

# Setting Priorities

After conducting a community assessment you may have a list of health issues or concerns that your community could address. *Moving to the Future* advises you to prioritize by choosing one or two health issues to focus on.

Ideally, your team or committee would use the Setting Priorities materials to choose the community's top health concern(s). The process in Setting Priorities is thorough and comprehensive, and it generates priorities that have broad support and that are well substantiated. However, it can take several weeks to work through this process.

After conducting a community assessment, your coalition may have already decided to focus on child and adolescent healthy weight, food security, heart disease prevention, or some other area. If so, this step of prioritizing is not necessary for you now. However, you may want help prioritizing intervention ideas and these materials can assist with that process.

The information and worksheets on the following pages include criteria to consider when determining priorities and techniques to facilitate a committee decision. The intent of these materials is to provide guidance. Use what is helpful and modify materials to meet your community's needs.

## How to Prioritize Health Issues or Concerns

1. Decide who will be involved in determining priorities. These may be the same people who were on the community assessment team, or you may want to include more people in this step.
2. Choose a leader/facilitator. This person should be perceived as neutral by the group. The leader should be skilled at managing conflict and managing dominant personalities.
3. Pull together the list of health concerns identified through the community assessment process. If you used the community assessment materials from *Moving to the Future: Nutrition and Physical Activity Program Planning*, refer to the "Community Health Concerns and Strengths" worksheet in the Conduct a Community Assessment chapter for your list of health concerns.
4. Organize a committee meeting to develop criteria or standards that the group will use to choose priorities. See pages 3—5, below, for example standards. On pages 6 and 7 of this piece is a worksheet with criteria and a scoring system.

You could convert steps 1 through 8 into a worksheet to help you track your progress.

5. At the same meeting or in a second meeting develop the process that your team will follow to make final decisions. See page 8 of this piece, “Setting Priorities—Possible Techniques,” for ideas.
6. Run each health concern through the criteria agreed to by your committee. How you do this will depend on the process your committee developed. For example, your committee may have agreed on criteria to use in scoring each health concern that will narrow down the list to three or four. Then the committee will choose one health issue by consensus. Or, your committee may have agreed on criteria to use in full committee discussions to narrow down the list of health concerns to just one.
7. Convene another committee meeting to finalize and confirm your community’s priority health issue. Again, depending on the process your committee developed, this meeting may be lengthy or short, or your committee may be able to agree on the priority via e-mail.
8. Record your top health issue(s) on the Setting Priorities Top Issues(s) form on page 9 of this piece. And record the priority on the “Priority, Goal, and Objectives Summary Sheet.”

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## Possible Standards

Listed below are four sets of criteria that you could use, edit, or modify to help your coalition prioritize the community's health concerns.

### **From *Moving to the Future: Developing Community-Based Nutrition Services Workbook & Training Manual***

The first set of criteria is based on the prioritization materials in the *Moving to the Future: Developing Community-Based Nutrition Services Workbook & Training Manual*. The “Setting Priorities Sample Worksheet” on pages 6 and 7 of this piece uses these criteria and includes a scoring system. Consider these criteria when setting priorities.

- Perceptions and opinions—how important is the health issue to those living in the community?
- Number of at-risk persons—how prevalent is the health issue in your community?
- Economic burden to the community—is the health issue costly to the community considering lost productivity and health care costs?
- Preventability—is the health issue preventable?
- Effectiveness of interventions already available in the community—are there already effective programs or services in the community for the health issue?
- Supportive environment—does the community environment (social and structural) support healthy behaviors related to the health issue?

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### **From *Communities Working Together for a Healthier New York***

The second set of criteria is from a report by the New York State Public Health Council. The report, *Communities Working Together for a Healthier New York*, recommended priority areas for public health action in New York up through 2006. The criteria for setting the health priorities were based on five principles:

1. Local communities can have the greatest impact on health by intervening in the **causes of poor health**, rather than focusing on the health problems themselves.
2. The greatest improvements in health can be achieved in areas where there are **effective interventions that involve the entire community and the individual**.

3. The priority health areas must address those conditions that result in the **greatest morbidity, mortality, disability, and years of productive life lost**.
4. The priority health areas should reflect **problems of greatest health concern to local communities**.
5. Progress should be measurable through **specific, quantifiable, and practical objectives**.

To access this resource, go to the report's link at [www.health.state.ny.us/nysdoh/phforum/hlthcomm.pdf](http://www.health.state.ny.us/nysdoh/phforum/hlthcomm.pdf). Or, if link does not work, go to the New York State Library's website at [www.nysl.nysed.gov/index.html](http://www.nysl.nysed.gov/index.html) and search for the document title.

It's likely that your state has prioritized health concerns. Consult your state's Healthy People documents and supplements for the criteria your state health agency may have used to set health priorities.

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### **From *Leading Health Indicators for Healthy People 2010: Final Report***

The U.S. Department of Health and Human Services (USDHHS), with significant external input, created Healthy People 2010, which is a comprehensive, nationwide health promotion and disease prevention agenda. It is designed to serve as a roadmap for improving the health of all people in the United States during the first decade of the twenty-first century. There are 467 health objectives organized into 28 specific focus areas. Although all 467 objectives are important to the nation's health, the USDHHS asked the Institute of Medicine to identify the top indicators that would best track the health status of the nation. The criteria used by the Institute of Medicine to select the leading health indicators may be helpful to your community. Health indicators should:

1. *Be worth measuring*—the indicators represent an important and salient aspect of the public's health.
2. *Be measurable for diverse populations*—the indicators are valid and reliable for the general population and diverse population groups.
3. *Be understandable by people who need to act*—people who need to act on their own behalf or that of others should be able to readily comprehend the indicators and what can be done to improve the status of those indicators.
4. *Galvanize action*—the indicators are of such a nature that action can be taken at the national, state, local, and community levels by individuals as well as organized groups and public and private agencies.

5. *Lead to actions that can lead to improvement and are known and feasible*—there are proven actions (e.g., personal behaviors, implementation of new policies, etc.) that can alter the course of the indicators when widely applied.
6. *Generate results of action that can be measured over time*—if action is taken, tangible results will be seen indicating improvements in various aspects of the nation's health.

To access the *Leading Health Indicators for Healthy People 2010: Final Report* go to <http://books.nap.edu/html/healthy3/>. To see the 10 leading health indicators go to <http://www.healthypeople.gov/LHI/>.

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### **From *Mobilizing for Action through Planning and Partnerships (MAPP)***

The National Association of County and City Health Officials produced MAPP, a communitywide strategic planning tool for improving community health. This tool helps communities prioritize public health issues and identify resources for addressing them. The tool includes overviews, in-depth guidance, worksheets, resources, and success stories. MAPP uses the phrase *strategic issues* instead of the word *priorities*. And instead of listing specific criteria for choosing strategic issues, MAPP includes in-depth guidance and a worksheet to help a community health team identify its strategic issues. This resource is available online at [http://mapp.naccho.org/MAPP\\_Home.asp](http://mapp.naccho.org/MAPP_Home.asp)

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## Sample Worksheet

Use this worksheet to rank the health issues discovered in the community assessment.

Remember to edit this worksheet to meet your needs.

1. Reproduce the worksheet for each issue identified.
2. Based on your knowledge of the community and the health information obtained in your community assessment process, rate each health issue considering the criteria listed in the table. If you are prioritizing health concerns within a particular subpopulation (racial group, age group, etc.), then score these criteria assuming that the subpopulation is the community. For example, if you were prioritizing health concerns among Mexican American adolescents in your community, you might edit this scoring sheet by replacing “community” with “Mexican American adolescents in our community.”
3. Make a list of the health issues with their total scores.
4. Rank the problems, assigning 1 to the problem with the highest score.

Health Issue: \_\_\_\_\_

	Score
<p><b>a. Perceptions and opinions</b></p> <ul style="list-style-type: none"> <li>If the community perceives this problem as serious, enter a 3.</li> <li>If the community perceives this problem as moderate but not requiring immediate action, enter a 2.</li> <li>If the community perceives this problem to be minor or feels no sense of urgency in addressing it, enter a 1.</li> </ul>	
<p><b>b. Number of at-risk persons actually affected by the problem</b></p> <ul style="list-style-type: none"> <li>If this is one of the most prevalent problems in the community, enter a 3.</li> <li>If the problem is less prevalent in the community, but is still a problem, enter a 2.</li> <li>If relatively few people are affected, enter a 1.</li> </ul>	

<p><b>c. Economic burden to the community (lost productivity, high health care costs, etc.)</b></p> <ul style="list-style-type: none"> <li>• If the economic burden of this problem is high, enter a 3.</li> <li>• If the economic burden of this problem is moderate, enter a 2.</li> <li>• If the economic burden of this problem is relatively low, enter a 1.</li> </ul>	
<p><b>d. Preventability (effective means to prevent the problem)</b></p> <ul style="list-style-type: none"> <li>• If the problem can be prevented from occurring, enter a 3.</li> <li>• If the problem cannot be prevented but can be detected early and stopped, enter a 2.</li> <li>• If the problem cannot be prevented and cannot be detected before it becomes a problem, enter a 1.</li> </ul>	
<p><b>e. Effectiveness of interventions already available in the community</b></p> <ul style="list-style-type: none"> <li>• If no effective interventions are available, enter a 3.</li> <li>• If somewhat effective interventions are available, enter a 2.</li> <li>• If effective, well-attended interventions are available for the community, enter a 1.</li> </ul> <p>*Think about all interventions available, including one-on-one services, group education programs, and population-based programs.</p>	
<p><b>f. Supportive environment (the more supportive, the lower the score)</b></p> <ul style="list-style-type: none"> <li>• If the environment discourages healthy behaviors, enter a 3.</li> <li>• If the environment is somewhat supportive of healthy behaviors, enter a 2.</li> <li>• If the environment encourages healthy behaviors, enter a 1.</li> </ul>	
<p><b>TOTAL SCORE</b></p>	

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## Possible Techniques

Even after prioritizing your community's health issues, you may have several issues that emerged as top concerns. This sheet includes some possible exercises you could use to guide a committee of partners to consensus.

- Provide the list of health issues and ask coalition members to rank their top five choices, giving their top choice a 5, their second choice a 4, and so on down to number 1. All the individual scores for each health issue are then tallied and issues are ranked by total group score. Some of this work can be done ahead of a meeting to prevent wasting committee members' time.
- Have one or two unbiased committee members complete a scoring worksheet on every health issue. The top 4 or 5 health issues identified from the scoring could then be put to a vote or to a discussion by the remaining committee members.
- Mail team members a scoring worksheet and the list of health issues and ask them to score each health issue and return their scores to be compiled by a neutral party.
- Mail team members a scoring worksheet and the list of health issues and ask them to score each health issue and bring their top two ranked issues to the next team meeting. At the team meeting, compile all the top issues and ask people to vote for 1 or facilitate a discussion to try and reach consensus.
- List all health issues on a flip chart and give every member a certain number of adhesive dots to vote for their top issues, considering the criteria developed by the group. This voting can be done until the list is narrowed down to 1 or 2 issues.
- If your list of health issues is short, the team may be able to reach a decision by consensus. Reaching consensus can be time consuming, but it may be essential if the health priority requires commitment of all team members. Having a set of ground rules for building consensus will help tremendously. A sample list of ground rules might include the following:
  - Remain open-minded and nonjudgmental
  - Everyone participates, no-one dominates
  - Don't interrupt when another participant "has the floor"
  - Build on the ideas shared by others
  - Complaints are okay when they come packaged with a solution
  - If two positions conflict, look for a third that will reconcile differences
  - Get expression of support from all members before making decisions final



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## Top Issue(s)

**Priority Health Issue:** \_\_\_\_\_

**Priority Health Issue:** \_\_\_\_\_

The two questions below help you summarize the process your community followed in choosing a health priority. Grant applications often require this information. Take some time now to record the process your community followed in choosing a health priority.

**List the people and agencies involved in determining the Priority Health Issue(s):**

**Briefly describe the process followed to determine the Priority Health Issue(s).**