

## CHNA and Implementation Plan Regulatory Standards

What	LHD Regulatory Standards (Illinois Administrative Code)	Hospital Regulatory Standards (IRS)
<b>Frequency</b>	Every five (5) years	Every three (3) years
<b>Community Served</b>	The population within the local health department's jurisdiction	<p>Based on relevant facts and circumstances, including the geographic area served by the hospital facility, target populations served (for example, children, women, or the aged), and principal functions (for example, focus on a particular specialty area or targeted disease).</p> <p>May include populations outside of those in which its patient populations reside.</p> <p>May not define its community in a way that excludes medically underserved, low-income, or minority populations who are part of its patient populations, live in geographic areas in which its patient populations reside (unless they are not part of the hospital facility's target populations or affected by its principal functions), or otherwise should be included based on the method used by the hospital facility to define its community.</p>
<b>Assess community health needs</b>	Systematically describes the <b>prevailing health status and health needs of the population</b> within the local health department's jurisdiction	Identify <b>significant health needs of the community</b> , prioritize those health needs, and identify potential measures and resources (such as programs, organizations, and facilities in the community) available to address the health needs.
<b>Community input/participation</b>	Involve <b>community participation</b> in the identification of community health problems, priority-setting, and completion of the community health needs assessment and community health plan	<p>Persons representing the <b>broad interests of the community</b> including, at a minimum:</p> <ul style="list-style-type: none"> <li>A. Governmental public health departments</li> <li>B. Medically underserved, low-income, and minority populations</li> <li>C. Written comments</li> </ul>

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<b>Documentation</b>	<p>Adoption of Plan by Board of Health to include:</p> <p>A. Statement of purpose and description of how the assessment will be used to improve health in the community.</p> <p>B. Description of the <b>community participation</b> process, a list of community groups involved in the process, and <b>method for establishing priorities</b>.</p> <p>C. Description of the health status and health problems most meaningful for the community in the data groupings designated by the Department in the IPLAN Data System.</p> <p>D. A description of the process and outcomes of <b>setting priorities</b>.</p>	<p>Report that is adopted by an authorized body of the hospital facility and includes a description of:</p> <p>A. <b>Process and methods</b> used including:</p> <ul style="list-style-type: none"> <li>- data and information used in the assessment,</li> <li>- methods of collecting and analyzing the data and information</li> <li>- identification of any parties with whom the hospital facility collaborated, or with whom it contracted for assistance, in conducting the CHNA.</li> </ul> <p>B. <b>Community input</b></p> <p>C. <b>Prioritization of the community's health needs</b> and potential measures and identified resources to address such needs</p>
<b>Data</b>	<p>An <b>analysis of data</b> (Community health indicators) contained in the IPLAN Data System or a similar, equally comprehensive data system. May use additional data describing the health of its population including natality, mortality, morbidity and risk factors for illness in its jurisdiction.</p>	<p>Description of process and methods in CHNA report:</p> <p>1) describes the <b>data and other information used</b> in the assessment, as well as the <b>methods of collecting and analyzing this data and information</b></p>
<b>Collaboration</b>		<p>If a hospital facility collaborates with other hospital facilities in conducting its CHNA, all of the collaborating hospital facilities <b>may produce a joint CHNA report as long as all of the facilities define their community to be the same and conduct a joint CHNA process</b>. In addition, the joint CHNA report must clearly identify each hospital facility to which it applies and an authorized body of each collaborating hospital facility must adopt the joint CHNA report as its own.</p>

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<b>Implementation plan</b>	<p>Community Health Improvement Plan (CHIP) shall describe the:</p> <p>A) Purpose (how the plan will be used to improve health);</p> <p>B) Process used to develop the plan;</p> <p>C) Priority including the importance of the priority health need, summarized data and information on which the priority is based, the relationship of the priority to Health People; and factors influencing the level of the problem (e.g., risk factors, contributing and indirect contributing factors);</p> <p>D) Measurable outcome objective (at least one) covering a five-year time frame related to each priority health need;</p> <p>E) Measurable impact objective (at least one) related to each outcome objective; and</p> <p>F) Proven intervention strategy (at least one) to address each impact objective including: community resources that will contribute to implementation; estimated funding needed for implementation; and anticipated sources of funding.</p>	<p><u>Plans to Address Significant Health Need</u> Must describe:</p> <ul style="list-style-type: none"> <li>- actions the hospital intends to take to address the need,</li> <li>- anticipated impact of these actions and the plan to evaluate such impact,</li> <li>- <b>programs and resources</b> the hospital facility plans to commit to address the health need, and</li> </ul> <p>Must establish ongoing feedback mechanism to take into account written comments received on its most recently adopted implementation strategy.</p> <p><u>If Not Addressing a Significant Health Need</u> The hospital must provide a brief explanation of why it does not intend to address the significant health need.</p> <p><u>If Joint Implementation</u> (exception to general rule) Three requirements include:</p> <ol style="list-style-type: none"> <li>1) Clearly identifying how it applies to the hospital</li> <li>2) Clearly identifying the hospital's role and responsibilities in taking the actions described in the implementation strategy and the programs and resources the hospital facility plans to commit in taking those actions, and</li> <li>3) A summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relate to the hospital facility</li> </ol> <p>An authorized body of the hospital facility must <b>adopt the implementation strategy</b> in the same taxable year as the CHNA</p>
<b>Adoption of Implementation Plan</b>		

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<b>Report available to the public</b>	The local health department shall disseminate health reports...to the board of health, county board or other legislative bodies within its jurisdiction, the media, and the public	CHNA report must be <b>widely available</b> to the public as follows: 1) “conspicuously” posted on a Web site, 2) remains posted until 2 subsequent reports have been posted 3) does not require creation of account or personally identifiable information in order to access 4) paper copy available at no charge at the hospital facility
<b>Organizational Capacity</b>	The process for developing an assessment of organizational capacity shall address:  A) the internal capabilities of the local health department to conduct effective public health functions, including an assessment of operational authority, community relations, information systems, and program management; or  B) an organizational strategic plan developed within the previous five years that assesses strengths, weaknesses, opportunities and threats in the local health jurisdiction	