DOMAIN 1 - Community Health Assessment

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 1.1: Participate in or conduct a collaborative process resulting in a comprehensive community health assessment.			
1.1.1 T/L: Participate in or conduct a Tribal/local partnership for the development of a comprehensive community health assessment of the population served by the local public health system.			
Has your agency been involved in a tribal/local partnership to plan or conduct an assessment of the health of the community? What partners were involved in the assessment? What role did various partners have in the process? **Definition: A community health assessment is a systematic examination of the health status indicators for a given population that is used to identify key problems and assets in a community. The ultimate goal of a community health assessment is to develop strategies to address the community's health needs and identified issues. A variety of tools and processes may be used to conduct a community health assessment; the essential ingredients are community engagement and collaborative participation.** **Example: partnerships may include healthcare providers, schools, departments of tribal/local government, community-based agencies, local health department, social services, business, etc.**			
1.1.2 T/L: Complete a Tribal/local community health assessment.			
Has your agency taken part in completing a Tribal/local community health assessment? *How was information gathered for the assessment? What data was collected? How were community members involved in the process? What knowledge do community members have about the process and opportunity to be involved?* *If as assessment has been done, what were the successes and challenges of the process?* *Do you have suggestions for completing future assessments? What changes or resources might make future assessments easier to conduct?* **Example: Tribal health center staff were involved in completing the MAPP process; CHANGE tool, Adult Tobacco Survey.**			

1.1.3 A: Ensure that the community health assessment is accessible to agencies, organizations, and the general public.			
Are the results of the community health assessment available to everyone in the community to see, including organizations and the general public? If a community member wanted information about the results of the assessment, how could they get them? *In what ways could the assessment be made more accessible for everyone?What are some additional venues that might be appropriate for sharing the results?* **Example: Publishing results of the assessment in a pamphlet or brochure; make the results available in common areas of the health clinic; posted on a website; shared through a presentation with leadership**			
Standard 1.2: Collect and maintain reliable, comparable, and valid data that provide information on conditions of public health importance and on the health status of the population.			
1.2.1 A: Maintain a surveillance system for receiving reports 24/7 in order to identify health problems, public health threats, and environmental public health hazards.			
Does your community have or use a system that can receive reports 24/7 to identify any health problems, public health threats and/or environmental public health hazards? **Example: Threats and hazards might include an infectious disease outbreak or release of hazardous chemicals into the environment.** *If so, how well is the system working? Is it well organized and useful?* *If not, how does the local community keep track of public health threats?* **Definition: Participation in a local or statewide network system that provides notification to local public health staff in the event of a major outbreak of pandemic flu.**			
1.2.2 A: Communicate with surveillance sites at least annually.			
What agencies or groups report health data back to the tribal health system/clinic? What other agencies or departments does your clinic work with to obtain public health information? *What system/protocol is in place to ensure that there is communication on a regular basis between agencies outside of the Tribe/Indian health center that report data and the tribal health center itself?* **Example: Holding quarterly or annual meetings with external entities. Agencies that might report back to the Tribal health clinic could include Healthy Start, local health departments, or schools.**			

1.2.3 A: Collect additional primary and secondary data on population health status.			
How could your local consortium collect extra information from other sources about the health of the community? *Have other tribal agencies (law enforcement, parks and recreation, etc.) conducted surveys in the past year? Would they be willing to share results?* *Where could you look for primary and secondary data about health in the community?* **Definition: Primary data are data observed or collected from original sources such as interviews, surveys, focus groups, etc. Secondary data are data which have been collected in the past, collected by other parties, or result from combining data from existing sources.** *What information is still needed in order to get a "complete picture" of the health of the whole community (including priority groups)?*			
1.2.4 T: Provide reports of primary and secondary data to other public health agencies in the state.			
Were results of the community health assessment shared with state and local health departments? Shared with other agencies in the local public health system? *What feedback, if any, was given about the reports? Is there a process in place about how to share reports with state and local health departments?* **Example: Distributed data can be in hard copy or web-based format and reports may address social conditions within the tribal community that impact infant mortality or other factors influencing health.**			

Standard 1.3: Analyze public health data to identify trends in health problems, environmental public health hazards, and social and economic factors that affect the public's health.			
1.3.1 A: Analyze and draw conclusions from public health data.			
Who was involved in review and analysis of the health information that was gathered for the community assessment? What process is there within the local public health system to regularly review community health data? *What conclusions were made after looking over the community's health information that was gathered?* *What underlying factors or trends (clusters, health problems, behavioral risk factors, environmental public health hazards, or social and economic conditions that affect the health of the community) were identified by reviewing the data? What was unexpected or surprising?* **Example: Discussion within local consortium regarding the data points that stand out most from the results. Over discussion of results, group comes to consensus about the interpretation or meaning of the information. Notable findings might include high levels of tobacco use during pregnancy or high rates of obesity among particular age/gender groups**			
1.3.2 T: Provide public health data to the Tribal community on a variety of public health issues, at least annually.			
Does the tribal health clinic provide public health data to the tribal community at least once a year? *How is the information shared with the community and what is the feedback from the community? Does the information reach everyone? Who may not get the information?* **Example: Information can be in hard copy or distributed via a verbal presentation to an audience of community members. Reports of health data can also be distributed via mailing lists, email, workshops, websites, press releases, etc.**			

Standard 1.4: Provide and use the results of health data analysis to develop recommendations regarding public health policy, processes, programs or interventions.			
1.4.1 A: Use data to recommend and inform public health policy, process, programs, and/or interventions.			
How do tribal/local agencies use data to update policies and programs that affect public health? *How are various groups and agencies throughout the community involved in this process?* *How old is the data used to update policies and programs and where is the data from? Is more recent or reliable data needed?* **Example: Findings might include an unexpectedly high rate of substance among youth, and this information is used to draft a youth possession policy and inform a public media campaign.**			
1.4.2 T/L: Develop and distribute tribal/community health data profiles to support public health improvement planning processes at the tribal or local level.			
Does any agency in the community create a "health profile" with community health data? If yes, how is this used for health improvement planning? **Definition: A health profile could be an overview of a particular health issue within the community such as infant mortality, or may focus on specific indicators of infant mortality such as substance abuse. The profile includes key data points (indicators) of health status related to the health issue.**			

DOMAIN 2 - Investigation

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 2.1: Conduct timely investigations of health problems and environmental public health hazards.			
2.1.1 A: Maintain protocols for investigation process.			
Is there a set of steps used (a formal procedure) by the tribal/local health system to investigate health problems and environmental public health hazards in a timely manner? **Example: Developing procedures to investigate the outbreak of a sexually transmitted disease, increased rates of premature births or chemical emissions, etc.** *Is the procedure consistent between investigations? Are there rules to follow when investigating public health concerns?* **Example: Written protocols that include a procedure for investigation and assignment of staff responsibilities.**			
2.1.2 T/L: Demonstrate capacity to conduct an investigation of an infectious or communicable disease.			
Is the tribal/local health system able to investigate outbreaks of infectious diseases? **Example: Is the system prepared to participate in investigating an outbreak of influenza, measles, or food borne illness? Are there staff and resources to conduct an investigation?** *When was the last time an infectious disease outbreak had to be investigated in the local community? What happened? What role did agencies have in the process?* *Is there a protocol for investigating the outbreak when it occurs in overlapping jurisdictions? Who has authority for what? Who is in charge?* **Example: A formal arrangement between the tribal public health system and state/local health departments agreeing to participate in an investigation and support the Tribal health system.**			
2.1.3 A: Demonstrate capacity to conduct investigations of non-infectious health problems, environmental, and/or occupational health hazards.			
Is the tribal/local health system able to investigate non-infectious diseases, environmental, and/or occupational hazards? *When was the last time a non-infectious disease or environmental/occupational hazard was investigated? What was it for? What role did agencies have in the process? How did it work? What barriers were there to completing the investigation?* **Example: An environmental public health hazard might be lead found in the drinking water or a chemical spill**			

2.1.4 A: Work collaboratively through established governmental and community partnerships on investigations of reportable/disease outbreaks and environmental public health issues.			
Does the tribal/local public health system work with community agencies and local government to investigate diseases and environmental public health problems? **Example: A written agreement is in place that shows the different partners that play a role in investigation and what their roles are.** *What types of partners come to or should be at the table in the event of a disease investigation?*			
2.1.5 A: Monitor timely reporting of notifiable/reportable diseases, lab test results, and investigation results.			
Are reportable diseases, lab test results, and investigation results reported in a timely manner to necessary partners and agencies? **Definition: Reportable diseases are those that health institutions are required by law to report so that surveillance systems can detect an outbreak of the disease right away.** *Are all partners notified and given access to these investigations and results?* **Example: State law may require that reports are given to local health departments, hospitals, state health departments, etc.**			
Standard 2.2: Contain/mitigate health problems and environmental public health hazards.			
2.2.1 A: Maintain protocols for containment/mitigation of public health problems and environmental public health hazards.			
Is there a process to follow for containing health problems and environmental hazards in the community? Is the process effective in containing health problems to lessen the negative effect on the population? **Example: There is a written plan and process in place to contain an influenza outbreak.**			
2.2.2 A: Demonstrate a process for determining when the All Hazards Emergency Operations Plan (EOP) will be implemented.			
Definition: An All Hazards Emergency Operations Plan is an action plan for addressing a natural disaster, terrorist event, disease outbreak or cluster, environmental public health hazard or other emergency that threatens the population's health. *Is there a protocol for figuring out when to use the All Hazards Emergency Operations Plan (EOP)? What topics are included in the protocol? Is it useful?* **If no EOP or equivalent is maintained by the system, write "N/A".**			

2.2.3 A: Complete an After Action Report (AAR) following events.			
Are there After Action Reports (AAR) that are completed after events within the tribal community? **Definition: An After Action Report gives a description and analysis of the tribal/local health system's performance during an emergency operation, identifies issues that need to be addressed, and includes recommendations for corrective actions for future emergencies and disasters.** If no AAR or equivalent is completed by the system, write "N/A:".			
Standard 2.3: Ensure access to laboratory and epidemiologic/environmental public health expertise and capacity to investigate and contain/mitigate public health problems and environmental health			
2.3.1 A: Maintain provisions for 24/7 emergency access to epidemiological and environmental public health resources capable of providing rapid detection, investigation, and containment/mitigation of			
Does the tribal/local public health system have 24/7 emergency access to public health resources that can support detection, investigation and containment of public health problems? *What types of resources might be used in these situations?* **Example: Maintaining a phone tree used to contact public health resources either within the health department or outside it in the event of a public health emergency 24/7.** *Do you think the tribal/local health system would be able to detect, investigate and contain a public health problem if one emerged?*			
2.3.2 A: Maintain 24/7 access to laboratory resources capable of providing rapid detection, investigation and containment of health problems and environmental public health hazards.			
Is there 24/7 emergency access to lab resources that can be used to quickly detect, investigate and contain public health problems? *Do you think these lab services are capable of carrying out these duties in a timely manner?* **Example: A lab either within the health clinic or outside of it that can detect disease agents 24/7 in the event of a public health emergency such as a disease outbreak.**			

2.3.3 A: Maintain access to laboratory and other support personnel and infrastructure capable of providing surge capacity.			
Is there maintained access to support personnel that is able to provide surge capacity in the event of a public health emergency? **Definition: Surge capacity refers to the ability to expand care or service capabilities in response to unanticipated or prolonged demand.** *Do you think the amount of support personnel available is adequate to detect, investigate and contain a public health problem in the community?* **Example: Development of agreement or protocol that identifies support personnel from or outside the health clinic that can assist in detecting, investigating or containing a public health problem.**			
2.3.4 A: Demonstrate that Tribal, state, and local health departments work together to build capacity and share resources to address Tribal, state, and local efforts to provide for rapid detection,			
Do the tribal, state, and local health departments have the ability to work together to provide detection, investigation and containment of public health problems that cross jurisdiction lines? *Is there documentation that shows the shared resources and/or additional capacity joint exercises between tribal, state and local health departments that can be used in the event of a public health problem?* **Example: A memorandum of understanding between the tribal health system and the local and state health departments that outlines plans to communicate and collaborate to address public health problems that cross jurisdictions.**			
Standard 2.4: Maintain a plan with policies and procedure for urgent and non-urgent communications.			
2.4.1 A: Maintain written protocols for urgent 24/7 communications.			
Are there written steps for handling urgent 24/7 communications within and between agencies? *Do agencies/health department partners and the public have access to the protocol?* **Example: Communication plans developed with and distributed to partners such as law enforcement, schools, hospitals, government agencies, etc.** *In the event of an emergency, is the protocol actually used? If not, why?*			

2.4.2 A: Implement a system to receive and provide health alerts and to coordinate an appropriate public health response.			
Is there a system in place to receive and give health alerts to and from the general public? **Example: Participation in a Joint Information Center (JIC) or Health Alert Network (HAN) that receives and issues alerts 24/7.** *When the health alerts are received, is it passed on to other partners (i.e. health care providers, emergency responders)?* *Do you feel that the system would be able to take the health alerts and find an appropriate public health response?*			
2.4.3 A: Provide timely communication to the general public during public health emergencies.			
In the event of a public health emergency, do you feel that community members would be notified in a timely manner? If not, why? *What are some ways that those responsible for notifying the public could send the message out? Would these forms of communication reach everyone?* **Example: Notifying the public of emergencies via a website posting, email, television and radio media, etc.**			

DOMAIN 3 - Education

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 3.1: Inform and educate about public health issues and functions.			
3.1.1 A: Provide information to the public on protecting their health.			
What information given to community members about how they can protect their health? *What could make the information more useful, if it isn't already? Do people understand and take the information into consideration for protecting their health?* **Example: Public health information/education may address health risks such as high blood pressure; health behaviors such as unprotected sexual activity; disease or injury prevention such as immunizations or seat belt use; and/or wellness such as healthy nutrition and exercise.**			
3.1.2 A: Implement health promotion strategies to protect the population from preventable health conditions.			
What activities are going on in the community to help people improve their health? *What other health activities would you like to see in the community, or in what way could the current activities be improved? What gaps are there in health services? Who may these services be missing?* *What role does each agency/program play in protecting and improving the health of the community? How well coordinated are these activities?* **Example: Interventions involving health education, community change, or organizational and social supports that provide conditions that support the health of individuals and the community as a whole.**			
Standard 3.2: Provide information on public health issues and public health functions through multiple methods to a variety of audiences.			
3.2.1 A: Provide information on public health mission, roles, processes, programs and interventions to improve the public's health.			
Is the community aware of the mission and role of the various agencies? How is the public informed? Does the community know the role of public health (to improve the overall health of the community)? *Does the public know abouthealth programs and interventions (activities, policies, regulations) to improve the health of the community?* *How could the public be informed of these things?* **The roles, activities, and current initiatives of the clinic or public health system may be posted on the internet, in a brochure, on a newspaper insert, etc.**			

3.2.2 A: Establish and maintain communication procedures to provide information outside the health department.			
What formal rules/processes exist for communicating with the public about public health issues? **Example: The health agency may have procedures that outline the process for giving out information accurately, timely and appropriately to target audiences.** *When public health information is given to the community, is it in a format that is appropriate for the target audience? How do you know? what feedback do you get from community members?*			
3.2.3 A: Maintain written risk communication plan.			
Does the community have a written plan that details the communications and media protocols that will be followed during a public health crisis or emergency? **Example: A risk communication plan may also be called an emergency communication, crisis communication or media communication plan.** *What if there is a rumor or misinformation about an emergency, does the plan explain how to deal with public alarm/panic?* **Example: A risk communication plan would provide protocols and an outline of roles and responsibilities for staff of how the health system will work with media and the public during an emergency.**			
3.2.4 A: Make information available through a variety of methods.			
Is health information available and accessible to community members through a variety of methods and formats? *What format do you prefer to get information in?* *What methods are not being used to distribute health information?* **Example: A webpage, radio or television program, or newsletter, that delivers health data, public health program information, and contact information for reporting disease outbreaks.**			
3.2.5 A: Provide accessible, accurate, actionable, and current information in culturally sensitive and linguistically appropriate formats for populations served by the health department.			
Is public health information given to community members in a way that is useful, meaningful, and understandable to them? *Are there ways to make information accessible and useful to people that may speak another language, be hearing impaired or have low literacy?* **Example: Providing brochures in another language to make health information accessible for those speaking a different language. Supporting written text in newsletters with images for low-literacy individuals.**			

DOMAIN 4 - Community Engagement

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 4.1: Engage with the community to identify and address health problems.			
4.1.1 A: Establish and/or actively participate in partnerships and/or coalitions to address specific public health issues or populations.			
What partnerships/groups/coalitions exist within your community that look at specific public health problems? **Example: Participation in local or statewide a maternal and child health coalition or anti-tobacco consortium.**			
Who are the agency partners at the table and who else could be a partner? Who else could be involved in a partnership that is currently not involved?			
What kinds of public health problems need to have a greater focus on them?			
4.1.2 T/L: Link stakeholders and partners to technical assistance regarding models of engaging with the community.			
Does the tribal/local health agency help link partners and agencies to people within the community? Does the tribal/local agency help outside agencies engage the community in working on health and solving health problems? Does the tribal/local agency provide other agencies with information about how best to engage with the community? **Example: Providing other agencies with information about cultural norms, values, relationship building skills, building trust, communication styles, shared decision making, tribal soverignty.**			
Standard 4.2: Promote the community's understanding of and support for policies and strategies that will improve the public's health.			
4.2.1 A: Engage with the community about policies and/or strategies that will promote the public's health.			
Is the general community engaged in discussions about policies to improve the community's health? **Example: Holding a community forum about a proposed policy change; giving community members time to comment on proposed policy changes.**			
Do you think there is support from community members for public health policies and strategies?			
In what ways could community members be more involved in these processes?			

4.2.2 A: Engage with governing entities, advisory boards, and elected officials about policies and/or strategies that will promote the public's health.
Are governing bodies, advisory boards, and officials involved in discussions about policies that will promote the community's health? Why or why not? *What might be the benefits of engaging with them around public health policies?* *How could these groups be invited to talks about public health policy?* **Example: Planning a meeting or event to present a new public health policy to lawmakers and advisory boards. Presenting decision-makers with information to increase support for public health policies through informing and engagement.**

DOMAIN 5 - Policies & Plans

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 5.1: Serve as a primary and expert resource for establishing and maintaining public health policies, practices, and capacity.			
5.1.1 A: Monitor and track public health issues that are being discussed by individuals and entities that set public health policies and practices.			
Are agency partners aware of what public health problems are being discussed by the decision-making bodies (councils, boards) who determine public health policies and practices? **Example: The tribal health department/clinic reads reports or summaries of public health issues by other departments, elected officials or governing entities.** *Are agency partners in the local public health system prepared to inform policy decisions with science-based information?* **Example: Tribal/local health agency staff present at council meetings about health issues and "best practices" for addressing the health issues.** *How can tribal/local health agency partners make sure they are kept in the loop about public health policy discussions?* **Example: Community health manager attends all health board meetings.**			
5.1.2 A: Engage in activities that contribute to the development and/or modification of public health policy.			
Are tribal/local public health agency partners involved in activities that will lead to the creation or updating of public health policies? **Example: The tribal health department/clinic informs the public about the need for a new health related policy and asks program clients to speak in support of these policies at board meetings.** *How can tribal/local health agency partners become more involved in the policy process?* *What is the importance of being involved in activities that promote health policy development?*			
5.1.3 A: Inform governing entities, elected officials, and/or the public of potential public health impacts, both intended and unintended, from current and/or proposed policies.			
How are the government and the public informed of any possible consequences that could arise from current or new public health policies? **Example: The loca/tribal health department/clinic could provide decision-makers with an impact statement or fact sheet that addresses potential benefits and risks of proposed policies that would affect public health.** *Is there more that can be done to inform any of these groups about possible affects that policies can have on the health of community members?*			

Standard 5.2: Conduct a comprehensive planning process resulting in a Tribal/State/Community Health Improvement Plan			
5.2.1 T: Conduct a process to develop a tribal/local community health improvement plan.			
Have different types of agencies throughout the community worked together to create a process for developing a tribal community health improvement plan? **Example: Completing the Mobilizing for Action through Planning and Partnership (MAPP) model in order to use the results to generate an action plan.** *What are some ways to get different types of agency partners and stakeholders together to conduct undergo process?*			
5.2.2 T: Produce a tribal/local community health improvement plan as a result of the health improvement process.			
Was an actual plan developed according to results of the planning process? What steps would be involved in this process? **Definition: A community health improvement plan includes: improvement strategies; measurable and time-framed targets; policy changes needed to reach targets; partners and their roles; measurable health outcomes to monitor progress.** *What is/would be the role of different agencies in creating this health improvement plan?* *What is/would be the role of different agencies in carrying out this plan?*			
5.2.3 A: Implement elements and strategies of the health improvement plan, in partnership with others.			
Has the health improvement plan been carried out in partnership with many various tribal/local agencies? **Example: If results of the planning process indicate low literacy among young mothers, the system might consider collaborating with an alternative high school to implement an intervention targeting reading levels among women. The community health improvement plan could provide guidelines for priorities, activities and sharing resources among partners.** *If the community doesn't have a plan, what partners might be able to utilize parts of a plan if one was created in the future? What other plans currently exist and how could they be incoporated into a community health improvement plan?*			

5.2.4 A: Monitor progress on implementation of strategies in the community health improvement plan in collaboration with broad participation from stakeholders and partners.			
How could a community health improvement plan be evaluated? If you have one for your community, how is it evaluated? **Definition: Evaluation is measuring progress toward objectives in order to made decisions and take action when strategies need improvement.** *What would be the benefits of evaluating the plan? Who will/would be responsible for evaluating the plan?*			
Standard 5.3: Develop and implement a health department organizational strategic plan.			
5.3.1 A: Conduct a department strategic planning process.			
Has the tribal/local health agency created a strategic plan for the agency? **Definition: Strategic Planning for the clinic or health system might include analysis of opportunities and threats, strengths and weaknesses, or stakeholders; environmental scanning; or scenario development.** *What did the process look like or what might it look like for developing a strategic plan? Is the process linked to the process for developing a community health improvement plan?* *Is the plan understood by everyone who works at the health agency? Why or why not?*			
5.3.2 A: Adopt a strategic plan.			
Has the health clinic adopted a strategic plan? Might the clinic adopt a strategic plan in the future? What could the strategic plan look like? **A strategic plan would include a mission; vision; strategic priorities; objectives with measureable and time-framed targets; identification of external factors that may impact community health. A strategic plan defines and determines the clinic's roles, priorities, and direction over three to five years. The plan may be approved or adopted by Tribal Council or other governing board.**			
5.3.3 A: Implement the strategic plan.			
To what extent has the system implemented the agency's strategic plan? **Example: Assigning responsibility and taking action to implement portions of the strategic plan; assigning persons responsible for monitoring the plan; scheduling meetings to follow up on the plan.** *What might be useful about the plan? How could the plan be used to guide activities of the clinic?*			

Standard 5.4: Maintain an all hazards emergency operations plan.			
5.4.1 A: Participate in the process for the development and maintenance of an All Hazards Emergency Operations Plan (EOP).			
Is there an All Hazards Emergency Operations Plan (EOP) in your community? *Would the tribal/local health agency be willing to participate in creating one?* *What responsibilities and roles would need to be decided upon as part of this process (authority on tribal lands, who leads the emergency response, etc)* *What other partners should be involved in creating an EOP?* *Exdample:* **Work with other Tribal departments to develop a plan for effectively responding to various types of emergencies that affect public health, such as natural disasters, pandemics, emergencies.**			
5.4.2 A: Adopt and maintain a public health emergency operations plan (EOP).			
If the community does have an Emergency Operations Plan (EOP), how is it kept up-to-date? *If there isn't one, how could a future EOP be kept up-to-date?* *What might be the roles and responsibilities of different agencies and partners from your community in an EOP?* **Example: Working with other Tribal departments (law enforcement, school district, etc.) to implement a plan to effectively respond to various types of emergencies. Holding exercises to practice implementation of the plan.**			

DOMAIN 6 - Enforcement

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 6.1: Review existing laws and work with governing entities and elected/appointed officials to update as needed.			
6.1.1 A: Review laws to determine the need for revisions.			
Do tribal/local agency partners regularly look at current laws to see if updates are needed? **Example: Health director has meetings with Council, Health Board, or other governing body to review existing laws and provide input for revisions.** *What kinds of things are considered when updating public health laws?* *Who is/should be involved in reviewing public health laws in the community?*			
6.1.2 A: Inform governing entity and/or elected/appointed officials of needed updates/amendments to current laws and/or proposed new laws.			
Is the tribal/local government informed of needed updates/amendments to current or proposed laws? How are they informed and by whom? **Example: The Tribal health system might inform the Tribal Council or Health Board of law changes needed to address emerging threats, such as increased attempts to market tobacco to children.**			
Standard 6.2: Educate individuals and organizations on the meaning, purpose, and benefit of public health laws and how to comply.			
6.2.1 A: Maintain agency knowledge and apply public health laws in a consistent manner.			
Are public health laws enforced throughout the community in a consistent manner? Who enforces the laws? How is enforcement carried out? **Example: Determining and ensuring that prohibition against the sale of tobacco products to minors is enforced consistently at all points of sale is done by the tribal police.** *Are the public health laws clearly understood by those who enforce them?* *Do all tribal/local agency partners understand how public health-relatd laws support the good health of all people throughout the community? Is this message promoted to the general public?* **Example: The majority of the public understand that smoke-free air laws help protect everyone from secondhand smoke exposure.**			

6.2.2 A: Ensure that laws and permit/license application requirements are accessible to the public.			
Does the general public have ways of looking at laws and seeing permit/license application requirements? *What might be a better way to make sure the public has access?* *Why might members of the public need licensing information?* **Example: The health department website could have links to to laws along with forms and other parts of a permit or licensing process.**			
6.2.3 A: Provide information or education to regulated entities regarding their responsibilities and methods to achieve full compliance with public health related laws.			
Are regulated agencies in the community aware and educated about public health laws and how to comply with them? **Example: Providing information to school staff regarding the need to enforce immunization requirements for students.** *Which agencies in your community are regulated and would therefore need to comply with public health laws?* *What might be some ways that regulated agencies can be notified of new laws that will affect them?*			
Standard 6.3: Conduct and monitor public health enforcement activities and coordinate notifications of violations among appropriate agencies.			
6.3.1 A: Maintain current written procedures and protocols for conducting enforcement actions.			
Who makes sure that public health laws are being enforced consistently? *Do the enforcement agencies collaborate to enforce the laws consistently and inform one another of non-compliance?* *Are there up-to-date, written procedures for enforcing public health laws in the community?* **Example: Maintaining a manual that specifies the responsibilities and authority of various entities-- In some cases the health department/clinic enforces the laws, but sometimes other entities are given authority to conduct enforecment.**			
6.3.2 A: Conduct and monitor inspection activities of regulated entities according to mandated frequency and/or a risk analysis method that guides the frequency and scheduling of inspections of			
Do public health inspections take place within the community? If so, when? **Example: Implementing a formal plan to regularly inspect restaurants for food safety, according to mandate or results of risk analysis.** *Are there guidelines for how often inspections should take place? Are the guidelines followed?* *If there is no schedule for inspection, how does the tribal/local health agency ensure that one is put in place?*			

6.3.3 A: Follow procedures and protocols for both routine and emergency situations requiring enforcement activities and complaint follow-up.			
What procedures, if any, are in place for enforcement activities and for following up with complaints? *Are the procedures followed? Why or why not?* **Example: Complying with a plan that specifies which agencies are responsible for various enforcement actions.**			
6.3.4 A: Determine patterns or trends in compliance from enforcement activities, and complaints.			
From looking over documented public health law enforcement activities and complaints, can you see any trends or patterns? **Example: Youth tobacco possession laws are not enforced on school grounds.** *What might the patterns tell you about enforcement activities? Are some instances of non-compliance or complaints more prevalent than others?* **Example: Identifying opportunities for improvement for some enforcement activities through education of agency personnel doing the enforcement.**			
6.3.5 A: Coordinate notification of violations to the public, when required, and coordinate the sharing of information among appropriate agencies about enforcement activities, follow-up activities, and			
Is the public notified about public health law violations? How is the public notified? *Why might it be important for the public to know when a public health law has been violated?* **Example: Sharing information with partners and the community as necessary when a restaurant or nursing home does not comply with public health laws.**			

DOMAIN 7 - Access

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 7.1: Assess health care service capacity and access to health care services.			
7.1.1 A: Convene and/or participate in a collaborative process to assess the availability of health care services.			
What is each agency's role in providing (or ensuring access to) each of the following health care services? · *Clinical preventive services* · *Emergency services* · *Urgent care* · *Occupational medicine* · *Ambulatory care* · *Inpatient care* · *Dental treatment* · *Behavioral health* *What partners are involved in providing these services?* *Has there been any efforts to work across agencies to assess the availability of health care services for community members?* *How are resulting data (health care data) shared among involved partners? Are formal or informal agreements established between agencies?* **Example: Having an established formal or informal agreement with the local hospital to share records regarding prenatal care and delivery.** **Example: Working with local social service agencies to assess the type of health needs and level of access to care among their clients.**			
7.1.2 A: Identify populations who experience barriers to health care services.			
What groups in your community could be considered at-risk for poor health? For instance, what are the most common barriers to care in the community? Who has barriers to health care? *How have local/tribal agencies and partners been involved in identifying these at-risk groups? Which partners provide them with care or other services?* *Who may need healthcare but isn't getting it—for instance, due to their personal circumstances, such as unemployment, lack of cash assistance, etc.?* *What populations do previous health assessment results indicate are priorities?* **Example: Focus groups have found that some community members want more done to involve the elders in wellness programs or other activities.** **Example: Survey results show that pregnant women who continue using drugs throughout their pregnancy do not seek care for fear of losing their child.**			

7.1.3 A: Identify gaps in access to health care services.			
How does each of these types of issues cause gaps in health care services? • *Financial (cost of services, lack of assistance)* • *Health care system capacity (lack of physicians or dentists)* • *Cultural (health-related beliefs and norms)* • *Geographic (lack of transportation)* *Why do you think that groups with barriers are not getting the care that they need?* *What gaps have previous health assessments suggested?* *What additional or new types of partners are needed to address gaps in services?* **Example: Limited availability of dentist at Tribal health clinic makes it difficult for patients to make a timely appointment.**			
Standard 7.2: Identify and implement strategies to improve access to health care services.			
7.2.1 A: Convene and/or participate in a collaborative process to establish strategies to improve access to health care services.			
How does each tribal/local agency/department work toward improving access to healthcare services in the community? *What partners are involved in this effort to improve access?* **Example: There are meetings of a coalition to discuss strategies for better meeting the needs of those lacking access to care.**			
7.2.2 A: Collaborate to implement strategies to increase access to health care services.			
What efforts are going on in your community to increase access to healthcare? This might include: • *Linking individuals to existing services (care navigation)* • *Providing transportation* • *Partnering with other community resources to coordinate services* *What formal agreements (MOA or MOU) exist between your agency and the partners described above?* **Example: Establishing an agreement between behavioral health department and health clinic staff to refer pregnant women using tobacco to cessation services.**			
7.2.3 A: Lead or collaborate in culturally competent initiatives to increase access to health care services for those who may experience barriers due to cultural, language, or literacy differences.			
What culturally tailored health programs and services exist in the community? *What other programs could be improved by becoming more culturally relevant?* **Example: Providing training and education for clinic providers and staff regarding traditional medicine and American Indian cultural beliefs about health and wellness.**			

DOMAIN 8 - Workforce

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 8.1: Encourage the development of a sufficient number of qualified public health workers.			
8.1.1 T/L: Establish relationships and/or collaborations that promote the development of future public health workers.			
What current partnerships are in place to help encourage a supply of workers in public health agencies/programs? Think about the following types of agencies: · *Schools* · *Academic programs* · *Vocational training programs* *What partnerships don't you have that might be useful?* **Example: Establishing a partnership with the local community college to provide internships for nursing students within the tribal/local health agency.**			
Standard 8.2: Assess staff competencies and address gaps by enabling organizational and individual training and development.			
8.2.1 A: Maintain, implement and assess the health department workforce development plan that addresses the training needs of the staff and the development of core competencies.			
What training opportunities have been made available over the past couple of years, for health center workers or general tribal employees? *What training is most needed among employees? Most requested?* *What current efforts exist to increase the capacity of the workforce?* **Example: Providing annual staff training on specific public health issues, best practices.** **Example: Provide staff the opportunity to attend state or national conferences to obtain CEUs.**			
8.2.2 A: Provide leadership and management development activities.			
What programs or activities have been offered over the past two years in the community to help people develop leadership and management skills? *Do people participate in the trainings? Is there a demand for more trainings?* **Example: Building leadership skills by providing scholarships for managers to attend state or national tribal leadership conferences.**			

DOMAIN 9 - Quality Improvement

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 9.1: Use a performance management system to improve organizational practice, processes, programs, and interventions.			
9.1.1 A: Engage staff at all organizational levels in establishing or updating a performance management system.			
Who is involved in monitoring how well tribal/local agencies are performing (meeting the expectations set for them, achieving their goals)? *How is performance of tribal/local health agencies tracked and measured?* *How can the this process for measuring performance be improved (or created if there is not one in place)?* **Example: Presenting draft policies for establishing quality assurance measures in providing prenatal care to Tribal Council for approval.** **Example: Have a process for gathering input from clinic staff regarding important indicators to track with a performance management system.**			
9.1.2 A: Implement a performance management system.			
What goals, objectives, and measures for quality improvement exist for agencies within the local public health system? *What is going well? What are some opportunities/areas for improvement?* **Example: Healthy Start tracks indicators on an annual basis such as the percentage of expectant mothers who receive prenatal care during the first trimester. The Tribal clinic tracks how many diabetic patients receive comprehensive diabetes care on a quarterly basis.**			
9.1.3 A: Use a process to determine and report on achievement of goals, objectives, and measures set by the performance management system.			
What is the process used to determine whether or not each agency has achieved its goals, objectives and measures? *How are the evaluations used to improve the local health system?* *Is the system meeting all of its outcome targets?* *How are the results of the performance monitoring shared with clients and community members? How are findings reported?* **Example: Conducting quarterly review of key indicators (% of mothers receiving prenatal care, % of infants meeting immunization guidelines, etc.) using data from RPMS to determine areas where improvement may be needed.**			

9.1.4 A: Implement a systematic process for assessing customer satisfaction with health department services.			
How is consumer satisfaction within each agency in the local public health system assessed? *In what ways is consumer feedback collected and analyzed? How do agencies use that feedback?* **Example: Providing paper surveys when patients check out to solicit feedback on their services and experience.**			
9.1.5 A: Provide staff development opportunities regarding performance management.			
How do agencies within the local public health system help staff understand and use performance management? *What kinds of trainings are offered for staff to learn about performance management and evaluation?* **Example: Providing opportunities to clinic staff to attend computer trainings familiarizing them with the performance management system.**			
Standard 9.2: Develop and implement quality improvement processes integrated into organizational practice, programs, processes, and interventions.			
9.2.1 A: Establish a quality improvement program based on organizational policies and direction.			
Is there a quality improvement plan established for agencies within the local public health system? *Who is involved in writing, updating and implementing the quality improvement plan?* *What are the goals and mission of the various agencies? Are these integrated into the quality improvement plan?* **Example: Development of a quality improvement plan that reflects the agency's mission and goals-- for instance, defining the specific tasks that make up comprehensive prenatal care and education, setting objectives to increase the incidence of women who seek prenatal care during the first trimester of pregnancy, or setting an objective to increase the prevalence of women of reproductive age who have received comprehensive education.**			
9.2.2 A: Implement quality improvement activities.			
What benefits do you think staff might have from seeing the quality improvement plan put into action and getting feedback on how well they are doing and what areas need to be improved? *How does staff use quality improvement data and strategies to make their work more effective?* **Example: In reaction to low rates of prenatal care, develop and implement program strategies to engage women of childbearing age in the community in health promotion activities.**			

DOMAIN 10 - Evidence-Based Practice

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 10.1: Identify and use the best available evidence for making informed public health practice decisions.			
10.1.1 A: Identify and use applicable evidence-based and/or promising practices when implementing new or revised processes, programs, and/or interventions.			
What evidence-based practices are used by agencies within your community's local public health system within the last three years? **Definition: Evidenced-based practice involves making decisions on the basis of the best available scientific evidence, using data and information systems systematically, applying program-planning frameworks, engaging the community in decision making, conducting sound evaluation, and disseminating what is learned.** *What (if any) programs or processes have been revised to incorporate evidence-based practices?* **Example: Using the *Guide to Community Preventive Services* to develop an evidence based diabetes prevention program.** *In what programs or agencies might it be helpful to refer to evidence based practices for improving programs?* *How are evidence-based practices adapted or tailored to your unique community (in what ways do programs follow the Native culture, language, values, and customs)?*			
10.1.2 T/S: Foster innovation in practice and research.			
How do agencies in our community use new and creative approaches in addressing and understanding community health? *What types of new and creative approaches to addressing and understanding community health are agencies interested in trying?* *What research projects are partner agencies involved in and who are their partners? How will these projects help improve the health of Native American community members?* **Example: Participation in a community-based research project, or collaboration with a university or research organization to conduct research.**			

Standard 10.2: Promote understanding and use of research results, evaluations, and evidence-based practices with appropriate audiences.			
10.2.1 A: Ensure human subjects are protected when the health department is involved in or supports research activities.			
How does the health clinic/health department ensure that people who participate in research studies are protected (physically, mentally and emotionally) when they are involved in research activities? *Do you think community members feel safe to get involved in research studies? Why or why not?* *How does the tribal/local health agency ensure that the best interests of the Native American community are protected and promoted in all research activities?* **Example: Presenting potential opportunities for human involvement in research activites to an IRB, IRB equivalent, or Tribal Council for review and approval before beginning any research activities.**			
10.2.2 A: Maintain access to expertise to analyze current research and its public health implications.			
How do tribal/local agencies ensure that current research findings are reviewed and thoughtfully considered for changing current programs or practices? *If there is not expertise within the community, who is or could be contacted outside the community for review and interpretation of research findings?* **Example: Assigning staff or working with knowledgeable professionals from other agencies to evaluate new research findings and help apply those findings to the tribal/local health agency's work.**			
10.2.3 A: Communicate research findings, including public health implications.			
How do agencies within the tribal/local public health system let the public know about research findings and how those findings may effect the health and wellbeing of community members? *Is the information shared in a way that makes it understandable and useful to the general public? How do you know that people understand and use the information?* **Example: Presenting to Health board about the results of a program evaluation and how the program/service has impacted health of community members.**			

10.2.4 T: Provide technical assistance to the state health department, local health departments, and other public health system partners in applying relevant research results, evidence-based and/or			
How often does the tribal/local health agency communicate with the state health department, local health departments and other tribal partners about lessons learned from research or evidence-based practices? *How do agencies in the tribal/local community educate and inform state and local health departments about using culturally relevant approaches to improving health in Native American communities?* **Example: Meeting with public health staff from other Tribes to share strategies for implementing culturally tailored interventions.** **Example: Attending a conference to present on a successful approach to working with Native American community members to improve their health.**			

(OPTIONAL) DOMAIN 11 - Administration

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 11.1: Develop and maintain an operational infrastructure to support the performance of public health functions.			
11.1.1 A: Maintain policies and procedures regarding health department operations, review policies and procedures regularly, and make them accessible to staff.			
What is the health center's process for maintaining policies and procedures? *Who is in charge of developing, writing, reviewing, revising, training, and sharing health center policies and procedures with the staff?* *Does the staff have access to view the written policies and procedures?* **Example: Having on file an organizational chart of the clinic or health department.** **Example: Institute a working group to review current policies and procedures for pre- and postnatal care on a regular basis and revise them as necessary.**			
11.1.2 A: Maintain written policies regarding confidentiality, including applicable HIPAA requirements.			
What policies exist in the health center regarding confidentiality of patient information? *How are the policies maintained? Who is in charge of keep the policies up-to-date?* *How are staff educated on HIPAA requirements?* **Example: Using formal agreements to limit how and to whom electronic medical data can be shared with other departments or agencies.** **Example: Training handbook outlining confidentiality policies and procedures for all staff.**			
11.1.3 A: Maintain socially, culturally, and linguistically appropriate approaches in health department processes, programs, and interventions, relevant to the population served in its jurisdiction.			
What steps does the health center take in order to approach health in a way that is appropriate to the community's needs? *How does the health center ensure that processes, programs, and interventions are socially, culturally and linguistically appropriate?* *Do you think the programs and interventions currently in place are useful to the whole community?* *What changes made need to take place to make them appropriate and useful for everyone?* **Example: Adapting existing programs to better fit the needs of the Native American community by incorporating traditional methods of healing into primary health care visits.**			

11.1.4 A: Maintain a human resources system.			
What procedures are used for hiring, managing, evaluating and improving the performance of health center personnel? *Which particular individuals within the health center or from another agency are in charge of these processes?* **Example: Written policy to provide Tribal members with the first opportunity to apply for open positions of employment.** **Example: Providing all new and existing employees with an employee handbook or human resource manual that contains information regarding work hours, benefits, equal opportunity employment, etc.**			
11.1.5 A: Implement and adhere to the health department's human resources policies and procedures.			
How are human resource policies (those that guide hiring, managing, evaluating and improving the performance of health center personnel) enforced within the health center? *Is there a human resources department in the health center?* **Example: Administering an employee satisfaction survey to determine to what extent human resources policies are being adhered to.** **Example: Process in place to verify proof of enrollment for employees hired in accordance with Indian Preference law.**			
11.1.6 A: Use information systems that support the health department mission and workforce by providing infrastructure for data collection/analysis, program management, and communication.			
In what ways can the health system/clinic in your community gather health data? *How does the health system/clinic analyze the data?* *Does the health clinic have computer software that is capable of managing all of the data that is collected?* **Example: Use of electronic health records within Tribal health clinic.** **Example: Use of an electronic billing or grants management system.**			
11.1.7 A: Maintain facilities that are clean, safe, accessible, and secure.			
Would you say that the health clinic is clean, safe and accessible for staff and the public? *What improvements do you think should be made to the health clinic in this regard?* **Example: Conducting an environmental assessment.** **Example: Records documenting appropriate medical waste storage and disposal.**			

Standard 11.2: Establish effective financial management systems.			
11.2.1 A: Comply with external requirements for the receipt of program funding.			
What are the funding sources for the various programs and initiaitves of the health center? Is funding for programs stable and sustainable? *How does the health center ensure that the specific requirements of each funding source are met?* *Is the health center in need of or looking for more funding opportunities?* **Example: Completion of annual reports documenting compliance with federal grant requirements.** **Example: Reports to Tribal Council detailing compliance with procedures specified by varied funding sources.**			
11.2.2 A: Maintain written agreements with entities providing processes, programs and/or interventions delegated or purchased by the public health department.			
Does the health center cooperate with other agencies for some health programs or interventions provided to community members? What are some examples? *Are there written agreements in place between the health center and the other agencies?* **Example: Compact or funding agreement with U.S. DHHS to carry out programs of the Indian Health Service.**			
11.2.3 A: Maintain financial management systems.			
Who is in charge of the finances for the health center? *Are there any issues with the finances or the management of funds?* **Example: Quarterly or annual financial reports provided to funders.**			
11.2.4 A: Seek resources to support agency infrastructure and processes, programs, and interventions.			
Is the health center looking for more funding to support its processes, programs and interventions? *In what places is the health center looking for funding?* *What might be some ways that funds can be maximized to increase the resources available for public health?* **Example: Applying for grant opportunities from local, state, or national entities.** **Example: Using results of a Tribal health assessment to demonstrate the level of need for resources to Tribal leadership.**			

(OPTIONAL) DOMAIN 12 - Governance

Discussion Questions and Examples	Has been done/ Going well	Areas to improve	Other Notes
Standard 12.1: Maintain current operational definitions and statements of the public health roles, responsibilities, and authorities.			
12.1.1 A: Provide mandated public health operations, programs, and services.			
What mandates (policies, regulations, laws) have been passed by any governmental bodies that have authority over the health center's service area, which the health center must uphold in order to protect the health of the community? *Does the health center follow these mandates?* **Example: Having a Tribal resolution, ordinance, or executive order that describes the authority of the health department/clinic to perform its duties.**			
12.1.2 A: Maintain current operational definitions and/or statements of the public health governing entity's roles and responsibilities.			
Is there a governing entity that oversees the actions of the health center? What is the entity? *How is the health center held accountable for meeting the expectations and resonsibilities as required by the governing entity?* **Example: Participation in a Health Board or other governing body.** **Example: Tribal resolution, ordinance, or executive order that describes the structure and role of the Health Board or other governing body.**			
Standard 12.2: Provide information to the governing entity regarding public health and the official responsibilities of the health department and the governing entity.			
12.2.1 A: Communicate with the governing entity regarding the responsibilities of the public health department.			
How often does the health center communicate with the Health Board or other governing entity? *Does the health center educate the Health Board or governing body about health center responsibilities?* **Example: Providing presentations to the Health Board or Tribal Council outlining the clinic/department's roles and responsibilities.** **Example: Soliciting feedback from the Health Board on proposed policies and procedures.**			
12.2.2 A: Communicate with the governing entity regarding the responsibilities of the governing entity.			
Does the entity that oversees the health center provide trainings on public health responsibilities that it oversees or advises? *Does the entity that oversees the health center know its duties and responsibilities as related to public health?* **Example: Providing presentations to the Health Board or Tribal Council outlining the Board/Council's roles and responsibilities for public health.**			

Standard 12.3: Encourage the governing entity's engagement in the public health department's overall obligations and responsibilities.
12.3.1 A: Provide the governing entity with information about important public health issues facing the health department and/or the recent actions of the health department.
During communications between the health center and its governing entity, are updates given about public health issues and activities in the community? Does information also flow in the opposite direction (from governing entity to health center)? **Example: Regular meetings, or other established mode for sharing information, between the Health Board and clinic or Healthy Start staff.**
12.3.2 A: Track actions taken by the governing entity.
Does the health center understand the priorities, policy positions, opinions and actions of its governing entity? **Example: Meeting minutes that document processes and rationale for Health Board decisions.**
12.3.3 A: Communicate with the governing entity about assessing and improving the performance of the health department.
What kinds of communication exist between the health center and its governing entity about how to assess and improve the performance of the health clinic? **Example: Providing presentations to the Health Board or Tribal Council outlining the clinic or program's current activities and initiatives.**