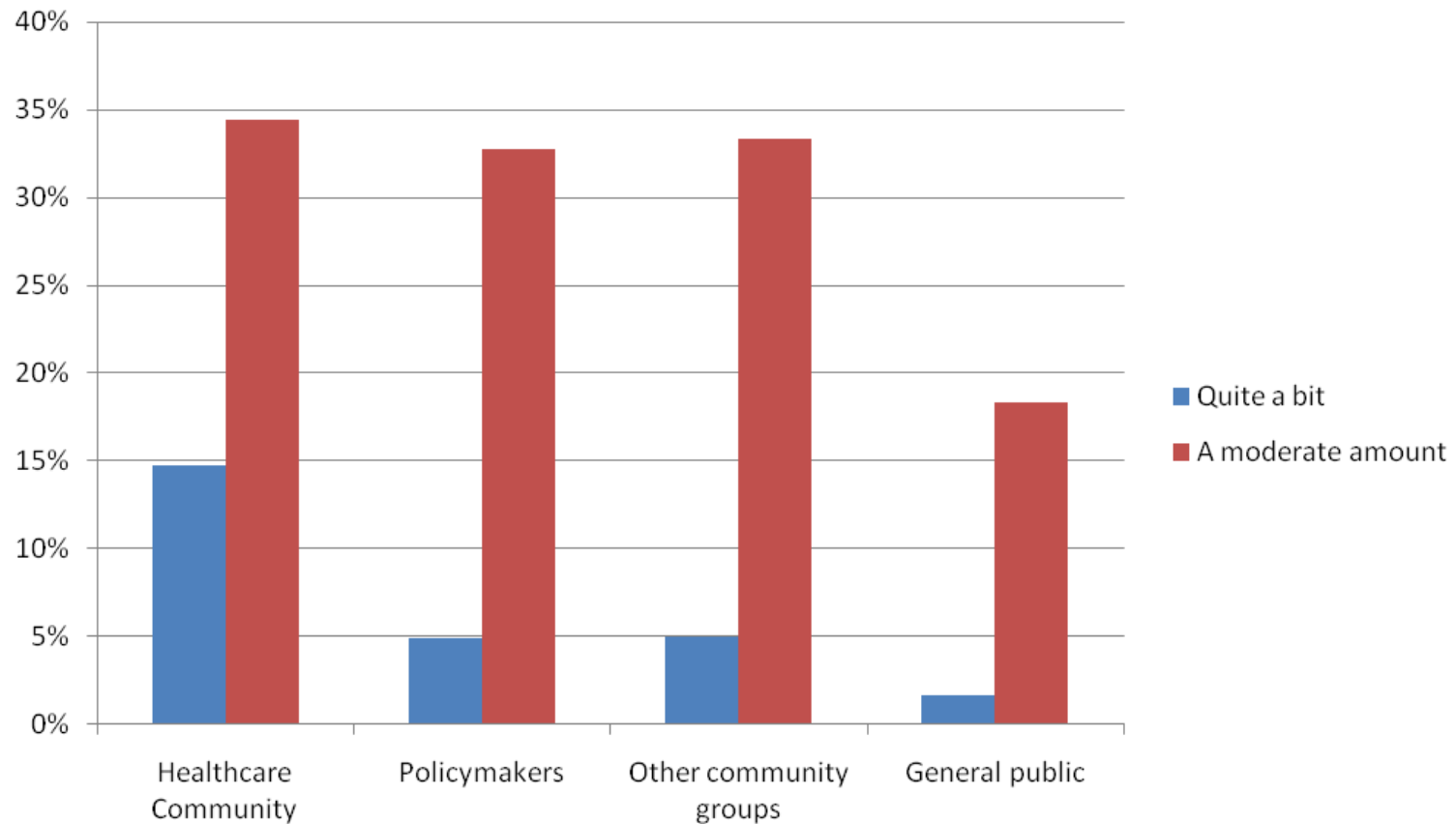


What *influences* the impact
of the Rankings?

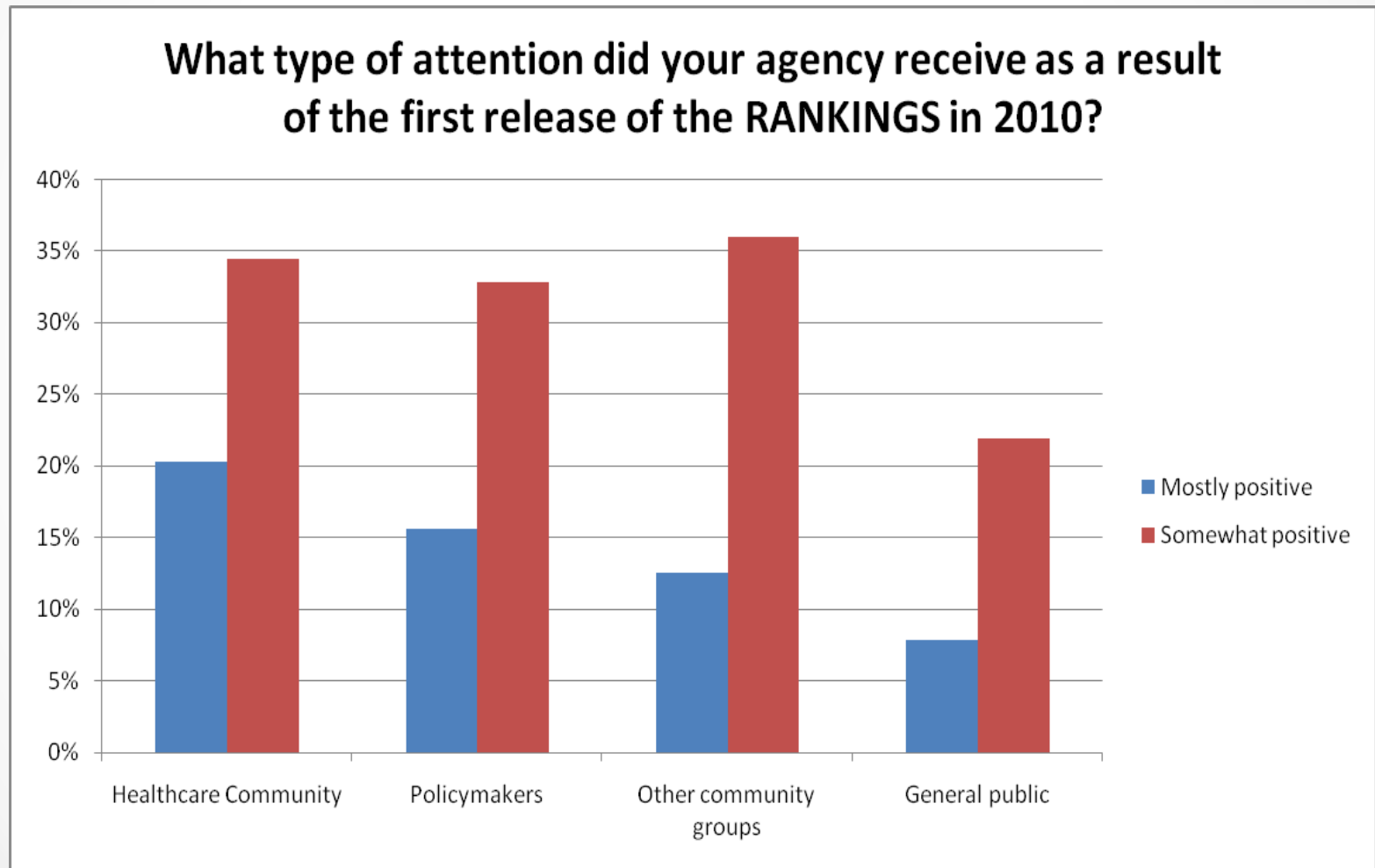
...

Amount Attention

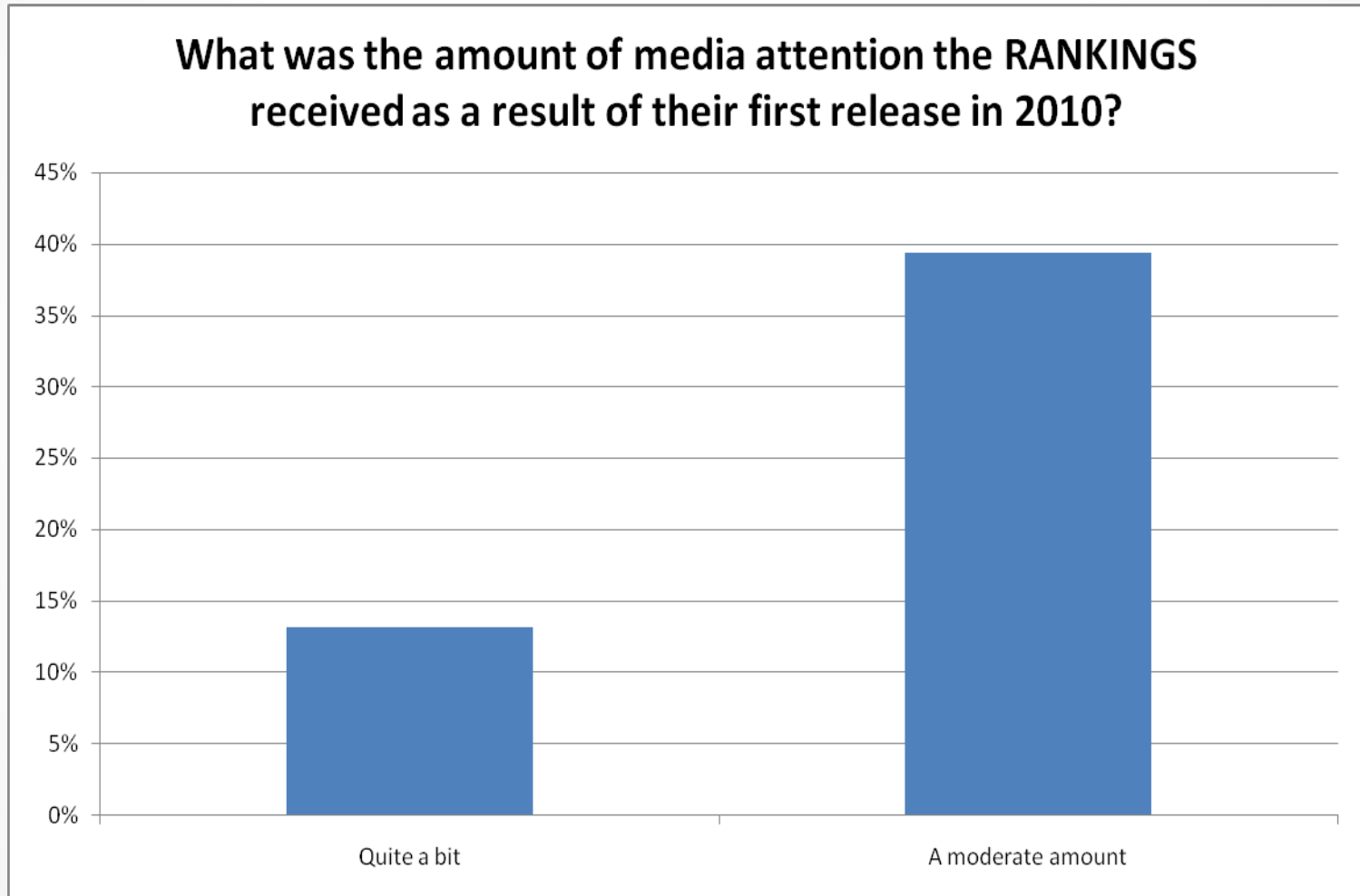
What was the amount of attention the RANKINGS received as a result of their first release in 2010?



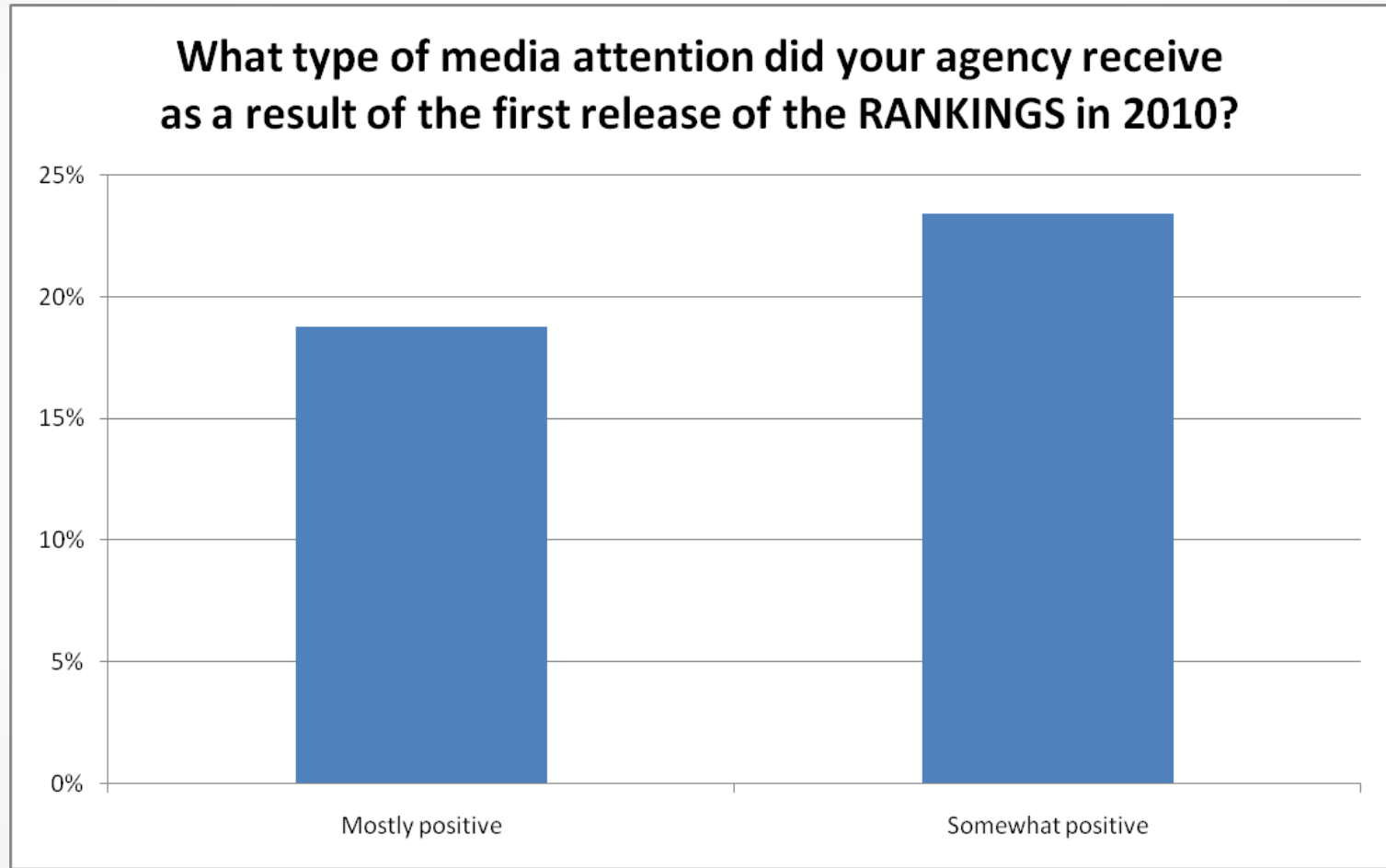
Type of Attention



Media: Amount Attention



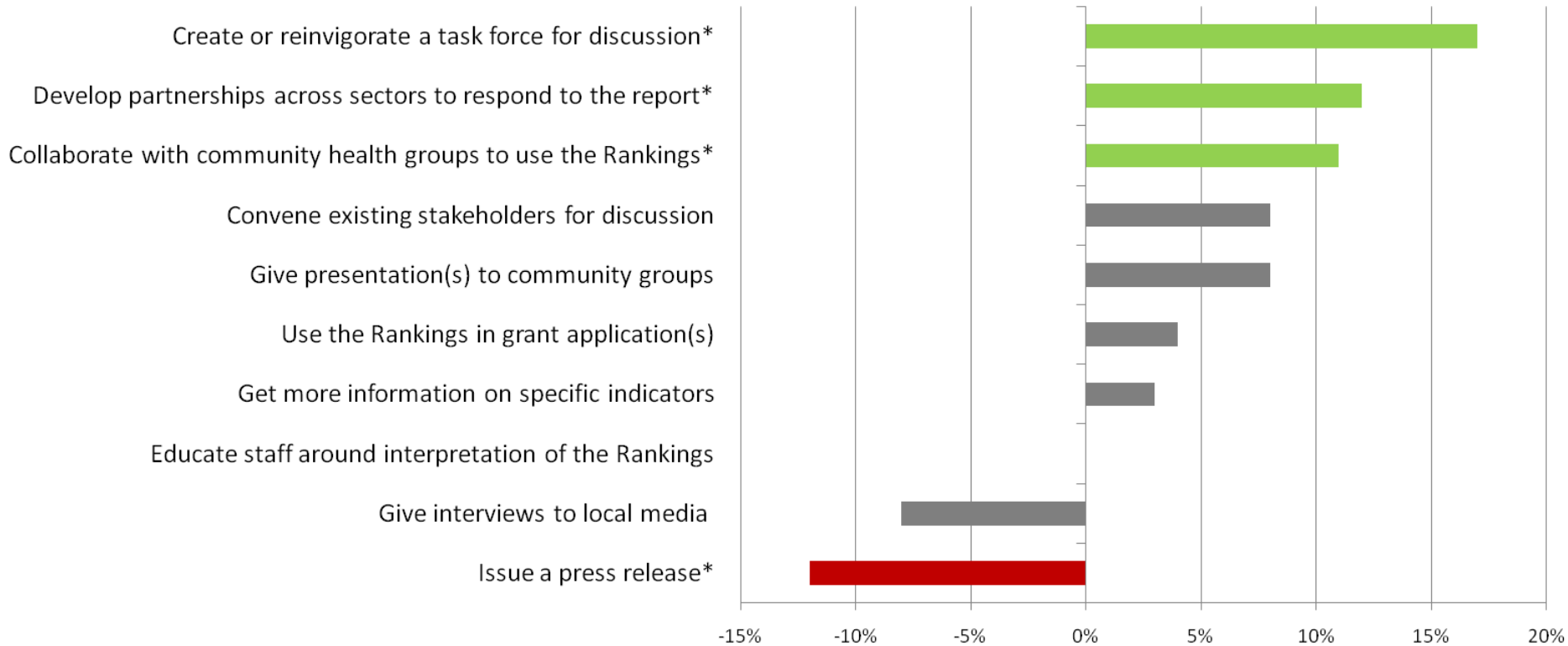
Media: Type Attention



What changes have
occurred *over time* in the
ways LHDs have used the
Rankings?

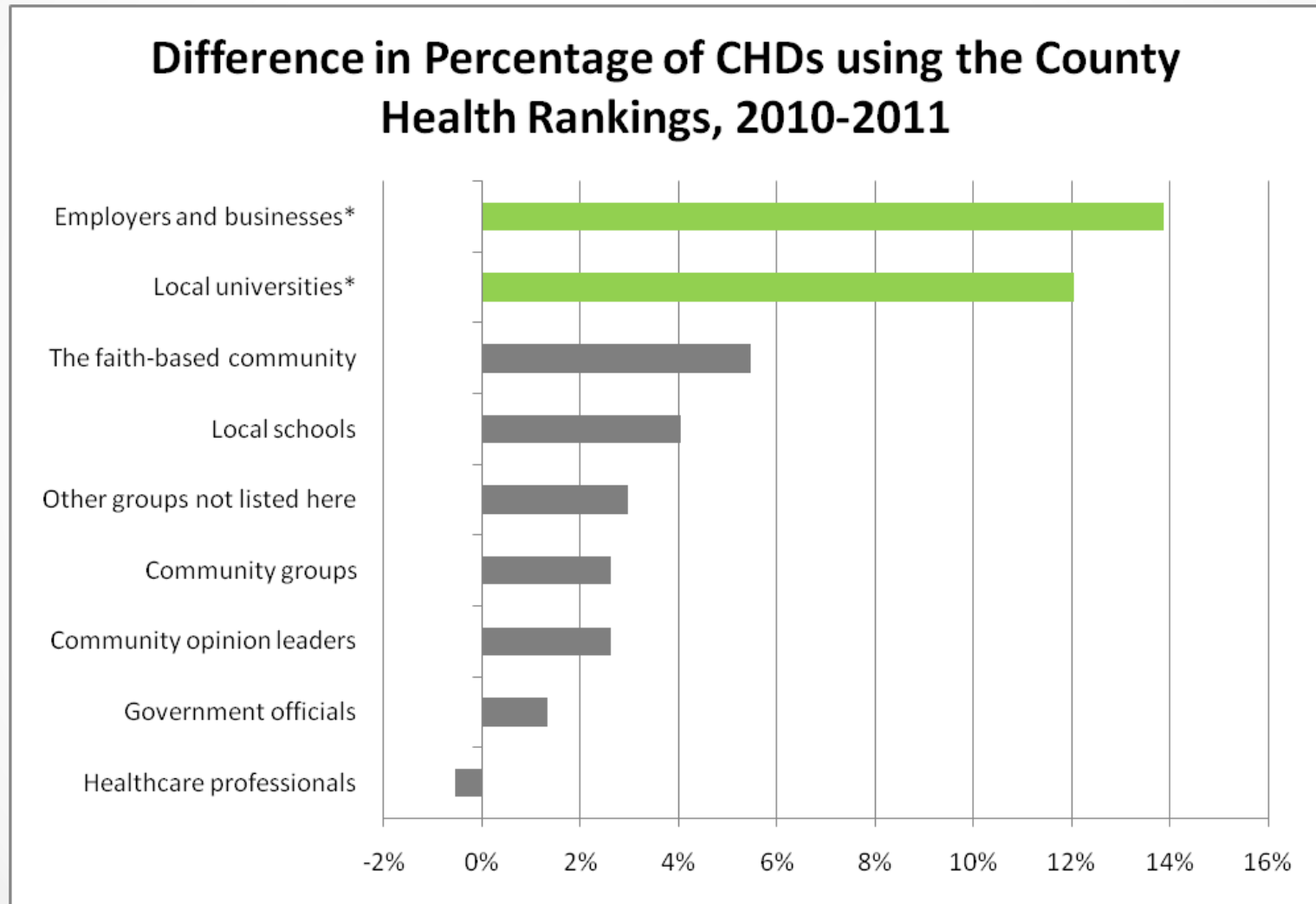
Use 2010 - 2011

Difference in Percentage of CHDs using the County Health Rankings, 2010-2011



*Statistically Significant Change ($p < .05$) (Red and Green Bars)

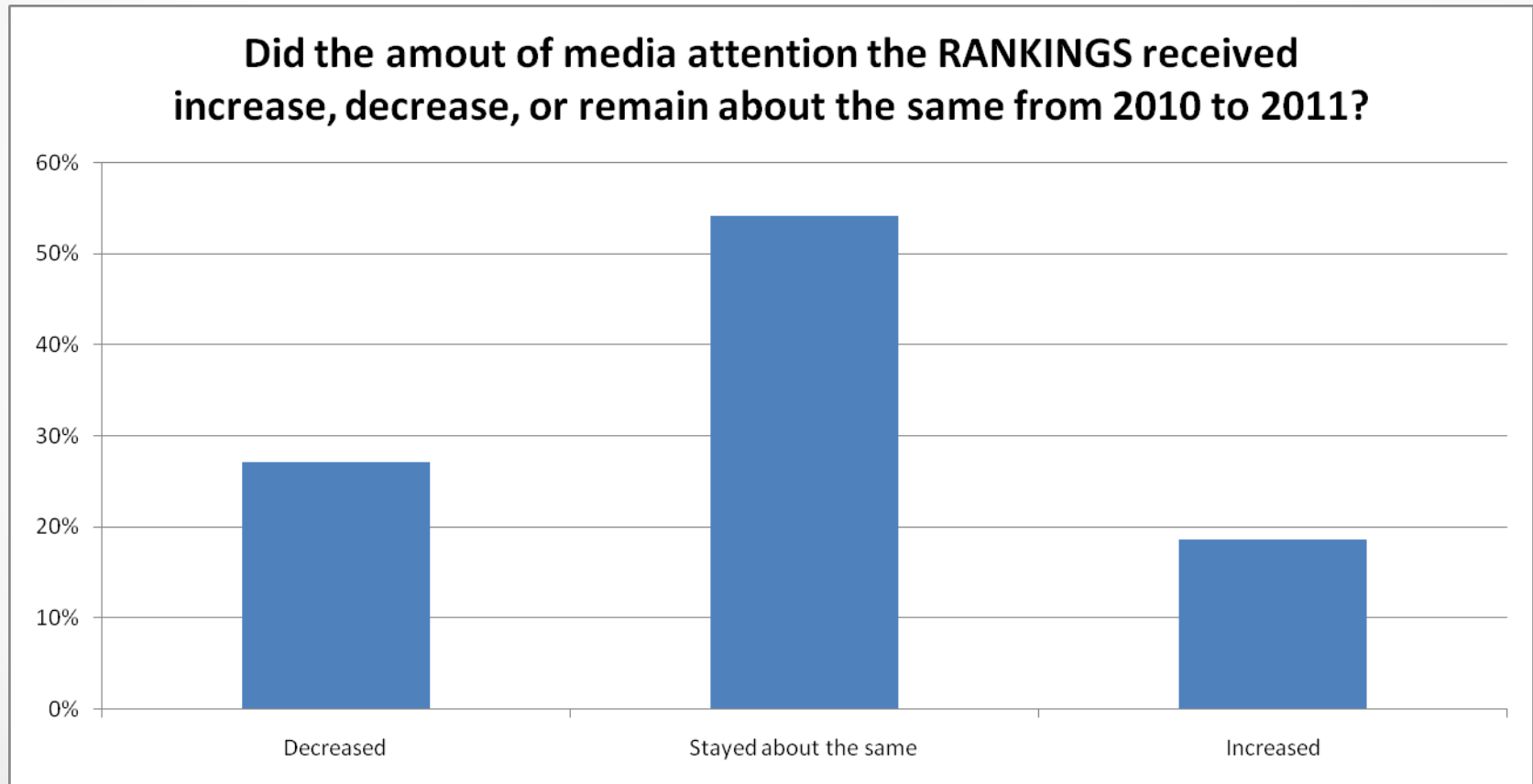
Engagement: 2010-2011



• *Statistically Significant Change (p<.05)

•

Media Attention: 2010-2011



Discussion

- Rankings
- Lack of media attention – trending decline
- Lack interaction w UW and DOH support
- Capacity

Implications

- Florida Department of Health
 - Media
 - Capacity
 - Data

- Robert Wood Johnson

Thank you!

Bonnie J. Sorensen, MD, MBA
Director, Volusia County Health Department
Florida Department of Health



Public Health
Prevent. Promote. Protect.

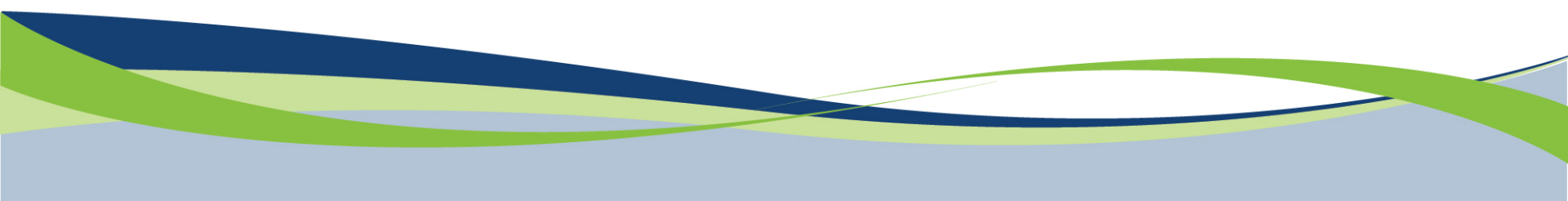
Other Meeting Agenda Items

Updates

- NCC Website
- Quick Strikes
- Sharing information and methods to address Health Disparities (Sarah Ramirez-CA)
- RWJF celebrates 40 years of making impact

Items for Dissemination

- Special PHSSR issue of *Journal of Public Health Management and Practice* will be released in November.
- *Frontiers in PHSSR*: <http://uknowledge.uky.edu/frontiersinphssr>
- The RE-ACT Podcast series is in production and will launch later this summer. Additional interviews will be conducted at AcademyHealth.



Other Meeting Agenda Items

Upcoming meetings

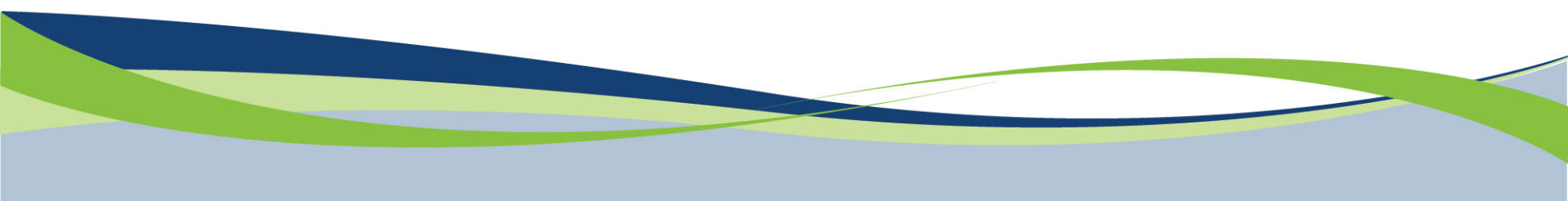
- AcademyHealth, June 24-26, Orlando, FL
- NACCHO, July 11-13, Los Angeles, CA
- APHA, October 27-31, San Francisco, CA

July events:

- Monthly Virtual Meeting: July 19, presentation by CO PBRN
- Quarterly Skill-Building Webinar, Monday, July 30, 1:00 – 2:30pm: Preparing Participatory Grant Proposals

PBRN Updates

- OH PH PBRN Survey “Future of Teaching in Local Public Health”
- **Network Contact Rosters**



Other Meeting Agenda Items

Grant reporting reminders

- Send to grantreports@rwjf.org , copy to PublicHealthPBRN@uky.edu
- RWJF guidelines for annual, final narrative reports & bibliography:
http://www.rwjf.org/files/publications/RWJF_GranteeReportingInstructions.pdf
- RWJF guidelines for financial reports:
http://www.rwjf.org/files/publications/RWJF_FinancialGuidelinesReporting.pdf
- RWJF guidelines for electronic submission standards for products and reports
www.rwjf.org/files/publications/RWJF_ElectronicSubmissions.pdf



OHIO PH PBRN

Future of Teaching in Local Public Health

What? This survey from the Research Association for Public Health Improvement (RAPHI) investigates the impact of budget decreases in Local Health Departments (LHDs) on the extent and nature of student learning experiences available in local public health.

Who? LHD Directors, Commissioners and Division Directors

Why You? The Ohio Public Health PBRN is seeking PBRN partners who share an interest in public health education in LHDs. We intend to extend this survey, currently in the field in Ohio, to a national convenience sample through involvement from our fellow PH PBRNs

To Review the Survey: <https://www.surveymonkey.com/s/PCQWK9Y>

Please contact RAPHI if you would like to be involved
Michelle Menegay | mcm54@case.edu | 216.368.2826
www.ohioraphi.org



Future of Teaching in Local Public Health

PH PBRN Commitment:

- Collaborate with RAPHI to recruit participation among your state PBRN through marketing the survey link to LHD leaders via email blasts, conference calls, and other network mechanisms
- Provide denominator information to allow estimation of participation rate

Advantages of Participation:

- RAPHI will make each individual PBRN database available to you
- Opportunities to collaborate on analysis and publication of the data are available

Please contact RAPHI if you would like to be involved
Michelle Menegay | mcm54@case.edu | 216.368.2826
www.ohioraphi.org



Greetings Ohio Health Department Leaders,

Ohio email solicitation

The Ohio Research Association for Public Health Improvement (RAPHI) has been described as the research voice for local health departments in Ohio. **Let your voice be heard!**

RAPHI has created a survey to investigate the impact of the economic downturn and budget decreases in LHDs on the extent and nature of student learning experiences available in local health departments. This survey represents an opportunity for your experience to help shape the training of public health and related health professional students in Ohio, while seeking a better understanding of the competing pressures and priorities you are experiencing.

From high school students to nursing, environmental health, and public health students, many health departments have invested substantial time and energy in teaching. But **whether you have been active in teaching or not**, please complete this survey so that we have a full understanding of the range of current and desired involvement in public health education in all Ohio health departments.

If you are an Ohio Health Department Director, Commissioner, or Division Director, please consider taking the survey:

<https://www.surveymonkey.com/s/PCQWK9Y>



For more information contact:

Glen Mays

glen.mays@uky.edu



111 Washington Avenue • Lexington, KY 40517

859.257.5678

www.publichealthsystems.org

