



December 7, 2016

*Public Health Assessment Process  
in North Carolina*



# *Overview of the Public Health Assessment Process*

- Overview of Community Health Assessment
- History of Assessment Process in NC
- Local Health Department (LHD) Process
- State Health Department Process
- Current Health Priorities
  - Healthy North Carolina 2020
  - Local Health Department Priorities
  - State Health Assessment Priority Areas



# *What is Community Health Assessment?*



# *Community Health Assessment (CHA)*

- Community Assessment is the foundation for improving and promoting the health of community members
- The role of CHA is to
  - Identify factors that affect the health of a population
  - Determine the availability of resources within the community to adequately address these factors



# *CHA Key Questions*

- What are the strengths in our community?
- What health concerns do community residents have?
- What are the emerging health issues in the community?
- What other resources are needed in the community to address these concerns?



# *Who Participates in Community Health Assessments?*

- Business and industry
- Health care providers
- Public health
- School systems
- Media
- Local universities and colleges
- Civic and social organizations
- Local government
- Voluntary agencies
- Hospitals
- Other appropriate groups



# *History of Community Assessment in NC*

- Began in 1974 as the planning and budgeting system (PBS)
- Expanded in 1983 to become the community diagnosis process
  - Means to examine aggregate health and social statistics along with the investigator's knowledge of the local situation to determine the health needs of the community
- Mandated by NC Legislature in 1991
- Local requirement mandated in 2005



# *County Level Community Health Assessment*





# *CHA in Local Health Departments*

- County residents take the lead role in
  - forming partnerships
  - gathering health-related data
  - determining priority health issues
  - identifying resources
  - planning community health programs
- Three or four year cycle (depending on alignment with local hospital's Community Health Needs Assessment)
- On-going process



# *CHA as Part of LHD Accreditation*

- Benchmark 1: A local health department shall conduct and disseminate results of regular community health assessments.
  - Activity 1.1: The local health department shall conduct a comprehensive community health assessment every 48 months.
  - Activity 1.2: The local health department shall update the community health assessment with an interim “State of the County’s Health” report (or equivalent) annually.
  - Activity 1.3: The local health department shall disseminate results of the most recent community health assessment and “State of the County’s Health” report to the local health department’s stakeholders, community partners and the general population.
- Benchmark 11: The local health department shall convene key constituents and community partners to identify, analyze, and prioritize community health problems/issues.
  - Activity 11.1: The local health department shall participate in a collaborative community steering committee to identify health issues and needs.
  - Activity 12.1: The local health department shall participate in a collaborative process to identify strategies for addressing community health problems.



## *8 Phases to North Carolina's CHA in LHDs*

1. Establish a Community Health Assessment Team
2. Collect Primary Data
3. Collect Secondary Data
4. Analyze and Interpret County Data
5. Determine Health Priorities
6. Create the Community Health Assessment Document
7. Disseminate the Community Health Assessment Document
8. Develop Community Health Action Plan

# *State Level Community Health Assessment*



## *CHA at the State Level*

- Governor's Task Force on Health Objectives for the Year 2000 established in 1994 produced *Health Carolinians 2000*
- Governor's Task Force for Healthy Carolinians established in 2001 produced *Healthy Carolinians 2010* and *Healthy North Carolina 2020*



# *Healthy North Carolina 2020*

- Focus areas were built off the 2009 Prevention Action Plan
  - Tobacco Use
  - Physical Activity and Nutrition
  - Injury
  - Sexually Transmitted Diseases/Unintended Pregnancy
  - Maternal and Infant Health
  - Substance Abuse
  - Mental Health
  - Infectious Disease/Foodborne Illness
  - Oral Health
  - Social Determinants of Health
  - Environmental Health
  - Chronic Disease
  - Cross-cutting



# *State Health Assessment*

- Public Health Accreditation Board (PHAB) requires the following to be less than 5 years old when applying for accreditation
  - State Health Assessment
  - State Health Improvement Plan
- State Health Assessment Team began meeting in April, 2016



# *Current Health Priorities*





# *Healthy North Carolina 2020*

## **Tobacco use**

- Decrease the percentage of adults who are current smokers
- Decrease the percentage of high school students reporting current use of any tobacco product
- Decrease the percentage of people exposed to secondhand smoke in the workplace in the past seven days

## **Physical activity & nutrition**

- Increase the percentage of high school students who are neither overweight nor obese
- Increase the percentage of adults meeting CDC Aerobic Recommendations
- Increase the percentage of adults who consume fruit one or more times per day
- Increase the percentage of adults who consume vegetables one or more times per day

# *Healthy North Carolina 2020*

## **Injury & violence**

- Reduce the unintentional poisoning mortality rate
- Reduce the unintentional falls mortality rate
- Reduce the homicide rate

## **Maternal & infant health**

- Reduce the infant mortality racial disparity between whites and African Americans
- Reduce the infant mortality rate
- Reduce the percentage of women who smoke during pregnancy

## **STD & unintended pregnancy**

- Decrease the percentage of pregnancies that are unintended
- Reduce the percentage of positive results among individuals aged 15 to 24 tested for chlamydia
- Reduce the rate of new HIV infection diagnoses

# *Healthy North Carolina 2020*

## **Substance abuse**

- Reduce the percentage of high school students who had alcohol on one or more of the past 30 days
- Reduce the percentage of traffic crashes that are alcohol-related
- Reduce the percentage of individuals aged 12 years and older reporting any illicit drug use in the past 30 days

## **Mental health**

- Reduce the suicide rate
- Decrease the average number of poor mental health days among adults in the past 30 days
- Reduce the rate of mental health-related visits to emergency departments

## **Oral health**

- Increase the percentage of children aged 1-5 years enrolled in Medicaid who received any dental service during the previous 12 months
- Decrease the average number of decayed, missing, or filled teeth among kindergartners
- Decrease the percentage of adults who have had permanent teeth removed due to tooth decay or gum disease

# *Healthy North Carolina 2020*

## **Environmental health**

- Increase the percentage of air monitor sites meeting the current ozone standard of 0.075 ppm
- Increase the percentage of the population being served by community water systems (CWS) with no maximum contaminant level violations
- Reduce the mortality rate from work-related injuries

## **Infectious disease & foodborne illness**

- Increase the percentage of children aged 19-35 months who receive the recommended vaccines
- Reduce the pneumonia and influenza mortality rate
- Decrease the average number of risk factor violations per inspection

## **Social determinants of health**

- Decrease the percentage of individuals living in poverty
- Increase the four-year high school graduation rate
- Decrease the percentage of people spending more than 30% of their income on rental housing

# *Healthy North Carolina 2020*

## **Chronic disease**

- Reduce the cardiovascular disease mortality rate
- Decrease the percentage of adults with diabetes
- Reduce the colorectal cancer mortality rate

## **Cross-cutting**

- Increase average life expectancy
- Increase the percentage of adults reporting good, very good, or excellent health
- Reduce the percentage of non-elderly uninsured individuals
- Increase the percentage of adults who are neither overweight nor obese

## *Top Priorities from 2010-2015 LHD CHAs*

- Chronic Disease – Obesity
- Chronic Disease – Diabetes
- Mental Health and Substance Abuse
- Chronic Disease – Cardiovascular Disease
- Access to Health Care
- Physical Activity and Nutrition
- Chronic Disease – Cancer
- Tobacco Use
- Adolescent Pregnancy Prevention



# *2016 State Health Improvement Plan Priority Areas*

- Access to quality and culturally competent care, including integration of physical and mental health
- Infant Mortality/Perinatal Health
- Obesity, Nutrition and Physical Activity
- Tobacco use (including e-cigarettes)
- Unintended pregnancy



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