





COMMUNITY HEALTH ASSESSMENT GUIDE

2024

INTRODUCTION PAGE 02

INTRODUCTION

Community Health Assessment Overview

What is a CHA?

A process that engages with community members and local public health system partners to systematically collect and analyze qualitative and quantitative healthrelated data from a variety of sources within a specific community

In other words, taking steps to understand the health status and health risk in a community using data from multiple sources

CHA vs CHNA

Non-profit hospitals are federally required to conduct community health needs assessments (CHNAs) every three years and develop a plan to meet those needs in exchange for their tax-exempt status. CHA is a voluntary document complete every three to five years completed by local health departments.

Why complete a CHA?

- Understand health problems to inform community decisionmaking.
- Development and implementation of community health improvement plans with stakeholders implementing different portions.
- Opportunity to build and/or strengthen relationships with other community and state partners.

Working with Partners

Recruiting stakeholders is crucial for identifying CHA priorities and how to best assess your community. A non-profit hospital(s) and public health can collaborate on this plan and the Community Health Improvement Plan.

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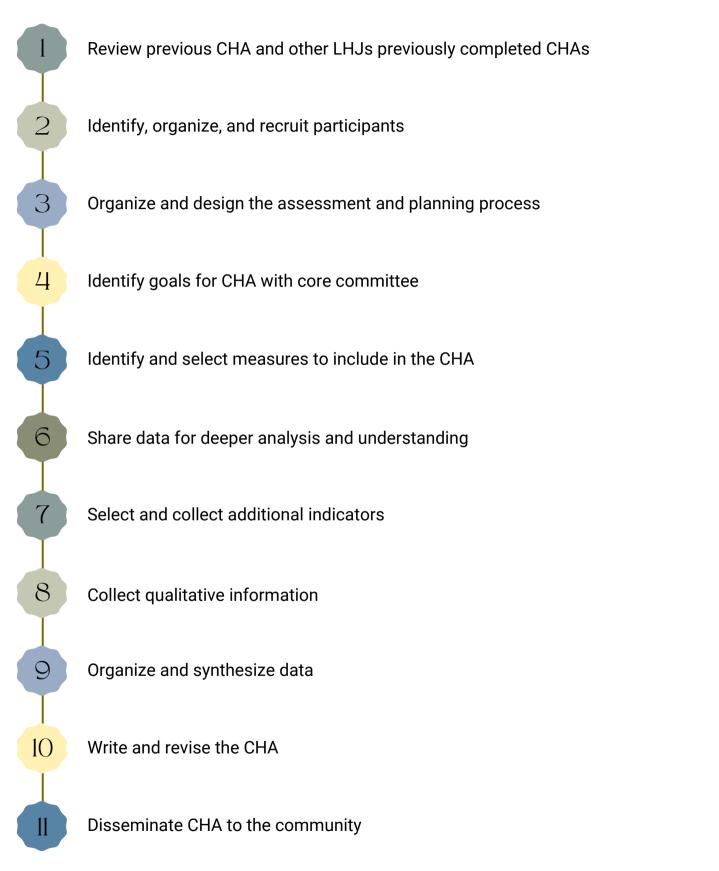
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EXAMPLE TIMELINE

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| Organize for Success/Partnership Development | Q1 | Q2 | Q3 | Q4 |
|---|----|----|----|----|
| Identify, organize, and recruit participants | | | | |
| Organize and design the assessment and planning process | | | | |
| Community Health Assessment Process | Q1 | Q2 | Q3 | Q4 |
| Identify/select measures to include in the CHA (from primary and secondary sources) | | | | |
| Compile quantitative data from secondary sources | | | | |
| Develop/disseminate/collect a community survey | | | | |
| Collect qualitative information (focus groups, key informant interviews) | | | | |
| Organize/synthesize qualitative information | | | | |
| Share data/information (hold community dialogues or focus group discussions) for deeper analysis and understanding of what the data means | | | | |
| Select and collect additional indicators (based on community dialogue) | | | | |
| Write/revise the CHA | | | | |
| Disseminate CHA to the community | | | | |

CHA STEPS PAGE 05



CHA STEPS 1 - 3 PAGE 06



Review previous CHA and other LHJs previously completed CHAs

Completed Community Health Assessments Completed Community Health Needs Assessments CHA/CHNA dashboard State Health Assessment State Health Improvement Plan Create a workplan for your CHA process

2

Identify, organize, and recruit participants

Core Support Team — is responsible for most of the work in this phase as it prepares for the CHA/CHIP process and recruit participants.

Steering Committee — is recruited and selected during this phase. The committee, which will guide and oversee the CHA/CHIP process, should be broadly representative of the community and the local public health system.

Broad Community Involvement — participants should be recruited as invitations are extended for the Stakeholder Committee. The community should also be informed of the upcoming CHA/CHIP process and opportunities for involvement that will occur throughout the planning process. Worksheet.

3

Organize and design the assessment and planning process

Association for Community Health Improvement (ACHI)

Pros: Adaptive community resources Cons: PHAB standards and timeline

Mobilizing for Action through Planning and Partnerships (MAPP)

Pros: PHAB recommended and nationally used Cons: Timeline for final CHA and increased difficulty

The Community Tool Box (University of Kansas)

Pros: Easy to use, PHAB recommended, and community specific

Cons: Not as straightforward as MAPP

Community Assessment for Public Health Emergency Response (CASPER)

Pros: Random stratified sample and meets PHAB standards Cons: Complicated sampling and lacks qualitative data

Select a combination of the CHA process to best fit your jurisdiction.

CHA STEPS 4 - 7 PAGE 07

4 Identify goals for CHA with core committee

Identify/select measures to include in the CHA (from primary and secondary

Secondary resources:

Indicator worksheet

Insights

Community Health Data

Data Requests Form

ESSENCE (syndromic surveillance)

BRFSS

Hospital Discharge Data (inpatient and emergency department)

Birth

Death

Fetal Death

Abortion

2022 Communicable disease rates, contact Meagan.Gillespie@mt.gov

Immunization rates

For additional IZ rates, contact Trisha.Gardner@mt.gov

Planning for primary data collection:

Primary data menu

Learn from other LHJs (*link to a summary of primary data collection methods

used by other jurisdictions)

CHA survey question template link

Share data/information (hold community dialogues or focus group discussions) for deeper analysis and understanding of what the data means

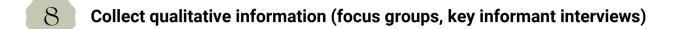
Stakeholder questions

Facilitation activities *link to previously completed activities and/or agendas*

Focused Conversation method

Select and collect additional indicators (based on community dialogue)

Collect additional secondary indicators Update primary data questions CHA STEPS 8 - 11 PAGE 08



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Broad Community Involvement — participants should be recruited as invitations are extended for the Stakeholder Committee. The community should also be informed of the upcoming CHA/CHIP process and opportunities for involvement that will occur throughout the planning process. Worksheet.

Organize/synthesize data

Qualitative analysis methods
Quantitative analysis methods
Data visualization *link from connected community*

() Write/revise the CHA

PHAB standards self-assessment

ll Disseminate CHA to the community

Communication planning guide and excel sheet Continue to update CHA with new data as it become available Next: Complete a Community Health Improvement Plan

COMPONENTS OF A CHA

- I. Cover Page
- II. Acknowledgement Page
- III. Table of Contents
- IV. Executive Summary
- V. CHA Methodology Summary/CHA Methodology Summary
- VI. Community Description
- VII. Data Summary

I. Cover Page

The cover page should include the full name of the local or Tribal health department and the date of the CHA.

II. Acknowledgement Page

Partners

Collaborators

Stakeholders

Funding sources

PHAB Requirements:

- At least 2 organizations representing sectors other than governmental public health.
- At least 2 community members or organizations that represent populations who are disproportionately affected by conditions that contribute to poorer health outcomes.

III. Table of Contents

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Executive Summary

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Executive Summary and CHA Methodology Summary

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Community Description

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Data Summary

IV. Executive Summary

An introduction to your community health assessment planning process.

The process for how partners collaborated in developing the CHA.

A statement of your health department's goals or vision, and/or a summary of key findings from the community health assessment.

CHA Methodology Summary

- A brief description of how you engaged community members and stakeholders.
- A brief description of data collection methods
- A brief description of the process used to identify health challenges and assets.

The CHA methodology summary should include the name (e.g., MAPP, ACHI, Assessing and Addressing Community Health Needs, University of Kansas Community Toolbox) and/or a brief description of the CHA planning process that you used. The description of method used should describe how you engaged community members, collected data, and identified health challenges and assets. This section helps create transparency in the CHA planning process and can be used to outline how the CHA was implemented.

V. Community Description

A description of your community will place the assessment in context for the reader. The description will also help people involved in the assessment process better understand the unique characteristics of your community and how these characteristics impact public health.

Community Description may include:

Description of service area

- Location on map
- Geography

Demographics

- · Population size and population trends
- Age distribution
- · Gender ratio
- · Family Size
- · Race and ethnicity
- Sexual orientation
- · Languages spoken
- · Educational attainment
- Disabilities
- Mobility
- · Veteran status
- · Immigration status
- Life expectancy

Socioeconomics

- Median household income
- · Employment status
- Percentage of population below federal poverty level
- Home ownership and homelessness

Secondary data from two or more different sources.

• **PHAB Requirement**: The percent of the population by race and ethnicity, Languages spoken within the jurisdiction, Other demographic characteristics, as appropriate for the jurisdiction.

VI. Data Summary

• Description of health issues, health status measures and trends, and contributing causes of community health issues.

- Specific description of population groups with particular health issues.
- Summary of existing community assets, strengths, and resources to address health issues.
- Use both primary and secondary data.
- Continued engagement of the community throughout the data collection and analysis is important.

RESOURCE PAGE

PHAB standards (version 2022):

- PHAB requires opportunity for the Tribal or local community at large to review and contribute to the assessment.
- PHAB requires the ongoing monitoring, refreshing, and adding of data and data analysis.

More information and resources available at:

- www.phaboard.org
- https://dphhs.mt.gov/publichealth/brfss/publications
- https://www.naccho.org/uploads/downloadable-resources/PI-Workforce-HP2030-Tool-FINAL12-19-2022.pdf
- https://dphhs.mt.gov/publichealth/diseasesconditions/
- https://www.health.state.mn.us/communities/practice/assessplan/lph/community/chip.html

This information was adapted from PHAB, NACCHO, the Minnesota Department of Health, Austin/Travis County Community Health Assessment, and the Department of U.S. Health & Human Services

How the System Improvement Office can help:

Need technical assistance? Contact HHSPHSDBuildingHealthySystems@mt.gov

Grant Funding

Through the Public Health Improvement Grant, MT DPHHS is able to provide grant funding for local and tribal health departments completing their CHA, CHIP, or Strategic Plan.

Email KPride@mt.gov to learn more.