Learning Objectives

At the completion of the session, participants will be able to do the following:

1. Draft the different types of criteria that they believe their core team should consider in their community’s issue prioritization process.
2. Use at least two tools or methods, including a QI technique or tool, for issue prioritization.
3. Design an issue prioritization process that ensures attention to health condition priorities, system-level issues and a social determinant of health or health inequity priority.
4. Ensure that CHA findings and other objective information inform priority setting.
5. Plan an issue prioritization process in their community that positions the CHIP to lead to systematic action-planning and ownership by community members, partners, and elected officials.
6. Involve project staff, community members, and LPHS partners meaningfully in an issue prioritization process in a way that manages their expectations.
7. Explain key considerations for how to ensure that different sectors of the community and public health system have an equal voice in setting priorities.
8. Understand the role of community will and other contextual factors that influence issue prioritization and how to address this in planning the process.
9. Re-state the CHA/CHIP demonstration site project requirements for issue prioritization and CHIP development.
10. Describe the required documentation on issue prioritization and CHIP development and implementation from PHAB Standards and Measures Version 1.0.
Identify Strategic Issues

Strategic issues (or Vision Areas, Priority Areas) are fundamental policy choices or critical challenges that must be addressed in order for a community to achieve its vision.
The Process

- Determine the method for completing this phase
- Present summary of all four assessments
- Brainstorm potential strategic issues
- Develop an understanding about why an issue is strategic
- Consolidate overlapping or related issues
- Conduct a prioritization or selection process
- Arrange issues into an ordered list
- Disseminate results
- Evaluate the process
Brainstorm & Categorize Strategic Issues

Ensure that brainstorm process includes potential issues from all assessments and that they include:

- Results from Community Health assessment
- Health condition priorities
- System level issues
- Social determinants of health

Consider using Affinity Diagram to ensure that information from all the assessments and these topic areas are considered.
Affinity Diagram*

Why use it?
- To allow a QI team to creatively generate a large number of ideas/issues and organize in natural groupings to understand the problem and potential solutions.

What does it do??
- Encourages creativity by everyone on team
- Breaks down communication barriers
- Encourages non-traditional connections among ideas/issues
- Allows breakthroughs to emerge naturally
- Encourages ownership of results
- Overcomes “team paralysis”

*PH Memory Jogger page 12
How to Build an Affinity Diagram

• Phrase the issue under discussion in a full sentence and write at the top of full size flip chart paper
• Distribute 3 x 5 post-it notes to each participant
• Follow the rules for brainstorming
• Have each participant write their ideas on the Post-Its, one idea per sheet in large letters, 4-7 words each
• Have participants place their Post-Its on Flip Chart
• Facilitator assists group to sort Post-Its into 5 – 10 related categories
• For each category create a title or heading
• Review categories and ideas to rearrange, if necessary
Uptake of Vaccines Example (Kittitas, WA)
# Criteria for Prioritizing Issues

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Size</td>
<td>How many people are affected?</td>
</tr>
<tr>
<td>Seriousness</td>
<td>Deaths, hospitalizations, disability</td>
</tr>
<tr>
<td>Trends</td>
<td>Is it getting worse or better?</td>
</tr>
<tr>
<td>Equity</td>
<td>Are some groups affected more?</td>
</tr>
<tr>
<td>Intervention</td>
<td>Is there a proven strategy?</td>
</tr>
<tr>
<td>Values</td>
<td>Does our community care about it?</td>
</tr>
<tr>
<td>Resources</td>
<td>Build on current work – available $?</td>
</tr>
<tr>
<td>Others?</td>
<td>Social Determinant, root cause</td>
</tr>
</tbody>
</table>
Exercise-Criteria to Prioritize Vacation Choices

• Each person at the table generates a list of at least 4 criteria
• Share criteria around the table (clarify as needed)
• Gain consensus at table on 5 criteria to use in your prioritization process for where to take your next vacation
Exercise-Criteria to Prioritize Issues

• Each person at the table generates a list of at least 4 criteria
• Share criteria around the table (clarify as needed)
• Gain consensus at table on 5 criteria to use in your prioritization process for health issues
Control and Influence

• This is a conceptual tool to help give a team guidance on what to focus on when trying to pick a topic to improve
• They should focus where they have both control and knowledge
• In Public Health we may work more in the influence part of the circle or quadrant
Control and Influence

It helps to understand where:

• We have control
• We may need assistance
• We can influence only
• We should stay away from

It also points out that we can expand our control area by becoming more knowledgeable, seeking assistance, and trying to be influential in areas beyond our control.
Rate the Seriousness of the Health Problem
(Hanlon Method for Prioritizing Health Problems APEXPH)

Give each health problem a numerical rating on a scale of 0 through 10. The table below is an example of how the numerical rating might be established.

<table>
<thead>
<tr>
<th>How Serious a Health Problem is Considered</th>
<th>“Seriousness” Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Serious (e.g., very high death rate; premature mortality; great impact on others; etc.)</td>
<td>9 or 10</td>
</tr>
<tr>
<td>Serious</td>
<td>6, 7, or 8</td>
</tr>
<tr>
<td>Moderately Serious</td>
<td>3, 4, or 5</td>
</tr>
<tr>
<td>Not Serious</td>
<td>0, 1, or 2</td>
</tr>
</tbody>
</table>
**Rate the Size of the Health Problem**

Give each health problem a numerical rating on a scale of 0 through 10 (reflects % of the local population affected by the particular health problem)

<table>
<thead>
<tr>
<th>Percent of Population with the Health Problem</th>
<th>“Size of the Problem” Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>25% or more</td>
<td>9 or 10</td>
</tr>
<tr>
<td>10% through 24.9%</td>
<td>7 or 8</td>
</tr>
<tr>
<td>1% through 9.9%</td>
<td>5 or 6</td>
</tr>
<tr>
<td>.1% through .9%</td>
<td>3 or 4</td>
</tr>
<tr>
<td>.01% through .09%</td>
<td>1 or 2</td>
</tr>
<tr>
<td>Less than .01% (1/10,000)</td>
<td>0</td>
</tr>
</tbody>
</table>
Rate Effectiveness of Available Interventions

It may be helpful to define upper and lower limits of effectiveness and assess each intervention relative to these limits. For example, vaccines are a highly effective intervention for many diseases; those diseases would receive a high “Effectiveness of Intervention Rating.”

<table>
<thead>
<tr>
<th>Effectiveness of Available Interventions in Preventing the Health Problem</th>
<th>“Effectiveness” Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Effective; 80% to 100% effective (e.g., vaccine)</td>
<td>9 or 10</td>
</tr>
<tr>
<td>Relatively Effective 60% to 80% effective</td>
<td>7 or 8</td>
</tr>
<tr>
<td>Effective 40% to 60%</td>
<td>5 or 6</td>
</tr>
<tr>
<td>Moderately Effective 20% to 40% effective</td>
<td>3 or 4</td>
</tr>
<tr>
<td>Relatively Ineffective 5% to 20% effective</td>
<td>1 or 2</td>
</tr>
<tr>
<td>Almost Entirely Ineffective Less than 5% effective</td>
<td>0</td>
</tr>
</tbody>
</table>
## Criteria Matrix

<table>
<thead>
<tr>
<th>Health Issue</th>
<th>Importance</th>
<th>Control</th>
<th>Serious</th>
<th>Size</th>
<th>Effective Actions</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Issue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Immunizations</td>
<td>3</td>
<td>2</td>
<td>5</td>
<td>6</td>
<td>10</td>
<td>26</td>
</tr>
<tr>
<td>2. Teen Pregnancy</td>
<td>2</td>
<td>1</td>
<td>7</td>
<td>3</td>
<td>4</td>
<td>17</td>
</tr>
<tr>
<td>3. Childhood Obesity</td>
<td>3</td>
<td>2</td>
<td>9</td>
<td>8</td>
<td>3</td>
<td>25</td>
</tr>
<tr>
<td>4. Low HS Graduation</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>6</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td>5. Alcohol/Drug Use</td>
<td>1</td>
<td>1</td>
<td>8</td>
<td>3</td>
<td>2</td>
<td>15</td>
</tr>
</tbody>
</table>
Prioritization Matrix-Weighing Your Options

Use it to narrow down options through a systematic approach of comparing choices by applying criteria

What does it do?

- Quickly surfaces basic disagreements to resolve up front
- Forces teams to focus on the best things to do
- Limits “hidden agendas” by surfacing criteria as part of process
- Increases chance of follow-through as get more buy-in
- Reduces the chance of selecting someone’s “pet project”

PH Memory Jogger, pages 105-115
How to Use Prioritization Matrix

- Take topics/issues and ask:
  Does X contribute more than Y in achieving the goal, based on our criteria?
- Once you have agreement on the answer, then decide how much:
  1 = equally important
  5 = significantly more important
  10 = exceedingly more important
  1/5 = significantly less important
  1/10 = exceedingly less important
- Assign agreed-upon value to the issue contributing more and the reciprocal score to the other
- Total the scores and prioritize the issues, highest to lowest
# Example of Prioritization Matrix

(Each issue against Importance criterion)

<table>
<thead>
<tr>
<th></th>
<th>1. Immu.</th>
<th>2. Engage Commu.</th>
<th>3. CHIP</th>
<th>4. Food</th>
<th>5. Family Planning</th>
<th>Row Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Immu.</td>
<td></td>
<td>10</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>2. Engage Community</td>
<td>1/10</td>
<td></td>
<td>1</td>
<td>1/5</td>
<td>1/5</td>
<td>1.5</td>
</tr>
<tr>
<td>3. CHIP</td>
<td>1</td>
<td>1</td>
<td>1/5</td>
<td>1</td>
<td></td>
<td>3.2</td>
</tr>
<tr>
<td>4. Food</td>
<td>1</td>
<td>5</td>
<td>5</td>
<td></td>
<td></td>
<td>16</td>
</tr>
<tr>
<td>5. Family Planning</td>
<td>1/5</td>
<td>5</td>
<td>1</td>
<td>1/5</td>
<td></td>
<td>6.4</td>
</tr>
</tbody>
</table>
# Restaurant — Enjoyment criteria

<table>
<thead>
<tr>
<th></th>
<th>McDonalds</th>
<th>Olive Garden</th>
<th>Outback</th>
<th>Row Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>McDonalds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Olive Garden</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outback</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Tables - Prioritization Exercise

- Each table conducts a prioritization exercise on criteria of “Relaxation” for the following family vacations:
  - Camping at your favorite campground
  - Las Vegas weekend
  - Disney World or Disneyland (whichever is closest)
- Then redo the prioritization matrix for the criteria of “Expense”
- Create Summary Matrix
Tables Report Out on Prioritization Exercise
Short Break

Be Back in 15 minutes, please!
Prioritization Exercise: Wireless Voting Technology

**Benefits of the Technology:**
- Ratings are instantaneous
- Ratings are anonymous
- Use of the technology can shorten the length of time it takes to get to consensus
- Works well with large groups
- Keeps participants actively engaged

**Drawbacks of the Technology:**
- It is not as effective with small groups
- The process can be time consuming if there is a large list of items to prioritize and if the list of criteria is extensive
- On-the-spot programming can be time consuming
Prioritization Exercise: Wireless Voting Technology

• We will participate in a “mock” prioritization exercise

• You will be asked to prioritize the following issues:
  – Lack of dentists in area who accept Medical Assistance (residents having to travel outside of county)
  – High infant mortality rates
  – Highest childhood obesity rates in the state
  – Increase in teen suicide rates (increase of 25% over past 3 years)

• Each will be rated across the following two criteria:
  – Seriousness of the issue (What are the consequences if we do not address? What is the scope of the issue?)
  – Ability to impact the issue (Are we in a position to effectively make a difference and “move the needle”?)
Voting Time!!!
Prioritization Exercise: Wireless Voting Technology

Tabulating & Reviewing the Results

➢ What is the best way to tabulate the results?
  • Average ratings?
  • % of highest ratings?

➢ How do I report on the results during the meeting?
  • Matrix
  • Listing from high to low

➢ Consider having the group dictate decision-making criteria
  • Where do you “draw the line in the sand”?
  • What if the group debates the ratings or is surprised?
Prioritization: Overcoming Potential Barriers
Prioritization: Overcoming Potential Barriers

- Prioritization is skewed by those in attendance
- Attendance is less than what was expected
- Attendees do not like criteria or proposed process
- Attendees debate the outcome of the prioritization
- Certain individuals are upset that their issue is not one of the top
- New issues will arise and be suggested for consideration, even if data clearly indicates that it is not a significant issue
- The group is unwilling to make a final decision on drawing the line in the sand on top priorities
- The group takes on too many priorities
The Importance of Community Ownership

• Be strategic and representative in who participates in the prioritization
  – This will assist in helping the community embrace the results

• Be sure to balance the framework for the day with flexibility; attendees may very well throw some curveballs
  – Debate about criteria
  – Some individuals will campaign hard for “their issue”

• Always go back to the objectives and purpose of the prioritization
• Be sure to set the expectations at the very beginning
• As a facilitator of this exercise, you must be perceived as objective and not biased toward a particular issue
Ensuring Meaningful Engagement of Partners

• Have an agenda that is developed with input from others (as Steering Committee perhaps)
• Promote the meeting well in advance…get RSVPs (follow-up if needed)
• Ask for volunteers for various roles
  – Facilitator (might be public health representative)
  – Notetaker
  – Tabulator of results
• It is important for individuals to feel as if it is their process, not yours that you are forcing upon them
• Again, need to strike the appropriate balance between having a framework and flexibility
Comanche County’s Story

CHIP Planning Meeting

- Review and Discussion of Data
  - Advance material via email
  - Highlight data from featured topics

- Voting on Priority Areas
  - Three votes each
  - Top 5 selected
Highlights of our Quality Approach…. The BIG Payoff!

CHIP meeting included key officials that had been difficult to engage:

- Mayor
- City Council Members
- CEOs from both major hospitals***
- City Manager
- County Commissioner
- Representatives from every major coalition
- Representatives from outlying communities

Slide courtesy of Comanche County, OK
5 Priority Areas Selected

- Obesity
- Tobacco Use and Prevention
- Violence
- Sexual Health
- Access to Care
Local Public Health System

Slide courtesy of Comanche County, OK
Let’s Discuss!

Sites discuss which of these techniques you may want to take back and recommend for use in your prioritization processes.
What questions or comments do you have?
PROJECT REQUIREMENTS & PHAB STANDARDS AND MEASURES: ISSUE PRIORITIZATION
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.”
Address the Social Determinants of Health

- **Consider multiple determinants of health, especially social determinants** like social and economic conditions that are often the root causes of poor health and health inequities among sub-populations in their jurisdictions.

- Have a particular focus on the following:
  - …Including at least one of these issues [social determinants of health or health inequity] as a priority for community health improvement efforts in addition to other health priorities in the CHIP.
Project Requirements: Issue Prioritization

Required characteristics of the CHIP:

- Background information that does the following:
  - Briefly describes the way in which community members and LPHS partners were engaged in development of the CHIP, particularly their involvement in both the issue prioritization and strategy development.

- Priority issues section that does the following:
  - Describes the process by which the priorities were identified.
  - Outlines the top priorities for action. The priorities need to include at least one priority aimed at addressing a social determinant of health that arose as a key determinant of a health inequity in the jurisdiction.
  - Includes a brief justification for why each issue is a priority.
Project Requirements: Issue Prioritization

Required characteristics of the Community Health Improvement Process Report

- CHIP overview:
  - Describe how community members and LPHS partners were engaged in development of the CHIP, especially for **issue prioritization** and strategy development.
  - Summarize the **top priorities for action** and the **process by which these were identified**.
PHAB Requirements: Issue Prioritization

*Be sure to review the standards listed below to identify the measures and required documentation that PHAB seeks related to issue prioritization.

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

Standard 5.2: Conduct a comprehensive planning process resulting in a tribal/state/community health improvement plan
PHAB Requirements: Issue Prioritization

For example...

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

*Required documentation 1.a:* Documentation that data and information from various sources contributed to the community health assessment and how the data were obtained. [Guidance: Provide documentation that identifies and describes the community health status and areas for health improvement, the factors that contribute to health challenges…]

**Measure 5.2.1L: Completed community health improvement planning process that included…**

*Required documentation 1c:* Issues and themes identified by stakeholders in the community. [Evidence that stakeholder discussions were held and that they identified issues and themes…]

*Required documentation 1e:* A process to set community health priorities. [Evidence that participants developed a set of priority community health issues.]

**Measure 5.2.2L: Produce a community health improvement plan as a result of the community health improvement process**

*Required documentation 1.a:* Community health improvement plan dated within the last five years that includes: community health priorities…