National Health Security Preparedness Index Stakeholder Engagement and Communication Workgroup

24 May 2017 | 2:30-3:30pm EST
Web link for presentation slides: https://uky.zoom.us/j/474312686
Phone line for audio: 1-855-880-1246 | Meeting ID: 474 312 686
(please mute computer speakers if using phone audio)

NHSPI Program Management Office
University of Kentucky
Agenda

2017 Index Release and Dissemination
- Website
- Key Findings
- Release Media Coverage
- Preparedness Summit
- Upcoming Index Webinar Series
- June 14 Webinar: Association of Healthcare Emergency Preparedness Professionals
- June 24: AcademyHealth Public Health Systems Research Interest Group

Preparedness Innovator Challenge and Use Tools
- Status Update
- New Resources
  - Tips from the Field
  - Innovator’s Guide
  - In Production: Communicator’s Guide

2018 Production
- Think-Tanks/Ad Hoc Workgroups

Other Business
- Workgroup Leadership
Strengthening national health security and preparedness helps build a culture of health.

The index combines measures from multiple sources and perspectives to offer a broad view of the health protections in place for the nation as a whole and for each U.S. state. The index identifies strengths as well as gaps in the protections needed to keep people safe and healthy in the face of large-scale public health threats, and it tracks how these protections vary across the U.S. and change over time.

SELECT A DATA SET

2013
2014
2015
2016

6.8
NATIONAL PREPAREDNESS LEVEL

10
confidence interval: 6.7 - 7

KEY FINDINGS FOR 2016

Community Planning & Engagement
MOST IMPROVED
with 16.0% growth since 2013

PREPAREDNESS BY DOMAIN

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Strengthening national health security and preparedness helps build a culture of health.

Drawing data from 50 sources, the National Health Security Preparedness Index is the most comprehensive look at each state’s preparedness to date. It is also the first national index that looks at the nation’s health security by collectively measuring the preparedness of the states. The display of results on the NHSP website takes into account both preparedness and model complexities, however, states face varying threats, apply preparedness principles in locally relevant ways, and have unique interdependencies. Explore the interactive map below to understand the range of influences on America’s health security and preparedness.

KEY

- ADOPTS NATIONAL AVERAGE
- MEETS NATIONAL AVERAGE
- FALLS BELOW NATIONAL AVERAGE

To view details of the latest methodology, go to www.preparedindex.org.
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The National Health Security Preparedness Index

Summary of Key Findings
April 2017
Steady but slow progress

*statistically significant change
Key Findings

The U.S. improved in most domains during 2013-16, except healthcare delivery and environmental health.

*statistically significant change
Geographic disparities in health security are large and persistent

Key Findings

2013

2014

2016

2015

Above average
Within average
Below average
%Increase in year
%Decrease in year

Legend:

- Above average
- Within average
- Below average
- %Increase in year
- %Decrease in year
Improvements occurred across the U.S., but 12 states trailed or lost ground
Key Findings

Health security tracks closely with social & economic determinants of health

Percent of population below federal poverty threshold

Percent of population with health insurance coverage
Closing gaps and inequities: Insights from the Index

- Build & connect existing networks and coalitions
- Engage the private sector
- Focus on low-resource states & settings
- Focus on stagnant and declining domains: healthcare & environmental systems
- Include insurance coverage as a security strategy
- Allow for flexibility in allocation and use of resources
Early Media Coverage

Satellite and Radio Media Tour
On Thursday April 20, RWJF’s Alonzo Plough and UK’s Glen Mays staffed a satellite and radio media tour. Combined, the two completed 15 interviews with television and radio stations around the country.

Media Coverage
In addition to the tour, Index spokespeople conducted interviews with a wide array of outlets ranging from West Virginia Public Broadcasting to the Miami Herald, and Homeland Preparedness News to the Honolulu Star Advertiser. Their hard work paid off with coverage rolling in, including hits in national publications like Forbes, large regional papers like the Philadelphia Inquirer, health trades like FierceHealthcare as well as influential policy outlets like Politico and WTOP. Media tracking efforts are ongoing but sample coverage is below:

National Outlets
- AJMC - Public Health Preparedness Report Shows Improvements, But State Disparities Remain
- FierceHealthcare - RWJF report: Nation’s public health emergency preparedness improving, but slowly
- Forbes - From Flint To Ebola, Readiness Is Unequal For US Health Emergencies
- Homeland Preparedness News - New index shows disparity in states’ first responder readiness, overall preparedness
- Medscape - US Slightly More Prepared for Public Health Emergencies
- Pharmacy Times - How Prepared is the United States for a Public Health Emergency?
- Politico Pro (subscription) – White House wants another shot at Obamacare repeal (daily recap)

State, Local, Trade, and Other Outlets
- Baltimore Sun (MD) - Report: Maryland better prepared than average for public health emergency
- Center for Infectious Disease Research and Policy (MN) - US preparedness index finds sluggish, uneven progress
- Delaware Public Media (DE) - Delaware is among states best prepared…
- Denver Post (CO) - Prepared for disaster?
- Herald-Dispatch (WV) - WV meets health emergency prep average
- KJZZ (AZ) - Would Arizona Be Ready If Hit With Public Health Emergency?
- KSL (UT) - Preparing for the worst
- New Jersey 101.5 (NJ) - NJ is no longer a ‘leader’ in health security, report claims
- News On 6 (OK) - Oklahoma Is Not Ready For A Statewide Health Emergency
- News Tribune (WA) - Survey: Good rural medical care not state’s strong suit
- NJTV (NJ) - How Does NJ Rate In Emergency Preparedness?
- Northeast Mississippi Daily Journal (MS) Mississippi gains ground in public health emergency prep
- Philadelphia Inquirer (PA) - Are Pa. and N.J. prepared for emergencies?
- Post and Courier (SC) - If disease, natural disaster or terrorism strikes, would South Carolina be prepared? Study says the answer is no
- Rapid City Journal (SD) - Report: State lagging in health safety and emergency preparedness…
- Richmond Times-Dispatch (VA) - On public health emergency index, Va. performs better…
- Rutland Herald (VT) - Governor, NEA clash over health-care bargaining
- Spectrum News Texas (TX) - Health Security Gets Check-Up: How Prepared is Texas…
- Star-Advertiser (HI) - Isles rank worse for a health crisis than U.S. average
- VTDigger (VT) - Vermont Is Number One In The Nation For Health Security Preparedness
- West Virginia Public Broadcasting (WV) - Report: W.Va. is Prepared…
- WMAR (MD) - Maryland ranks one of the best states prepared for disaster
- WNPV (PA) - Preparedness Survey Shows Pa. in The Middle of The Pack
- WTOP (DC) - DC, Md. and Va.’s health-security preparedness is above average
Racial and ethnic inequities in health security

Percent of population residing in a state with below-average health security

Additional Analyses from the Preparedness Summit

Relative Risk:
- 21%* (2013)
- 8% (2015)
- 38%* (2016)

*statistically significant difference
Rural-Urban differences in health security
Percent of population residing in a state with below-average health security

Relative Risk: 23%*

*statistically significant difference
Caveats and cautions

- Imperfect measures & latent constructs
- Missing capabilities
- Timing and accuracy of underlying data sources
Upcoming 2017 Index-Related Events

• **June 14 Webinar:** Association of Healthcare Emergency Preparedness Professionals

• **June 24, New Orleans:** AcademyHealth Public Health Systems Research Interest Group

• **TBD:** Index Webinar Series
  - ~3 over next year
  - Raise Index awareness
  - Prompt multi-sectorial dialogue, co-learning on health security issues
**Deadline:** July 31, 2017

**New Resources Available:**

**Using the National Health Security Index: Tips from the Field**

A variety of stakeholders have suggested a series of strategies for using the index to improve health security and preparedness efforts. Conversations with stakeholders from public health, emergency management, state legislators, and health care identified these examples of index use, which you may find appropriate for your organization or community.

If you have used these or other approaches to the index, we invite you to share your experiences through the Index Preparedness Innovator Challenge. All entries must be received by July 31, 2017. More information is available at [http://dx.doi.org/10.1109/3201301](http://dx.doi.org/10.1109/3201301).

**General Suggestions for Using the Index**

1. **Begin by understanding the measures, subdomains, and domains or how the index is constructed.** The index includes six domains that research and experience have shown to be important in protecting people from consequences of disasters and emergencies.

2. **More detailed information about the Index Methodology can be found at [http://dx.doi.org/10.1109/3201301](http://dx.doi.org/10.1109/3201301).**

3. **The Index Program Office offers technical assistance to understand the Index construction; contact [healthsecurebryce.com](http://healthsecurebryce.com).**

4. **Identify ways that your organization could improve its health security and preparedness capacity and capabilities.** Stakeholders can use index results to identify and prioritize areas for improvement. For example, state public health, emergency management, and other professionals can review index scores at the domain and subdomain levels to identify areas in which the state is strong (above the national average) or challenged (below the national average) and prioritize domains, subdomains, and measures for improvement with state stakeholder. Once areas for improvement have been prioritized, state level professionals can take additional actions to assure improvements occur.

5. **Focus on communicating and improving scores for the domains and subdomains rather than focusing only on specific measures.** The Index is not designed to be a checklist for health security and preparedness. Some of the strategies conversations to improve on preparedness can happen at the domain and subdomain levels.

6. **Begin discussions to understand where your organization’s and partners’ limited capacity to improve may be best utilized.** The Index Methodology includes weighting of measures within subdomains and weighting of subdomains within domains. Preparedness experts created the weighting schemes to emphasize the most important areas for improvement.

7. **If you review the Index Methodology and measures weighting (see link in the first suggestion above), you can focus efforts on subdomains with higher weights to strengthen subdomain performance.**

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**Innovator’s Guide to the National Health Security Index**

**Tips for Coalition-builders, Catalysts & Entrepreneurs**

May 2017

**Preparedness Innovator Challenge Update**
Other Resources in Production

• Index Communication Guide
• In-Depth, Downloadable State Reports

Alabama

The National Health Security Preparedness Index tracks state and national progress in preparing for disasters, disease outbreaks and other emergencies that pose risks to health and well-being. The Index measures changes in national and state health security capabilities over time, across a broad array of domains and sectors. The 2017 Index is based on 139 measures organized into 19 subdomains and the six domains below.

HEALTH SECURITY FROM 2013 TO 2016 ACROSS THE SIX DOMAINS

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<thead>
<tr>
<th>Year</th>
<th>Overall</th>
<th>Health Security Surveillance</th>
<th>Community Planning &amp; Engagement</th>
<th>Incident &amp; Information Management</th>
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2016 Overall Health Security

Alabama’s overall health security level reached 6.2 out of 10 in 2016, a 3.3% increase from 2013. The overall health security level in Alabama was significantly below the national average health security level of 6.8 in 2016.

Strengths:
• Alabama’s largest improvement occurred in the Community Planning & Engagement domain, which increased by 8.2% between 2013-16.
• Health security levels significantly exceeded the national average in none of the six domains.
• The state’s highest health security level in 2016 occurred in the domain of Health Security Surveillance with a value of 7.8.

Challenges:
• Health security levels declined in one domain: a decline of -1.5% occurring in Countermeasure Management.
• Health security levels were significantly below the national average in 4 domains: Community Planning & Engagement, Incident & Information Management, Countermeasure Management, and Environmental & Occupational Health.
• The state’s lowest health security level in 2016 occurred in Healthcare Delivery with a value of 5.1.

Acknowledgements
Support for the National Health Security Preparedness Index is provided by the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the Foundation. The Index Program Office is housed at the University of Kentucky and staffed through a collaboration between the Center for Public Health Systems and Services Research, College of Public Health and the Center for Business and Economic Research, Gatton College of Business and Economics. For more information, contact NHSPI@uky.edu.

Learn more about the Index and health security levels at www.NHSpl.org
Think-Tanks/Ad Hoc Workgroups

- Environmental and Occupational Health Domain
- Municipalities
- Territories
Other Business

• June 14th Systems for Action Research-in-Progress Webinar: “Cross Jurisdictional Sharing Arrangements between Tribes and Counties for Emergency Preparedness Readiness”
  More information here: http://systemsforaction.org/research-progress-webinars

• SECW Leadership and Operations
  • Chairship
  • New Member Recommendations
  • Scheduling
  • Next Meeting
Open Virtual Workgroup Meetings: Participating Further in Index Evolution

- **Stakeholder Engagement and Communication Workgroup**
  
  *TBD: Watch Your Email for Doodle Poll*

  **NEXT VIRTUAL MEETING: TBD**

- **Analytic Methodology and Model Design Workgroup**
  
  *Third Tuesdays, 1:00pm-2:00pm ET*
For More Information

National Program Office

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