

SHIP  
Partnership  
Satisfaction  
Survey  
Analysis  
Report

State Health Improvement Plan  
Evaluation and Implementation Committee  
October 2008

In January 2008, the State Health Improvement Plan (SHIP) Affiliated Partnerships completed a survey regarding their satisfaction on a variety of issues. The results of the survey serve as an important means for the Department of Health (DOH) to better understand the needs of the Partnerships and as a guide for the SHIP Steering Committee in 2008-2009 and beyond.

Forty-five out of sixty active Partnerships completed the survey, yielding a response rate of 75%. Note: The survey did not ask for identifying information so the results are anonymous and no information is available to link responses to specific partnerships for additional follow-up.

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## Survey Questions

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### **Question 1: In what DOH region is your organization located?**

All districts were represented with responses.

### **Question 2: What are the number of partners in your organization?**

Almost half of the partnerships (21) indicated they have 35 or more partners in their organization.

**Questions 3 through 7** were designed to gauge the degree of satisfaction of partnerships in each topic area, using a Likert scale of 1 (least satisfied) to 6 (most satisfied). The chart below each narrative section represents the average of the responses received for each question. Responses identified as 'Not Applicable' were not included in the results. Selected quotes from respondents follow each chart.

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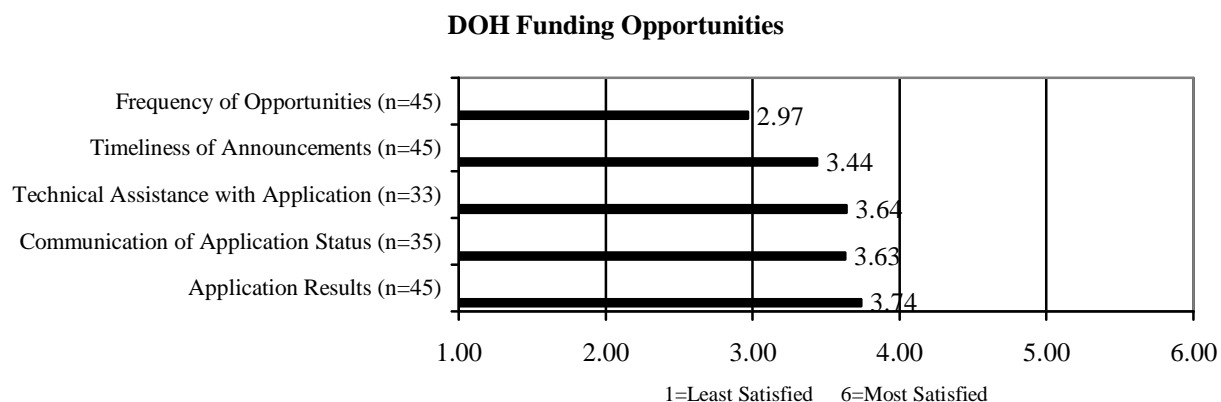
## Summary of Findings

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### **Question 3: DOH Funding Opportunities (mini-grants, grants, etc.)**

Respondents were asked to rank their degree of satisfaction on the following: Frequency of Opportunities, Timeliness of Announcements, Technical Assistance with Application, Communication of Application Status, and Application Results.

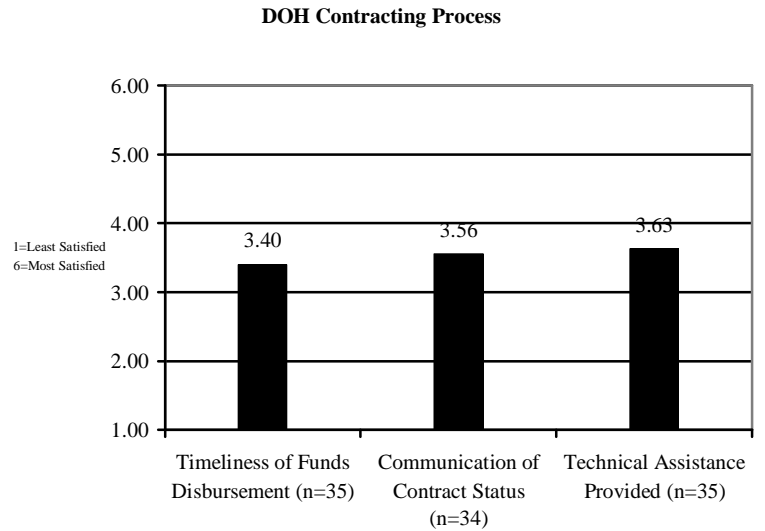
Overall, responses were middle of the scale. The question 'Frequency of Opportunities' received the lowest rating.



**Question 4: DOH Contracting Process**

Respondents were asked to rank their degree of satisfaction on the following: Technical Assistance Provided, Communication of Contract Status and Timeliness of Fund Disbursement.

Overall, responses were middle of the scale.

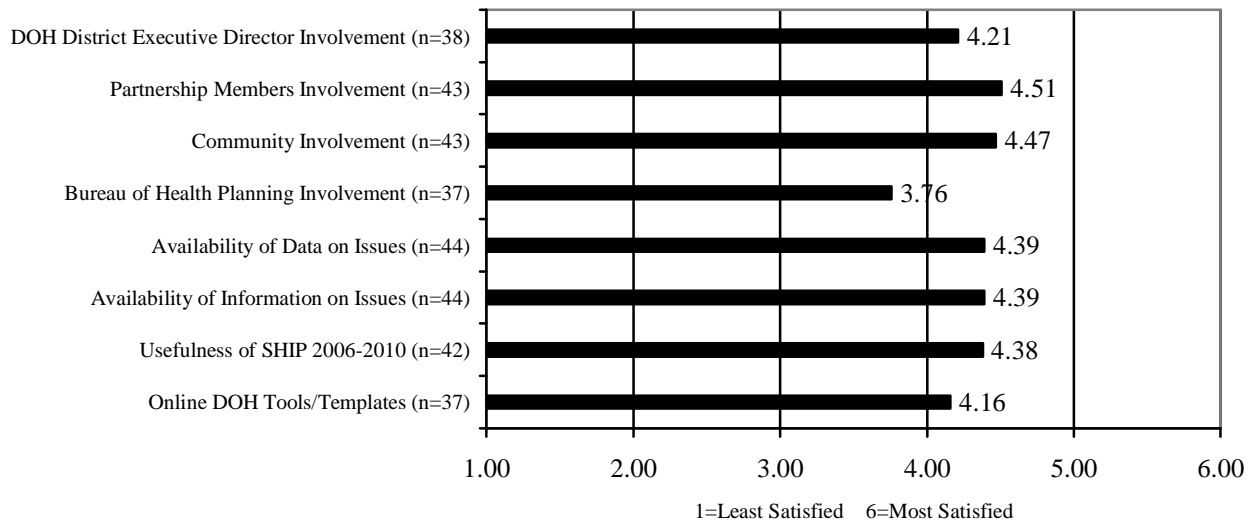


**Question 5: Needs Assessment Development**

Respondents were asked to rank their degree of satisfaction on the following: DOH District Executive Director Involvement, Partnership Members Involvement, Community Involvement, Bureau of Health Planning Involvement, Availability of Data on Issues, Availability of Information on Issues, Usefulness of SHIP 2006-2010, and Online DOH tools/templates.

Overall, respondents have a good degree of satisfaction with each area within the needs assessment development area. The Bureau of Health Planning (Bureau) received the lowest rating for involvement in this process. The Bureau typically provides technical assistance, tools, and trainings and has not been directly involved in the needs assessment process.

**Needs Assessment Development**

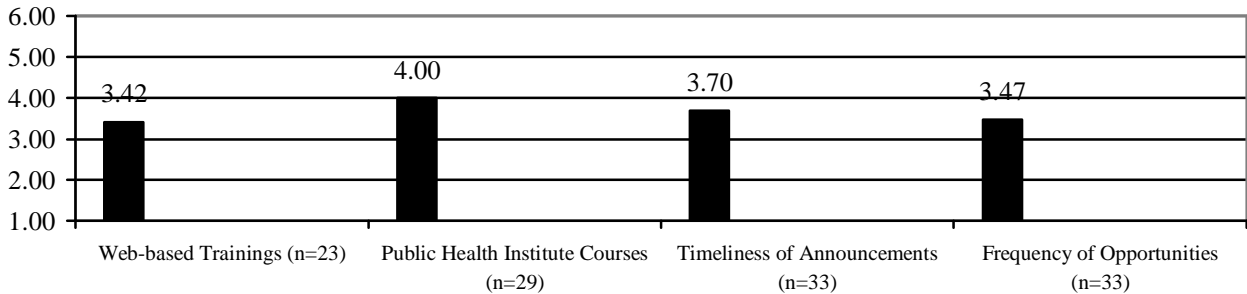


### Question 6: Partnership Training Opportunities

Respondents were asked to rate their degree of satisfaction on the following: Frequency of Opportunities, Timeliness of Announcements, Public Health Institute Courses and Web-based Trainings.

Overall, responses were middle of the scale. Respondents identified they are more satisfied with the Public Health Institute Courses and less satisfied with web-based trainings.

**Partnership Training Opportunities**



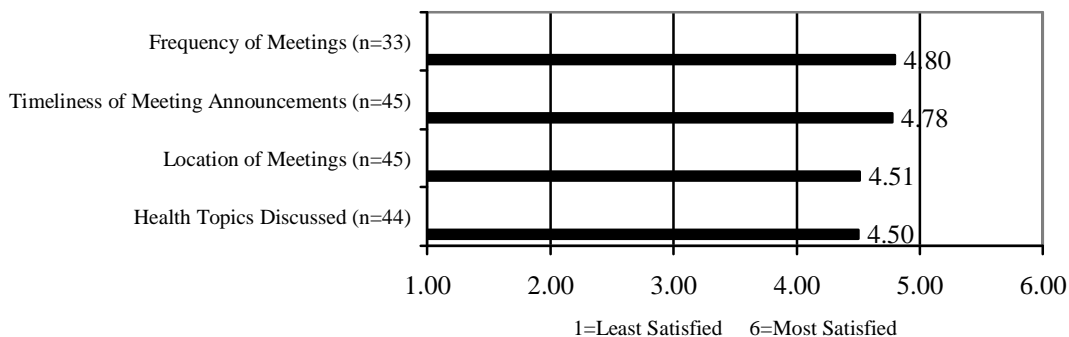
1=Least Satisfied 6=Most Satisfied

### Question 7: Local Advisory Council Meetings

Respondents were asked to rate their degree of satisfaction on the following: Frequency of Meetings, Timeliness of Meeting Announcements, Location of Meetings, and Health Topics Discussed.

Overall the respondents are indicating strong degrees of satisfaction for the Local Advisory Council (LAC) meetings.

**Local Advisory Council Meetings**



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## Additional Comments

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### On Funding...

*“Funding is needed. Please return the SHIP mini grants.”*

*“Resources formerly provided by SHIP mini-grant are greatly missed.”*

*“It is difficult for some SHIP Partnerships to sustain their operation without some level of funding commitment from DOH. SHIP Partnerships when funded by DOH generated significant health promotion and wellness activity far in excess of the \$5,000 to \$10,000 investment by DOH. In my opinion it was one of the best investments made by DOH to increase community response to address their local needs.”*

*“The grant funds available through SHIP are adequate for our small community. However, there is no funding for the SHIPs. ... This makes it tough for SHIP to be a top priority.”*

*“It's difficult for partners in rural, economically depressed areas to stay on board when funds dry up.”*

### On the DOH Contracting Process:

*“Mini-grant process is effective and efficient”*

### On Training Opportunities:

*“I would like to see more training for capacity building and program planning, etc.”*

*“We would like to see more training available around the "Healthy People 2010" and more cost effective training on specific SHIP initiatives.”*

*“Non use was impacted by our lack of awareness as to what available beyond Institute and time constraints, not on quality of offerings.”*

### On Local Advisory Council Meetings:

*“...it would be nice to make our regional SHIP meetings more worthwhile. ...This could be an opportunity for professional development/trainings/etc.”*

*“While it's important for SHIPs to meet on a regular basis to identify needs, it is often difficult to provide activities and information when there is less and less funding from partners who are already on very tight budgets.”*

*“The regional meetings keep me informed and make me aware of what other SHIPs are doing in their counties.”*

*“Strong communications between the SHIP Steering Committee and their agenda items and the LACs is needed.”*

*“We need less ‘announcement’ time at Ad council meetings. We need more time discussing issues.”*

General Comments:

*“We as a committee would like all local DOH representative to receive the same email announcements that the DOH County Partner receives”*

*“Would appreciate if we could participate in SHIP meetings via audio or video conferencing - we have the technology here”*

*“There needs to be education for newer SHIP members as to their responsibilities and what support is available from DOH.”*

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## Action Steps and Timelines

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After analyzing the survey responses, the following table was developed to capture recommendations for addressing the identified needs. While the table provides specific goals and actions steps along with timelines for their completion, it is not meant to be all inclusive. As Partnerships evolve, it is expected that additional needs will emerge, and new recommendations will be identified to address those needs.

**Abbreviation Key:**

BHP – Bureau of Health Planning  
BHSR – Bureau of Health Statistics & Research  
DED – District Executive Director  
LAC – Local Advisory Council  
SHIP – State Health Improvement Plan  
SHIP SC – Steering Committee

## 2008 SHIP Partnership Satisfaction Survey: Action Steps and Timelines

GOALS	ACTION STEPS	RESPONSIBLE ENTITIES	TIMELINE
<b>1. Increase knowledge of SHIP Partnerships regarding grant and other funding opportunities</b>			
	A. Continue to include and expand the provision of grant and funding opportunities to Partnerships via a variety of means (SHIP Bulletin, presentations, LAC Meetings, etc.)	SHIP SC, LAC, DED, BHP	Ongoing
	B. Create grant template of commonly asked for information for SHIP Partnerships to complete and use when applying for funding opportunities	BHP	December 08
	C. Explore the feasibility of targeting funding opportunities directly to SHIP Partnerships and/or including criteria that applicants must apply in conjunction with SHIP Partnerships	BHP	May 08
<b>2. Enhance relationships and communication within Department of Health concerning SHIP and SHIP Partnerships</b>			
	Establish regular meetings with appropriate bureau and program staff within Department of Health to discuss issues of relevance to SHIP and SHIP Affiliated Partnerships: role/potential role of Partnerships, communication of funding opportunities, aligning/realigning of funding, targeting of funding opportunities to Partnerships and other topics	BHP	February 09
<b>3. Enhance relationships and communication with state agencies concerning SHIP and SHIP Partnerships</b>			
	Establish regular meetings with appropriate state agencies which have an interest in SHIP and in the work of the SHIP Partnerships to discuss relevant issues: knowledge of SHIP, role/potential role of Partnerships, communication of funding opportunities, alignment and targeting of funding opportunities and other topics	BHP, SHIP SC, (state agency representatives)	August 09
<b>4. Address funding for SHIP Partners</b>			
	A. Explore the feasibility of aligning/realigning existing funding to Partnerships	BHP, SHIP SC	May 09
	B. Explore the feasibility of targeting of funding opportunities directly to SHIP Partnerships and/or including criteria that applicants must apply in conjunction with SHIP Partnerships	BHP	May 09
<b>5. Address contracting issues within Department of Health</b>			

	A. Distribute information regarding relevant grantees/contractors to SHIP Partnerships in a timely manner	BHP	March 09
	B. Suggest improvements in the contracting process based on reviewing other agencies' methods	BHP	March 09
<b>6. Increase knowledge of and use of needs assessments by SHIP Partnerships</b>			
	A. Identify and distribute information concerning conducting needs assessments	SHIP SC, LAC, DED, BHP	January 09, Ongoing
	B. Encourage SHIP Partnerships to share their own experiences regarding needs assessments	SHIP SC, LAC, DED, BHP	January 09, Ongoing
	C. Provide training and technical assistance on the use of needs assessments	SHIP SC, LAC, DED, BHP	January 09, Ongoing
<b>7. Increase knowledge of SHIP Partnerships regarding relevant health and other issues</b>			
	A. Identify specific training needs of Partnerships	SHIP SC, LAC, DED, BHP	December 08, Ongoing
	B. Develop a training plan to address training needs	SHIP SC, LAC, DED, BHP	December 08, Ongoing
	C. Explore feasibility of providing CEUs for participation in training opportunities	SHIP SC, LAC, DED, BHP	December 08, Ongoing
	D. Establish a yearly training schedule with Bureau of Health Statistics and Research for on-site training at LAC meetings	SHIP SC, LAC, DED, BHP, BHSR	December 08, Ongoing
	E. Explore the feasibility of offering training opportunities via different venues including but not limited to telephone, in person, by video technology, via the Internet	SHIP SC, LAC, DED, BHP	December 08, Ongoing
<b>8. Strengthen the role of the Local Advisory Councils</b>			
	A. Discuss LACs with District Executive Directors and Partnerships to determine current roles and needs of both entities	SHIP SC, LAC, DED, BHP	January 09, Ongoing
	B. Engage Steering Committee in discussions regarding role of LACs within their structure	SHIP SC, BHP	April 09, Ongoing
	C. Provide technical assistance to address issues relevant to LACs	DED, BHP	January 09, Ongoing