

## Introduction

PHAB’s three prerequisites for local health departments – community health assessment, community health improvement plan, and strategic plan – are related to other documentation required by PHAB. The following tool consists of checklists for the CHA and CHIP, as well as charts that list the measures and required documentation for each prerequisite and other related measures. Consideration of these related measures throughout the documentation preparation for the prerequisites will ensure continuity throughout the health department’s application and facilitate the preparation of documentation for related measures.

Below is a list of all of PHAB’s standards and measures for local health departments. The highlighted and underlined measures are captured in this tool. Please note this document reflects PHAB’s Standards and Measures **Version 1.5**.

<u>1.1.1 T/L</u>			
<u>1.1.2 T/L</u>	3.1.1 A		
<u>1.1.3 A</u>	<u>3.1.2 A</u>	6.1.1 A	
1.2.1 A	3.1.3 A	6.1.2 A	10.1.1 A
1.2.2 A	3.2.1 A	6.2.1 A	10.2.1 A
1.2.3 A	3.2.2 A	6.2.2 A	10.2.2 A
1.2.4 L	3.2.3 A	6.2.3 A	10.2.3 A
1.3.1 A	3.2.4 A	6.3.1 A	
1.3.2 L	3.2.5 A	6.3.2 A	11.1.1 A
1.4.1 A	<u>3.2.6 A</u>	6.3.3 A	11.1.2 A
1.4.2 T/L		6.3.4 A	11.1.3 A
	4.1.1 A	6.3.5 A	11.1.4 A
2.1.1 A	4.1.2 T/L	7.1.1 A	11.1.5 A
2.1.2 T/L	4.2.1 A	7.1.2 A	11.1.6 A
2.1.3 A	4.2.2 A	7.1.3 A	11.1.7 A
2.1.4 A		7.2.1 A	11.2.1 A
2.1.5 A	5.1.1 A	7.2.2 A	11.2.2 A
2.2.1 A	5.1.2 A	7.2.3 A	11.2.3 A
2.2.2 A	5.1.3 A		11.2.4 A
2.2.3 A	<u>5.2.1 L</u>	8.1.1 T/L	
2.3.1 A	<u>5.2.2 L</u>	8.2.1 A	12.1.1 A
2.3.2 A	<u>5.2.3 A</u>	<u>8.2.2 A</u>	12.1.2 A
2.3.3 A	<u>5.2.4 A</u>	8.2.3 A	12.2.1 A
2.3.4 A	<u>5.3.1 A</u>	8.2.4 A	<u>12.3.1 A</u>
2.4.1 A	<u>5.3.2 A</u>		12.3.2 A
2.4.2 A	<u>5.3.3 A</u>	<u>9.1.1 A</u>	12.3.3 A
2.4.3 A	5.4.1 A	9.1.2 A	
	5.4.2 A	9.1.3 A	
		<u>9.1.4 A</u>	
		9.1.5 A	
		<u>9.2.1 A</u>	
		9.2.2 A	

### Community Health Assessment

PHAB’s requirements for the **community health assessment** (CHA) prerequisite are found in Standard 1.1 (Participate in or conduct a collaborative process resulting in a comprehensive community health assessment). The required documentation reflects both the process and the product. Below is a checklist that lists the required documentation and the documentation guidance for the measures that are applicable to local health departments. It may be used as a guide as a CHA is created and/or to ensure that all pieces of required documentation have been generated during the process.

✓	Community Health Assessment Components	
	Required documentation	Documentation Guidance
	Data and information from various sources contributed to the community health assessment and how the data were obtained	Include both primary and secondary data. Include both qualitative and quantitative data. Non-traditional/non-narrative data is encouraged. See PHAB guidance for examples and sources.
	Demographics of the population	Gender, race, age, socioeconomic factors, income, disabilities, mobility (travel time to work or to health care), educational attainment, home ownership, employment status, immigration status, sexual orientation, etc.
	Description of health issues and specific descriptions of population groups with particular health issues and inequities	A description of the health issues of the population and their distribution, based on the analysis of data. The description must address the existence and extent of health disparities between and among specific populations in the community or areas in the community.
	Description of factors that contribute to specific populations’ health challenges	A discussion of the contributing causes of the health challenges, for example, behavioral risk factors, environmental factors (including the built environment), socioeconomic factors, policies, injury, injury, maternal and child health issues, infectious and chronic disease, resource distribution, and the unique characteristics of the community that impact health status. Multiple determinants of health must be included. Health disparities and high health-risk populations must be addressed. Community factors that contribute to higher health risks must be considered.
	Description of existing community or Tribal assets or resources to address health issues	The assessment must include a listing or description of the assets and resources that can be mobilized and employed to address health issues. These may include other sectors.

✓	Processes related to the Community Health Assessment	
	Required documentation	Documentation Guidance
	Participation of representatives of various sectors of the Tribal or local community	Membership list and meeting attendance records
	Regular meetings or communications with partners	Meeting agenda, meeting minutes, copies of emails, reports or other documents that show meeting frequency
	The process used to identify health issues and assets	Document the collaborative process used to identify and collect data and information, identify health issues, and identify existing Tribal or local assets and resources to address health issues. The process may be an accepted national model; state-based model; a model from the public, private, or business sector; or other participatory process model. When a specific model is not used, the key steps undertaken that outline the process should be described.
	Opportunity for the Tribal or local community at large to review and contribute to the assessment	The department must provide documentation that preliminary findings of the assessment were distributed to the community at large and that the community's input was sought. Methods to seek community input include: publication of a summary of the findings in the local press with feedback or comment forms, publication on the health department's web page and website comment form, community/town forums, listening sessions, newsletters, presentations and discussions at other organizations' local meetings, etc.
	Ongoing monitoring, refreshing, and adding of data and data analysis	The department must document the gathering of information, collection of data, conduct of community dialogues, and/or identification of community assets specific to populations and/or geographic areas in the community where health inequities and poorer health indicators were identified in the community health assessment. Complete revision is not required, but for a continuous effort to better understand the health of the population through information/data collection
	Information provided to partner organizations concerning the availability of the community health assessment	Health departments must document how they inform partners, stakeholders, other agencies, associations, and organizations of the availability of the CHA.
	The availability of the community health assessment findings to the public	Health departments must document how they communicate the community health assessment results to the public.

Below is a chart that lists the measures and documentation related to the CHA. Consideration of these related measures throughout the development of the CHA will help ensure continuity throughout the health department’s application and facilitate the preparation of documentation for related measures.

<b>Standard 1.1: Participate in or conduct a collaborative process resulting in a comprehensive community health assessment</b>		
<b>Measure</b>	<b>Documentation</b>	<b>Notes on related measures</b>
1.1.1 T/L: Tribal/local partnership that develops a comprehensive community health assessment of the population served by the department	<ol style="list-style-type: none"> <li>1. Participation of representatives from a variety of sectors of the Tribal or local community</li> <li>2. Regular meetings or communications with partners</li> <li>3. The process used to identify health issues and assets</li> </ol>	
1.1.2 T/L: A Tribal/local community health assessment	<ol style="list-style-type: none"> <li>1. A Tribal or local community health assessment that includes:               <ol style="list-style-type: none"> <li>a. Data and information from various sources contributed to the community health assessment and how the data were obtained</li> <li><b>b. Demographics of the population</b></li> <li>c. Description of health issues and specific descriptions of population groups with particular health issues and inequities</li> <li>d. Description of factors that contribute to specific populations’ health challenges</li> <li>e. Description of existing community or Tribal assets or resources to address health issues</li> </ol> </li> <li>2. Opportunity for the Tribal or local community at large to review and contribute to the assessment</li> <li>3. The ongoing monitoring, refreshing, and adding of data and data analysis</li> </ol>	<p>Related to demographic data:</p> <p>3.2.6 A 1. Demographic data regarding ethnicity and languages spoken in the community</p> <p>8.2.2 A 2. Recruitment of individuals who reflect the population served</p>

<p>1.1.3 A: Accessibility of the community health assessment to agencies, organizations, and the general public</p>	<p>1. Information provided to partner organizations concerning the availability of the community health assessment</p>	<p>Related to distribution of the community health assessment:</p> <p>12.3.1A – guidance 1. The health department must document communications with the governing entity regarding important public health issues and/or recent actions of the health department. Important public health issues include a population’s health status, health indicators, health equity and disparities, disease outbreaks, environmental health hazards, etc. Documentation could be reports, testimonies, formal meeting minutes, meeting summaries, program updates, reports on identified public health hazards, <b>community health assessment findings</b>, community dashboards, outbreak and response efforts, annual statistical reports, or other written correspondence (memos, emails)</p>
	<p>2. The availability of the community health assessment findings to the public</p>	

### Community Health Improvement Plan

PHAB’s requirements for the **community health improvement plan** (CHIP) prerequisite are found Standard 5.2 (Conduct a comprehensive planning process resulting in a tribal/state/community health improvement plan). The required documentation reflects both the process and the product. This tool lists the required documentation and a summary of the documentation guidance for the measures that are applicable to local health departments, and may be used as a guide as a CHIP is created and/or to ensure that all pieces of required documentation have been generated during the process.

✓	Processes related to the Community Health Improvement Plan	
	Required documentation	Documentation Guidance
	Community health improvement planning process that includes:	The process may be an accepted state or national model; a model from the public, private, or business sector; or other participatory process model.
	Broad participation of community partners	This can be documented through participant lists, attendance rosters, minutes, or work groups or subcommittees.
	Information from community health assessments	This may include a list of data sets or evidence that participants used the community health assessment.
	Issues and themes identified by stakeholders in the community	Evidence that stakeholder discussions were held and that they identified issues and themes. The list of issues must be provided as documentation.
	Identification of community assets and resources	Evidence that stakeholder discussions were held and that they identified issues and themes. The list of issues must be provided as documentation.
	A process to set health priorities	Evidence that participants developed a set of priority community health issues.
	Implementation of the plan, in partnership with others, including:	
	Process to track actions taken to implement strategies in the plan	Must specify the strategies being used, the responsible partners involved, and the status of the effort or results of the actions taken. Documentation could be narrative table, spreadsheet, or combination
	Examples of plan implementation	Examples must identify a specific achievement and describe how it was accomplished
	Evaluation reports, including:	Annual evaluation reports on progress in implementing the CHIP that includes:
	Progress related to health improvement indicators	Description of the progress made on health indicators as defined in the plan. Must consider feasibility and the effectiveness of the strategies, etc. If the plan is new, a report of a previous plan may be provided or detailed plans for assessment and reporting may be submitted
	Review and revision, as necessary, of the health improvement plan strategies based on results of the assessment	Document that the health improvement plan has been reviewed and revised as necessary based on the reports required. Revisions may be in the improvement strategies, planned activities, time-frames, targets, or assigned responsibilities.

✓	Community Health Improvement Plan Components	
	Required documentation	Documentation Guidance
	Desired measurable outcomes or indicators of health improvement and priorities for action	Community health priorities, measurable objectives, improvement strategies and activities with measurable and time-framed targets that were determined in the planning process. In establishing priorities, the plan must include consideration of addressing social determinants of health, causes of higher health risks and poorer health outcomes of specific populations, and health inequities. Strategies may be evidence-based, practice-based, or promising practices or may be innovative to meet the needs of the community. National state-of-the-art guidance should be referenced, as appropriate.
	Policy changes needed to accomplish health objectives	Policy changes needed to accomplish the identified health objectives must be included in the plan.
	Individuals and organizations that have accepted responsibility for implementing strategies	Designation of individuals and organizations that have accepted responsibility for implementing strategies outlined in the community health improvement plan. This may include assignments to staff or agreements between planning participants, stakeholders, other local governmental agencies, or other community organizations. For this measure, agreements do not need to be formal, such as an MOA/MOU.
	Consideration of state and national priorities	LHDs must demonstrate that they considered both national and state health improvement priorities where they have been established.

Below is a chart that lists the measures and documentation related to community health improvement planning. Consideration of these related measures throughout the development of the CHIPA will help ensure continuity throughout the health department’s application and facilitate the preparation of documentation for related measures.

<b>Standard 5.2: Conduct a comprehensive planning process resulting in a Tribal/state/community health improvement plan.</b>		
<b>Measure</b>	<b>Documentation</b>	<b>Notes on related measures</b>
5.2.1 L: A process to develop community health improvement plan	1. Community health improvement planning process that included: <b>a. Broad participation of community partners</b> b. Information from community health assessments c. Issues and themes identified by stakeholders in the community d. Identification of community assets and resources e. A process to set community health priorities	Potentially related to the community health improvement process:  9.1.4 A - guidance 1. Using a <b>broad, customer/stakeholder identification list developed as part of a strategic planning or health improvement planning process</b> , the health department must document how customer/stakeholder feedback was collected, analyzed, and conclusions drawn from two types of customers
5.2.2L Community health improvement plan adopted as a result of the community health improvement planning process	1. Community health improvement plan that includes: a. Desired measurable outcomes or indicators of health improvement and <b>priorities</b> for action b. Policy changes needed to accomplish health objectives c. Individuals and organizations that have accepted responsibility for implementing strategies d. Consideration of state and national priorities	<u>Related to community health improvement plan in general:</u> 5.3.2A – guidance 1g. <b>[The strategic plan must include] linkages with the health improvement plan</b> and the health department’s quality improvement plan. The strategic plan need not link to all elements of the health improvement plan or quality improvement plan, but it must show where linkages are appropriate for effective planning and implementation.  <u>Related to community health priorities:</u> 3.1.2 A Several components required in this measure to address health priority mirror strategies and components of the CHIP process

<p>5.2.3 A: Elements and strategies of the health improvement plan implemented in partnership with others</p>	<p>1. A process to track actions taken to implement strategies in the community health improvement plan 2. Implementation of the plan</p>	
<p>5.2.4 A: Monitor and revise as needed, the strategies in the community health improvement plan in collaboration with broad participation from stakeholders and partners</p>	<p>1. Reports on progress made in implementing strategies in the community health improvement plan 2. Review and revision, as necessary, of the health improvement plan strategies based on results of the assessment</p>	

### Strategic Plan

PHAB’s requirements for the **strategic plan** prerequisite are found in Standard 5.3 (Develop and implement a health department organization strategic plan). The required documentation reflects both the process and the product. Below is a checklist that lists the required documentation and the documentation guidance for the measures that are applicable to local health departments. It may be used as a guide as a strategic plan is created and/or to ensure that all pieces of required documentation have been generated during the process. Consideration of these related measures throughout the development of the strategic plan will help ensure continuity throughout the health department’s application and facilitate the preparation of documentation for related measures.

<b>Standard 5.3: Develop and implement a health department organizational strategic plan.</b>		
<b>Measure</b>	<b>Documentation</b>	<b>Related Measures</b>
5.3.1 A: Department strategic planning process	1. Use a planning process to develop the organization’s strategic plan: <b>a. Membership of the strategic planning group</b> <b>b. Strategic planning process steps</b>	Potentially related to the membership of the strategic planning group: 9.1.4 A - guidance 1. Using a <b>broad, customer/stakeholder identification list developed as part of a strategic planning or health improvement planning process</b> , the health department must document how customer/stakeholder feedback was collected, analyzed, and conclusions drawn from two types of customers
5.3.2 A: Adopted department strategic plan	1. Health department strategic plan that includes: a. Mission, vision, guiding principles/values b. Strategic priorities c. Goals and objectives with measurable and time-framed targets d. Consideration of key support functions required for efficiency and effectiveness e. Identification of external trends, events, or factors that may impact community health or the health department f. Assessment of health department strengths and weaknesses <b>g. Link to the health improvement plan and quality improvement plan</b>	Related to the strategic plan in general:  9.2.1A – Describe and demonstrate how the improvement projects align with the health department’s strategic vision/mission  Potentially related to the strategic plan in general:  9.1.1A –The health department must document leadership’s engagement in setting a policy for and/or establishing a performance management system for the department. <b>Documentation could be, for example, strategic and operational plans...</b>
5.3.3 A: Implemented department strategic plan	1. Progress towards achievement of goals and objectives contained in the plan	