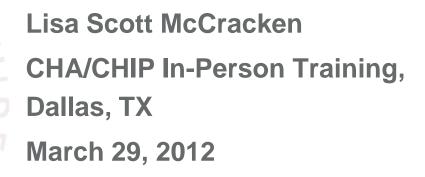
"Presenting CHA Findings to Inform Health Improvement Planning"





Learning Objectives

- 1. Describe the project and PHAB documentation requirements for presenting the findings of the CHA.
- 2. Translate CHA findings for policy makers, LHD staff, LPHS partners and community members.
- 3. Plan data presentations in both written and oral form that motivate action, especially on social determinants of health and health inequities.
- 4. Choose at least two practical methods through which the results of a CHA can be presented in oral and written form, especially to lay audiences and non-health professionals.
- 5. Plan the venues through which and the methods that will be used to present the findings of the CHA to the public and other stakeholders.





Learning Objectives (cont.)

- 6. Explain the characteristics of clear and impactful presentations of CHA findings in graph, chart, picture, or other visual formats.
- 7. Identify roles for LHD staff, community members and/or LPHS partners in written and oral presentations of findings.
- 8. Discuss how to present limitations of CHA data and findings.
- 9. Plan for potential communication challenges and the strategies that can be used to overcome them.
- 10.Describe how to be clear about the "call to action" in presenting the CHA findings to various audiences.
- 11.Describe at least three considerations to ensure CHA findings and documentation are organized in preparation for PHAB accreditation application.





Organizing the Data



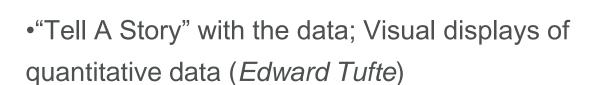




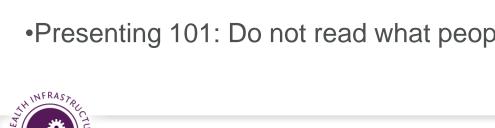


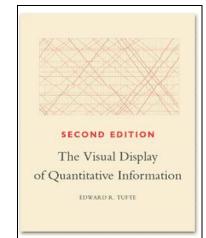
Considerations for Organizing & Presenting the CHA Data

- Remember that people take in information differently (verbal, visual, etc.) Keep this in mind when structuring the presentation & reporting.
- You do not need to regurgitate every statistic and point of feedback from the CHA



Presenting 101: Do not read what people can read!









Sample Presentation Flow

- •Introductions & Opening Remarks (Potential way to engage partners!)
 - Importance of who is in attendance!
- Research overview
 - Provide background and approach
 - Put limitations out there in the beginning!
 - Strengths & Opportunities
 - Summary section by research component
 - Cross-tabulations of data (health inequities; demographic differences)
 - General takeaways and conclusions
- Questions about research and/or data
- Next steps: Call-to-Action

Recommended length: 1 to 1 ½ hours





Methods of Presenting the Data



- PowerPoint
- Prezi (www.prezi.com)
- Excel graphs
- Word document/pdf (written summary to accompany presentation)
- GIS maps
- •Phone vs. webinar vs. in-person (do best not to give people an easy "opt out" from in-person meeting; the importance you give it will send a message)
- Quotes from participants to help tell the story
- Pictures to help tell the story
- •Translate data into "real life" messages (e.g. convert percentages to actual number of people in the area)
- Storytelling/Case studies





Audience Considerations





Audience-Specific Considerations

- •Messages and format will vary depending on the audience:
 - Presentation within the agency
 - Hospital audience/message
 - Elected officials
 - "Joe & Josephine" Public
 - Community partners
- Length of presentation
- •Have a communications plan!
 - Social media
 - Traditional media outlets







Presentation Barriers Exercise

Small group work at tables





How do I handle...

- A. "I'm not quite sure how to bring the message down to the 'lay person' level. What is the best way to keep the language basic without compromising the research elements of the assessment?"
- B. "How do I effectively present small numbers?"
- C. "I can easily report the quantitative information, but I'm struggling to convey the qualitative data. What is the best way to present that?"
- D. "I presented the results of our assessment and had some people debate the statistics. How do I handle this?"
- E. "I have some community partners who are very passionate about 'their' cause. Those same issues did not necessarily rise to the top as unfavorable for our area. How do I handle this?"
- F. "How do I ensure that sufficient attention has been given to noting the health inequities and social determinants of health during the presentation?"





Engaging Partners





How to integrate partners into the presentation

- •Give credit where credit is due:
 - Note where data was contributed by partners
 - Partners assistance in data collection
- Consider a tag-team approach to the presentation
 - Opening remarks
 - Next steps & Call-to-Action
 - Closing remarks
- •Strongly encourage always having an "acknowledgements" section in the reports, CHIP, and other promotions
- Discuss partner locations for presentation







The Importance of Community Ownership

- Setting the tone from the beginning of the presentation is important
- Connect the dots for attendees....what does this mean to them?
 - Collective Call-to-Action
 - Opportunity for collective and individual goals being met
 - Use and integration into organization's respective strategic plans
 - Use data for grant applications and initiatives
- Open posting/sharing of results for all to view/access



Development of Presentation/ Communication Plan Exercise

Individual work at tables completing worksheet/template







Questions & Group Discussion





PROJECT REQUIREMENTS & PHAB STANDARDS AND MEASURES: PRESENTING THE CHA FINDINGS





Engage Community Members and LPHS Partners

"Community members must be engaged in a meaningful and substantive way throughout the CHA and CHIP processes, including indicator selection, data collection, data analysis, data presentation and distribution, issue prioritization, CHIP creation, implementation of CHIP, and monitoring of results."

"Partners should be engaged in a strategic way throughout the CHA and CHIP processes, including gaining access to data, mobilizing community members, data collection, data review, issue prioritization, and CHIP implementation."





Required characteristics of the Community Health Profile presenting the findings of the CHA:

- Background information that does the following:
 - Clearly describes the jurisdiction that was assessed. It is acceptable for CHAs to cover a geographic area that extends beyond the LHD's jurisdiction, but it may not focus on only a subset of the LHD's jurisdiction.
 - Specifies the assessment or improvement model or the tailored approach used for the CHA.
 - Briefly describes how community members and LPHS partners were involved in the CHA.





Required characteristics of the Community Health Profile (cont'd):

- Data and analyses that do the following:
 - Describe the characteristics of the overall population (age distribution, race and ethnicity, socioeconomic status, etc.).
 - Demonstrate the use of a broad set of indicators of community health, well-being, and quality of life and multiple data sources.
 - Consider a range of issues that affect health directly and indirectly.
 - Incorporate data from a variety of sectors that influence health such as housing, education, transportation, etc.
 - Identify community members' definition(s) of health and relationship to cultural needs and values.
 - Identify desired health and health-related outcomes from the perspective of community members.
 - Use federal, state, and/or local data as appropriate.
 - Use qualitative data as well as quantitative data. Include qualitative data on community perceptions, assets, priorities, and the community health context.





Required characteristics of the Community Health Profile (cont'd):

- Data and analyses that do the following:
- Demonstrate the use of indicators, data collection methods, and data analysis techniques that allow for the identification and examination of health inequities.
 - Choose indicators that represent a broad range of items that community members have indicated, or literature shows, may be inequitable.
 - Use data and data collection methods that can be analyzed and reviewed for health inequities (i.e., if a data source already exists for an indicator but the data cannot be analyzed for health inequities, consider using another data source or collecting new data on this indicator to fulfill this need).
 - Ensure that sample sizes are large enough, when appropriate, to allow for data analysis to examine health inequities between and among sub-populations.
- Show that both community assets/strengths and resources as well as needs/gaps were assessed.
- Compare jurisdiction data with that of neighboring jurisdictions, state, and/or the nation.
- Include a review of trends and sub-population specific data when possible (e.g., if sufficient data are available on health status, risk factors, etc. for different racial or ethnic groups, then the data presented should be stratified by race and ethnicity).



Required characteristics of the Community Health Profile (cont'd):

- A summary of the major CHA findings that does the following:
- Describes the process used to synthesize all of the data to arrive at the major CHA findings.
- Presents the major CHA findings.

Required characteristics of the Community Health Improvement Process Report:

 Discuss how the Community Health Profile was created and how it was/will be distributed to the public.





*Be sure to review the standards listed below to identify the measures and required documentation that PHAB seeks related to presenting the CHA findings.

Standard 1.1: Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment





For example...

Measure 1.1.2 T/L: Complete a Tribal/local community health assessment

Required documentation 1.a: Documentation that the Tribal or local community at large has had an opportunity to review and contribute to the assessment [Guidance: Preliminary findings of the assessment were distributed to the community at large and that the community's input was sought...]

Measure 1.1.3A: Ensure that the CHA is accessible to agencies, organizations, and the general public

Required documentation 1: Documentation that the community health assessment has been distributed to Partner organizations.

Required documentation 2: Documentation that the community health assessment and/or its findings have been made available to the population of the jurisdiction served by the health department.



