

Introduction to Community Needs Assessments: Finding the Data

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The Center for Health Workforce Studies

- Established in 1996
- Based at the University at Albany School of Public Health
- Committed to collecting and analyzing data to understand workforce dynamics and trends
- Goal to inform public policies, the health and education sectors and the public
- Broad array of funders in support of health workforce research

Today's Webinar

Today, we will review

- What are community needs assessments
- Planning for community needs assessments
 - Who should be involved
 - Defining the community
- Telling the data story
- Finding/creating data for community needs assessments
- Prioritizing findings

What are Community Needs Assessments?

What are Community Needs Assessments?

- Assessments of:
 - Population
 - Resources
 - Services
 - Health care statuses
 - Health care outcomes
- That can help identify community priorities

Why Do We Conduct Community Needs Assessments?

- Why conduct community needs assessments?
 - Required by funder
 - Required by government
 - Providers assessing services for expansion or creation of services
- Why are community needs assessments important
 - Identifies potential problems
 - Brings stakeholders together to discuss problems
 - Identifies potential solutions
 - Creates a guide for implementing solutions

Planning for Community Needs Assessments

Who Should be Involved

- Important part of community needs assessments
 - Identifying community stakeholders
 - Ensuring community stakeholder involvement
 - Data analysis
 - Data interpretation and contextualization
 - Prioritization of problems
 - Identifying potential solutions

Who Should be Involved

- Businesses
- Community/political leaders
- Educational institutions/school districts
- Funder
- Health care providers
- Labor
- Patients/clients
- Public health
- Researchers
- Social service organizations

Defining the Community

- Geographic boundaries – vary by service category (emergency room boundaries are closer to the hospital than open heart surgery geographic boundaries)
- May also be a population (homeless, HIV/AIDS, migrant farm workers, low-income or uninsured) within specific geographic areas

Defining the Community

- Political boundaries
 - Cities, towns, counties
- Historical neighborhoods
- Population based all the census tracts in an area with
 - 50% of the population are persons of color
 - 50% of the population are individuals under 200% of federal poverty level
- Hospital service areas
- Others – user or funder defined

Telling the Data Story

As You Think About the Data

- What is the best way to collect the data you will need?
- What does the data tell me?
- What does the data not tell me?
- Does the indicator make sense for my community?
- Are there significant variations in the data that can be explained? Contextualize the data.

As You Think About the Data

- What data are available to help tell the story?
 - Primary data
 - Secondary data
- What are the benchmarks to compare the data to?
- How are you drawing conclusions and prioritizing results?

As You Think About Your Story

- As you think about your story, is it .
 - Clear and concise?
 - Does the data weave a story?
 - Does it help you prioritize your work?
 - Appropriate for your organization?
 - Can the problem identified be addressed?
 - Are there resources within the organization to address the problem?
 - Are there other organizations/resources that can address the problem?

Finding and Creating Data for Community Needs Assessments

Service Area Determinants

- Availability of exercise/green space/walkable neighborhoods
- Availability of work/type of employers
 - Exposure to contaminants
 - Income
 - Insurance status
- Environmental conditions
 - Air
 - Water
- Housing stock
 - Age of housing stock
 - Lead
 - Ownership
 - Seasonal rentals
- Public transportation
- Jobs/Employment

Service Area Determinants

- Health Care
 - Providers
 - Health Centers
 - Hospitals/beds
 - Home Health Care
 - Nursing Homes
- Social Services
 - Food/nutrition
 - Homeless
 - Housing
 - Substance Abuse
 - Veterans

Primary Data Collection

- Primary Data
 - Qualitative
 - Case studies
 - Focus groups
 - Interviews
 - Observation (generally not used for community needs assessments)
 - Quantitative
 - Journals (generally not used for community needs assessments)
 - Surveys

Community Organizational Input

- Organizational characteristics
 - Partners
 - Population(s) served
 - Service area
 - Service(s) provided
- Funding level and sources
- Priority(ies)
- Barriers for addressing priority(ies)

As You Think About Secondary Data

- How are the data being presented?
 - Level of geography
 - Nation
 - State
 - County
 - Sub county
 - Are larger geographic areas masking problems in smaller geographic areas?
 - Is how the data collected a matter of convenience?

As You Think About Secondary Data

- Is it appropriate for the analysis/question(s) asked?
- Understanding the data
 - Population versus sample
 - Rates/percentages
 - What data is being collected
 - Registered voters versus likely voters
 - All RNs versus actively practicing RNs
 - Total population versus civilian population
 - Jobs versus employed people

Secondary Data Sets

- Demographic
 - Age
 - Education
 - Family status
 - Gender
 - Housing
 - Income
 - Insurance status
 - Limited English proficiency
 - Race/ethnicity

Secondary Data Sets

- Health Statistics
 - Behaviors
 - Drinking
 - Smoking
 - Hospitalizations
 - Status
 - Asthma
 - Diabetes
 - Vital Records
 - Deaths
 - Births

Secondary Data Sets

- Education
 - College graduations
 - Associates
 - Bachelor's
 - Master's plus
 - Dropout rates
 - Enrollments
 - High school graduations
 - Limited English proficiency
 - Percent on free or reduced lunch

Prioritizing Your Findings

Prioritizing Your Findings

- The final step in developing community needs assessments is prioritizing projects, thus prioritizing funding.
- The meeting process
 - Who will be involved
 - Who will facilitate the meeting
 - How will voting occur
 - Who will record the votes
 - Discussion
- The prioritization process
 - Mathematical (weighted)
 - Visual (dot method)
 - Other

What to Consider During Prioritization

- How severe is the issue/problem?
 - In considering the data, are there many individuals affected by the issue/problem?
 - Is this an emerging issue/problem?
- Does the community view this issue/problem as an area which needs to be addressed?
- What is the perceived need for more interventions or programs to address the issue/problem. Does the community have enough resources currently to address the issue/problem?
- Is funding for the intervention available and sustainable to address the issue/problem?
 - Property tax dollars
 - Reimbursement – government or billable services
 - Grants

Weighted Prioritization

- Criteria/indicators/categories established for assessing data
 - Each criterion given a weight based on importance, impact, etc.
 - 5 = High feasibility, impact, or need
 - 3 = Medium feasibility, impact, or need
 - 1 = Low feasibility, impact, or need
 - 0 = Not applicable Each criterion give a score

Weighted Prioritization

- Criteria are scored based on level of need
 - 5 -- Substantial additional interventions or programs are needed
 - 3 -- There are some interventions, but more interventions or programs are needed.
 - 1 -- There are many interventions or programs and no additional assistance is needed.
- The scores adjusted by the weight are summed.
- The higher the score, the more of a priority for the county or community.

Dot Method

- Criteria used to discuss the focus area/issue.
- Each member is given a set of dots for voting.
 - The number of dots can vary.
 - Research suggests $\frac{1}{3}$ of the number of area assessed, i.e., each participant gets 6 dots if 18 areas are being assessed.
- Facilitator gives participants an overview of each of the issues and asks participants to discuss all the relevant issues.

Dot Method

- Criteria used to discuss the issue/problem.
- To start, facilitator gives participants an overview of each of the issue/problems and asks participants to discuss all the relevant factors.
- Each member then is given a set of dots for voting.
 - The number of dots can vary.
 - Research suggests $\frac{1}{3}$ of the number of area assessed, i.e., each participant gets 6 dots if 18 areas are being assessed.

Dot Method

- At the end of the discussion, participants place one or more dots corresponding to the issue(s)/problem(s) to show their strong preferences for that issue/problem as a priority.
- Issue(s)/problem(s) with the most dots is/are the top priority (ies).
- You may wish to conduct this voting in several rounds to quickly eliminate those issues/problems where there is no interest to identify as a priority.

Other Resources

- <https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources>
- https://www.cdc.gov/globalhealth/healthprotection/fetp/training_modules/15/community-needs_pw_final_9252013.pdf
- https://communityactionpartnership.com/publication_toolkit/community-needs-assessment-resource-guide/
- <https://www.healthworkforceta.org/community-health-needs-assessment/>

Questions?

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