



# Community Health Assessment Checklist NC Local Health Department Accreditation



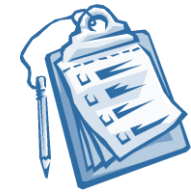
CHA/CHNA Year:

Local Health Department:

	<b>Benchmark 1: A local health department shall conduct and disseminate results of regular community health assessments</b>	<b>Intent: The CHA report is the primary source of information used by the LHD in developing its strategic plan and in guiding new programs and services.</b>	<b>Met</b> ✓	<b>Not Met</b> (X)	<b>CAP Needed</b> (Yes/No)
<b>1.1</b>	<b>Conducted at least every 4 years (48 months)</b>	Previous CHA/CHNA: 2015			
<b>1.1 a</b>	<b>Provide evidence of community collaboration in planning and conducting the assessment</b>	Page/s: 6			
<b>1.1 b</b>	<b>Reflect the demographic profile of population</b>	Page/s: 8-11			
<b>1.1 c</b>	<b>Describe socioeconomic, educational and environmental factors that affect health</b>	Page/s: 11, 13-25			
<b>1.1 d</b>	<b>Assemble and analyze secondary data (collected by someone other than the health department) to describe the health status of the community.</b>	Page/s: 8-43			
<b>1.1 e</b>	<b>Collect and analyze primary data (collected by the health department) to describe the health status of the community.</b>	Page/s: 12, 13, 29, 31, , 40-43, 45			
<b>1.1f</b>	<b>Compile and analyze trend data to describe changes in community health status and in factors affecting health.</b>	Page/s: 8-43			
<b>1.1 g</b>	<b>Use scientific methods for collecting and analyzing data</b>	Page/s: 4, See page 3 of this checklist			
<b>1.1 h</b>	<b>Identify population groups at risk for health problems</b>	Page/s: 12-41			
<b>1.1 i</b>	<b>Identify existing and needed health resources.</b>	Page/s: 46-50			
<b>1.1 j</b>	<b>Compare selected local data with data from other jurisdictions (e.g., local to state, local to local).</b>	Page/s: 16-43			
<b>1.1 k</b>	<b>Identify leading community health problems.</b>	Page/s: 4-5, 12-13, 28-34, 36-40, 42-45			
<b>Additional Comments:</b>					



# Community Health Assessment Checklist NC DHHS/DPH: Consolidated Agreement



CA-FY18 CA-FY19	The Department shall provide to the Local Technical Assessment and Training Branch Head or designee:				
10. a	Comprehensive community health assessment (CHA) at least every four years, for each county or health district	Previous CHA/CHNA: 2015			
10. a	CHA should be a collaborative effort with local partners inclusive of hospitals, businesses, community partners, and the local Healthy Carolinians Partnership (if such exists)	Page/s: 2-4			
10. a	Collection and analysis of primary data at the county and district level (if such exists), secondary data from the State Center for Health Statistics (SCHS) and other sources	Page/s: 8-45			
10. a	Assessment and analysis of community resources	Page/s: 46-50			
10. a	Identify a list of community health problems based on the assessment	Page/s: 12-13,44-45			
10. a	Each identified problem shall be prioritized and described in the narrative.	Page/s: 4-5, 23-24			
10. a	CHA will include data analysis of those indicators listed in the Accreditation Self-Assessment Inventory, Benchmark 1, Activity 1.1.	Page/s: 12-13, 44-45			
10. a	CHA is due on the first Monday in March following the year of assessment	Date received:			
12.	Requests variances in submission of documents in writing in advance of the required date of submission. Emails may be sent to the Director, Community Health Assessment, Local Technical Assistance and Training Branch (LTAT) cha.sotch@dhhs.nc.gov	Date of request:			
13.	Refer to CHA tools at <a href="https://publichealth.nc.gov/lhd/">https://publichealth.nc.gov/lhd/</a>				
DPH Website	Executive Summary	Page/s:			
	Documentation	Style:			

OFFICE USE ONLY:

Date of Review:

Date of letter stating CHA meets content requirements:

Date of letter stating that CAP(s) have been accepted:

Reviewer(s):

Date marked complete (filings/review/submission/emails verified):

**1.1g Primary Data Collection – Community Health Opinion Survey**

The North Carolina Institute of Public Health:

Questionnaire - designed and consulted

- Assisted with preparation for and logistics of survey
- Sample design created

Acquired most current U.S. Census spatial data and conducted two-stage cluster sample

Drew random sample of neighborhoods and addresses for conducting face-to-face interviews (using County address data, focusing on residential addresses only)

-Designed data entry form in CDC's Epi Info™ 7 using County-supplied questionnaire and uploaded form and spatial data to Collect SMART software (supplied by NCIPH)

-Questionnaire was coded in Epi Info™ in English

-Provided paper field maps for up to 15 teams and training materials for up to 60 participants

-Provided face-to-face just-time-training on the use of Collect SMART (mobile data collection, analysis and monitoring platform), survey techniques, field safety, data collection, and equipment

\*Provided the following training materials:

\*Field notebooks (paper copies of questionnaire in color to administer survey and in black and white for backup, field maps, point lists, tracking forms)

\*Training notebooks (agenda and safety checklist and contacts, color copy of questionnaire, training slides and other handouts)

-Loaned 15 Samsung Tab E Android tablets (8") with active data plans and for data entry and navigation and 10 Garmin Nuvi GPS units for backup navigation support to survey sites

-Provided on-site data collection technical assistance throughout data collection

*Source: Scope of Services, Community Health Needs Assessment, Presented to Rowan County by the North Carolina Institute for Public Health, December 1, 2017*