Community Health Assessments: Strengthening Partnerships to Maximize Impact

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Obesity and mental health: statewide these are the top two health issues facing Minnesota communities today. We know this because of community health assessments conducted by Minnesota’s community health boards (CHBs) and, separately, by Minnesota’s nonprofit hospitals. The road to identifying these shared priorities, however—and, more importantly, how to collectively address them—is riddled with challenges that can detract from our ability to most effectively respond to community health needs.

Community health assessments and implementation plans are identified in Minnesota Statutes as a core function of local public health and provide the foundation for improving and promoting the health of our communities. They also are a national standard for all public health departments. Since 1976, Minnesota’s CHBs have been engaging their communities in the process of assessing local health issues and identifying the resources and interventions to address their highest priority needs.

More recently, the Affordable Care Act created a federal requirement that nonprofit hospital organizations must regularly conduct a community health needs assessment and adopt implementation strategies as part of their charitable status.

From a resources perspective, aligning the assessment activities of local public health and hospitals makes sense. The challenges that must be overcome to do so, however, are not insignificant. Among them: Minnesota Statutes and national accreditation standards require local public health to conduct a community health assessment at least every 5 years, while federal law requires nonprofit hospitals to conduct an assessment every 3 years. Overlaps in service areas and the existence of multi-county CHBs can result in counties trying to partner with multiple health systems at different times. The nature of each sector’s work means “community” and “population health” may be defined differently. Data, particularly for diverse populations, is expensive to collect; and not all agencies have the expertise to analyze or interpret it. After the assessment, moving to shared implementation of ways to address a community’s needs can be difficult, too.

Despite these challenges, the strong alignment in findings and priorities from the latest round of assessments highlights the value of pursuing approaches that support local public health and hospitals working together to complete this work. With such collaboration, we develop shared goals and maximize the impact of our actions to improve our communities’ health. To do so, however, first requires a joint understanding of the requirements local public health and hospitals are expected to meet, current practices, and training needs.

To facilitate this process, the Local Public Health Association (LPHA) and the Minnesota Hospital Association (MHA) teamed up this spring to conduct regional stakeholder meetings in St. Paul, St. Cloud and Mankato. One of the purposes of these meetings was to determine areas for action-oriented collaboration that will help us advance community health assessment efforts. This work was funded by a grant from County Health Rankings & Roadmaps, and it engaged partners from state and local public health, hospitals and health systems, and health plans.

Each meeting began with an overview of current health needs assessment requirements for each sector and commonly used resources, followed by a discussion of current priorities, challenges, and successes. Ultimately, each meeting included collective brainstorming for action items to improve future collaboration. Here’s what we heard stakeholders need:

• More opportunities for intentional collaboration with diverse partners;
• Move from talk to action—identify steps to begin “moving the needle;”
• A standardized process to give structure to assessments;
• Resources to support equity and inclusion from diverse populations;
• More accessible and shareable data;
• Training on best practices for conducting community health assessments; and
• Aligned regulatory timeframes, to the extent possible.

These stakeholder meetings were successful in motivating and reenergizing partners, but our work doesn’t stop here. Moving forward, our associations are committed to continuing our work together to support our members’ efforts to align their community health assessments and implementation plans. As next steps, the LPHA and MHA are exploring opportunities to:

• Create a directory of community health assessment contacts from local public health and hospitals throughout the state;
• Share best practices with one another via webinars, in-person trainings and/or a community of practice;
• Conduct regional trainings to further promote networking and increase skill sets; and
• Address the challenges resulting from different regulatory requirements.

By aligning local public health and nonprofit hospital community health assessments and implementation plans, we increase the effectiveness of local resources and investments directed toward addressing communities’ top health priorities. After all, our biggest community health concerns are far too great and complex for any one agency to solve alone.