

Kansas Partnership for Improving Community Health

Health Department and Hospital Crosswalk Community Health Needs Assessment

This table presents a cross walk between features recommended for community health assessments and improvement plans performed by local health departments and 501(c)(3) hospitals. More details can be found on KansasHealthMatters.org, click on CHNA Toolbox.

		Local Health Departments	Hospitals
General	1.	Completed within past five years	<ol style="list-style-type: none"> 1. Completed at least once every three years 2. First must be completed by end of tax year beginning after March 23, 2012
	2.	<ol style="list-style-type: none"> 1. Documents available to the public 2. Make assessment widely available to the partners 	<p>Make assessment widely available to the public</p> <ol style="list-style-type: none"> 1. Post on hospital or related Web site 2. Make copies available upon request
	3.	CHIP aligned with state and national priorities	
	4.	A formal model described to guide CHA-CHIP	
Work together	5.	Partnerships established	<ol style="list-style-type: none"> 1. Include input from persons having public health knowledge or expertise 2. Include input from persons who represent the broad interest of the community 3. <i>Collaboration with other hospitals and/or community partners</i>

Italics = These features are good practices, but not required.

		Local Health Departments	Hospitals
	6.	Community had the opportunity to review and comment on preliminary findings of the community health assessment	
	7.	Engagement of community subgroups about policies and strategies that will affect them	Engage leaders, representatives or members of medically underserved, low-income and minority populations and populations with chronic disease needs <i>Seeks community input that reflects the racial, ethnic and economic diversity of the community</i>
	8.	Engagement of governing entities about policies and/or strategies that will promote the public's health	
	9.	Balance of power and leadership	<i>Form assessment team/advisory committee that include key staff within the organization and community representatives</i>
	10.	Conflict resolution	
	11.	Stakeholders satisfaction with process	
Profile	12.	Variety of data sources	Analytical methods applied to identify community health needs
	13.	Primary data collected (e.g., disease reports, surveys, public hazard reports, focus groups, etc.)	Collects community input using community forums, focus groups, interviews, and/or surveys

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	14.	Secondary data utilized	<i>Demographics, health indicators, health risk factors, access to health care services (rates of uninsured, availability of primary care), social determinants of health, etc.</i>
	15.	Demographic data	Description of the community served by the hospital facility and how it was determined
	16.	Data on social determinants	<i>Social determinants of health (education, environmental quality, housing)</i>
	17.	Health issues for specific groups described	<i>Health indicators (leading causes of death and hospitalization), health risk factors (tobacco use, obesity)</i>
	18.	Disparities described	
	19.	Assets and resources described (e.g., community asset mapping)	Include a description of the existing health care facilities and other resources within the community available to meet the community health needs identified through the CHNA
	20.	Data sources cited	Describe sources and dates of data
	21.	Comparisons of local data	<i>Analyzes data collected and reviewed using:</i> <ul style="list-style-type: none"> - <i>Comparisons with other communities</i> - <i>Comparisons with federal or state benchmarks</i> - <i>When available, trends within the community</i>
	22.	Trends reported	
	23.		Describe information gaps

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Prioritize	24.	Information from the profile provided to stakeholders	1. Describe of how the hospital organization took into account input from persons who represent the broad interests of the community 2. Develops a summary (written report) of the CHNA
	25.	CHA-CHIP includes issues and themes identified by stakeholders	
	26.	Criteria for setting priorities established and agreed upon	Describe the process and criteria used in prioritizing health needs
	27.	Criteria for setting priorities utilized	Include a prioritized description of all of the community health needs identified through the CHNA
	28.	CHIP contains measurable objectives and timeframe for completion	
	Best and Promising	29.	Data used to inform public health policy, programs
30.		CHIP identifies improvement strategies that are evidence-informed	
31.		CHIP contains policy changes	
Implementation	32.	Implementation of health promotion strategies	Prepare a written implementation strategy to address identified community needs
	33.	Marketing of health promotion strategies	Implementation strategy must be widely available to the public
	34.	Contribute to public health policy	

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	35.	Implement elements and strategies of CHIP as planned, according to the plan timeline.	<ol style="list-style-type: none"> 1. Hospital Board of Directors must approve written implementation strategy 2. Attach Implementation strategy to Form 990
	36.	CHIP identified stakeholders that accept responsibility for implementation	<ol style="list-style-type: none"> 1. Describe how the hospital facility plans to meet the health need <ol style="list-style-type: none"> a. Identify programs and resources b. Describe planned collaboration with other entities 2. Describe any identified needs not addressed
	37.	CHIP includes priorities and action steps for entities beyond just LHDs	Separate plans for each hospital facility required
	38.	Evidence of seeking resources to support agency programs	
Evaluation	39.	CHIP contains plan for measurable health outcomes	<i>For each prioritized need, identify the goal to be achieved, measurable objectives, indicators for determining if objectives were met, and an evaluation measure</i>
	40.	CHIP contains plan for performance indicators to measure implementation progress	Implementation strategy must be adopted by the end of SAME tax year in which the CHNA is conducted
	41.	Revise CHIP based on evaluation results	
	42.		<ol style="list-style-type: none"> 1. \$50,000 excise tax applies for failure to meet assessment rules 2. Tax potentially applicable annually

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