

EVALUATION
LOCAL HEALTH IMPROVEMENT PRIORITY SETTING SUMMIT
OCTOBER 5, 2011

1. How did you hear about this event?

Direct e-mail: 14
Forwarded e-mail: 7
Media
Colleague: 9
Friend: 1

2. Was the objective of the event met?

Yes: 26 No Partially: 3 Unsure

3. Were the presentations helpful?

State SHIP Data: Yes: 29 Partially: 2

FCHD Data: Yes: 29 Partially: 1

Comments:

State SHIP Data Comments:

- Very good data
- Website information helpful

FCHD Data Comments:

- Would like more targeted areas
- Andrea was terrific
- Stats charts informative but complex

4. Was this a valuable use of your Time? (Please elaborate)

- Yes, I have met people and examined new ideas.
- Yes, networking was good.
- Yes, learned a lot about the needs in Frederick County.
- Yes.
- Yes, I learned how to access health statistics, so I can now continue to educate myself.
- Yes, good to obtain statistics and good to hear from others in the community.
- Yes, is important to our local organizations to know and participate.
- Yes, meeting a number of people I didn't know.

- Yes I learned about resources and gaps in the community related to access to health care and mental health services.
- Yes, Identified County issues and able to compare to other counties in the State.
- Hearing other's ideas and perspectives was very helpful. Use of personal stories of health care access useful as well.
- Yes, feel this is just setting priorities, Gave me interest in being involved and informed about rest of process.
- Awareness of issues I am not directly associated with.
- Yes, Valuable to identify the needs and understand the process to achieve goals.
- Yes because as a non-profit we need to know what the community needs via statistics vs. what we know the community needs via experiences.
- Yes, getting/having all of the discipline for one area to address to health needs of Frederick County will be rewarding.
- Yes, helped focus needs.
- Yes, wellness/prevention
- Yes, meeting other community providers, learning about the health issues facing Frederick County residents
- Yes, felt a lot was accomplished in a short time period
- Yes, broad spectrum of providers, agencies, service areas
- To bring this many people from multiple healthcare/human needs organizations was an important and valuable use of my time.
- Yes, great way to bring people together who are invested in improving the health of county residents.
- Yes, but I felt that there were a lot of necessary community partners who were not present.
- Yes, but rushed and unfinished
- Yes, opportunity to hear alternate viewpoints. Would have preferred more group discussion.
- Yes, we will be more effective as a community if we agree and then invest our resources in the top health priorities.

5. How could future meetings be more effective?

- I would like to have the overall mission defined.
- Folks going back to their areas of expertise and discussing at the summit.
- Shorter overall sessions—today was a long day—split into two?
- More outreach to professionals in a variety of areas of expertise.
- Need more holistic approach-- rather than slicing and dicing into neat little categories
- Time for participants to tend to services; more interactive; informative presentation good.
- Handouts of Power Point, org with Power Point operation
- Provide MD State Health Improvement Plan to attendees in advance.
- Time will tell how effective, once work groups produce and act on plans developed.

- Meals and snacks could be a little more health conscious!!
- Acoustics made it difficult to hear
- Spread tables out to create more space between tables. Difficult to hear all group discussions because of background noise.
- Maybe scale back on the agenda—I would rather produce quality work vs. quantity, so we didn't get as far with the worksheets.

6. How could future meetings be more efficient?

- It is good as is
- I believe that a big group divided was great and a lot got accomplished.
- This was very efficient
- Voting process and ranking led to more discussion and compromise perhaps more specific facilitation to present voting results and combined to be more concrete.
- Roundtable makes a difference/less lecture/more group discussion
- Possibly using smaller work groups to improve ability to communicate and develop plans.
- Today stayed on track pretty well.
- Less presentation time/more summaries to allow for more discussions

7. Do you plan to participate in a Priority Area Workgroup after today's meeting?

Yes: 19 No: 1 Unsure: 11

8. How do you anticipate you may be sharing information about today's event with others who did not attend?

- Write up notes and distribute to office
- Word of mouth
- Will share info
- Email (2)
- Tell friends and clients how to access SHIP and other health statistics
- As conversation allows
- Bring it back to my group and others I can suck in....
- Reporting discussions—topics, strategies
- Verbally
- Seeing where pressure points are and using tools of recovery to help community folks address them.
- Discussion and sharing materials/data
- Formally and informally (2)
- Word of mouth (2), discussion at meeting on topics
- Through meetings and updates of my work
- Small groups will invite others to join them
- Sharing priority areas with colleagues, generating ideas to address issues
- Will share information at division level staff meeting

- Report to agency staff
- Plan to share with co-workers and hopefully increase impact of the work groups
- Through community coalitions/staff meetings
- Staff meetings and distribution of select relevant materials
- Forward any emails received about how to get involved to my distribution lists.

9. What suggestions do you have to increase community awareness of and participation in the Local Health Improvement Process?

- By defining the mission your marketing dollars would be more focused.
- Facebook page—use social media; multiple agency websites linking to information
- Advertising and word of mouth
- Direct email to dentist/doctors; church community; non-traditional health providers
- I did not see any public advertisement of the event
- Utilize McD’s marketing tools—non-profits need these skills and tools and this includes health too.
- Previous focus groups with the community (assessment)
- We need to reach out to other sectors—particularly business community, chain of command, housing, alternative wellness, etc.
- Media
- Public access TV broadcasts; summarizations in print media; offer forums for the public
- Fliers of events; word of mouth, education, communication through professionals
- Involve churches, service clubs, etc.
- Advertise to citizens in the community via doctor’s offices, ask government to join
- Use the newspapers, put articles or a questionnaire for the papers and have the community respond.
- We need the FCHCC to monitor the work of the committees so they don’t fall by the wayside
- Have consumer participation in the process
- Website
- Offer community meetings
- Direct identification and invitation of added participants
- There was good representation from many organizations who have the ability to network with others. They also will surely invite others to future opportunities.
- Large event held at the Weinberg, additional events held at C. Burr Artz Library; meetings also with strategic communities/populations
- Webpage?, brochure/fact sheet? And survey monkey
- Publish a LHIP “newsletter” with progress reports and updates. Ask community organizations/agencies to report on how they are using the LHIP/doing work toward the goals and then reference their progress in the newsletter in media

interviews, etc. Reward or find ways to acknowledge businesses, agencies who use and/or do work to achieve the LHIP objectives.

10. Would you like more information about the Frederick County health Care Coalition?

Yes: 17

No: 5

11. What else would you like the Frederick County Health Care Coalition to address/do/provide?

- Coordination of provider treatments; find ways of creating an easier volunteer system for doctors fill in the needs of the public.
- Wellness and promotion; chronic diagnoses
- Pay attention to Adult Health Care Access
- Basic economics of what we do
- Recovery and wellness principles; wellness recovery action planning (WRAP); intentional peer support (IPS)
- Collaborative meetings for non-profits in Frederick
- We need the FCHCC to monitor the work of the committees so they don't fall by the wayside.
- Wellness/Prevention Committee
- Update community providers on goals, progress, priority areas of the FCHCC.
- Webpage? Brochure/fact sheet and survey monkey
- Serve as the coordinating body for health resources in the community; pursue grants to fill gaps/address community health needs.