



Acronyms

- CHA Community Health Assessment
 CHIP Community Health Improvement Plan
 CHNA Community Health Needs Assessment

#	Comment	Response
1	CHA is lacking in certain data analyses from the CHNA	The CHA and CHNA are complimentary to each other, with the same key findings but different audiences and communication styles. The CHA audience includes community residents and other partners. Our hope was to publish a report that is accessible this diverse group of readers. For this reason, the CHA is intentionally a shortened version of the CHNA. Rather than include the full analysis from the CHNA, the CHA includes the findings and a sample of supporting data. The CHA also includes more graphics and data visualizations. Throughout the CHA, readers seeking more information on the analysis or supporting data are referred to the full CHNA.
2	The local environment is a critical component of root cause analysis and the CHNA data is inconsistent on zip code analysis and interpretation of Healthy Places Index and Communities of Concern. Several rural zip codes are totally ignored.	<p>Healthy Places Index is just one measurement that went into the analysis of Communities of Concern. Per the CHNA, “Geographic Communities of Concern were identified using a combination of primary and secondary data sources. Analysis of both primary and secondary data revealed 9 ZIP Codes that met the criteria to be classified as Communities of Concern.”</p> <p>There are several rural zip codes that form part of the Communities of Concern, and some that do not. This is also true of zip codes from the incorporated areas. However, all communities, whether or not they are identified as a Community of Concern, have some populations experiencing health disparities. It will be the work of the CHIP group to identify strategies most appropriate across diverse communities.</p>
3	Age is not reported on in most of the demographic analysis	<p>The CHNA, the foundation upon which the CHA is built, is already finalized. This is a helpful suggestion that will be recommended in future analyses.</p> <p>Age, along with other demographic characteristics, will be considered by the CHIP workgroup in development of specific strategies to address Significant Health Needs.</p>



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4	Falls by 65+ show up in several high risk areas. Are these happening in the home, in the hospital or in nursing homes? What are the age brackets? What are the social factors?	Detailed information on populations impacted by specific Significant Health Needs will be provided to the CHIP workgroup if that need is selected. Rather than provide an exhaustive dataset for each Significant Health Need, the CHA is intentionally written at a higher level. The more detailed work is in the CHNA and will be included in the CHIP.
5	More objective data analysis is needed to validate the subjective impressions	See response to Comment 1.
6	It may be above the 6th grade reading level. The summary talking point graphics provided are helpful.	We agree with comment. Staff will work to simplify the language used.
7	It might be good to combine all non-incorporated rural communities so they don't get left out.	The CHNA, the foundation upon which the CHA is built, is already finalized. We will suggest a combined unincorporated geographic unit in future analyses. CHIP workgroup members may select this approach as they develop localized strategies and goals.
8	The CHA needs to do a more thorough analysis of Communities of Concern so intervention and prevention resources can be allocated equitably.	The CHNA, the foundation upon which the CHA is built, is already finalized. This includes analysis of the Communities of Concern. However, this is a helpful suggestion that will be recommended in future analyses. As the CHIP is developed, staff will also develop community-specific one-page profiles to support understanding of localized populations and issues.
9	Bring forward some of the maps from the CHNA and provide accurate interpretations so all members understand the data based upon their local community.	Staff will work to include more maps in the CHA. As the CHIP is developed, staff will also develop community-specific one-page profiles to support understanding of localized populations and issues.