

**Local Public Health Data**



**Jefferson County Health Department**  
Gail Scott, RN, BSN, Director/Health Officer

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**Too Numerous to Count!**

- There are many types of data available at the local level.
- Health Departments also rely on State and Federal programs for data.
- Governing bodies used to rely solely on quantitative data or “counting widgets.”
- More data is outcome based or looking at Quality Improvement or return on investment.

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**Importance of Data**

- Other data uses in local public health
  - Grant Writing and Grant Management
  - Updating local policy – internal or external
  - Quality Improvement
  - Accreditation
  - Staffing
  - Budgeting
  - Marketing/Outreach
  - Many Others




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**Question/Hypothesis of Healthy Smiles for Mom and Baby**  
What will it take for pregnant women to be referred from medical setting to receive dental care that is safe throughout the pregnancy and is effective in improving and maintaining oral health?

Creating formal referral processes between local public health departments and dental providers is a promising strategy of this work.

More outcome data to come in the near future!

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### Impact/Outcomes of Healthy Smiles for Mom and Baby

- The project is still a work in progress.
- Referral/no-show rate - 0% no-show rate so far.
- Pregnant women have scheduled appointments for their children who do not have a dentist or who have never seen a dentist.
- Measures to be determined:
  - % of pregnant women that receive an oral health screening as part of their WIC/PNCC appointment
  - % of pregnant women who fail the oral health screening and are referred for care
  - % of pregnant women who receive dental care after a referral is made (so far 100%)

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### Public Health and GIS Mapping

- Certain types of data can use GIS mapping to show impact on the county.
- Examples:
  - Contaminated wells
  - Wells with Arsenic contamination
  - Elevated Radon levels
  - Elevated blood Lead levels
- Others?

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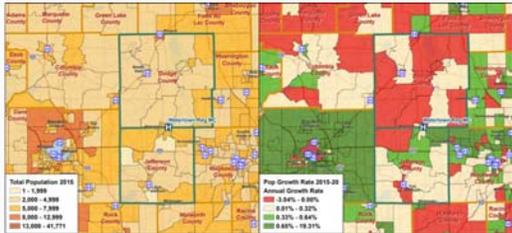
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## Mapping Data/Graphs/Charts

- Quick visual to show data
- Easier for some people to understand




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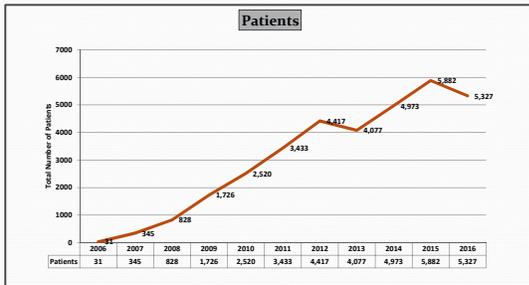
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## Community Dental Clinic Patients




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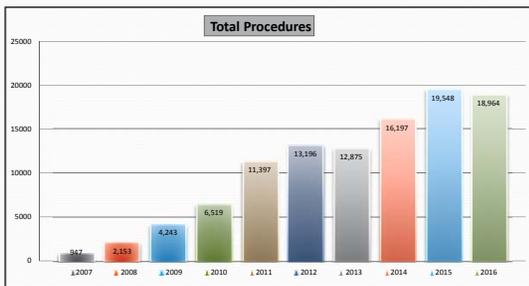
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## Community Dental Clinic Total Procedures




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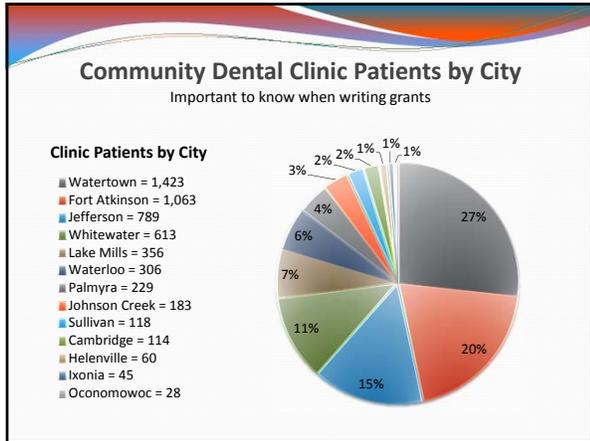
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### Community Health Assessment

A collaboration between Dodge County Human Services and Health Department, City of Watertown Department of Public Health, Jefferson County Health Department, Watertown Regional Medical Center and Fort HealthCare. Coordinated by the Dodge-Jefferson Healthier Community Partnership.

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### Community Health Assessment

- Statutory requirement of Local Health Departments (every 5 years)
- Federal requirement for non-profit hospitals (every 3 years)

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## Community Health Assessment

**Project goals**

- To continue a formal and comprehensive community health assessment process which will allow for the identification and prioritization of significant health needs of the community to allow for resource allocation, informed decision-making and collective action that will improve health.
- To initiate a collaborative partnership between all stakeholders in the community by seeking input from persons who represent the broad interests of the community including low income, minorities and those without access to healthcare.
- To support the existing infrastructure and utilize resources available in the community to instigate health improvement in the community.

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## Data Collection and Timeline

In August, 2016, the Dodge Jefferson Healthier Community Partnership began a Community Health Assessment for Dodge and Jefferson Counties. The Partnership sought input from persons who represent the broad interests of the community using several methods:

- Fifty-four community members, not-for-profit organizations (representing medically underserved, low-income, minority populations, and children), foundations, schools, health providers, and government representatives participated in three focus groups for their perspectives on community health needs and issues on September 8 and 9, 2016.
- Information gathering, using secondary public health sources occurred in August and September of 2016.

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## Data Collection and Timeline

- Sixteen community providers were surveyed via electronic and paper surveys, regarding their perspectives on community health status and needs from August 15 through August 1, 2016.
- 1,068 electronic and print community surveys were conducted between August 16 and September 6, 2016.
- A Community Health Summit was conducted on October 24, 2016 with 73 community stakeholders. The audience consisted of healthcare providers, business leaders, law enforcement, government representatives, not-for-profit organizations, (mental health, substance abuse, sexual violence, elderly services, foundations) and other community members.

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## Process and Methods

Both primary and secondary data sources were used in the CHA. Primary methods included:

- Community focus groups – Jefferson, Juneau, and Watertown, Wisconsin
- Community physician electronic surveys
- Community electronic and paper surveys
- Community health summit

Secondary methods included:

- Public health data – death statistics, county health rankings
- Demographics – population, poverty, uninsured
- Psychographics – demographics with behaviors

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## Health Assessment Focus Areas

Community Health Summit brainstorming resulted in the following 3 main Focus Areas:

- ✓ *Obesity/Nutrition & Activity*
- ✓ *Substance Abuse*
- ✓ *Mental Health*



The full Community Health Assessment is available on the Jefferson County Health Department website. Result of the assessment is a Community Health Improvement Plan.

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## Annual Reports



### Health Department Annual Report

- Annual requirement for all local Health Departments
- Great way to educate the County Board or other governing entity, the public, donors, students and others
- Vary greatly by Health Department and resources available

### Other Annual Reports

- Community Dental Clinic
- Rock River Free Clinic
- United Way Agencies
- Local Hospitals

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**Other Data**

- Larger Health Departments may have an epidemiologist, health educator or planner that provides more robust/additional data.
- Electronic charting & time tracking make it easier to analyze data.
- Reports can show time that each staff person spends on a particular program or service.
- Track costs versus benefits of program.
- The list is endless!

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**Contact Information**

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