NEW HAMPSHIRE  
STATE PUBLIC HEALTH LABORATORY SYSTEM ASSESSMENT  
SUMMARY REPORT  

The New Hampshire Public Health Laboratories participated as one of nine states in a field test assessment of the State Public Health Laboratory system on March 26, 2007. The assessment test is a collaborative project between the Center of Disease Control and Prevention (CDC) and the Association of Public Health Laboratories (APHL). It is based on the eleven core functions of public health laboratories and designed within the framework of the ten essential public health services. A public health consulting firm, Milne and Associates LLC, is the overseer of the project in conjunction with representatives from both CDC and APHL.

Under the direction of Christine Bean, Lab Director of the New Hampshire Public Health Laboratories (NHPHL), the planning for the assessment began in January 2007. A small group of laboratorians assembled to prepare the invitation list, logistics and scheduling. Assisting Chris were Emmanuel Mdurvwa, Sally Hartman and Jill Power.

The assessment required the use of a printed “tool” that was a 72-page booklet in which the participants were to score different indicators relating to the public health laboratory system. The tool indicated that the participants should be users, clients, vendors, policy makers, healthcare providers, and others who would benefit from public health laboratory services. Those services may be test results, training, communications, reporting or networking, plus many more.

The lab group brainstormed for those individuals and agencies (stakeholders) that utilize the laboratory system in some way. The amount of space within the facility dictated the approximate number of people to be could accommodated for the assessment. A core participant group was created to include certain stakeholders in each breakout group. They included a lab director, a Laboratory Response Network (LRN) representative, a public health nurse, a public health administrator, a NH Bureau of Disease Control representative and a public health laboratorian.

On February 2, 2007, approximately 116 hard copy invitations were sent out. Responses started coming in within the next week and continued until the day before the assessment.

On March 1, 2007, 80 participants were sent their assigned group packages and advance materials to review via email.

Three breakout sessions were set up to meet in each of three different rooms at the NH Health and Human Services building in Concord, NH. All of the participants met together for a welcoming in the auditorium and participated in one essential service assessment.

A facilitator was used for each group for the assessment process. A theme taker was an assistant to the facilitator and captured the information relayed and discussed throughout the assessment.
By the day of the assessment, March 26, 2007, we had 89 participants scheduled for the
day. All but 12 arrived as planned. A few others who had not responded initially showed
up and were welcomed. In total, 79 people were involved with the actual assessment.
Group A and B had 26 participants, including the facilitator and Group C had 27
participants, including the facilitator.

Each participant, theme taker and facilitator was given a spiral bound tool with the NH
logo on it. All received a folder with an agenda, a NHPHL test schedule, the NHPHL
mission statement, an NHPHL contact list, the “jelly bean” system picture, the Eleven
Core Functions of State Public Health Laboratories sheet, Public Health in America sheet
with the 10 Essential Public Health Services, an individual group evaluation form, a pad
of paper, a pen, colored voting cards, and a discussion card. Participant lists were made
available later in the day.

Refreshments and lunch were provided throughout the day, as were ushers to move
participants through the secure building.

Looking at the “Jelly Bean” System participants visual, we did not invite anyone
representing Nursing Homes or Mental Health. We did invite the following, however, but
they did no show – Corrections representative and an Elected Official. We did have a
representative from all of the other agencies listed as part of the system.

Many participants were very interested in becoming a part of this laboratory system
improvement project. Several invitees wished to hear the outcome of the results and to
know what step will be taken upon these results. Many also expressed interest in helping
to work on issues that may need addressing. We look forward to collaborating with others
to help improve the State Public Health Laboratory System.

Prepared by Jill Power, QA Manager, NHPHL