

Model Design Work Group Meeting, National Health Security Preparedness Index

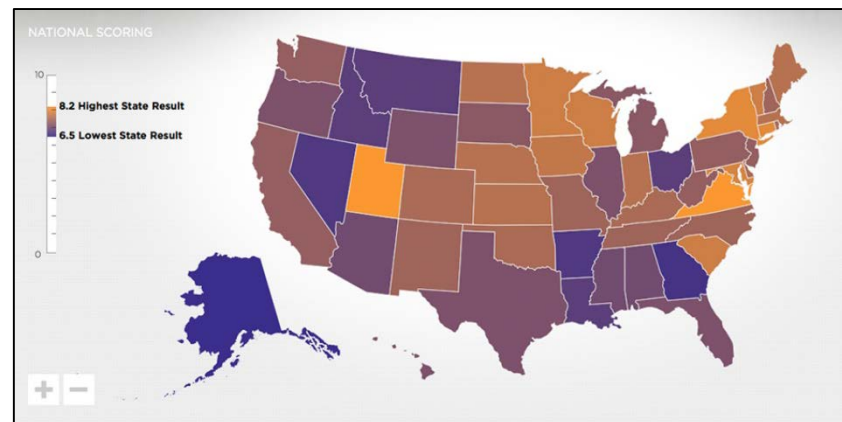


June 16, 2015

NHSPI Program Management Office
University of Kentucky

Agenda

- **NHSPI Project Update**
 - National Advisory Committee June 9 in-person meeting
 - Model Design Workgroup
- **Weighting Approach**
 - Old = equal weighting of items within subdomains gives rise to large differences in implicit weighting in the overall Index
 - New = explicit weights based on expert panel Delphi ratings
- **Consideration of two frameworks**
 - RWJF Culture of Health
 - ASPR National Health Security Strategy, 2015-2018



Weighting

- Expert panel, online Delphi approach
 - Three iterations
 - measures, subdomains, and then domains
 - Weighted with respect to “all hazards”



Weighting: Item Measures

Using a Visual Analog Scale (VAS) to gather expert opinion on how well a measure corresponds to its SUBDOMAIN

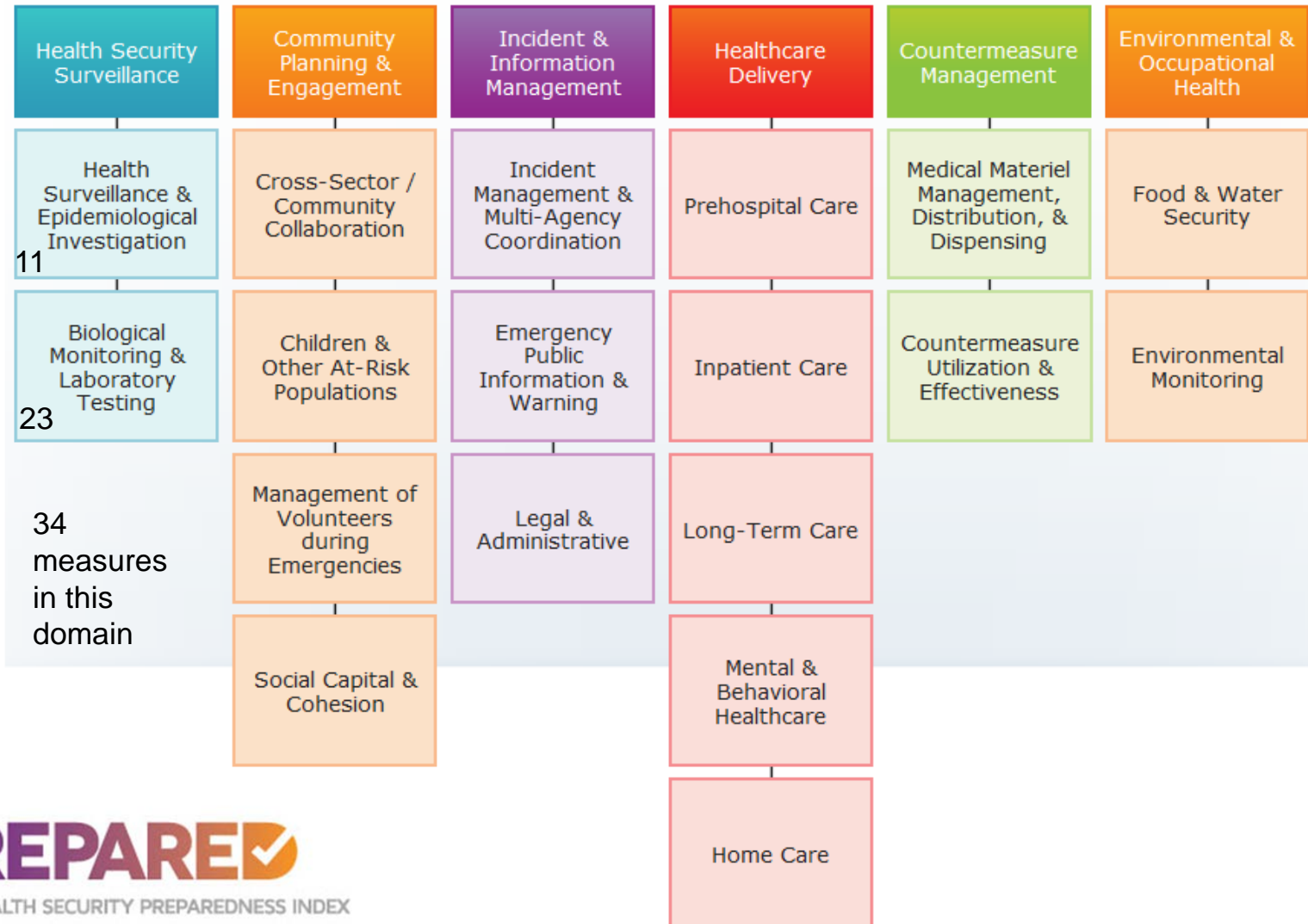
Please indicate how well each measure corresponds to the Health Surveillance & Epidemiological Investigation subdomain by filling in a circle:																					
1. State participates in the Behavioral Risk Factor Surveillance System (BRFSS)																					
No Correspondence at all: this measure is completely unrelated to the subdomain	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Perfect Correspondence: this measure fully and completely represents the subdomain
	0	0.5	1	1.5	2	2.5	3	3.5	4	4.5	5	5.5	6	6.5	7	7.5	8	8.5	9	9.5	



Weighting: Item Measures

- Other questions
 - Which measures are “cross-cutting,” “core” or “transcendent”?
 - Are there measures not listed that *should* be?
- Six Delphi groups (overlapping membership is okay)
 - Domain-level experts
 - Evaluation of all measures in that domain
 - Measures evaluated with respect to correspondence to the subdomain

Assess Measures Within a Domain



Weighting: Subdomains

- When thinking about a domain, what proportion of overall preparedness is attributable to its subdomains?
- Use the same Delphi groups used for item measure assessments

- When thinking about the domain of **HEALTH SECURITY SURVEILLANCE**, what proportion of a state's overall preparedness level is attributable to (total should add to 100%):
 - Health Surveillance & Epidemiological Investigation _____%
 - Biological Monitoring & Laboratory Testing _____%



Weighting: Domains

- When thinking about a national health security preparedness, what portion is attributed to each domain?
- Who are the Delphi participants for this assessment?

- When thinking about **NATIONAL HEALTH SECURITY PREPAREDNESS**, what portion of a state's overall preparedness level is attributable to (total should add to 100%):
 - Health Security Surveillance _____%
 - Community Planning & Engagement _____%
 - Incident & Information Management _____%
 - Healthcare Delivery _____%
 - Countermeasure Management _____%
 - Environmental & Occupational Health _____%



RWJF Culture of Health

- **Making Health a Shared Value**
 - measured by indicators such as the percentage of people who strongly agree that health is influenced by their peers and their communities and the percentage who indicate they have adequate social support from family and friends.
- **Fostering Cross-Sector Collaboration to Improve Well-Being**
 - denoted by measures like the number of local health departments that collaborate with community organizations and employers who promote better health in the workplace.
- **Creating Healthier, More Equitable Communities**
 - using measurements such as the number of grocery stores, farmers' markets, and safe sidewalks in communities; the ratio of children attending preschool; and the affordability of housing.
- **Strengthening Integration of Health Services and Systems**
 - gauged by measures such as the percentage of people served by a comprehensive public health system and the percentage of physicians sharing electronic data with other clinicians, health systems and patients.



National Health Security Strategy

- 1. Build and Sustain Healthy, Resilient Communities**
- 2. Enhance the National Capability to Produce and Effectively Use Both Medical Countermeasures and Non-Pharmaceutical Interventions**
- 3. Ensure Comprehensive Health Situational Awareness to Support Decision-Making Before Incidents and During Response and Recovery Operations**
- 4. Enhance the Integration and Effectiveness of the Public Health, Healthcare, and Emergency Management Systems**
- 5. Strengthen Global Health Security**



For More Information



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