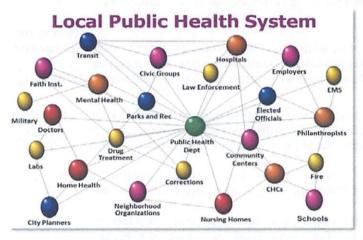
LOCAL PUBLIC HEALTH SYSTEM SURVEY

The Local Public Health System (LPHS) includes all entities that contribute to the delivery of public or personal health. Public health departments are typically at the center of this system as seen in the graphic (direction on page). This system includes, but is not limited to: county health departments, hospitals, community clinics, federally qualified health centers, elected officials, schools, faith-based, nonprofit organizations, public transit, civic and neighborhood groups, and the military.



To assess our local public health system, the Florida Department of Health in each county uses the 10 Essential Public Health Services framework developed by the National Association of County and City Health Officials.

THE TEN ESSENTIAL SERVICES OF PUBLIC HEALTH ARE:

- 1. Monitor community health and identify health problems
- 2. Diagnose and investigate health problems and hazards
- 3. Inform, educate, and empower people about health issues
- 4. Mobilize community partnerships to identify and solve health issues
- 5. Develop policies that support individual and community efforts
- 6. Enforce laws and regulations that protect health and ensure safety
- 7. Link people to needed personal health services
- 8. Assure competent public health and personal workforce
- 9. Evaluate effectiveness and quality of personal and population based health services
- 10. Research innovative solutions to health problems

Due to the COVID-19 pandemic the format included a coordinated survey developed by the CHNA planning team and distributed to the different community organizations in the public health system assessment. The assessment looks at the Ten Essential Public Health Services that were developed by the National Association of County and City Health Officials. The essential services are provided in the graphic (add direction on page). The LPHS assessment is designed to determine the capacity of the local public health system. The survey was sent to AHER members, asking them to share it with faith based Organizations, corrections facilities, elected officials, law enforcement, schools, nonprofit organizations, neighborhood organizations, employers, behavioral health, and transit facilities.

10 Essential Health Services



The LPHS survey contained 14 items covering topics such as access to population health data, educational activities, evaluation, and communication strategies.

The majority of organizations provide services in both Escambia and Santa Rosa counties.

| Escambia | 25% |
|-------------------------|-----|
| Santa Rosa | 15% |
| Escambia and Santa Rosa | 60% |

of the organizations often access population health data often to inform their work.

of the organizations responded that they would like greater access/understanding of how to use population health data to improve impact.

use GIS or other mapping technology to better understand their data, while 57% do not.

conduct activities that inform, educate, and empower people about health issues.

of the respondents customize education and information for those at higher risk of negative health outcomes (i.e. language barriers, cultural competence).

75% of the organizations work to connect people to health services (insurance programs, health screenings, direct care with physicians, and other healthcare providers)?

use communication strategies to build awareness of the importance of public health (both community and individual health needs).

engage local government officials in community health improvement activities.

have a process to help enroll individuals into public benefit programs such as Medicaid, WIC, EBT, etc.

94% identify and stay current with best practices.

Some questions asked in the LPHSA Survey required a narrative or short answer. These responses were used to help prioritize the major health concerns and areas of action for Escambia and Santa Rosa Counties.

The majority of respondents (83%) assess community needs to prioritize your organization services.

In response to collaboration with other partners in the local public health system (to include hospitals, home health, behavioral health, etc.) to deliver information and education, 63% indicated "Yes, frequently", 31% "Yes, occasionally", and 6% responded "No". The question was posed to see if the organization already provides resources for any of the six priority areas identified by AHER. The results are as follows:

| Overweight/obesity | 11% |
|--|----------------------------------|
| Poor eating habits | 19% |
| Substance abuse | 19% |
| Mental health | 20% |
| Child abuse | 13% |
| Access to healthcare | 15% |
| Other*: | 4% |
| *Linking frail elders to necessary service | es to remain in their own homes; |

*Linking frail elders to necessary services to remain in their own homes; Smoking cessation

When asked if they or someone in the organization would be interested in participating in AHER's work in each area, 14% were interested in helping with the area of child abuse, 7% in substance abuse and access to healthcare.