

Structural capacities, processes, and performance of small local public health systems

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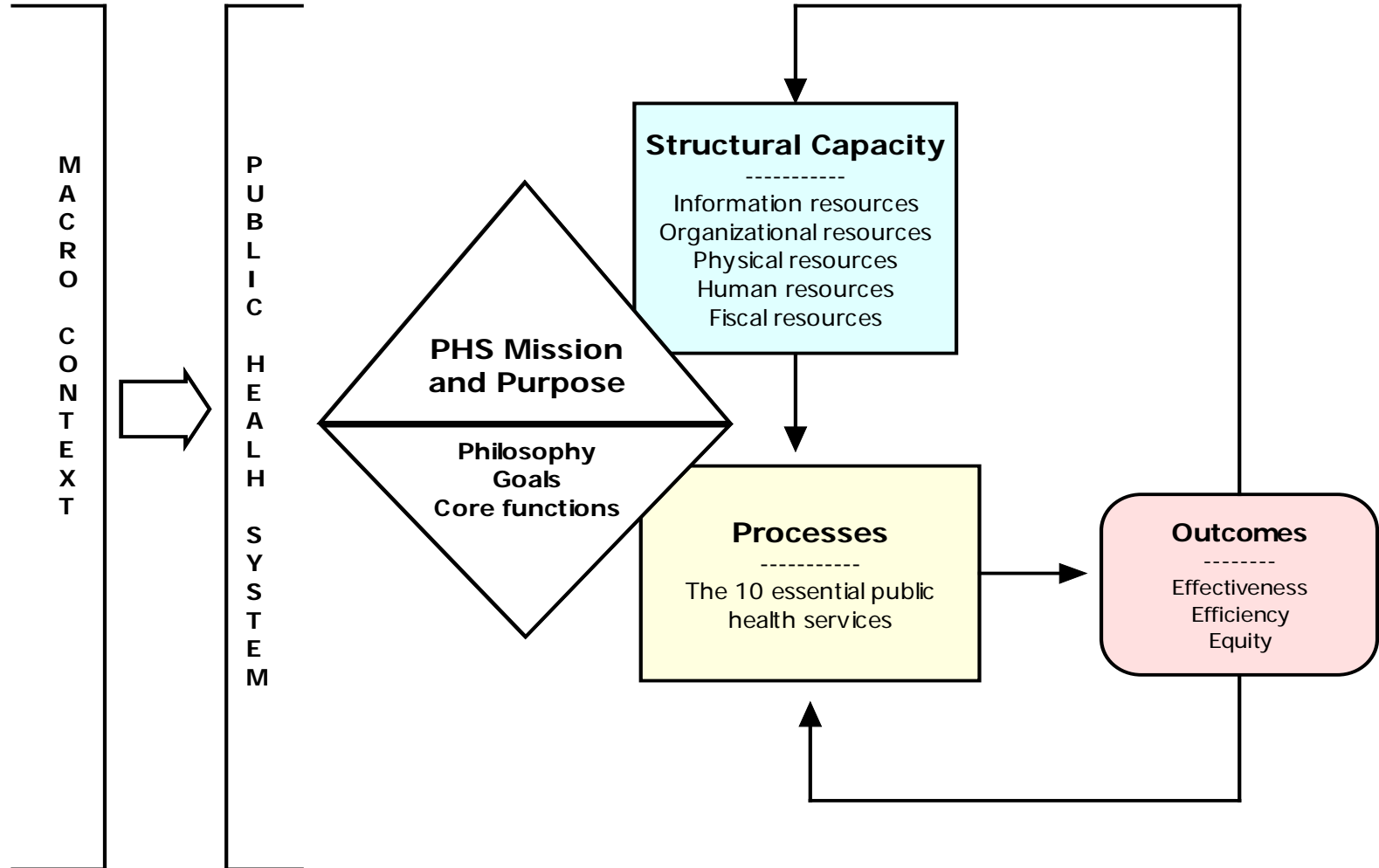
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- **Participants**

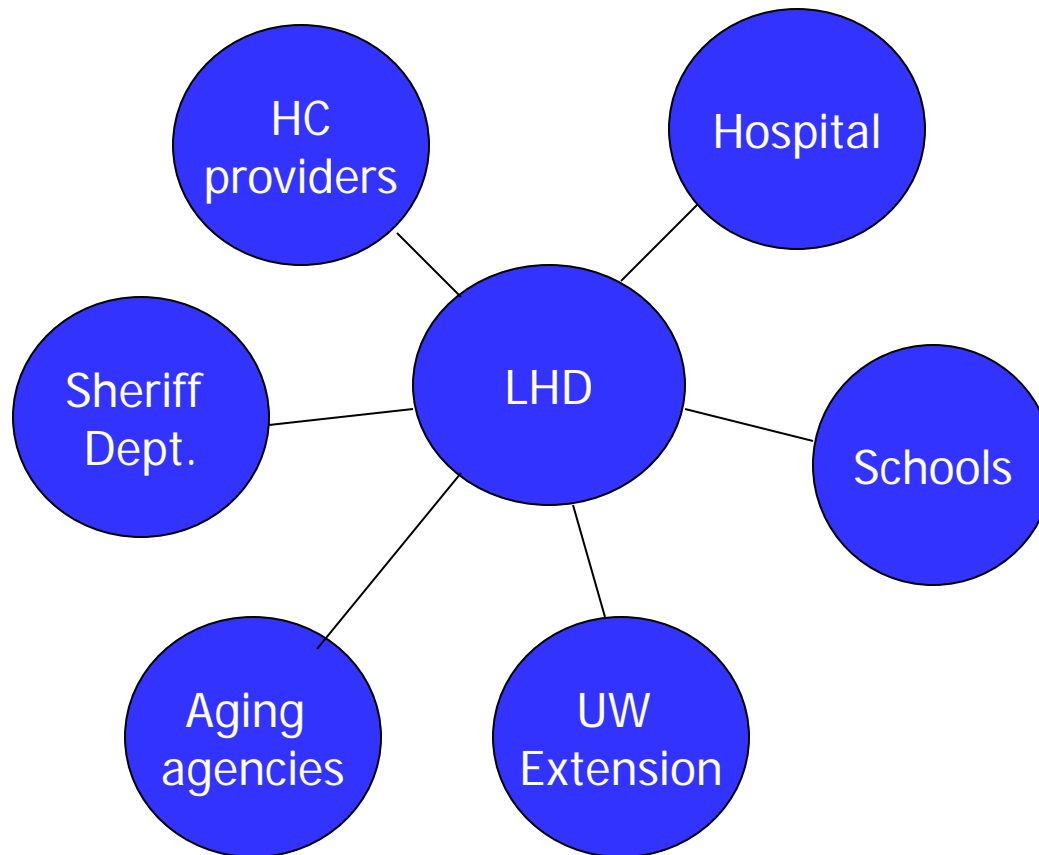
Study aims

- Develop measures of LPHS capacity, processes, and performance.
- Explore relationships between capacity, processes and performance outcomes predicted by conceptual framework.

Conceptual framework of public health system performance



“Local public health system” defined



Phase 1 LPHS Study (Zahner, 2006)

Design and methods

- UW-Madison IRB approval
- Web-delivered electronic survey (Websurvey@UW)
 - Two step recruitment
 - LHD directors invited (n=26)
 - Informants invited (n=287 from 21 counties)
 - Email reminders
 - Follow up telephone calls
- Secondary source data added based on county
- Analysis conducted in Stata 10.0; and NPSS

Response rates by agency type

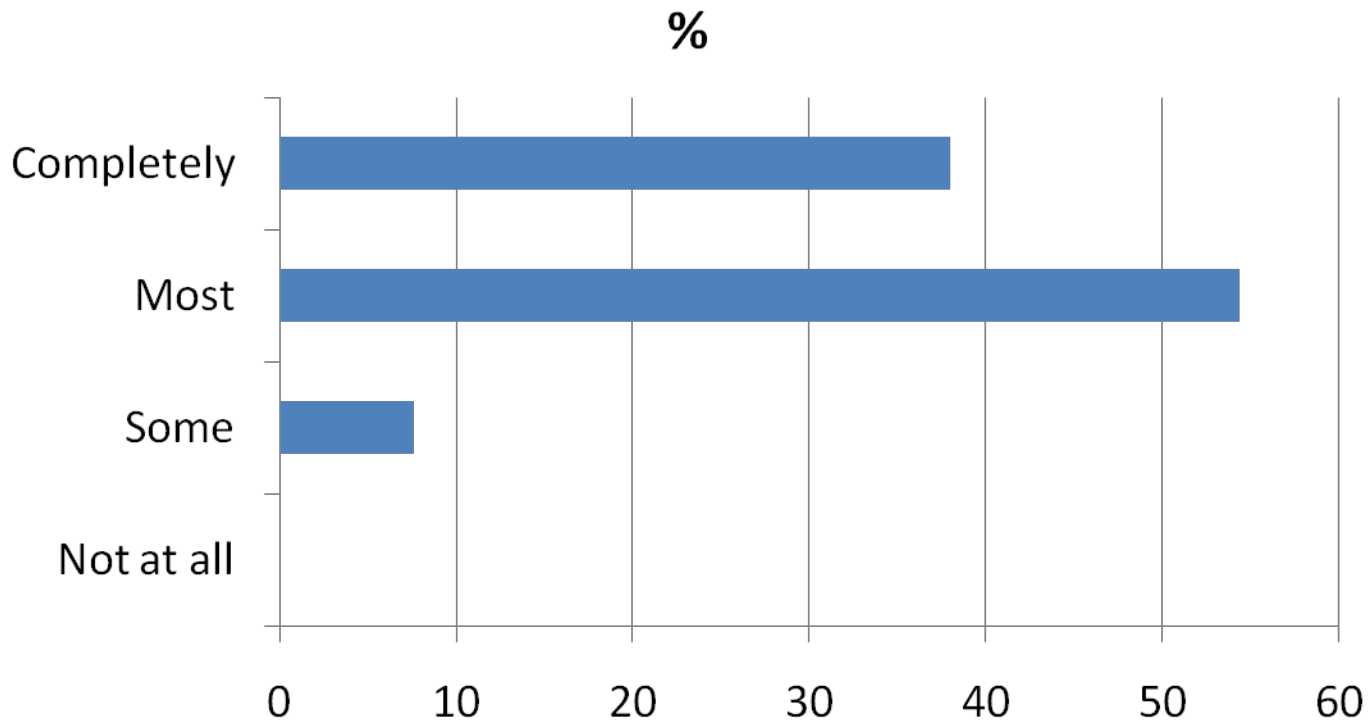
	# Invited	# Responded	Response rate
LHD	48	41	85%
UW Extension	41	25	61%
Sheriff	34	14	41%
Aging agency	26	16	62%
K-12 school	43	23	53%
Social service	37	20	54%
Health care	34	22	68%
Hospital	24	15	63%
Total	287	176	62%

Respondent characteristics

	Mean	Range
County population	--	4567-24,915
Long term residents	24.8 years	<1 – 65 years
Tenure in organization	14 years	<1 – 37 years
		%
Gender	Female	71%
Education level	Bachelor or higher	89%
	Master or higher	45%
Position type	Management	66%
	Professional	29%
	Support	5%

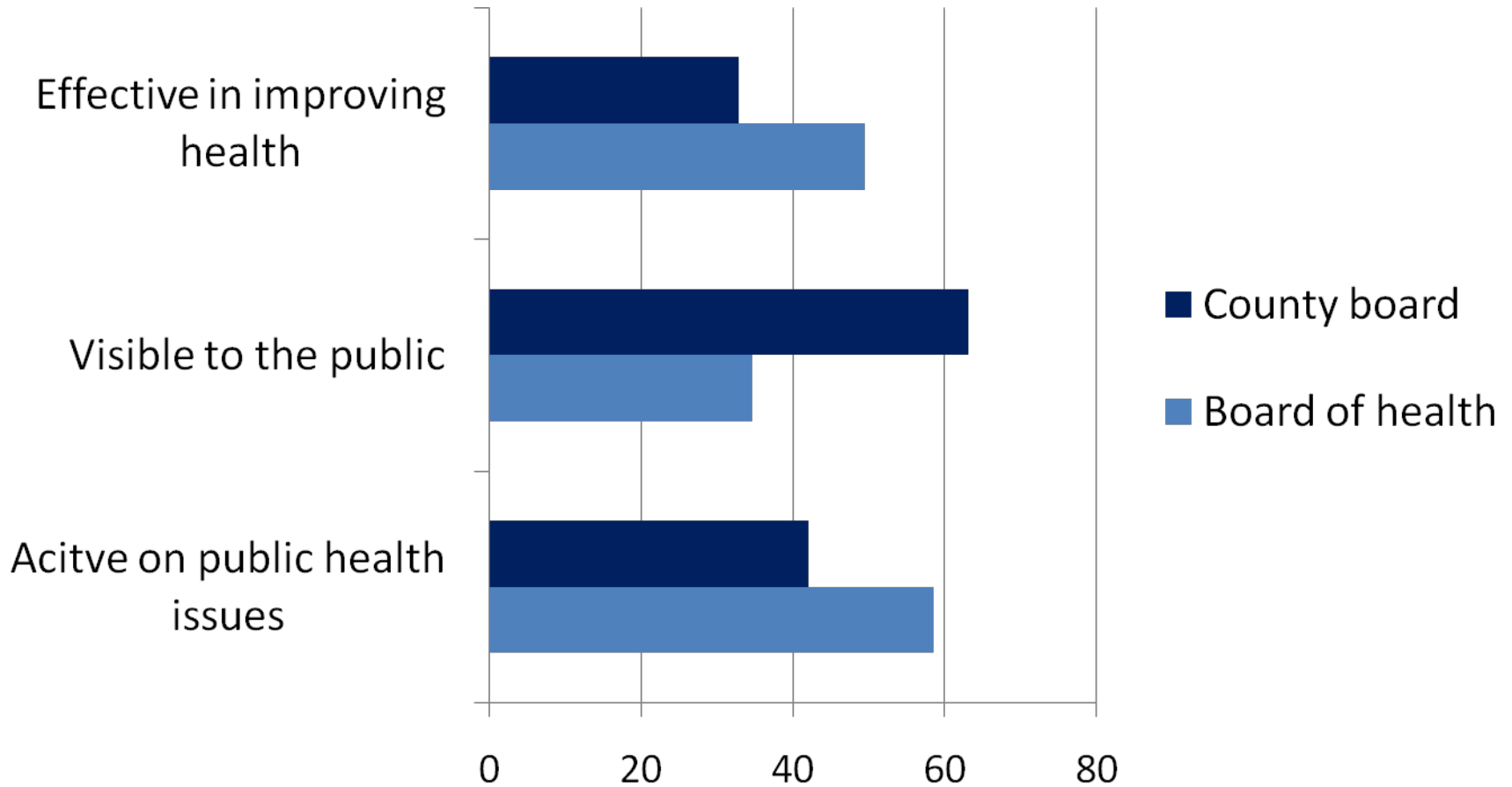
Information capacity

To what extent is the information technology capacity of your organization adequate to do your work?



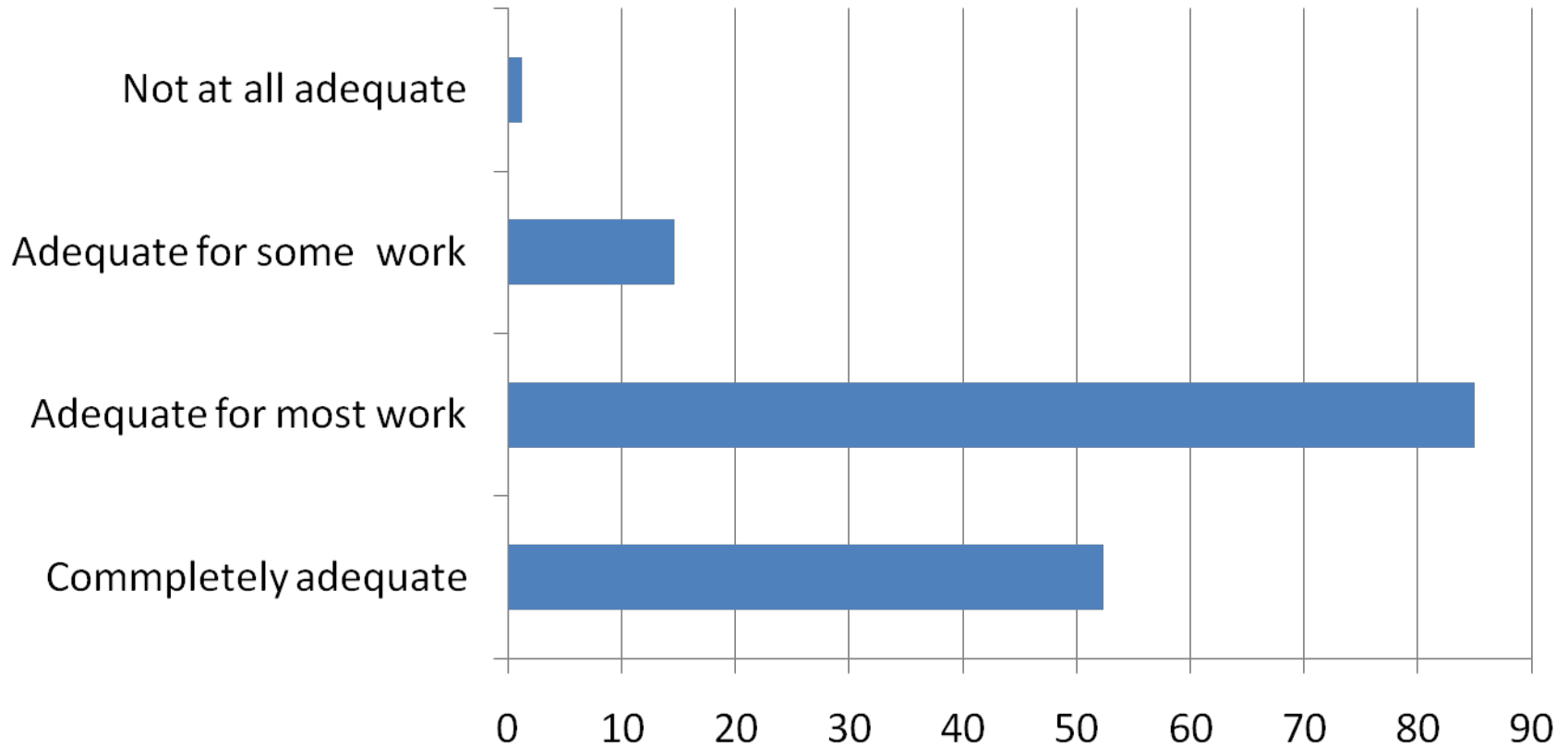
N=171

Organizational capacity



Physical capacity

To what extent are the physical resources of your organization adequate to do your work?

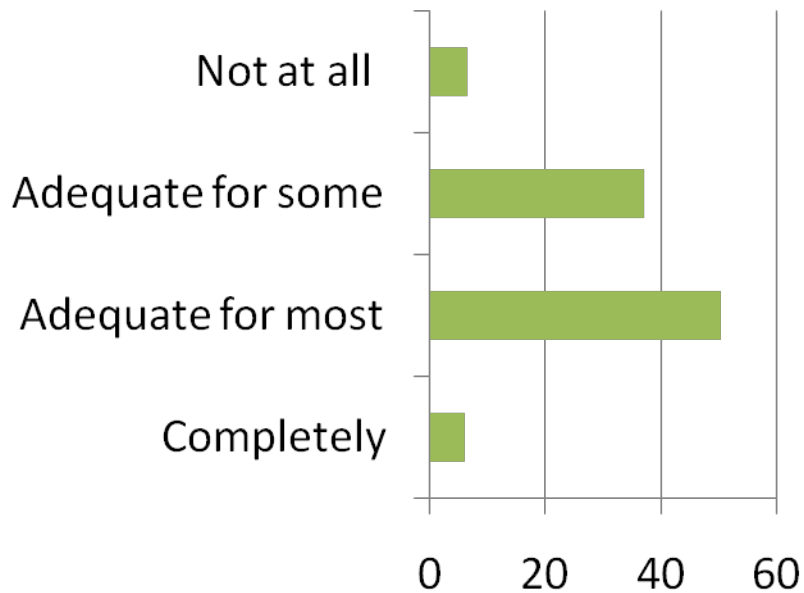


N=171

Financial capacity

To what extent are the financial resources of your organization adequate to do the work of your organization?

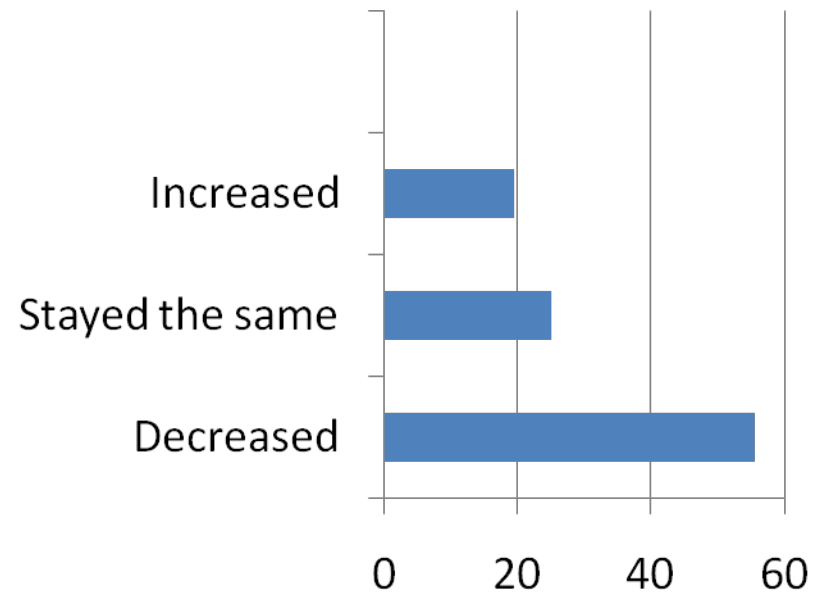
Percent



N=165

In the past 5 years, have the overall financial resources of your organization stayed the same, increased or decreased?

Percent

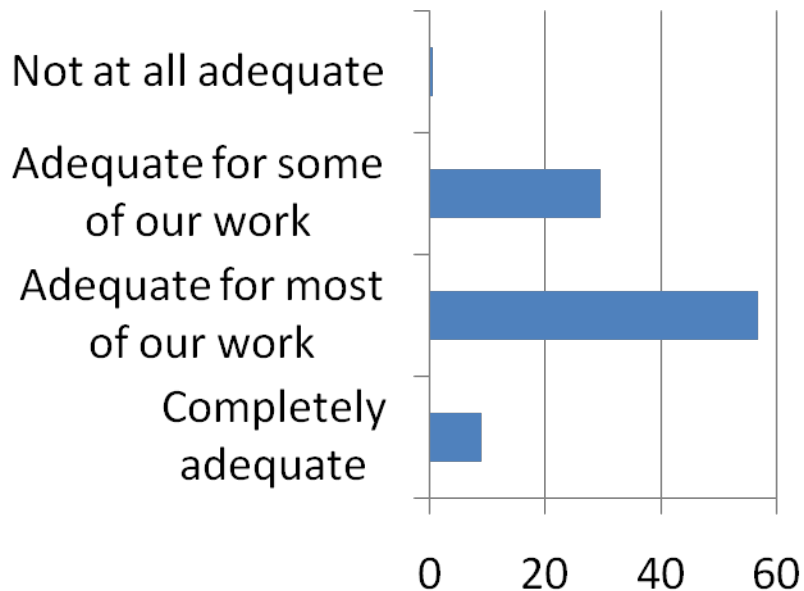


N=144

Human capacity

To what extent is the staffing of your organization adequate to do carry out the work of your organization?

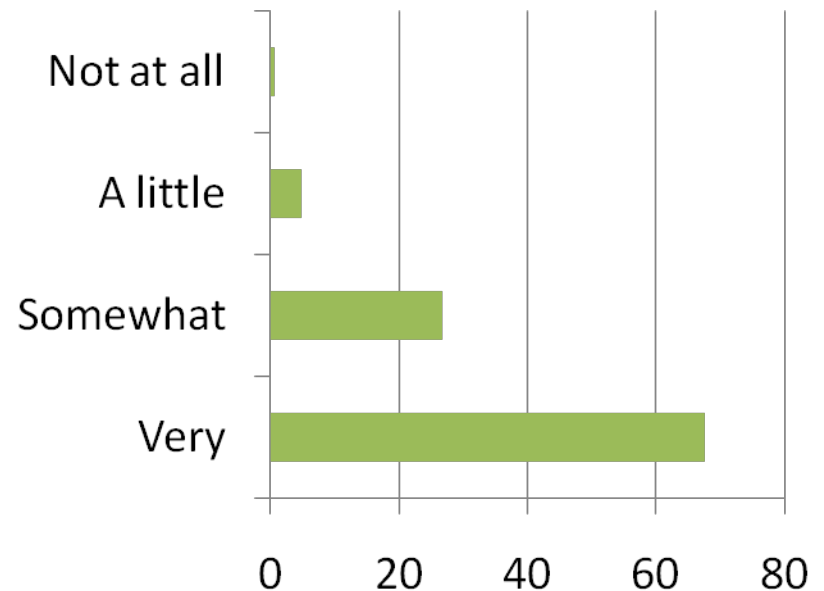
Percent



N=166

In your opinion, how effective is the leadership of your organization in supporting the work of your organization?

Percent



N=144

Process: Community assessment

Contributions to community assessment

	LHD	UWExt	Law	Aging	School	SS	HC	Hospital
Leadership	75-100%	1-24%	1-24%	25-49%	1-24%	25-49%	25-49%	1-24%
Staff time	75-100%	50-74%	50-74%	50-74%	50-74%	50-74%	50-74%	25-49%
Funding	75-100%	1-24%	1-24%	0%	0%	0%	25-49%	1-24%
Space	75-100%	75-100%	1-24%	0%	1-24%	25-49%	25-49%	0%
Data	75-100%	50-74%	50-74%	50-74%	50-74%	75-100%	75-100%	50-74%
Supplies	75-100%	1-24%	0%	0%	0%	25-49%	1-24%	1-24%
Partnership	75-100%	25-49%	50-74%	25-49%	25-49%	50-74%	25-49%	50-74%
N	33	13	4	7	6	12	12	7

75-100%



50-74%



25-49%



1-24%

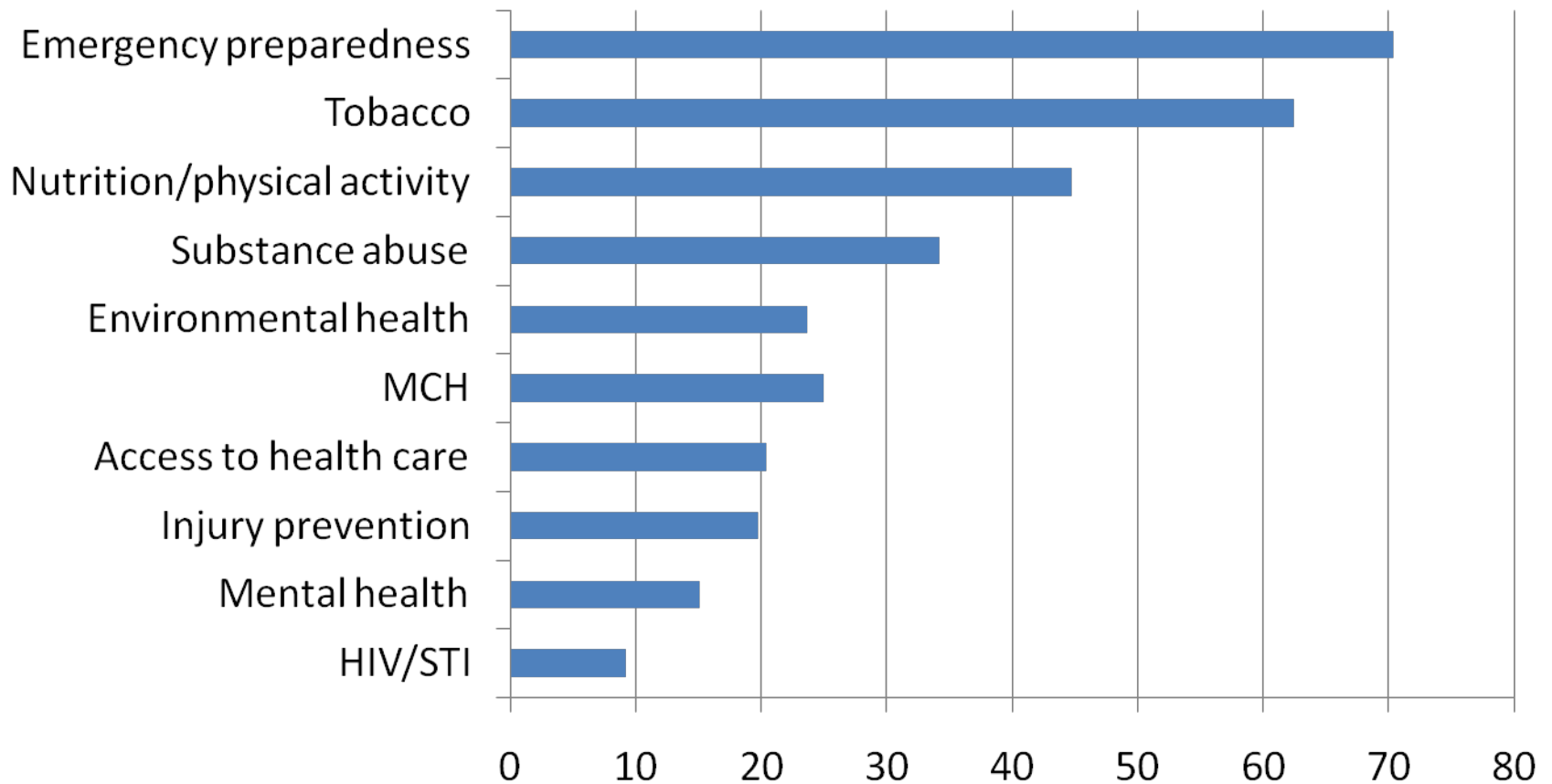


0%



Problem focused assessments

Percent



Process: Mobilizing partnerships

- Organization participation in CHA partnerships
- Network strength
 - Intensity
 - Sharing useful information
 - Sharing financial resources
 - Collaboration on projects
 - Information exchange at multiple levels
 - Durability
 - Frequency of providing useful assistance
 - Importance
 - Importance of linkages for health improvement

Outcomes:

Actions taken in response to CHA or CHIP

	LHD	UWExt	Law	Aging	School	SS	HC	Hospital
No actions								
Set priorities								
Set performance goals								
Reallocate resources								
Sought new resources								
Partnerships								
Advocacy								
N	33	14	5	8	9	11	14	8

75-100%



50-74%



25-49%



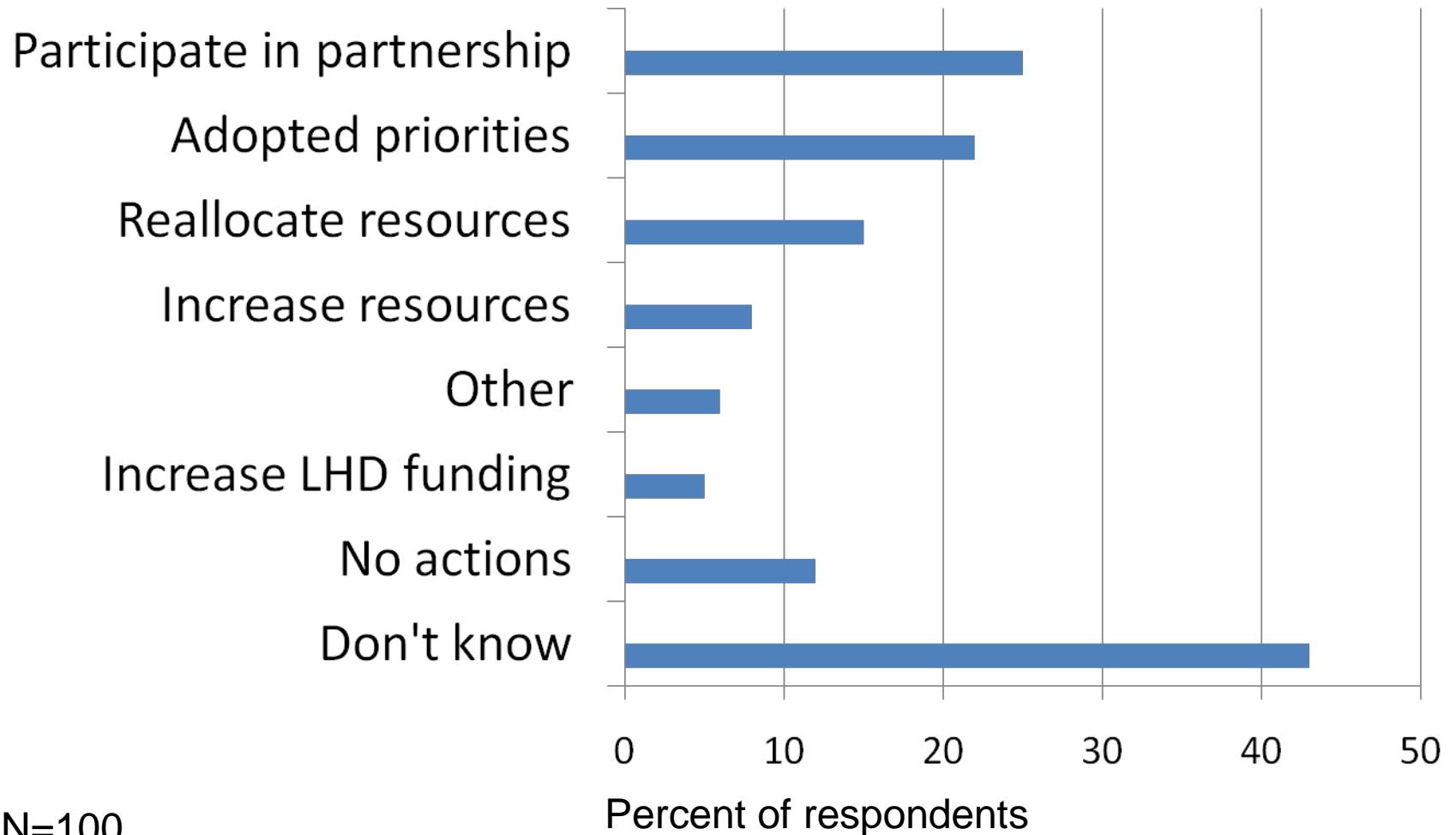
1-24%



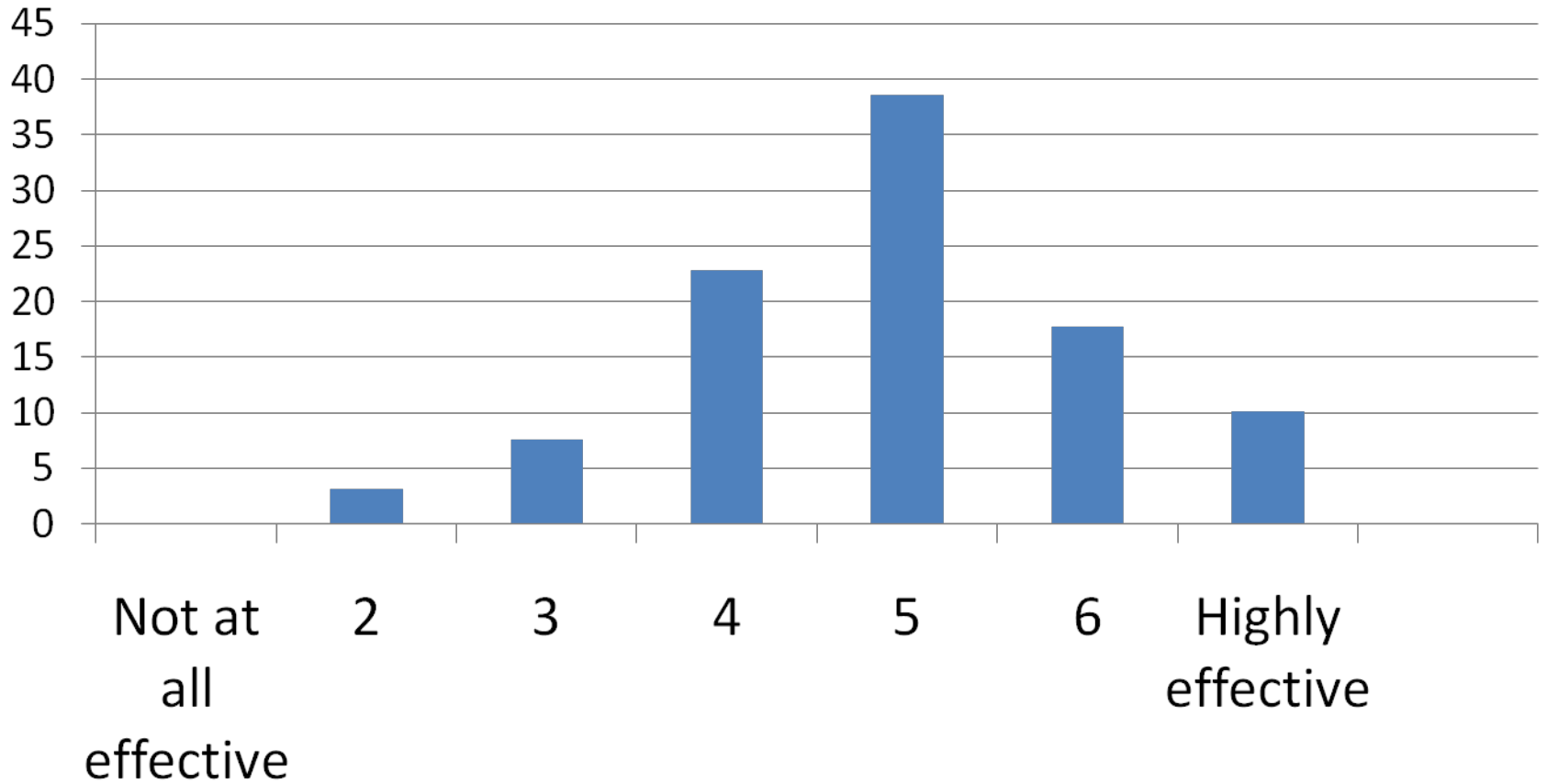
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Outcomes: County board actions



Outcomes: LPHS effectiveness



N=158

Percent of respondents

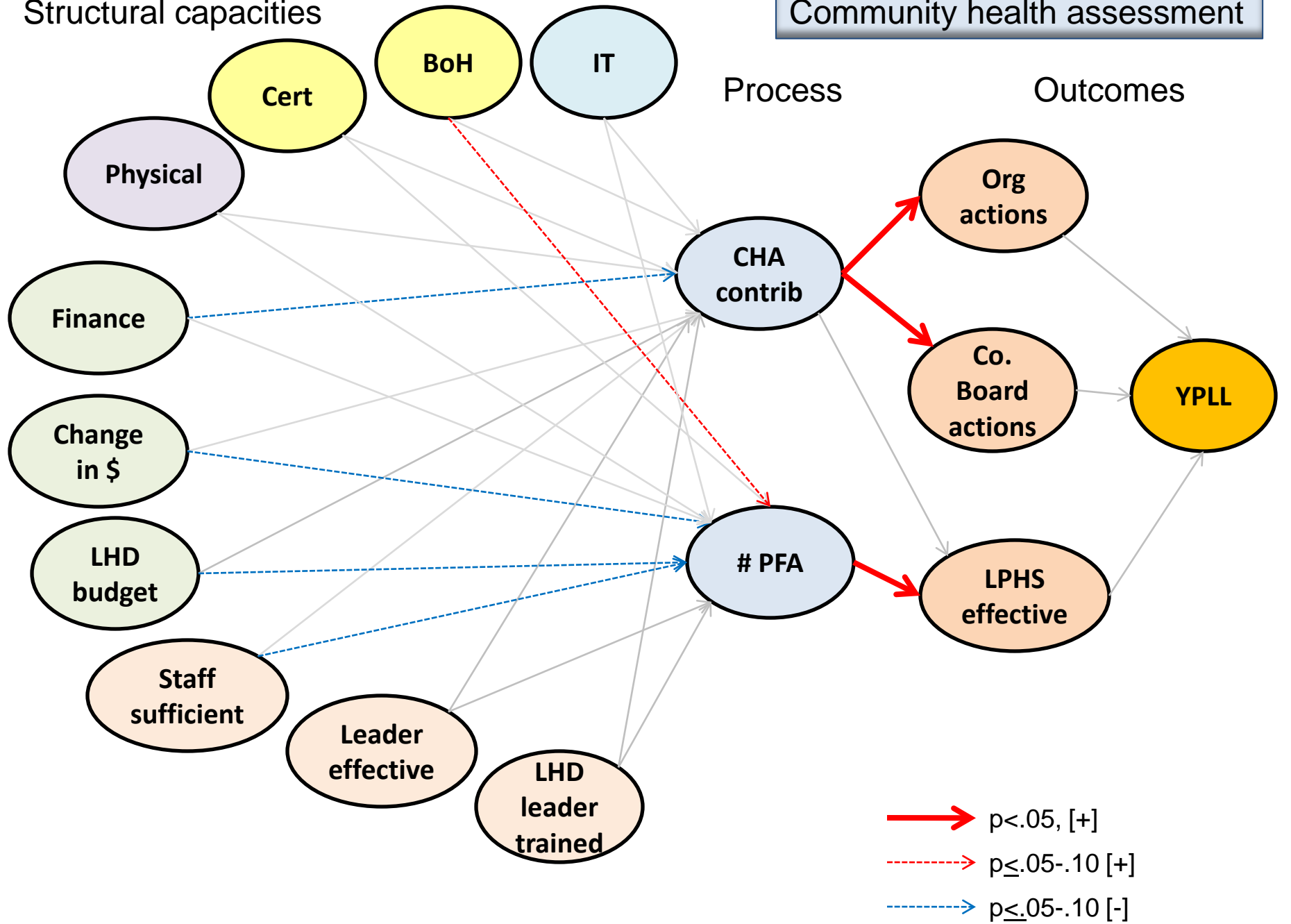
Relationships between capacities, processes, and performance

Construct	Measures	
Structural capacity (10)	IT capacity adequate BoH active Certification level Physical resource adequate Financial resource adequate	Resources increasing LHD budget Staff sufficient Leadership effective LHD leader training
Process	CHA	Organization contributions to CHA # Problem focused assessments
	Mobilizing partnerships	CHA partnership participation Network strength
Outcomes Near term	Organizational actions in response to CHA or CHIP County board actions in response to CHA or CHIP LPHS effectiveness	
Long term	YPLL	

Bold=secondary data

Structural capacities

Community health assessment

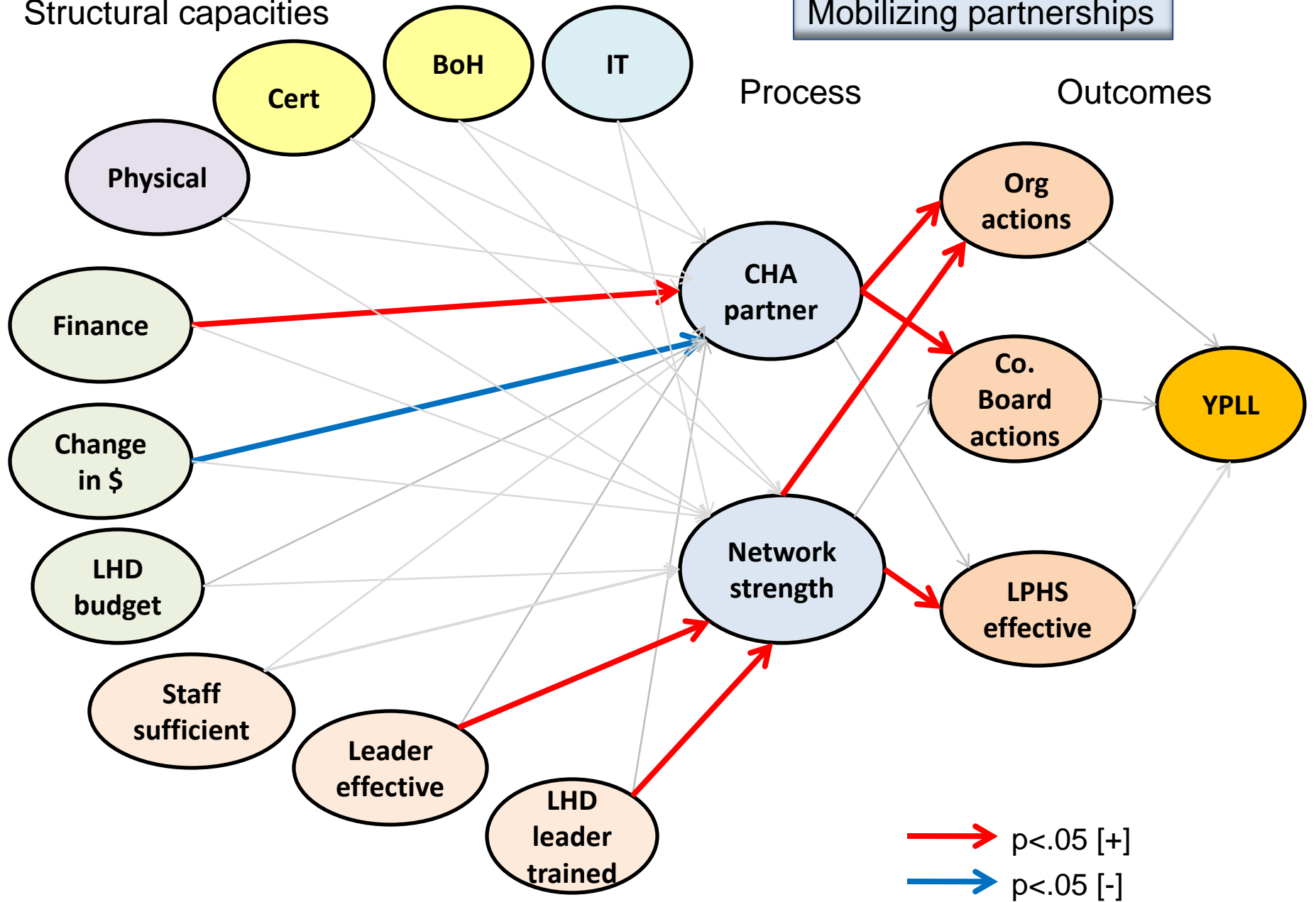


Structural capacities

Mobilizing partnerships

Process

Outcomes



Results Summary

Structural
capacity

- LPHS capacity mixed
 - Stronger for information, physical, human
 - Weaker for financial
 - Visibility lacking
 - Variation across partners

Process

- Community/problem-focused assessments common
- Engagement in partnership common
- LHD dominant role
- Finance, leadership, and BoH capacities important

Outcomes
Near term

- More assessment (CA/PFA) and more collaboration (partnering for assessment, network strength) are associated with more actions and greater perceived LPHS effectiveness

Outcome
Long term

- No association with YPLL by county

Implications for research

- Limitations
 - Limited sample size and response rates/missing data
 - Potential bias in recruitment
 - Mostly subjective measures
- Future research
 - Conceptual framework useful; consider using more broadly
 - Compare across size of systems (these were all small)
 - Compare across states
 - Plan more analysis by agency type and comparison across counties
 - Use county health ranking as outcome measure

Implications for policy and practice

- Concerns
 - Financial capacity
 - Lack of visibility for Board of Health
- Strengths
 - Leadership
 - Partner engagement in assessment and action

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