

LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT

Local Public Health System Assessment

INTRODUCTION

Lake County's Local Public Health System Assessment was convened by the Live Well Lake County Steering Committee on June 18th, 2015 at Rosalind Franklin University. The Local Public Health System Assessment (LPHSA) is one of four assessments Lake County is conducting as part of its Mobilizing for Action through Planning and Partnerships (MAPP) process. MAPP is a community-driven strategic planning framework utilized in community health improvement. This framework assists communities to prioritize public health issues and create a platform to develop and implement efforts to address them. The LPHSA assesses the capacity and the extent to which the local public health system implements the 10 Essential Public Health Services (EPHS).

ASSESSMENT INSTRUMENT

The National Public Health Performance Standards Program (NPHPSP) established a tool to measure the performance of local public health systems, defined as the collective efforts of public, private, and voluntary entities, as well as individuals and informal associations. This tool supports participants to:

- Complete the local public health system assessment
- Enhance the understanding of the public health system
- Build relationships within the public health system
- Foster an interest and awareness in performance improvement

The instrument is framed around the 10 Essential Public Health Services that are utilized in the field to describe the scope of public health. For each essential service, there are model standards that correspond to the primary activities conducted at the local level. A total of 30 model standards are assessed. Within each model standard, there are a series of discussion questions that break down the standard into its component parts. After discussing the standard, participants vote on the performance measures of the model standard. Consensus is required to finalize the score of each performance measure which is used to determine the score of each essential service. The scoring system is broken into five broad categories:

Optimal Activity	(76-100%)	Greater than 75% of the activity described is met.
Significant Activity	(51-75%)	Greater than 50% but no more than 75% of the activity described is met.
Moderate Activity	(26-50%)	Greater than 25% but no more than 50% of the activity described is met.
Minimal Activity	(1-25%)	Greater than 0% but no more than 25% of the activity described is met.
No Activity	(0%)	0% or absolutely no activity.

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METHODOLOGY

The assessment began with an opening 60-minute plenary session to welcome participants, provide an overview of the process, introduce the staff, and answer questions. Participants were introduced to specific concepts of the assessment process through a presentation and activities (for a list of participants, please see appendix A, page 25). Participants were then broken into five groups; each breakout group was responsible for conducting the assessment for two EPHS. Each group was facilitated by a trained facilitator and discussion notes were captured by a recorder. The day ended with a plenary session where improvement opportunities for each essential service were reported by participants of each group. The end-of-day dialogue outlined the next steps of the assessment process and encouraged participants to contact the Live Well Lake County Steering Committee for further involvement in MAPP activities.

LPHSA Breakout Group Assignments	
Group	Responsibilities
A	EPHS 1 – Monitor health status to identify community health problems.
	EPHS 2 – Diagnose and investigate health problems and health hazards in the community.
B	EPHS 3 – Inform, educate, and empower people about health issues.
	EPHS 4 – Mobilize community partnerships to identify and solve health problems.
C	EPHS 5 – Develop policies and plans that support individual and community health efforts.
	EPHS 6 – Enforce laws and regulations that protect health and ensure safety.
D	EPHS 7 – Link people to needed personal health services and assure the provision of health services.
	EPHS 9 – Evaluate effectiveness, accessibility and quality of personal/population-based health services.
E	EPHS 8 – Assure a competent public and personal health care workforce.
	EPHS 10 – Research for new insights and innovative solutions to health problems.

PARTICIPANTS

The Live Well Lake County Steering Committee worked with the Lake County Health Department to invite public health system partners from public, private, and voluntary sectors to participate in the LPHSA. The participants were selected with careful consideration to ensure that diverse perspectives were represented in each breakout group as well as balanced participation across sectors and agencies. Forty-eight participants attended; the numbers of attendees by sector are listed below:

LPHSA Participants			
Sector	Attendees	Sector	Attendees
Academic Institution	6	Health Department	5
Armed Forces	1	Homeless Shelter	1
Community Coalitions	2	Hospitals/Health Care	9
Emergency Preparedness	1	Housing	2
Environmental Advocates	2	Latino Services	1
Faith-Based Organizations	1	Libraries	1
Foundations/Non-Profit Organizations	5	Public Safety	2
General Public	2	Transportation	1
Government - Local	2	Youth Services	2
Government - State	1	Workforce Development	1

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RESULTS

Based upon the scores for the performance measures in each model standard, an average score was calculated for each of the 10 EPHS. The score of each EPHS can be interpreted as the degree to which the local public health system meets the performance standards for each Essential Service.

Summary of Essential Public Health Scores				
EPHS	EPHS Description	Score		Overall Ranking
1	Monitor Health Status to Identify Community Health Problems	Significant	51%	7 th
2	Diagnose and Investigate Health Problems and Health Hazards	Optimal	82%	1 st
3	Inform, Educate, and Empower People about Health Issues	Significant	63%	5 th
4	Mobilize Community Partnerships to Identify and Solve Health Problems	Significant	64%	4 th
5	Develop Policies and Plans that Support Individual and Community Health Efforts	Significant	71%	3 rd
6	Enforce Laws and Regulations that Protect Health and Ensure Safety	Optimal	80%	2 nd
7	Link People to Needed Personal Health Services and Assure the Provision of Healthcare When Otherwise Unavailable	Moderate	48%	9 th
8	Assure a Competent Public Health and Personal Healthcare Workforce	Moderate	47%	10 th
9	Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	Significant	62%	6 th
10	Research for New Insights and Innovative Solutions to Health Problems	Moderate	50%	8 th
Overall LPHSA Performance Score is SIGNIFICANT (62%)				

The highest ranked of the Essential Public Health Services was EPHS 2 (Diagnose and Investigate Health Problems and Health Hazards) which was assessed as having optimal activity of 82%. The lowest ranked was EPHS 8 (Assure a Competent Public Health and Personal Healthcare Workforce), assessed as having moderate activity of 47%. The average of all Essential Public Health Service scores resulted in the overall LPHSA performance score which was significant activity (62%).

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RESULTS - BY ESSENTIAL SERVICE

Essential Service 1: Monitor Health Status to Identify Community Health Problems

To meet the requirements of Essential Service 1, the Local Public Health System should:

- Assess accurately and continually, the community's health status
- Identify threats to health
- Determine health service needs
- Pay attention to the health needs of groups that are at higher risk than the total population
- Identify community health assets and resources that support the public health system in promoting health and improving quality of life
- Use appropriate methods and technology to interpret and communicate data to diverse audiences
- Collaborate with other stakeholders, including private providers and health benefit plans, to manage multi-sectoral integrated information systems

Sectors Represented

- | | | |
|--------------------------------|---------------------------|---------------------------|
| ✓ Community Coalitions | ✓ Health/Hospital Systems | ✓ General Public |
| ✓ Emergency Preparedness Teams | ✓ Local Health Department | ✓ State Health Department |
| ✓ Epidemiologist | ✓ Public Safety | |

Findings

Strengths:

- Awareness of some of the available data sets and how they can be used to influence policy and planning
- Health data available on local Health Department website
- Hazard vulnerability assessment is conducted yearly and organizations use this data to drive decisions
- Continuous GIS mapping for emergency preparedness
- Ebola prevention and preparedness was conducted very well
- Many registries available for use, examples are: I-Care, INEDSS, Crime registry, and Antiretroviral Pregnancy registry

Weaknesses:

- Lack of awareness of some critical data sets (e.g., Community Health Assessment)
- Data sets provided from the state level are not timely and of poor quality

Improvement Opportunities:

- Improve quality of data sets and sharing of data in general
- Increase the availability and awareness of the Community Health Assessment
- Increase in regular communicable disease updates
- Increase interconnectedness of data sets
- Use data sets for gap analysis and information sharing to strengthen system

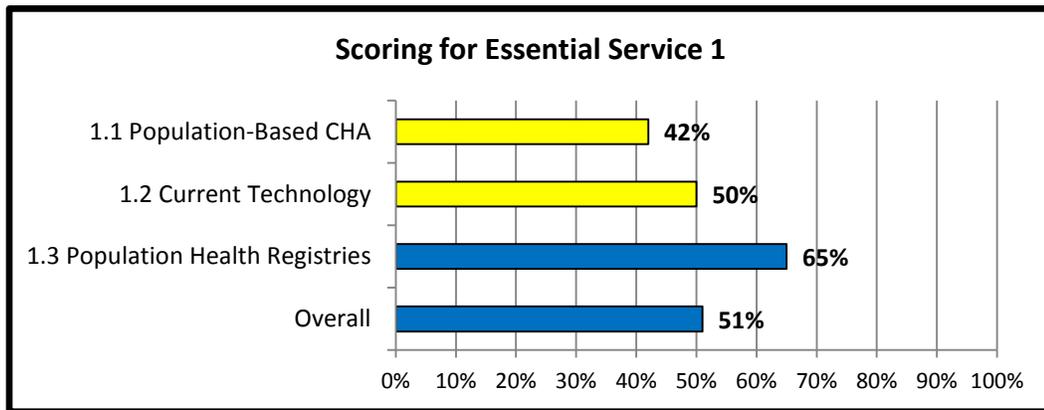
LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT

Scores by Performance Measure and Model Standard

1.1 Population-Based Community Health Assessment		
1.1.1 Community Health Assessment (CHA)	Significant	70%
1.1.2 Continuously update CHA with current information	Moderate	50%
1.1.3 Promote the use of CHA in the community	Minimal	5%
Overall Score for Model Standard	MODERATE	42%

1.2 Current Technology to Manage and Communicate Population Health Data		
1.2.1 Best available technology and methods to display data	Moderate	50%
1.2.2 Analyze health data to see where health problems exist	Moderate	50%
1.2.3 Use computer software to display complex public health data	Moderate	50%
Overall Score for Model Standard	MODERATE	50%

1.3 Maintain Population Health Registries		
1.3.1 Collect timely data consistent with current standards on health conditions	Significant	70%
1.3.2 Use information from population health registries in CHAs	Significant	60%
Overall Score for Model Standard	SIGNIFICANT	65%



Overall Score for Essential Service 1
SIGNIFICANT 51%

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Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards

To meet the requirements of Essential Service 2, the Local Public Health System should:

- Have access to a public health laboratory capable of conducting rapid screening and high-volume testing
- Establish active infectious disease epidemiology programs
- Create technical capacity for epidemiologic investigation of disease outbreaks and patterns of the following: (a) infectious and chronic disease, (b) injuries, (c) and other adverse health behaviors and conditions

Sectors Represented

- | | |
|--------------------------------|---------------------------|
| ✓ Community Coalitions | ✓ Health/Hospital Systems |
| ✓ Emergency Preparedness Teams | ✓ Local Health Department |
| ✓ Epidemiologist | ✓ Public Safety |
| ✓ General Public | ✓ State Health Department |

Findings

Strengths:

- Rapid response, coordination, and communication during emergencies (e.g., Ebola, TB, etc.)
- A variety of surveillance systems are utilized
- There is a county environmental lab that is certified by IDPH and IEPA

Weaknesses:

- Chronic disease surveillance is not conducted
- Lack of knowledge regarding reportable conditions and lack of reporting on some key indicators (e.g., crime data, child abuse)
- The capacity of state labs is not enough and the turnaround time is too lengthy in event of outbreaks
- Lack of capacity to respond in mental health crises

Improvement Opportunities:

- Educate the community on reportable conditions
- Create a tool to provide the Health Department with clear lab information (e.g., lab addresses)
- Increase surveillance (e.g., *C. difficile* infection, nursing homes, etc.)
- Increased communication between the Health Department and the hospitals during nursing home outbreaks
- Have emergency response coordinators present at outpatient and other provider clinics, not just at hospitals

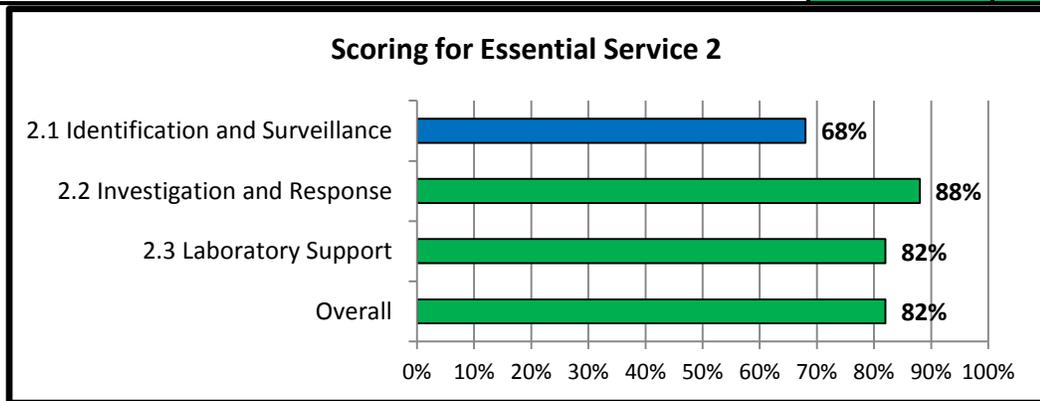
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Scores by Performance Measure and Model Standard

2.1. Identifying and Monitoring Health Threats		
2.1.1 Comprehensive surveillance system to identify, monitor and share information	Significant	60%
2.1.2 Provide and collect information on reportable disease and potential disasters and threats	Significant	75%
2.1.3 Best available resources to support surveillance systems and activities	Significant	70%
Overall Score for Model Standard	SIGNIFICANT	68%

2.2 Investigating and Responding to Public Health Threats and Emergencies		
2.2.1 Maintain instructions on how to handle communicable disease outbreaks	Optimal	80%
2.2.2 Written protocols for investigation of public health threats	Optimal	85%
2.2.3 Designated emergency response coordinator	Optimal	100%
2.2.4 Rapid response of personnel in emergency/ disasters	Optimal	90%
2.2.5 Identification of technical expertise	Optimal	85%
2.2.6 Evaluation of public health emergency response	Optimal	90%
Overall Score for Model Standard	OPTIMAL	88%

2.3 Laboratory Support for Investigating Health Threats		
2.3.1 Ready access to laboratories for routine diagnostic and surveillance needs	Optimal	76%
2.3.2 Ready access to laboratories for public health threats, hazards, and emergencies	Optimal	80%
2.3.3 Licenses and/or credentialed laboratories	Optimal	100%
2.3.4 Written protocols for laboratories for handling samples	Significant	70%
Overall Score for Model Standard	OPTIMAL	82%



Overall Score for Essential Service 2
OPTIMAL 82%

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Essential Service 3: Inform, Educate, and Empower People about Health Issues

To meet the requirements of Essential Service 3, the Local Public Health System should:

- Create community development activities
- Establish social marketing and targeted media public communication
- Provide accessible health information resources at community levels
- Collaborate with personal healthcare providers to reinforce health promotion messages and programs
- Work with joint health education programs with schools, churches, worksites, and others

Sectors Represented

- | | |
|---------------------------|---------------------------|
| ✓ Academic Institutions | ✓ Foundations |
| ✓ Armed Forces | ✓ Libraries |
| ✓ Community Coalitions | ✓ Local Health Department |
| ✓ Environmental Advocates | ✓ Youth Services |

Findings

Strengths:

- Excellent communication during emergencies
- Invested partners are focused on the “right” issues, (e.g., discussing ecological perspectives)
- Health care services at schools

Weaknesses:

- Lack of awareness of public health
- Successes are in pocketed areas of the county, missing some populations (e.g., Latinos)
- Communications not focused on prevention
- Social marketing campaigns not utilized enough to impact social change

Improvement Opportunities:

- Develop calendar for common messaging/communications
- Replicate successful programs county-wide (including small organizations) and with all populations
- A common thread of health curriculum for middle school students extending to higher education. The curriculum could focus on healthy living: including tobacco and substance abuse; mental health; nutrition, and wellness
- Develop residential mailings about emergency preparedness

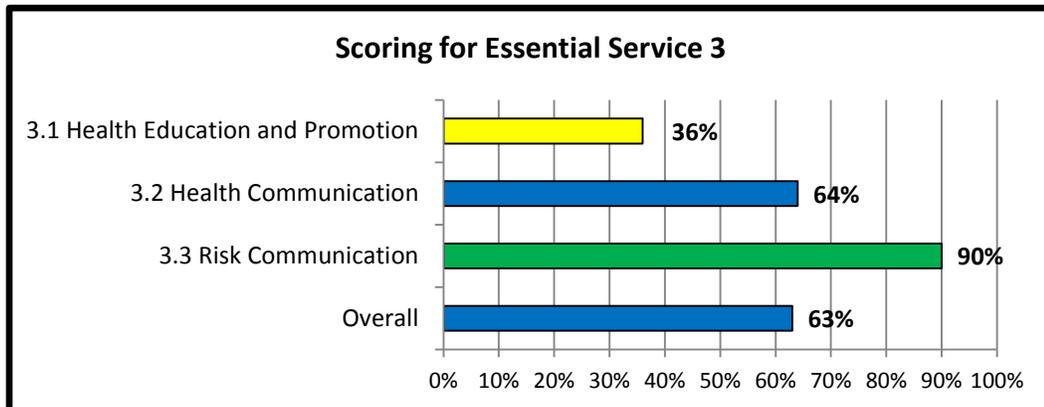
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Scores by Performance Measure and Model Standard

3.1 Health Education and Promotion		
3.1.1 Provision of community health information	Moderate	33%
3.1.2 Health education and/or health promotion activities	Minimal	25%
3.1.3 Collaboration on health communication plans	Moderate	50%
Overall Score for Model Standard	MODERATE	36%

3.2 Health Communication		
3.2.1 Development of health communication plans	Significant	60%
3.2.2 Relationships with media	Significant	51%
3.2.3 Designation of public information officers	Optimal	80%
Overall Score for Model Standard	SIGNIFICANT	64%

3.3 Risk Communication		
3.3.1 Emergency communication plans	Optimal	90%
3.3.2 Resources for rapid communications response	Optimal	90%
3.3.3 Risk communication training	Optimal	90%
Overall Score for Model Standard	OPTIMAL	90%



Overall Score for Essential Service 3
SIGNIFICANT 63%

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Essential Service 4: Mobilize Community Partnerships to Identify and Solve Health Problems

To meet the requirements of Essential Service 4, the Local Public Health System should:

- Convene and facilitate partnerships among groups and associations (including those not typically considered to be health related)
- Undertake defined health improvement planning process and health projects, including preventive screening, rehabilitation, and support programs
- Build a coalition to draw on the full range of potential human and material resources to improve community health

Sectors Represented

- | | |
|---------------------------|---------------------------|
| ✓ Academic Institutions | ✓ Foundations |
| ✓ Armed Forces | ✓ Libraries |
| ✓ Community Coalitions | ✓ Local Health Department |
| ✓ Environmental Advocates | ✓ Youth Services |

Findings

Strengths:

- “Find Help” Lake County resource directory
- Large number of well-functioning collaborations (e.g., Live Well Lake County)

Weaknesses:

- “Find Help” should be better updated by all organizations
- Geography drives delivery of resources rather than needs
- Collaborations/partnerships are not regularly evaluated and not well coordinated

Improvement Opportunities:

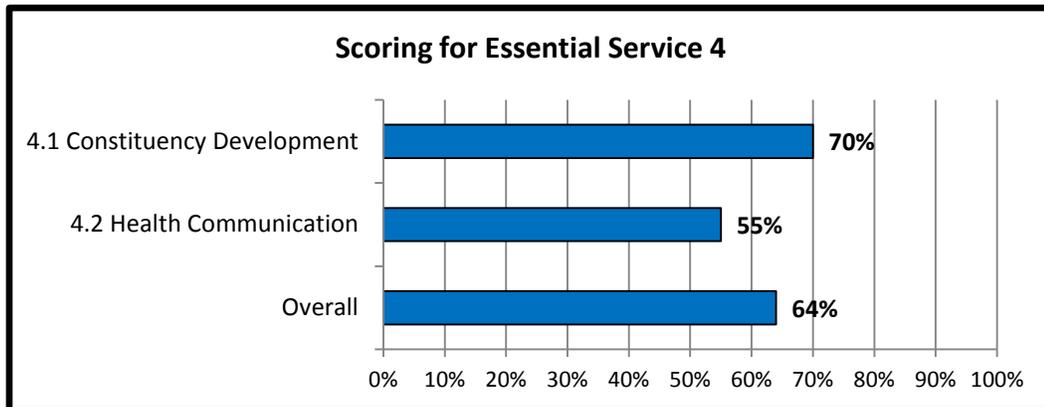
- Identify organizations by Essential Services
- Establish a strategy for identifying partners
- Identify indicators/benchmarks for marking the progress of outcomes through partnerships
- Create “311” info line for non-urgent community concerns
- Create an awards program to recognize initiatives surrounding health in community

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Scores by Performance Measure and Model Standard

4.1 Constituency Development		
4.1.1 Directory of organizations that comprise the LPHS	Optimal	80%
4.1.2 Identification of key constituents and stakeholders	Significant	60%
4.1.3 Participation of constituents in improving community health	Significant	65%
4.1.4 Communications strategies to build awareness of public health	Significant	75%
Overall Score for Model Standard	SIGNIFICANT	70%

4.2 Community Partnerships		
4.2.1 Partnerships for public health improvement activities	Significant	60%
4.2.2 Community health improvement committee	Significant	75%
4.2.3 Review of community partnerships and strategic alliances	Moderate	30%
Overall Score for Model Standard	SIGNIFICANT	55%



Overall Score for Essential Service 4
SIGNIFICANT 64%

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Essential Service 5: Develop Policies and Plans That Support Individual and Community Health Efforts

To meet the requirements of Essential Service 5, the Local Public Health System should:

- Ensure leadership development at all levels of public health
- Ensure systematic community-level and state-level planning for health improvement in all jurisdictions
- Develop and track measurable health objectives from the community health improvement plan (CHIP) as a part of a continuous quality improvement plan
- Establish joint evaluation with the medical healthcare system to define consistent policies regarding prevention and treatment services
- Develop policy and legislation to guide the practice of public health

Sectors Represented

- | | |
|---------------------------|--|
| ✓ Housing | ✓ Local Government |
| ✓ Public Safety | ✓ Volunteer Association of Elected Officials |
| ✓ Local Health Department | |

Findings

Strengths:

- Strong policies (e.g., mutual aid agreements, smoke-free housing, well water testing)
- Strong, diverse programs (e.g., LCHD services, emergency management, partnerships with GIS, electricity providers)
- “Find Help” Lake County resource directory

Weaknesses:

- Inconsistencies in/among county organizations in adopting and implementing policies
- Insufficient resources for implementing plans and policies
- Lack of access to care in the western portion of the county
- County-wide emergency communications
- Challenges between individual rights and benefit of community policies
- Lack of awareness of emergency preparedness

Improvement Opportunities:

- Creating and coordinating 211 services (health and human services information)
- Improving and enhancing access to transportation services
- Improve “Find Help” Lake County model so it can be utilized by other agencies
- Improve county-wide communication
- Interoperability of databases
- Public/private partnerships (e.g., closed PODs, potential open PODs)
- Alignment of LPHS strategies/activities with the Community Health Improvement Plan (CHIP)

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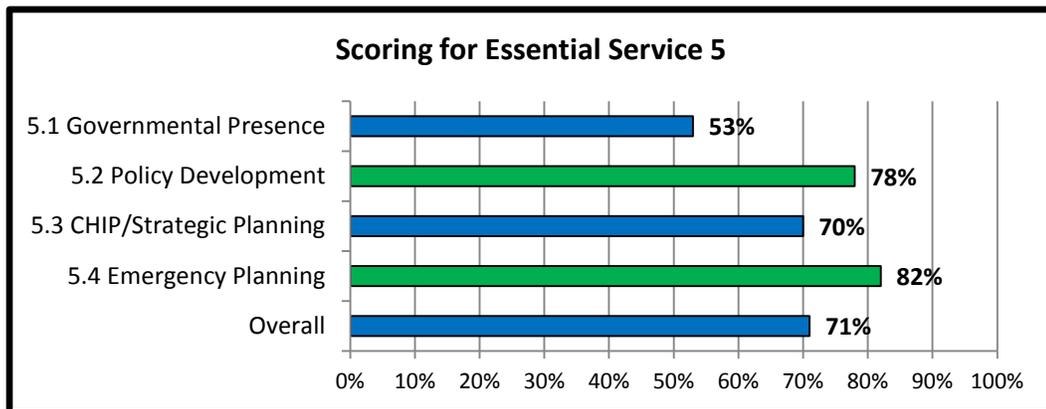
Scores by Performance Measure and Model Standard

5.1 Governmental Presence at the Local Level		
5.1.1 Governmental local public health presence	Significant	75%
5.1.2 Local health department accreditation	Moderate	50%
5.1.3 Resources for the local health department	Moderate	35%
Overall Score for Model Standard	SIGNIFICANT	53%

5.2 Public Health Policy Development		
5.2.1 Contribution to development of public health policies	Optimal	85%
5.2.2 Alert policymakers/public of public health impacts from policies	Optimal	90%
5.2.3 Review of public health policies	Significant	60%
Overall Score for Model Standard	OPTIMAL	78%

5.3 Community Health Improvement Process and Strategic Planning		
5.3.1 Community health improvement process	Optimal	80%
5.3.2 Strategies to address community health objectives	Optimal	80%
5.3.3 Organizational strategic planning alignment with community health improvement plan	Moderate	50%
Overall Score for Model Standard	SIGNIFICANT	70%

5.4 Planning for Public Health Emergencies		
5.4.1 Community task force or coalition for emergency preparedness and response plans	Optimal	85%
5.4.2 Emergency preparedness and response plan	Optimal	85%
5.4.3 Review and revision of the emergency preparedness and response plan	Optimal	76%
Overall Score for Model Standard	OPTIMAL	82%



Overall Score for Essential Service 5
SIGNIFICANT 71%

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Essential Service 6: Enforce Laws and Regulations that Protect Health and Ensure Safety

To meet the requirements of Essential Service 6, the Local Public Health System should:

- Enforce sanitary codes, especially in the food industry
- Protect drinking water supplies
- Monitor clean air standards
- Initiate animal control activities
- Follow-up with hazards, preventable injuries, and exposure-related diseases identified in occupational and community settings
- Monitor quality of medical services (e.g., laboratories, nursing homes, and home healthcare providers)
- Review new drug, biologic, and medical device applications

Sectors Represented

- ✓ Housing
- ✓ Public Safety
- ✓ Local Health Department
- ✓ Local Government
- ✓ Volunteer Association of Elected Officials

Findings

Strengths:

- Ordinance requirements at county level are stricter than those at state level
- The Health Department ensures that codes are followed (e.g., schools, hospitals, food-related, isolation/quarantine, animal control)
- Digital/online system for finding county codes

Weaknesses:

- No authority to enforce clean air standards or to require testing of private wells' water quality. Also, no authority to control the amount of groundwater quantity utilized
- A search warrant is required to enter a home for environmental reasons, hoarding, animals, and mental health issues

Improvement Opportunities:

- Expanding Barrington Area Council of Governments (BACOG) model county-wide
- Agreements and/or ordinances to require groundwater (wells) or septic testing for trending, systematic monitoring throughout Lake County
- Analyze health impacts (e.g., fair housing)
- State law changes regarding consumption/withdrawal of groundwater and maintenance of well and septic testing

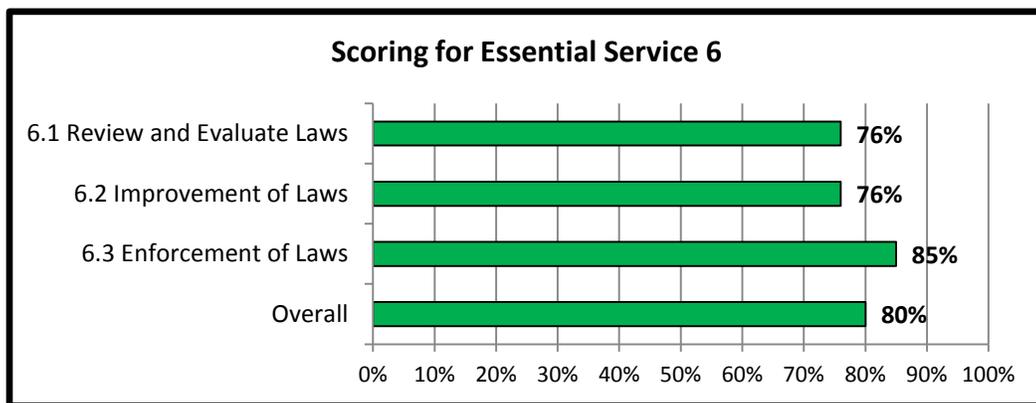
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Scores by Performance Measure and Model Standard

6.1 Reviewing and Evaluating Laws, Regulations, and Ordinances		
6.1.1 Provision of community health information	Significant	70%
6.1.2 Knowledge of laws, regulations, and ordinances	Optimal	85%
6.1.3 Review of laws, regulations and ordinances	Significant	70%
6.1.4 Access to legal counsel	Optimal	80%
Overall Score for Model Standard	OPTIMAL	76%

6.2 Involvement in Improving Laws, Regulations, and Ordinances		
6.2.1 Identification of public health issues not addressed through existing laws	Significant	67%
6.2.2 Development or modification of laws or public health issues	Significant	75%
6.2.3 Technical assistance for drafting proposed legislation, regulations, or ordinances	Optimal	85%
Overall Score for Model Standard	OPTIMAL	76%

6.3 Enforcing Laws, Regulations, and Ordinances		
6.3.1 Authority to enforce laws, regulations, and ordinances	Optimal	90%
6.3.2 Public health emergency powers	Optimal	90%
6.3.3 Enforcement in accordance with applicable laws, regulations, and ordinances	Optimal	90%
6.3.4 Provision of information about compliance	Optimal	76%
6.3.5 Assessment of compliance	Optimal	80%
Overall Score for Model Standard	OPTIMAL	85%



Overall Score for Essential Service 6
OPTIMAL 80%

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Essential Service 7: Link People to Needed Personal Health Services and Assure the Provision of Healthcare When Otherwise Unavailable

To meet the requirements of Essential Service 7, the Local Public Health System should:

- Ensure effective entry for socially disadvantaged and other vulnerable persons into coordinated system of clinical care
- Provide culturally and linguistically appropriate materials and staff to ensure linkage to services for special population groups
- Ensure ongoing care management
- Ensure transportation services
- Orchestrate targeted health education/promotion/disease prevention to vulnerable population groups

Sectors Represented

- | | |
|-----------------------------|---------------------------|
| ✓ Armed Forces | ✓ Latino Services |
| ✓ Faith-based Organizations | ✓ Local Health Department |
| ✓ Foundations | ✓ Local Government |
| ✓ Health/Hospital Systems | ✓ Transportation |
| ✓ Homeless Shelters | ✓ Youth Services |

Findings

Strengths:

- Coordination and quality of care between hospitals and FQHCs (e.g., Enroll Lake County, behavioral health services)
- Can identify key populations/issues geographically and by topic (e.g., HIV, homeless)
- Strong alliance of community partners
- Community-based practices are being utilized

Weaknesses:

- Still some populations not addressed (e.g., undocumented individuals, ineligible individuals, some subpopulations)
- Insufficient number of providers, particularly for Medicaid population
- Coordination services are fragmented
- Not enough linkages to Managed Care Organizations

Improvement Opportunities:

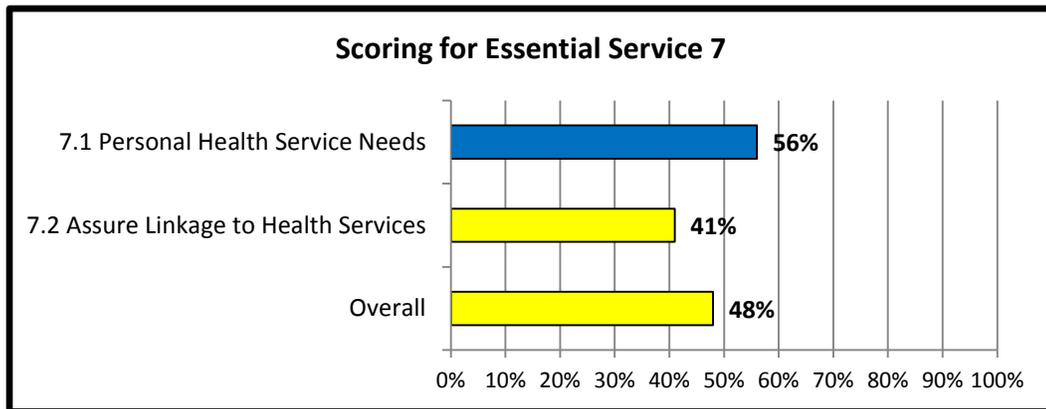
- Increase in overall coordination of care (e.g., between hospitals and FQHCs; between healthcare providers and social service agencies, etc.)
- Utilizing Service Point for increased electronic referrals
- Conduct more localized geographic assessments
- Identify sustainable mechanisms to manage healthcare and social subsidies

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Scores by Performance Measure and Model Standard

7.1 Identifying Personal Health Service Needs of Populations		
7.1.1 Identification of populations who experience barriers to care	Significant	75%
7.1.2 Identification of personal health service needs of populations	Moderate	50%
7.1.3 Develop partnerships to respond to unmet needs of the community	Moderate	36%
7.1.4 Understand barriers to care	Significant	60%
Overall Score for Model Standard	SIGNIFICANT	55%

7.2 Ensuring People are Linked to Personal Health Services		
7.2.1 Link populations to needed personal health services	Moderate	45%
7.2.2 Assistance to vulnerable populations in accessing needed health services	Minimal	24%
7.2.3 Initiatives for enrolling eligible individuals in public benefit programs	Significant	70%
7.2.4 Coordination of personal health and social service	Minimal	25%
Overall Score for Model Standard	Moderate	41%



Overall Score for Essential Service 7
MODERATE 48%

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Essential Service 8: Assure a Competent Public Health and Personal Healthcare Workforce

To meet the requirements of Essential Service 8, the Local Public Health System should:

- Educate, train, and assess personnel (including volunteers and other lay community health workers) to meet community needs for public health and personal health services
- Establish efficient processes for professionals to acquire licensure
- Adopt continuous quality improvement and lifelong learning programs
- Establish active partnerships with professional training programs to ensure community-relevant learning experiences for all students
- Provide education in the management and leadership development programs for those charged with administrative/executive roles

Sectors Represented

- ✓ Academic Institutions
- ✓ Foundations
- ✓ General Public
- ✓ Health/Hospital Systems
- ✓ Local Health Department
- ✓ Non-Profit Organizations
- ✓ Workforce Development

Findings

Strengths:

- Collaboration with educational partners
- Hands-on learning opportunities for students

Weaknesses:

- Lack of lifelong learning opportunities
- Lack of cultural competency
- Gap in mental health workforce
- Lack of clinical training opportunities and workforce development training in hospitals
- No certification available for patient safety training

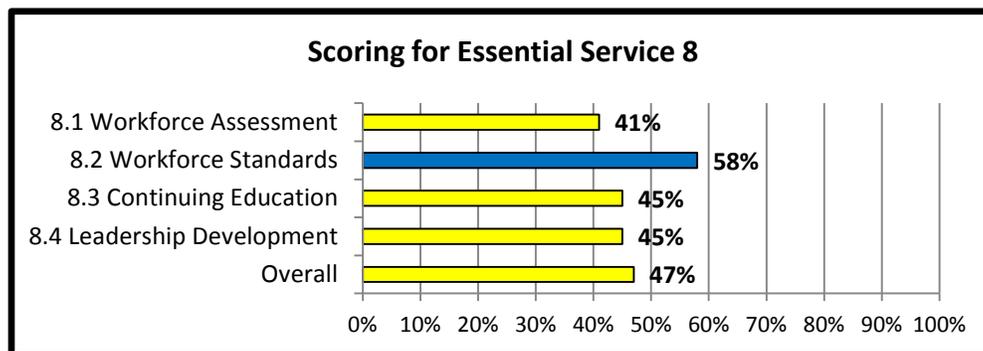
Improvement Opportunities:

- Conduct projected workforce needs assessment
- Increase number of clinical training locations in county
- Create shared vision for workforce development
- Increase training in cultural competency
- Sharing training resources between organizations
- Increase leadership development
- Develop training opportunities for veterans
- Certification for community health workers
- Leverage fee for service training opportunities

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Scores by Performance Measure and Model Standard

8.1 Workforce Assessment, Planning and Development		
8.1.1 Assessment of the LPHS workforce	Moderate	40%
8.1.2 Identification of shortfalls and/or gaps within the LPHS workforce	Moderate	28%
8.1.3 Dissemination of results of the workforce assessment/gap analysis	Significant	55%
Overall Score for Model Standard	MODERATE	41%
8.2 Public Health Workforce Standards		
8.2.1 Awareness of guidelines and/or licensure/certification requirements	Significant	65%
8.2.2 Written job standards and/or position descriptions	Significant	55%
8.2.3 Performance evaluations	Significant	55%
Overall Score for Model Standard	SIGNIFICANT	58%
8.3 Life-Long Learning through Continuing Education, Training, and Mentoring		
8.3.1 Identification of education and training needs for workforce development	Significant	55%
8.3.2 Opportunities for developing core public health competencies	Moderate	50%
8.3.3 Educational and training incentives	Moderate	50%
8.3.4 Collaboration between organizations and the LPHS for training and education	Moderate	45%
8.3.5 Education and training on cultural competency and social determinants of health	Minimal	25%
Overall Score for Model Standard	MODERATE	45%
8.4 Public Health Leadership Development		
8.4.1 Development of leadership skills	Moderate	50%
8.4.2 Collaborative leadership	Significant	51%
8.4.3 Leadership opportunities for individuals and/or organizations	Moderate	50%
8.4.4 Recruitment and retention of new and diverse leaders	Moderate	30%
Overall Score for Model Standard	MODERATE	45%



Overall Score for Essential Service 8
MODERATE 47%

LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT

Essential Service 9: Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services

To meet the requirements of Essential Service 9, the Local Public Health System should:

- Assess program effectiveness through monitoring and evaluating implementation, outcomes, and effect
- Provide information necessary for allocating resources and reshaping programs

Sectors Represented

- | | |
|-----------------------------|---------------------------|
| ✓ Armed Forces | ✓ Latino Services |
| ✓ Faith-based Organizations | ✓ Local Health Department |
| ✓ Foundations | ✓ Local Government |
| ✓ Health/Hospital Systems | ✓ Transportation |
| ✓ Homeless Shelters | ✓ Youth Services |

Findings

Strengths:

- Many organizations in Lake County
- Existence of a regional health exchange (e.g., MCHC HIE)

Weaknesses:

- Challenge to track health outcomes (e.g., lots of Electronic Health Record (EHR) systems)
- Have not worked with foundations, companies, and small organizations for funding

Improvement Opportunities:

- Increase evaluation in Live Well Lake County action teams
- Increase quality and quantity of data in the health system and share results
- Connect/Share data sets among partners
- Evaluate LPHS and drive improvements (structurally and programmatically)
- Assess exchange of information across partnerships and coordinate improvements

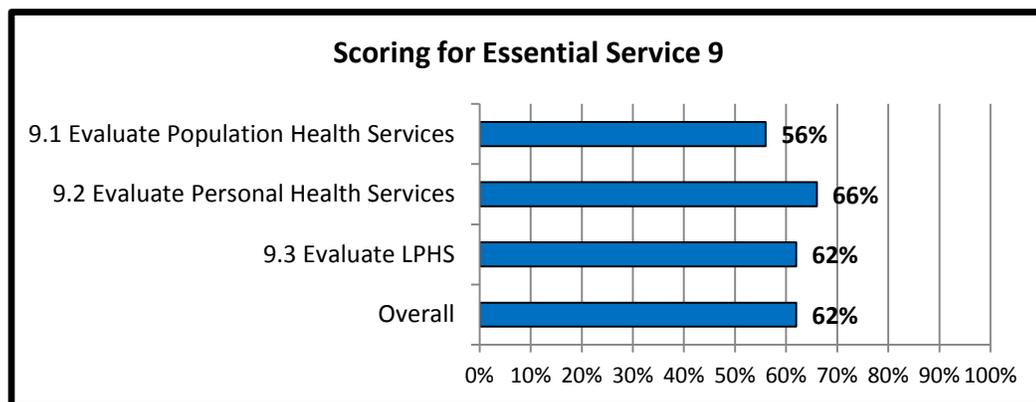
LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT

Scores by Performance Measure and Model Standard

9.1 Evaluating Population-Based Health Services		
9.1.1 Evaluation of population-based health services	Significant	70%
9.1.2 Assessment of community satisfaction with population-based health services	Minimal	25%
9.1.3 Identification of gaps in the provision of population-based health services	Significant	55%
9.1.4 Use of population-based health services evaluation	Significant	75%
Overall Score for Model Standard	SIGNIFICANT	56%

9.2 Evaluating Personal Health Services		
9.2.1 Personal health services evaluation	Moderate	50%
9.2.2 Evaluation of personal health services against established standards	Significant	75%
9.2.3 Assessment of client satisfaction with personal health services	Significant	65%
9.2.4 Information technology to assure quality of personal health services	Significant	70%
9.2.5 Use of personal health services evaluation	Significant	72%
Overall Score for Model Standard	SIGNIFICANT	66%

9.3 Evaluating the Local Public Health System		
9.3.1 Identification of community organizations or entities that contribute to the EPHS	Optimal	76%
9.3.2 Periodic evaluation of LPHS	Optimal	76%
9.3.3 Evaluation of partnership within the LPHS	Minimal	20%
9.3.4 Use of evaluation to guide improvements to the LPHS	Optimal	76%
Overall Score for Model Standard	SIGNIFICANT	62%



Overall Score for Essential Service 9
SIGNIFICANT 62%

LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT

Essential Service 10: Research for New Insights and Innovative Solutions to Health Problems

To meet the requirements of Essential Service 10, the Local Public Health System should:

- Establish a full continuum of innovation, ranging from practical field-based efforts to fostering change in public health practice to more academic efforts that encourage new directions in scientific research
- Continue linking with institutions of higher learning and research
- Create internal capacity to mount timely epidemiologic and economic analyses and conduct health services research

Sectors Represented

- | | |
|---------------------------|----------------------------|
| ✓ Academic Institutions | ✓ Local Health Department |
| ✓ Foundations | ✓ Non-Profit Organizations |
| ✓ General Public | ✓ Workforce Development |
| ✓ Health/Hospital Systems | |

Findings

Strengths:

- Outstanding pharmaceutical/medical companies
- Opportunities to collaborate with many higher education institutions
- Readiness and interest to do research

Weaknesses:

- Lack of research infrastructure (no training, no expertise, no financial resources, no research culture)
- Lack of awareness or understanding of the terms population health and public health
- Lack of collaboration to develop continuing education
- Lack of field training for clinical training and research

Improvement Opportunities:

- Engage students as researchers
- Create opportunities for community-based participatory research
- Connect the needs of the community with researchers
- Engage academic institutions in population health research
- Collaborate with other organizations to enhance applications to receive funding
- Translate research findings to the general public

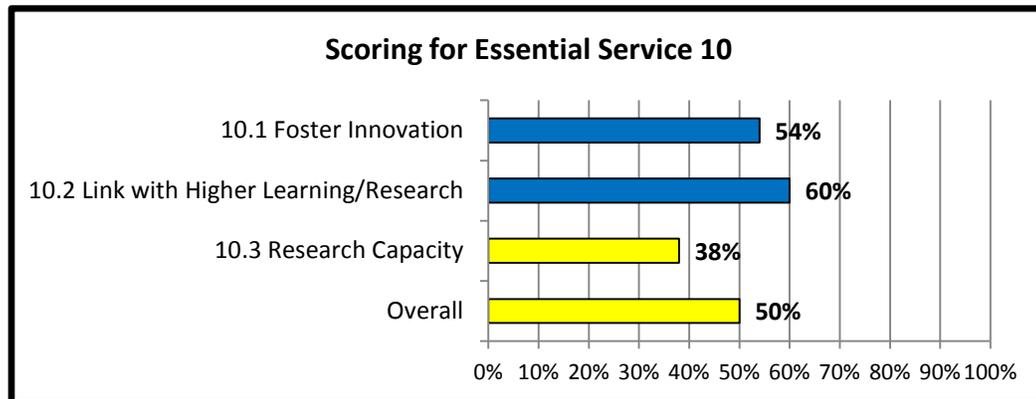
LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT

Scores by Performance Measure and Model Standard

10.1 Fostering Innovation		
10.1.1 Encouragement of new solutions to health problems	Moderate	50%
10.1.2 Proposal of public health issues for inclusion in research agenda	Moderate	50%
10.1.3 Identification and monitoring of best practices	Significant	65%
10.1.4 Encouragement of community participation in research	Moderate	50%
Overall Score for Model Standard	SIGNIFICANT	54%

10.2 Linking with Institutions of Higher Learning and/or Research		
10.2.1 Relationships with institutions of higher learning and/or research organizations	Significant	75%
10.2.2 Partnerships to conduct research	Moderate	50%
10.2.3 Collaboration between the academic and practice communities	Significant	54%
Overall Score for Model Standard	SIGNIFICANT	60%

10.3 Capacity to Initiate or Participate in Research		
10.3.1 Collaboration with researchers	Moderate	50%
10.3.2 Access to resources to facilitate research	Minimal	25%
10.3.3 Dissemination of research findings	Significant	51%
10.3.4 Evaluation of research activities	Minimal	25%
Overall Score for Model Standard	MODERATE	38%



Overall Score for Essential Service 10
MODERATE 50%

LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT

NEXT STEPS

The LPHSA was the first assessment to be completed in Lake County's 2015-2016 MAPP process. The Live Well Lake County steering committee is guiding the completion of the remaining three assessments. Upon completion, the results of the assessments will be analyzed and prevailing health concerns will be identified and strategically prioritized. Following prioritization, goals and action plans to address priority issues will be developed, implemented, and aligned to improve the local public health system and ultimately the health of the community.

APPENDIX

Appendix

APPENDIX A: LOCAL PUBLIC HEALTH SYSTEMS ASSESSMENT PARTICIPANTS

Janet L. Agnoletti

*Executive Director
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APPENDIX

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Sg2

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Case Management/Social Service, Northwestern Lake Forest Hospital/Grayslake Cancer Center

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Executive Director

Mano a Mano Family Resource Center

Dr. Carmella Mikol

Professor, Associate Degree Program in Nursing

College of Lake County

Janelle Miller Moravek

Executive Director

Youth and Family Counselling

Maggie Morales

Manager of Community Engagement

Lake County Community Foundation

Mike Munda

Principal

ROE Regional Safe School

Maureen Murphy

Division Manager

Catholic Charities

Brenda O'Connell

Continuum of Care Program Coordinator

Lake County Community Development

Carmen Patlan

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Waukegan Public Library

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Lake County Health Department and Community Health Center

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APPENDIX

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Erie Family Health Care Center*

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Healthcare Foundation of Northern Lake County*

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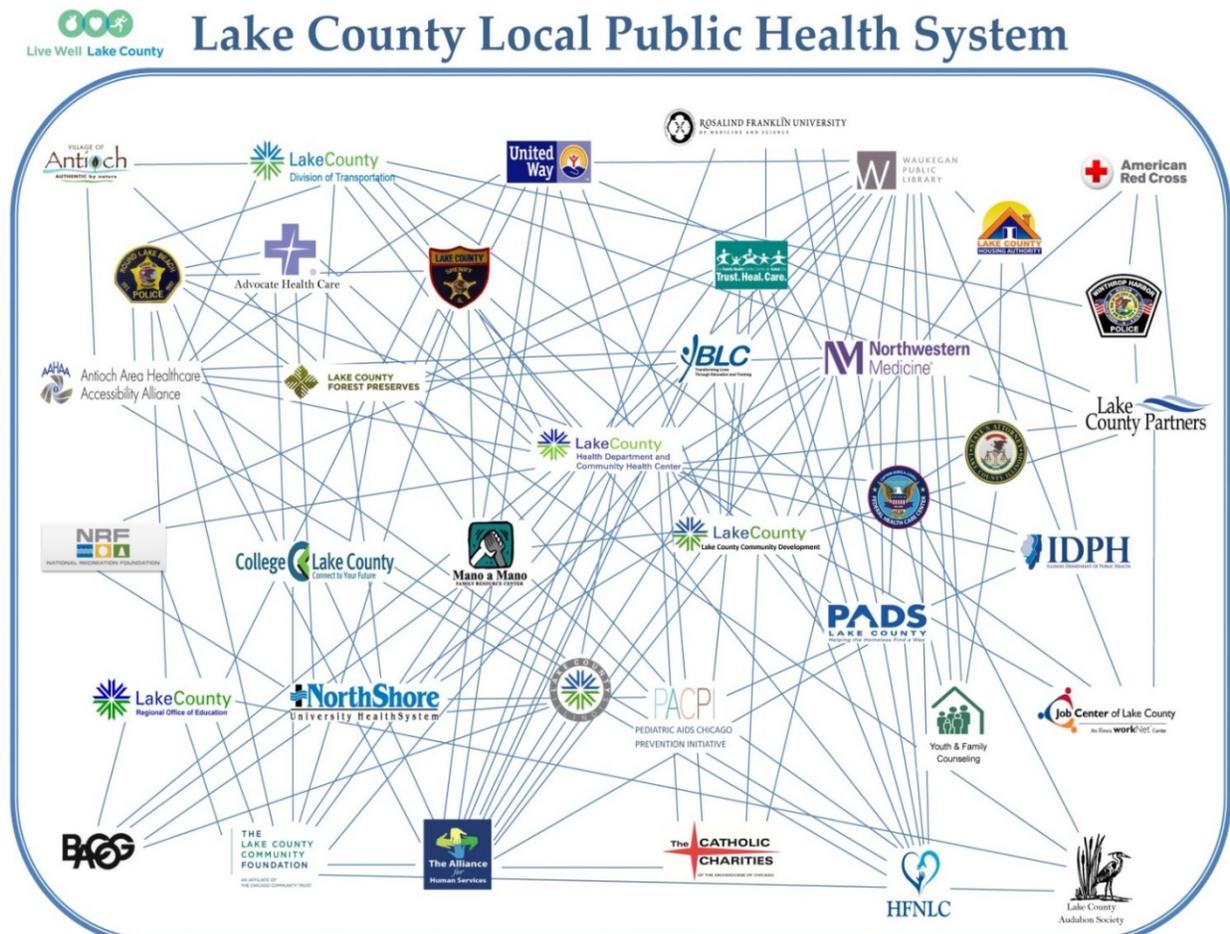
Jim Zimmerman

*Senior Associate Dean for Administration, Accreditation and
Finance at The Chicago
Rosalind Franklin University of Medicine and Science*

APPENDIX

APPENDIX B: LAKE COUNTY'S SYSTEM CONNECTEDNESS DIAGRAM

The System Connectedness Diagram (or jelly bean diagram) depicts the interconnectedness of community agencies within the local public health system. Participants created the diagram by using string to connect logos from their organizations with other organizations they work with. The results were digitized and developed into the diagram below:



Created on June 18, 2015 by the Community Organizations Comprising the Lake County Local Public Health System

APPENDIX

APPENDIX C: LAKE COUNTY'S WORDLE

A *Wordle* is a creative cloud of words that is utilized to convey a message. Every participant at Lake County's LPHSA contributed to the *Wordle* by using one word to answer the question "What excites you most about the work you do?" The larger the word in the *Wordle*, the more often it was mentioned.

