City of Carson City Agenda Report

Date Submitted: March 8, 2011 Agenda Date Requested: March 17, 2011 Time Requested: 15 Minutes To: Carson City Board of Health From: Health & Human Services (Marena Works) Subject Title: Review of the results from the local public health system performance assessment conducted in September and December of 2010. Staff Summary: Two community meetings were held in September and December of 2010 to conduct a local public health performance assessment. This priority list is being provided to the board as information only. Type of Action Requested: (check one) (____) Resolution () Ordinance () Formal Action/Motion (X) Other (Specify) Information Only Does This Action Require A Business Impact Statement: () Yes (X) No Recommended Board Action: Information Only. Explanation for Recommended Board Action: No Action Required Applicable Statue, Code, Policy, Rule or Regulation: N/A Fiscal Impact: N/A Explanation of Impact:N/A Funding Source: N/A Alternatives: **Supporting Material:** Prepared By: Marena Works, MSN, MPH, RN Reviewed By: Marena Dunks Date: 3-9-1/

	(Department Head) (City Manager) (District Attorney) (Finance Director)	ionat.	Date:	3/8/4 19/11
Board Action	Taken:			
Motion:				Aye/Nay
(Vote Reco	rded By)			

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

Standard	Rating	Activities
Population-Based Community Health Profile (CHP)	Optimal/Significant	Participants felt there was OPTIMAL LPHS activity regarding: Conducting a Community Health Assessment Community Health Assessment being updated at least every 3 years Using Community Health Assessment data to monitor progress toward health-related objectives
	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: Comparing Community Health Assessment to other representative areas Using Community Health Assessment data to track trends over time
	Moderate	None
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: Compiling data from the Community Health Assessment(s) into a Community Health Profile (CHP) Identifying the organizations/individuals responsible for contributing data to produce the CHP Each contributor having access to the completed CHP Promoting community-wide use of data Placing a media strategy to promote community-wide use of CHP Providing easy access of the information to the general public Using the CHP to inform health policy/planning decisions to organizations in the LPHS
Current	Optimal/Significant	None
Technology to	Moderate	None
Manage and Communicate Population Health Data	Minimal	Participants felt there was MINIMAL LPHS activity regarding: • 'State-of-the-art' available to support a health profile database • Utilizing technology to make community health data available electronically • Using computer-generated graphics to identify trends and/or compare data
	No Activity	Participants felt there was NO LPHS activity regarding: LPHS having access to geocoded health data Using geographic information systems (GIS)
Maintenance of	Optimal	None
Population Health Registries	Significant/Moderat e	Participants felt there was SIGNIFICANT LPHS regarding: Contributing to one or more population health registries Maintaining standards for data collection
	Moderate	Participants felt there was MODERATE LPHS regarding: • Establishing processes for reporting health events to the registries • Using information from one or more population health registries in the past year
	Minimal	None

Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards in the Community

Standard	Rating	Activities
Identification and Surveillance of Health Threats	Optimal	Participants felt there was OPTIMAL LPHS activity regarding: Integrating system with national/state systems Using surveillance systems to monitor changes in the occurrence of health problems
	Significant	None
	Moderate	Participants felt there was MODERATE LPHS activity regarding: Participating in surveillance system designed to monitor health problems and identify health threats Having system compliant with national/state health information exchange guidelines Health professionals report disease information in a timely manner to public/state health
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: • Have necessary resources to support health problem and health hazard surveillance and investigation activities • Using information technology for surveillance activities • Having Masters/Doctorate level epidemiologists and/or statisticians to asses/analyze public health hazards
Investigation and Response to Public Health Threats and Emergencies	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: Have current epidemiological case investigation protocols to guide immediate investigations of public health emergencies Designating an individual to serve as an Emergency Response Coordinator within the jurisdiction Coordinating with the local health department's emergency response personnel and local community leaders Evaluating public health emergency response incidents for effectiveness and opportunities for improvement
	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding:
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Having the capacity to mobilize volunteers during a disaster
	Minimal	None
Laboratory Support for Investigation of Health Threats	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: Maintaining ready access to laboratories capable of meeting routine diagnostic and surveillance needs Have ready access to laboratory services to support investigations of public health threats, hazards, and emergencies Only utilizing laboratories that are licensed and/or credentialed Maintain current protocols and guidelines for handling laboratory supplies

Standard	Rating	Activities
Laboratory Support for Investigation of Health Threats cont'd	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: • Have access to laboratory services to support these investigations within four hours of notification • Have access to at least on microbiology lab within four hours of notification
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Having the capacity to mobilize volunteers during a disaster
	Minimal	None

Essential Service 3: Inform, educate, and empower people about health issues.

Standard	Rating	Activities
Health Education and Promotion	Optimal / Significant	Participants felt there was OPTIMAL LPHS activity regarding: • Working with advocates and the media to publicize activities
	Significant Significant /Moderate	Participants felt there was SIGNIFICANT LPHS activity regarding: Conducting health education and promotion campaigns The campaigns were based on sound theory and best practices Campaigns were designed to support healthy behaviors Campaigns were tailored for populations with higher risk of negative outcomes Campaigns reached populations in specific settings Ongoing evaluation of health education/promotion activities Entities working with local advocates / media to publicize activities Organizations working together on specific health promotion activities
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Providing the public, policymakers and stakeholders with information on community health • Organizations working together to plan activities
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: Providing information on community health status, i.e., heart disease rates, cancer rates, environmental risks, etc. Providing information on community health needs, such as those identified by community members or through a needs assessment tool
Health Communication	Optimal	Participants felt there was OPTIMAL LPHS activity regarding: Individuals were identified and designated to provide health information and answer public media inquiries
	Significant Significant /Moderate	Participants felt there was SIGNIFICANT LPHS activity regarding: Establishing and utilizing relationships with the media Policies and procedures in place to route media inquiries There's a mechanism in place to document and respond to public inquiries Coordinating with the media to develop information on health issues Spokespersons are adequately trained to provide accurate, timely and appropriate information on health issues for different audiences Adequate policies / procedures to coordinate responses/announcements to health issues Guidance for creating targeted public health messages using various channels
Health	Moderate	Participants felt LPHS communications plans MODERATELY:

Standard	Rating	Activities
Communication cont'd		 Included policies / procedures for creating, sharing and disseminating information with partners and key stakeholders Identified different sectors of the population to target messages for various audiences Included guidance for developing content and material to the type of dissemination channel
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: Organizations had developed health communication plans Organizations work collaboratively to link communications plans
Risk Communication	Optimal	Participants felt there was OPTIMAL LPHS activity regarding: Development of emergency communications plans adapted to different emergencies Plans included procedures for interagency coordination dependent upon the type of emergency Plans established lines of authority, reporting and responsibilities for emergency communications teams in accordance with NIMS Technological capacity (telephone, electronic and print) to respond to communication needs
	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: Guidelines for providing necessary information from emergency operations center situation reports, health alerts, meeting notes to stakeholders, partners and the community Adequate resources to ensure rapid communications response Available staff to develop /adapt emergency communications material and provide to stakeholders in the event of an emergency Providing crisis /emergency communications training for new/current staff Having policies/procedures to ensure rapid mobile response by public information officers Providing communication "go-kits"
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Procedures for alerting communities/special populations on possible health threats • Maintaining a directory of emergency contact information for media liaisons, partners, stakeholders and PIOs
	Minimal	None

Essential Service 4: Mobilize community partnerships to identify and solve health problems.

Standard	Rating	Activities
Constituency Development	Optimal	Participants felt there was OPTIMAL LPHS activity regarding: • Supporting volunteers to help in community health improvement activities and projects through recruitment, promotion and retention opportunities

Standard	Rating	Activities
Constituency Development cont'd	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: • A process for identifying key constituents/stakeholders • Identifying new individuals/groups for constituency building • Identifying key constituents for general health issues • Encouraging participation of constituents in improving community health • Encouraging constituents from the community-at-large to identify community issues • Maintaining a current directory of organizations that comprise the LPHS • Using communication strategies to build awareness of the importance of public health
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Maintaining a current list of the names and contact information for individuals and key constituent groups • Identifying key constituents for specific health concerns • Existence of communication strategies for facilitating communication among organizations
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: • Making the directory of organizations that comprise the LPHS accessible
Community	Optimal	None
Partnerships	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: Building partnerships in the community to maximize public health improvement activities Exchange of information by organizations within these partnerships Optimizing resources to deliver Essential Public Health Services Sharing responsibilities to deliver Essential Public Health Services Inclusion of a broad representation of the community, such as governmental entities, hospitals, primary care physicians, social services providers, civic, professional and faith-based organizations, etc.
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Exchange of information by organizations within these partnerships • Conducting collaborative decision-making action
	Minimal / No Activity	Participants felt there was MINIMAL LPHS activity regarding: • Establishing a broad-based community health improvement committee • Actions that the committee should undertake, such as a health assessment, health improvement plan, monitoring and evaluating progress, leveraging community resources and meeting on a regular basis • Reviewing the effectiveness of community partnerships and strategic alliances, including an assessment of participation in solving health problems, information on the satisfactions of constituents with partnerships efforts, identification of actions to improve the partnership process/capacity, and implementation of actions recommended to improve the partnership process

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

Standard	Rating	Activities
Governmental	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding:
Presence at the Local Level		LPHS including a governmental local public health presence
		 Local Health Department working with state health agency and other state partners to assure the provision of public health services
	Significant	Participants felt that there was SIGNIFICANT LPHS activity regarding: Maintain documentation maintaining its mission and describing its statutory, chartered, and/or legal responsibilities Assure the availability of resources for the local health department's contributions to the Essential Public Health Services
	Moderate	None
	Minimal	None
Public Health Policy Development	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: Contributing to the development of public health policies Engaging Constituents in identifying and analyzing issues Advocate for prevention/protection policies for those in the community who bear a disproportionate risk for mortality/morbidity Within the past year, LPHS involvement in activities that influenced or informed the public health policy process
	Significant	Participants felt that there was SIGNIFICANT LPHS activity regarding: • Alerting policymakers and the public of public health impacts from current and/or proposed policies
	Significant/Moderat e	Participants felt that there was MODERATE LPHS activity regarding: Reviewing public health policies at least every three years
	Minimal	None
Community	Optimal	None
Health	Significant	None
Improvement Process and Strategic Planning	Moderate	Participants felt that there was MODERATE LPHS activity regarding: Establishing a community health improvement process Broad participation in the community health improvement process Including issues and themes identified by the community in the community health improvement process Including the identification of community assets and resources in the community health improvement process Prioritization of community health issues in the community health improvement process Including the development of measurable health objectives in the community health improvement process Developing a community health improvement plan Conducting a strategic planning process
	Minimal	Participants felt that there was MINIMAL LPHS activity regarding: • Using an established tool such as MAPP or PACE-EH with the community health improvement process

Standard	Rating	Activities
Community Health Improvement Process and Strategic Planning cont'd	Minimal	 Including community health assessments in the community health improvement process Developing strategies to address community health objectives Identifying the individuals/organizations accountable for the implementation of community health strategies
Plan for Public Health Emergencies	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: Maintaining an all-hazards emergency preparedness and response plan Identifying within the emergency response plan the public health disasters and emergencies that might trigger its implementation Aligning the emergency response plan with existing plans, protocols and procedures for emergency response within the community Outlining protocols and standard operating procedures for emergency response
	Significant/Optimal	Participants felt that there was SIGNIFICANT LPHS activity regarding: • Participating in a task force of community partners to develop and maintain local/regional emergency preparedness and response plans • Testing the All-Hazards plan through simulations of one or more "mock events" within the past two years
	Significant	Participants felt that there was MODERATE LPHS activity regarding: • Including broad LPHS representation in task force participation
	Moderate/Minimal	None Participants felt that there was NO LPHS activity regarding:
	No Activity	Reviewing and revising of the All-Hazards plan within the past two years

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

Standard	Rating	Activities
Review and Evaluation of Laws, Regulations, and Ordinances	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: Identifying local public health issues that can only be addressed through laws, regulations, and ordinances Maintaining knowledge about federal, state, and local laws, regulations, and ordinances that protect the public's health
	Significant	Participants felt that there was SIGNIFICANT LPHS activity regarding: Reviewing the laws, regulations, and ordinances that protect the public's health Having access to legal counsel to assist with the review of laws, regulations, and ordinances related to public's health
	Moderate	None
	Minimal	None
Involvement of	Optimal	None
Laws, Regulations, and Ordinances	Significant	Participants felt that there was SIGNIFICANT LPHS activity regarding: Identifying local public health issues that are not adequately addressed through existing laws, regulations and ordinances Providing technical assistance to legislative, regulatory, or advocacy groups for drafting proposed legislation, regulations or ordnances

Standard	Rating	Activities
Involvement of Laws, Regulations cont'd	Moderate/Significan t	Participants felt that there was MODERATE LPHS activity regarding: • Participating in the development/modification of laws, regulations, and ordinances for public health issues, in the past five years
	Moderate	None
Enforcement of Laws, Regulations and Ordinances	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: Ability to enforce laws, regulations, or ordinances related to public health Ability to implement necessary community interventions in the event of a public health emergency through laws and regulations Assure that all enforcement activities are conducted in accordance with applicable laws, regulations, and ordinances Assessing, in the past five years, the compliance of institutions and businesses in the community with laws, regulations and ordinances designed to ensure public health
	Significant	Participants felt that there was SIGNIFICANT LPHS activity regarding: • Providing information about public health laws, regulations, and ordinances to the individuals who are required to comply to them • Integrating this information with other public health activities
	Moderate	None
	Minimal	None

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

Standard	Rating	Activities
Identification of Personal Health Service Needs of Populations	Significant/Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: Assessing the extent to which personal health services in its jurisdiction are available to populations who may experience barriers to care Assessing the extent to which personal health services are utilized by populations who may experience barriers to care
	Significant	Participants felt that there was SIGNIFICANT LPHS activity regarding: Identifying any populations who may experience barriers to personal health services Identifying the personal health services needed of populations in its jurisdiction Identifying populations who may experience barriers to care
	Moderate	None
	Minimal	None
Assuring the	Significant/Optimal	None
Linkage of People to Personal Health Services	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: Providing assistance to vulnerable populations in accessing needed health services Providing assistance that includes culturally and linguistically appropriate staff to assist population Providing assistance that includes culturally and linguistically appropriate materials
	Significant	

Standard	Rating	Activities
Assuring the Linkage of People to Personal Health Services cont'd		 Providing assistance that includes transportation services for those with special needs Having initiatives to enroll eligible individuals in public benefit programs such as Medicaid, and/or other medical or prescription assistance programs
	Moderate/Significan t	Participants felt there was MODERATE LPHS activity regarding: • Linking populations to needed personal health services • Coordinating with the delivery of personal health and social services to optimize access to services for populations who may encounter barriers to care
	Minimal	None

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

Standard	Rating	Activities
Workforce Assessment, Planning and Development	Optimal	None
	Significant	None
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Identification of shortfalls and/or gaps within the LPHS — gaps identified related to both workforce composition and to workforce size
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: Identifying gaps related to workforce skills and/or experience
	No Activity	Participants felt there was NO LPHS activity regarding: • An assessment conducted within the last 3 years • Identification of recruitment and retention shortfalls • Use of knowledge of gaps to develop plans to address workforce gaps • Implementation of plans for corrections of gaps by the LPHS organizations • A formal process to evaluate effectiveness of plans to address workforce gaps
Public Health Workforce Standards	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: • Awareness of guidelines and/or licensure/certifications requirements by organizations within the LPHS — Compliance with the guidelines • Development of written job standards • Organizations within the LPHS conducting annual performance evaluations • The LHD developing written job standards and/or position descriptions • The LHD conducting performance evaluations
	Significant	• None
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Periodic review of standards and/or position descriptions
	Minimal	None
Life-long Learning through Continuing Education, Training and Mentoring	Optimal	Participants felt that there was OPTIMAL LPHS activity regarding: • Provision of refresher courses for key public health issues by the LPHS
	Significant	Participants felt that there was SIGNIFICANT LPHS activity regarding: • Identification of education and training needs to encourage opportunities for workforce development
		Encouragement of workforce development through:

Standard	Rating	Activities
Life-long Learning through Continuing Education, Training cont'd	Significant	distance learning, attendance at conferences, staff cross-training Workforce incentives to participate in education and training experiences Dedicated resources for training and education
	Moderate	Participants felt there was MODERATE LPHS activity regarding: Opportunities for interaction between LPHS staff and faculty from academic/research institutions
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: Opportunities for all personnel to develop core public health competencies Training opportunities that include an understanding of the Essential Public Health Services
	No Activity	Participants felt there was NO LPHS activity regarding: • Training opportunities that include an understanding of the multiple determinants of health to develop more effective public health interventions • Training opportunities in cultural competence
Public Health	Optimal	None
Leadership Development	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: • Promoting the development of leadership skills • Encouraging formal leadership training for potential leaders • Promotion of collaborative leadership through a shared vision and participatory decision-making
	Moderate	Participants felt there was MODERATE LPHS activity regarding: Mentoring personnel in supervisory/middle management positions Promoting leadership at all levels within LPHS organizations Establishing ongoing financial resources t o support leadership development Leadership opportunities for individuals and organizations in areas where they can capitalize on their expertise and experience Recruitment and retention of new leaders representative of the community's population diversity Opportunities to develop community leadership through coaching and mentoring
	Minimal	None

Essential Service 9: Evaluate effectiveness, accessibility, and quality of personal and population-based health services.

Standard	Rating	Activitles
Evaluation of Population-based Health Services	Optimal	None
	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: • Evaluation of population-based health services in the last three years • Evaluation determines the extent to which program goals are achieved • Organizations within the system use the results of population-based health services evaluation in the development of strategic and operational plans
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Established criteria are used to evaluate population-based health services • Assessment of community satisfaction with population-based health services
Evaluation of	Moderate	 The assessment identifies where population-based health services can be improved and identifies gaps in the provision of population-based health

Standard	Rating	Activities
Population-based Health Services cont'd		services
	Minimal	Participants felt there was MINIMAL LPHS activity regarding the assessment: Gathering input from residents representing a cross-section of the community Determining if residents' needs are being met Determining residents' satisfaction with responsiveness to their complaints and concerns regarding of population-based health services
Evaluation of Personal Health Services	Optimal	Participants felt there was OPTIMAL LPHS activity regarding: • Specific personal health services in the community evaluated against established standards
	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: • Evaluation of personal health services in the last three years • Assessment of client satisfaction with personal health services • Use of information technology to assure quality of personal health services • Organizations use of electronic health records
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • The assessment of access to personal health services • Assessment of the quality and effectiveness of personal health services
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: • Ensuring that clients surveyed in the assessment of personal health services were representative of past, current and potential users of services • Use of information technology to facilitate communication among providers • Organizations within the system use the results of personal health services evaluation in the development of strategic and operational plans
Evaluation of the	Optimal	None
Local Public Health System	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: • Identification of community organizations or entities that contribute to the delivery of the Essential Public Health Services
	Moderate	None
	Minimal	None
	No Activity	Participants felt there was NO ACTIVITY by the LPHS activity regarding: • Conducting an evaluation every 3 to 5 years of the public health system

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

Standard	Rating	Activities
Fostering Innovation	Optimal	None
	Significant	Participants felt there was SIGNIFICANT LPHS activity regarding: • Identification of and staying current with best practices
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • LPHS organizations encouraging staff to develop new solutions to community health problems
	Minimal	Participants felt there was MINIMAL LPHS activity regarding LPHS organizations:
Fostering Innovation cont'd	Minimal	 Providing time and resources for staff to pilot test and conducts studies to determine new solutions Proposing public health issues agenda items to research organizations Encouraging community participation in the development or implementation



Standard	Rating	Activities
		of research
Linkage with Institutions of Higher Learning and/or Research	Optimal	None
	Significant	None
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • Developing relationships with institutions of higher learning and/or research organizations • Encouraging collaboration between the academic and practice communities
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: • Partnering with at least one institution of higher learning an/or research organization to conduct research related to the public's health
Capacity to	Optimal	None
Initiate or Participate in Research	Significant	None
	Moderate	Participants felt there was MODERATE LPHS activity regarding: • LPHS access to resources to facilitate research • Dissemination of research findings by the LPHS
	Minimal	Participants felt there was MINIMAL LPHS activity regarding: • LPHS access to researchers (either on staff or through other arrangements) • Evaluation of its research activities by the LPHS, including evaluation of: the development, implementation, impact on public health practice, and involvement of community representatives

LOCAL PUBLIC HEALTH SYSTEM PERFOMANCE ASSESSMENT SUMMARY -2011

Short Summary

In late 2010 an assessment of our local public health system was conducted using a standardized instrument developed by the Centers for Disease Control. Representatives of over fifty Carson City agencies and interest groups were invited to two days of meetings. The results of the assessment are presented below and are organized according to national guidelines for public health. These guidelines are termed Essential Health Services and represent the basic principles of public health.

The assessment was conducted as an open forum. Participants were asked their opinions of how well our community met the standards of each of the ten Essential Services. They were reminded that the Local Public Health System (LPHS) did not consist of just the health department or just the local hospital but included the contributions of all of their agencies as well as other health-related activities that they might each be aware of.

Those of you who participated in our Governance Assessment last fall will recognize the format. Both assessments are based on the same ten essentials of public health but with a different emphasis based on the role each plays. Our governance assessment has resulted in a number of improvements in the type and quality of information we receive as the board of health allowing us to govern more effectively. This assessment of the LPHS was a direct offshoot of the Board's need for more information about the state of health and health services in Carson City.

We at the health department have reviewed the results and are proud of the efforts our community has made to make this a healthier city for its citizens. But, as the report also points out, there is room for improvement. The following is a brief summary of the initial steps we believe would lead to a more cohesive and better organized system as well as avoid duplication of services among agencies. We hope to develop a list of 'health priorities' for Carson City that all the local public health agencies can use as goals for their own efforts.

<u>Essential 5-Develop Policies and Plans that Support Individual and Community Health Efforts</u> (Governance Essential 5-same)

- a. One of the objectives of the Task Force, after initial data collection, could be to include the issues and themes identified in the community as well as prioritize them and help develop a community health improvement plan.
- b. Review and revise an All-Hazards plan-this would involve various city agencies. Report ultimately should go to CCBOH and be available to public.

<u>Essential 6- Enforce laws and regulations that protect health and ensure safety.</u>
(Governance Essential 6-oversight of enforcement of public health laws and regulations.)

a. Continue current efforts. Participants did not identify any weaknesses in this area.

<u>Essential 7-Link people to needed personal health services and assure the provision of health cre when otherwise unavailable.</u>

(Governance Essential 7-same)

a. Continue current efforts. Participants did not identify many weaknesses in this area.

<u>Essential 8-Assure a competent public and personal health care workforce.</u> (Governance Essential 8-oversight of public health workforce issues.)

 Include WNC rep on Task Force. Explore possible relationship between UNR School of Community Health (Public Health) and city for mutual training and educational opportunities.

<u>Essential 9-Evaluate effectiveness, accessibility and quality of personal and population-based health services.</u>

(Governance Essential 9-Oversight and evaluation for personal and population-based health services.)

- a. Include additional members of community on Task Force to represent a variety of users of services. These might include high school students, WNC students, those who attend activities at the Senior Center and those who receive services at the CCHHS clinics.
- b. conduct an assessment of the LPHS every 3-5 years.

<u>Essential 10-Research for new insights and innovate solutions to health problems.</u> (Governance Essential 10-oversight of public health innovation and research)

a. Partner with UNR School of Community Health Sciences.

b. Include WNC rep on Task Force.