

# HEALTH PRIORITY IDENTIFICATION TOOLKIT



## Introduction

A health priority is a principal healthcare direction that takes into account established as well as emergent health care needs. Health priority identification (HPI) is an essential undertaking for an Urban Indian Health Organization (UIHO) to better understand and meet those established and emergent needs of the urban American Indian/Alaska Native (AI/AN) population. This HPI toolkit highlights methods that are effective in eliciting HPI from not only the urban AI/AN community you serve, but also from your community partners, your own staff and from your Electronic Health Record (EHR) system or annual chart audit.

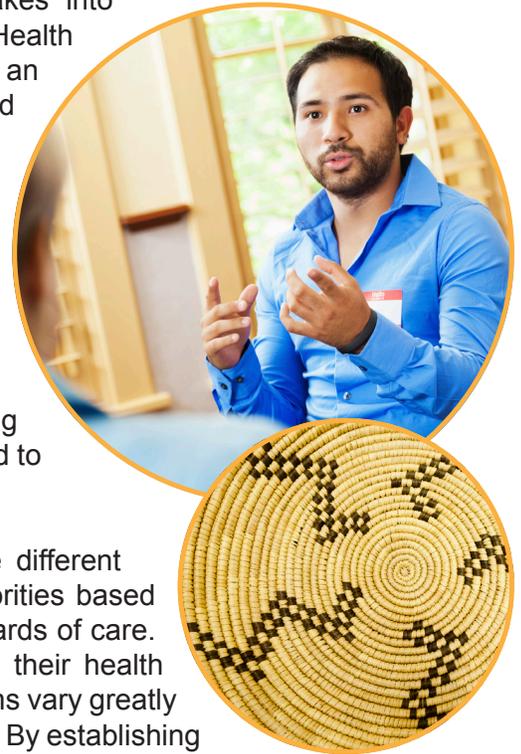
HPI can help a UIHO direct resource allocation throughout their service delivery profile as well as guide future service planning when considering program development. HPI can also be used to inform organizational strategic planning exercises.

Various funding agencies you interact with may emphasize different health priorities. Federal agencies have identified health priorities based on their agency goals, new policies and/or established standards of care. Federal agencies provide funding mechanisms aligned with their health priorities, as do private foundations. These funding mechanisms vary greatly and can be difficult to navigate (see [Funding Resource Guide](#)). By establishing a ranked list of health priorities your UIHO can organize which areas of program expansion and change are needed both to serve your population and position your organization to maximize access to changing resources. With an established set of health priorities, you can make a clear argument for program funding supported by actionable data. Building a strong argument with quality data is paramount when communicating with funding agencies.

There are several ways in which a UIHO can achieve HPI. Because this toolkit is designed for the use of UIHOs, we are working on some assumptions. They are:

1. You have established a mission statement, a value statement as well as identified organizational goals, objectives and strategies.
2. You have a service delivery profile tailored to the urban AI/AN population in your service delivery area.
3. You have experience with accessing the opinions of your urban AI/AN clients.

To guide the HPI process, the following sections cover relevant topic areas with accompanying resource links. The sections were designed with the purpose of a general introduction to HPI planning for UIHO administrative considerations. They are categorized as Needs Assessment, Survey Methods, Next Steps, Other Resources and UIHI Resources.



HPI TOOLKIT

## Needs Assessment

A needs assessment is in essence an analysis of the gap between the way things are now and the way you want them to be. A needs assessment is diverse in its intention. This toolkit focuses on using assessments to achieve HPI. For HPI development, use the needs assessment to ask what your urban AI/AN community health needs are and whether or not your UIHO is providing for these needs. This is a simplified description of what can be a very complex undertaking, but a healthcare needs assessment is a way to address a blanket question of service needs to any scale of your health care safety net system. This toolkit starts from a description of the smallest scale needs assessment, goes through increasingly involved assessments and ends with the most comprehensive needs assessment.

1. *Organizational Needs Assessment.* Starting on the smallest scale, you can first inquire within your own organization. Investigate where the majority of your resources are being allocated and identify what service need is being utilized most in your organization. Then analyze your organization's capacity to address the growing or highly reoccurring health needs. This organizational examination is achieved by analyzing the data you already collect through your EHR system, or if you do not currently have an EHR system, your annual chart audit. From this data, you can elicit for both AI/AN and total clients' needs to answer these questions:

- a. What health services were most utilized in the past year?
- b. How many follow-up visits occurred per condition?
- c. Is there a difference in AI/AN vs. non AI/AN service needs?
- d. How many referrals were issued and for what conditions?

After collecting these data, conduct a general inquiry of your own service providers and their support personnel regarding their perceived and experienced areas of increasing demand and possible gaps in your service delivery profile to meet those demands. Together, clinic data and information provided by your service staff and the trends identified will ultimately inform your HPI list.

Suggested Resources:

1. "Organizational Development Workbook for Faith-Based and Community Non-Profits"
  - a. Organizational needs assessment information guide:  
<http://cle.osu.edu/wp-content/uploads/Organizational-Development-Workbook.pdf>
  - b. Accompanying material and worksheets (see first 11 links):  
<http://cle.osu.edu/wp-content/uploads/>

2. *Community Informed Needs Assessment.* This needs assessment is much more complex and requires thorough planning because of your interaction with community members. There are two ways to conduct a community needs assessment. They can be undertaken concurrently, in succession or independently to inform your HPI list. The first method is to host a community gathering (commonly known as a community visioning) and the other method is to survey your clients. Both methods require dedicated staff, but in different capacities.

- a. The Community Gathering assessment is achieved by bringing those community members most impacted by your services together in a common place where they are encouraged to comment on topics designed to elicit your HPI list. This requires dedicated staff to define the 'community,' plan a community outreach event, organize communication and media use, facilitate the meeting, record participant comments, and synthesize and summarize results. To design an effective outreach event to collect the information you need, brainstorm questions and discussion guides that elicit the health priorities from group members with varied ideologies, philosophies and needs. This process is qualitative in nature and requires interpretation. Have several staff from multiple departments and

backgrounds attend and help with the HPI elicitation as well as with recording or note taking.

b. Using a community survey will generate your HPI list through collecting and analyzing responses from your urban AI/AN clients using common survey techniques. You will need dedicated staff to design the survey to not only test the questions for readability and understanding, but whether the question format will capture the data you need. Your staff will also need to design or choose a survey collection method to suit the needs of your organization. Generally, survey collection can be done in person, over the phone, through the mail, online or a combination of these methods.



#### Suggested Resources:

1. “A Community Needs Assessment Guide: A Brief Guide on How to Conduct a Needs Assessment”

a. Guide detailing a combination method of community focus groups informing survey creation:

[http://www.luc.edu/curl/pdfs/A\\_Community\\_Needs\\_Assessment\\_Guide\\_.pdf](http://www.luc.edu/curl/pdfs/A_Community_Needs_Assessment_Guide_.pdf)

2. “Leadership in Systems of Care: Creating and Communicating a Shared Vision”

a. A brief with information about shared visions, the role of leadership in communicating the shared vision and essential qualities for leaders:

<http://www.childwelfare.gov/management/reform/soc/communicate/initiative/actionbriefs/briefs/CreatingandCommunicatingaSharedVision.pdf>

3. *Public Health Safety Net Inquiry*. Your Public Health Safety Net consists of the community partners who deliver services to the urban AI/AN population in your service delivery area. This safety net includes agencies and organizations that fund your services, refer clients to your services, other health and social service providers that accept urban AI/AN clients as well as service providers that you refer your clients to for specialty care. Assessing your local public health safety net is a more in-depth process and requires using more staff and other resources such as community member contacts. You will be working with partner data, and depending on their own internal processes, you may be creating and signing a [Memorandum of Agreement \(MOA\)](#) document. You are surveying much the same data as in your organizational needs assessment but with sensitivity regarding your community partners’ policies and procedures. You may be limited by their ability to extract data for specific populations. Expanding your needs assessment to your AI/AN service providers not only diversifies your respondent pool, but also allows you to create a more holistic picture of community health needs beyond primary care which you can reflect in your HPI. This is especially useful in long range planning to inform partnership cultivation as well as program change and expansion.

#### Suggested Resource:

1. “Methods and Strategies for Community Partner Assessment”

a. A guide for conducting surveys to evaluate partnerships between higher education campuses and communities:

[http://depts.washington.edu/ccph/pdf\\_files/tools-partner.pdf](http://depts.washington.edu/ccph/pdf_files/tools-partner.pdf)

2. *Comprehensive Needs Assessment*. This method is simply combining all of these assessment techniques to get the most diverse pool of input possible. This is the most time intensive method and has the highest time, human and fiscal resource demands. You will need to organize extensively throughout

your entire Public Health Safety Net as well as internally for addressing multiple methodologies. You will need to rectify how you are going to use qualitative and quantitative data together to inform your HPI. Though this is an intensive undertaking, the Comprehensive Needs Assessment is by far the most complete form of needs analysis because you are drawing from your own organization, the community you serve and the Public Health Safety Net surrounding you. You engage stakeholders at all levels to inform your HPI, and this can set the stage for organizational planning in any capacity you see fit.

Suggested Resource:

1. “Concerns Report Handbook: Planning for Community Health”
  - a. Basis of many recent HPI resources and guides, details the survey process and next steps:  
[http://ctb.ku.edu/Libraries/Action\\_Planning\\_Guides/Concerns\\_Report\\_Handbook\\_Planning\\_for\\_Community\\_Health.sflb.ashx](http://ctb.ku.edu/Libraries/Action_Planning_Guides/Concerns_Report_Handbook_Planning_for_Community_Health.sflb.ashx)

## Survey Methods

There are many survey methodologies to choose from as well as examples of successful HPI survey techniques in public health that you can draw from. Below is a journal article that details one organization’s survey process that can be used as a reference model as well as some online resources to guide survey design.

Suggested Resource:

1. “Urban Indian Voices: A Community-Based Participatory Research Health and Needs Assessment”
  - a. Scholarly journal article, detailed survey process information:  
[http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/CAIANH/journal/Documents/Volume%2017/17%281%29\\_Johnson\\_Urban\\_Indian\\_Voices\\_49-70.pdf](http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/CAIANH/journal/Documents/Volume%2017/17%281%29_Johnson_Urban_Indian_Voices_49-70.pdf)
2. “Online Survey Design Guide”
  - a. Outline of best practices for creating a survey to be viewed on the internet:  
[http://lap.umd.edu/survey\\_design/guidelines.html](http://lap.umd.edu/survey_design/guidelines.html)
3. “Survey Development”
  - a. A rough guide for creating a general survey:  
<http://web.mit.edu/tll/assessment-evaluation/SurveyDevelopment-April07.pdf>

## Next Steps

Once your organization completes the HPI process and you have the data to support your findings, the next step is to determine how you can incorporate program change to address your results. This is most commonly executed by performing a readiness assessment. A readiness assessment is the first step in a strategic visioning process that examines and evaluates the key domains of organizational structure and community need necessary to make changes in programming. The following resources can help you choose an approach methodology. The UIHI also offers a readiness assessment resource specifically designed for UIHOs that can be found on the [UIHI website](#).

Suggested Resources:

1. “Sustainability Self-Assessment Tool”
  - a. A systematic guide for self-assessing a system of care in a community:  
<http://www.tapartnership.org/SOC/SOCsustainabilityPlanning.php?id=topic1>
2. The Community Tool Box: “Chapter 3. Assessing Community Needs and Resources”
  - a. Systematic instructions for conducting a needs assessment, worksheets included throughout:  
[http://ctb.ku.edu/en/tablecontents/chapter\\_1003.aspx](http://ctb.ku.edu/en/tablecontents/chapter_1003.aspx)

## Other Resources

The UIHI has developed materials for cultivating and working in partnerships including guides about MOAs and data sharing or data use agreements. These partnership resources are available on the UIHI website’s [Health Equity Partnership resources page](#). Your HPI list is a useful tool that can guide organizational planning

all the way down to planning for specific service delivery models. Though not necessary, it is a good idea to attempt an identification and synthesis of similarities between your HPI list and Healthy People 2020's (HP2020) objectives as well as the Indian Health Service's (IHS) Government Performance and Results Act (GPRA) clinical performance measures, even if you do not find any parallels. The ability to show that your HPI list is compatible with the federal government's established health priorities and monitoring system can better position your UIHO for federal funding opportunities.

1. Healthy People 2020.
  - a. HP2020 website:  
<http://www.healthypeople.gov/2020/default.aspx>
  - b. HP2020 implementation guide:  
[http://www.healthypeople.gov/2020/implementing/HP2020\\_MAPIT.pdf](http://www.healthypeople.gov/2020/implementing/HP2020_MAPIT.pdf)
2. IHS's GPRA.
  - a. IHS GPRA info page:  
<http://www.ihs.gov/qualityofcare/index.cfm>
  - b. IHS GPRA clinical performance measures report:  
[http://www.ihs.gov/CIO/CRS/documents/crsv11/GPRA%20PART%20Measures%20V11\\_1.pdf](http://www.ihs.gov/CIO/CRS/documents/crsv11/GPRA%20PART%20Measures%20V11_1.pdf)

### **UIHI Services**

The UIHI provides Technical Assistance and Data Request services to help you identify resources or even consult on HPI design. The scale and scope of your needs will determine how we can accommodate your UIHO's needs. For more information about UIHI's Technical Assistance services please contact us at [info@uihi.org](mailto:info@uihi.org) or 206-812-3030, or see our website at <http://www.uihi.org/resources/how-to-request-data/>.

### **Suggested Resources:**

Center for Learning Excellence at the College of Education and Human Ecology (2011). Organizational Development Workbook for Faith-Based and Community Non-Profits, Ohio State University.

Corporation for National Service and The Pew Charitable Trusts (2001). "Methods and Strategies for Community Partner Assessment."

Department of Health and Human Services (n. d.). Leadership in Systems of Care: Creating and Communicating a Shared Vision.

Fawcett, S. B. and Associates (1993). Concerns Report Handbook: Planning for Community Health.

Johnson, C. V., J. Bartgis, et al. (2010). "Urban Indian Voices: A Community-Based Participatory Research Health and Needs Assessment." American Indian and Alaska Native Mental Health Research 17(1): 49-70.

Mitchell, R. (2007). Survey Development, MIT.

Norman, K. L., S. Lee, et al. "Online Survey Design Guide." Retrieved August 13, 2012, from [http://lap.umd.edu/survey\\_design/guidelines.html](http://lap.umd.edu/survey_design/guidelines.html).

Sharma, A., M. Lanum, et al. (2000). A Community Needs Assessment Guide: A Brief Guide on How to Conduct a Needs Assessment, Loyola University Chicago.

Technical Assistance Partnership for Child and Family Mental Health (2003). "Sustainability Planning Toolkit for American Indian/Alaskan Native System of Care Communities." Retrieved July 23, 2012, from <http://www.tapartnership.org/SOC/SOCsustainabilityPlanning.php?id=topic1>.

The Community Tool Box (2012). "Chapter 3. Assessing Community Needs and Resources." Retrieved June 20, 2012, from [http://ctb.ku.edu/en/tablecontents/chapter\\_1003.aspx](http://ctb.ku.edu/en/tablecontents/chapter_1003.aspx).

### **Referenced Resources:**

American Public Health Association, Association of Schools of Public Health, et al. (2012). Maximizing the Community Health Impact of Community Needs Assessments Conducted by Tax-exempt Hospitals.

Department of Health and Human Services (2004). Promising Practices in MCH Needs Assessment: A Guide Based on a National Study.

Manitoba Health (n. d.). Community Health Needs Assessment Guidelines.

Watkins, R., M. W. Meiers, et al. (2012). A Guide to Assessing Needs: Essential Tools for Collecting Information, Making Decisions, and Achieving Development Results. Washington, DC, International Bank for Reconstruction and Development.

### **Resource Note**

Resources were chosen based on subject matter applicability, general accessibility, urban AI/AN health relatability, and section cohesion.