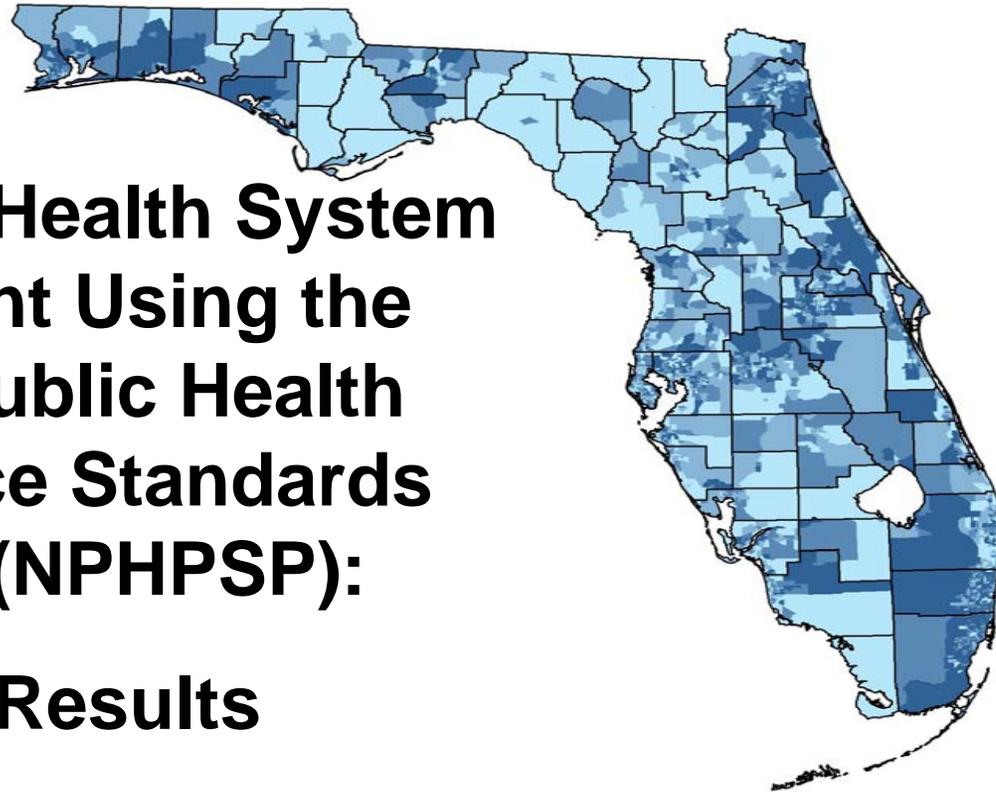


Webinar Series

Local Public Health System Assessment Using the National Public Health Performance Standards Program (NPHPSP): Using Results



Q & A with **Julia Gray, Public Health Foundation**



Office of Health Statistics and Assessment

June 28, 2011



Today's Topic

Local Public Health System Assessment Using the National Public Health Performance Standards Program (NPHPSP): Using Results

Series Goal: strengthen ability to assess public health system capacity and use results for planning and performance improvement efforts

- Last in a series of six modules

Today's Objectives:

- Retrieve reports of results
- Interpret results
- Apply data to MAPP-based community health assessment and health improvement planning
- Use data for performance improvement activities, strategic planning and accreditation preparation

Snapshot of NPHPSP

- Four core concepts
 - Ten Essential Public Health Services
 - Focus on public health system
 - Optimal level of performance
 - Support quality improvement
- Three instruments: state, local, governance
- Support for implementation and quality improvement
- Data for decision-making

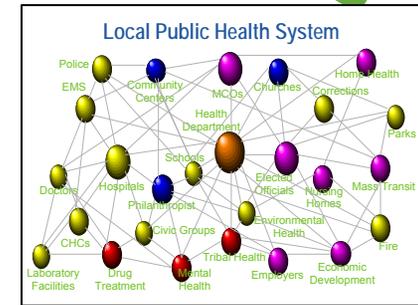
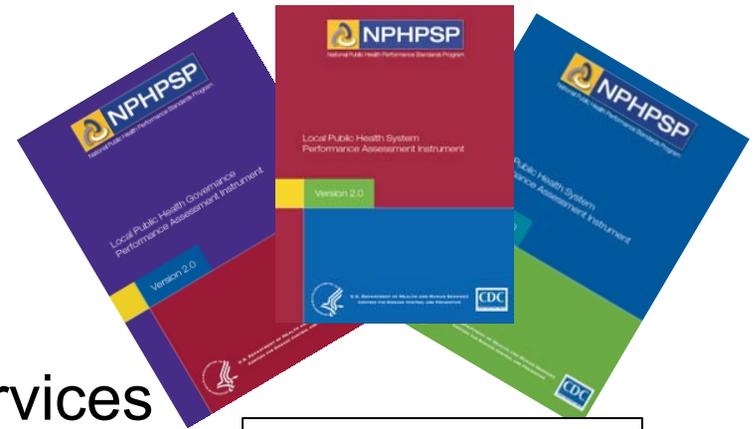
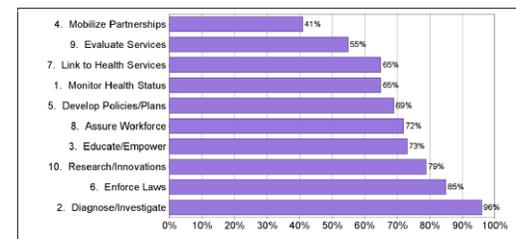


Figure 2: Rank ordered performance scores for each Essential Service



Using Results



- **NPHPSP**
 - Not an evaluation of program or agency performance
 - Data limitations prohibit cross jurisdictional comparison
 - Assesses overall system performance and current capacity
 - Measures against optimal benchmarks
 - Results used as planning tool for quality improvement

Access Reports of Results

www.nphpsp-results.org



- Home Page
- Partner Links
 - APHA
 - ASTHO
 - CDC
 - NACCHO
 - NALBOH
 - NNPFI
 - PHF
- Next Steps
- Help
- FAQs
- Contact Us

Welcome to the National Public Health Performance Standards Program (NPHPSP) data reporting page. This site allows users of the NPHPSP instruments to request user IDs, input data from their current performance assessment, and retrieve reports from both current and past assessments.

If you are new to the NPHPSP or are considering using the instrument for your public health system or board of health please visit the [Centers for Disease Control and Prevention \(CDC\) NPHPSP website](#) for more information or use the contact links on the left. The NPHPSP Instruments have been cleared by the U.S. Office of Management and Budget (OMB): NPHPSP State Public Health Systems Assessment OMB Control No. 0920-0557 (Expires September 30, 2013); NPHPSP Local Public Health Systems Assessment OMB Control No. 0920-0555 (Expires August 31, 2013); NPHPSP Local Public Health Governance Assessment OMB Control No. 0920-0580 (Expires September 30, 2013).

To enter or access performance data, you must have a User ID and password to log into this system. When registering for a new User ID, select "Local" as your User Type if you are completing the Local Public Health System Instrument, select "State" if you are completing the State Public Health System Instrument, and select "Governance" if you are completing the Local Public Health Governance Instrument. Every single jurisdiction or Board is assigned to a unique User ID.

If you are submitting data on behalf of a jurisdiction or Board that completed the NPHPSP assessment, please fill out the associated name of the jurisdiction or Board, mailing address, and contact information in the new User ID request form below. Need to register for bulk or multiple User IDs? Contact the NPHPSP Data System Support at (202) 218-4411 or nphpsp-support@phf.org for assistance.

- Log in using
 - User ID
 - Self-selected password



Please note that this website functions best using the latest version of Internet Explorer.

Register for a New User ID

Name of Jurisdiction (health department)/Board:

Address:

City:

State:

Zip Code:

County/Countries:

Tribal Organization: Yes No

User Type:

Does this jurisdiction have a previous ID? Yes No Provide if Known:

Login

User ID:

Password:

[Forgot Password ?](#)

Main Contact for the NPHPSP Assessment (health department/Board contact):

Access Reports of Results

www.nphpsp-results.org

The screenshot displays the NPHPSP Report Center interface. The top left features the NPHPSP logo and the text 'National Public Health Performance Standards Program'. The user is logged in as 'M00004'. The main content area is titled 'Report Center' and includes a 'Your Report' section with instructions and a 'Raw Data' section with links to various report types. A 'File Downloaded' dialog box is overlaid on the page, asking 'Do you want to open or save this file?' for a file named 'M00001_Report.rtf'.

- **Report Center**
 - Partial report
 - Full report
 - Data from optional modules included in Final Report only
 - Multiple displays
 - Charts
 - Graphs
 - Tabular scores
 - Raw data

Reports of Results

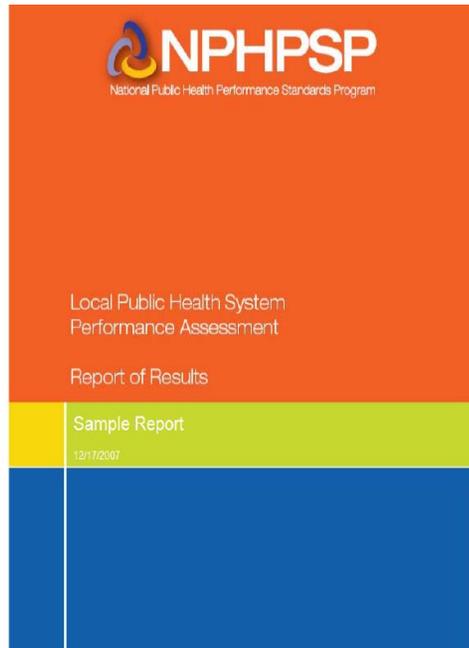


Table of Contents

A. The NPHPSP Report of Results

- I. Introduction
- II. About the Report
- III. Tips for Interpreting and Using NPHPSP Assessment Results
- IV. Final Remarks

B. Performance Assessment Instrument Results

- I. How well did the system perform the ten Essential Public Health Services (EPHS)?
- II. How well did the system perform on specific Model Standards?
- III. Overall, how well is the system achieving optimal activity levels?

C. Optional Priority Rating Results

What are potential areas for attention, based on the priority ratings and performance scores?

D. Optional Agency Contribution Results

How much does the Local Health Department contribute to the system's performance, as perceived by assessment participants?

Appendix

Resources for Next Steps

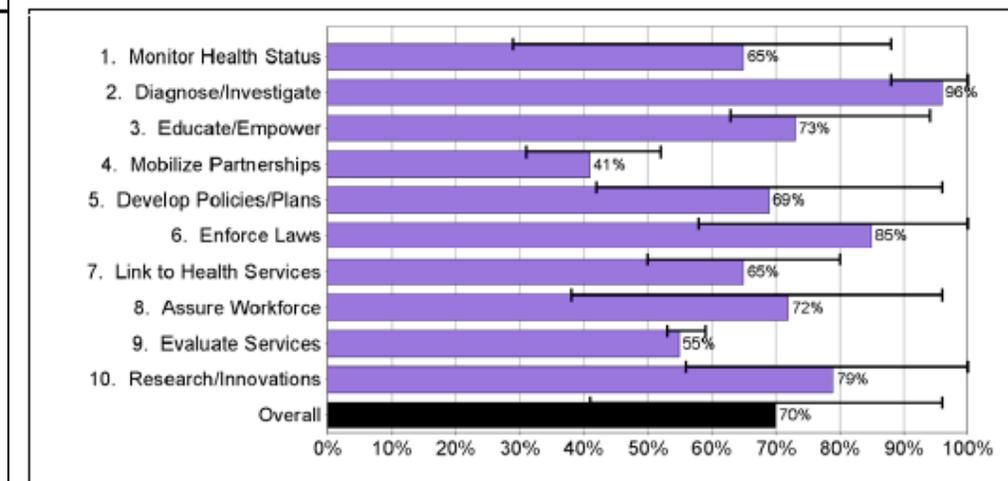
Reports of Results

I. How well did the system perform the ten Essential Public Health Services (EPHS)?

Table 1: Summary of performance scores by Essential Public Health Service (EPHS)

EPHS	Score	
1	Monitor Health Status To Identify Community Health Problems	65
2	Diagnose And Investigate Health Problems and Health Hazards	96
3	Inform, Educate, And Empower People about Health Issues	73
4	Mobilize Community Partnerships to Identify and Solve Health Problems	41
5	Develop Policies and Plans that Support Individual and Community Health Efforts	69
6	Enforce Laws and Regulations that Protect Health and Ensure Safety	85
7	Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	65
8	Assure a Competent Public and Personal Health Care Workforce	72
9	Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	55
10	Research for New Insights and Innovative Solutions to Health Problems	79
Overall Performance Score		70

Figure 1: Summary of EPHS performance scores and overall score (with range)



Reports of Results

Figure 2: Rank ordered performance scores for each Essential Service

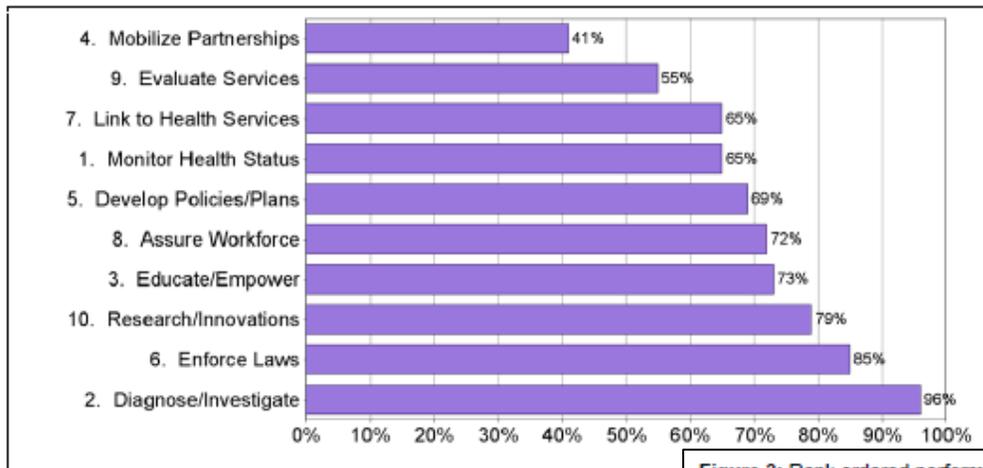
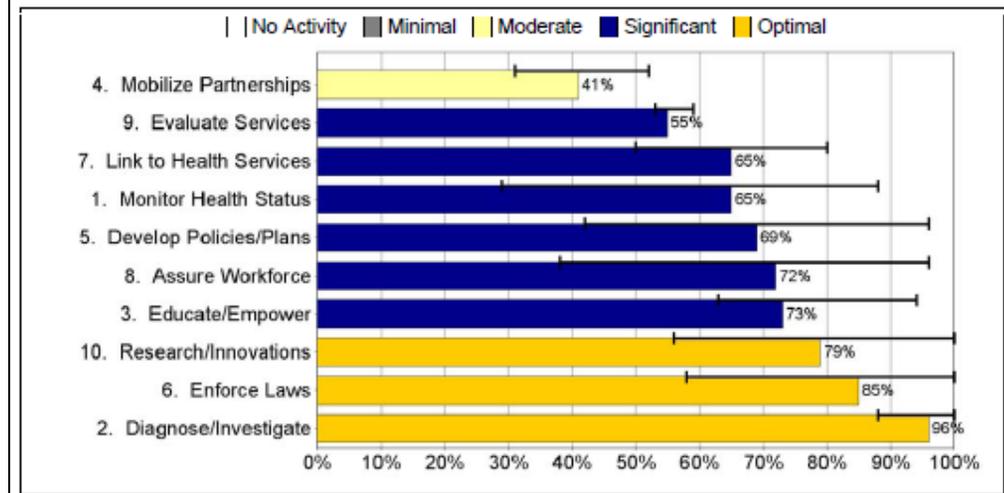


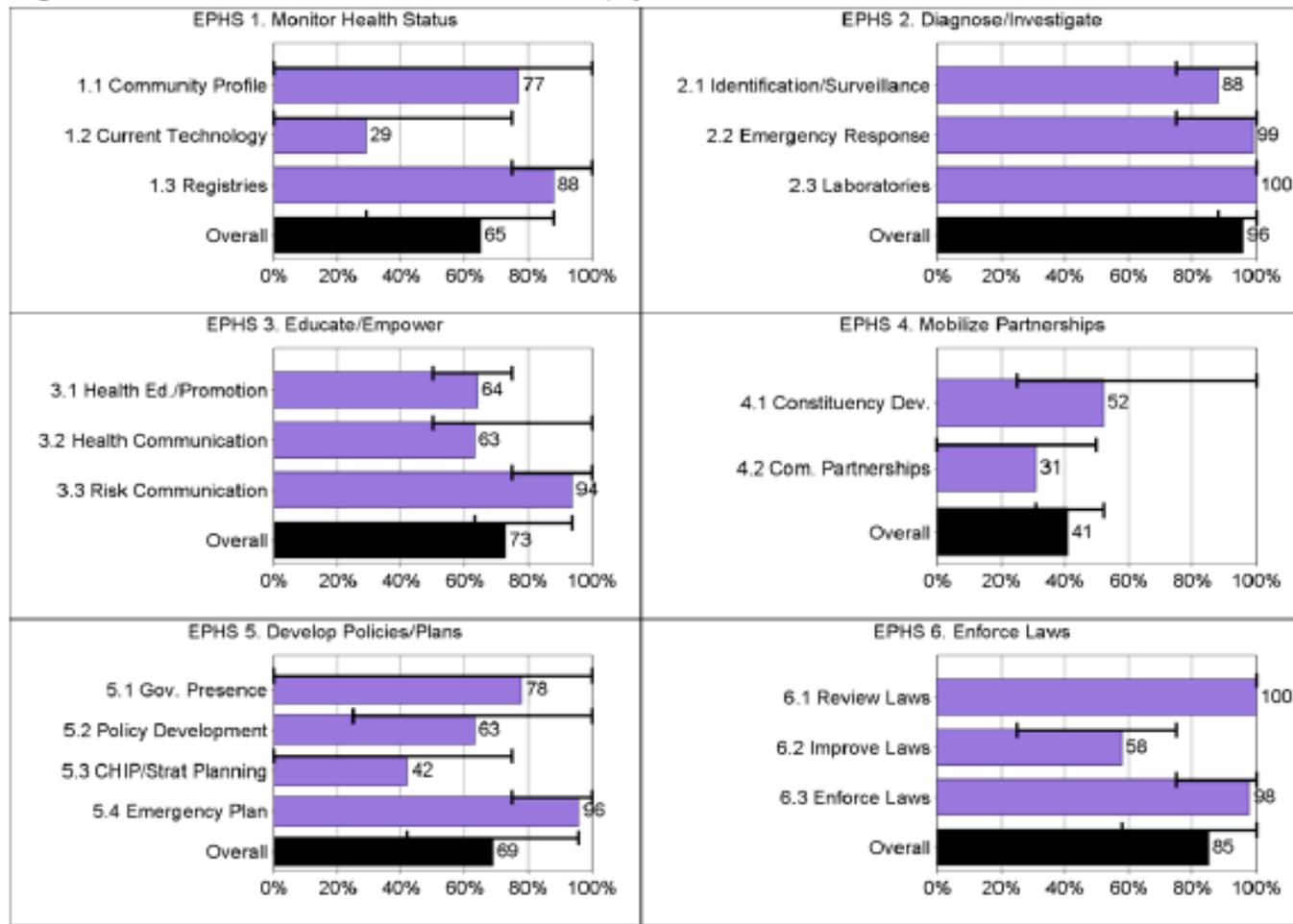
Figure 3: Rank ordered performance scores for each Essential Service, by level of activity



Reports of Results

II. How well did the system perform on specific model standards?

Figure 4: Performance scores for each model standard, by Essential Service



Reports of Results

Table 2: Summary of performance scores by Essential Public Health Service (EPHS) and model standard

Essential Public Health Service	Score
EPHS 1. Monitor Health Status To Identify Community Health Problems	65
1.1 Population-Based Community Health Profile (CHP)	77
1.1.1 Community health assessment	84
1.1.2 Community health profile (CHP)	76
1.1.3 Community-wide use of community health assessment or CHP data	71
1.2 Access to and Utilization of Current Technology to Manage, Display, Analyze and Communicate Population Health Data	29
1.2.1 State-of-the-art technology to support health profile databases	50
1.2.2 Access to geocoded health data	38
1.2.3 Use of computer-generated graphics	0
1.3 Maintenance of Population Health Registries	88
1.3.1 Maintenance of and/or contribution to population health registries	100
1.3.2 Use of information from population health registries	75
EPHS 2. Diagnose And Investigate Health Problems and Health Hazards	96
2.1 Identification and Surveillance of Health Threats	88
2.1.1 Surveillance system(s) to monitor health problems and identify health threats	83
2.1.2 Submission of reportable disease information in a timely manner	100
2.1.3 Resources to support surveillance and investigation activities	81
2.2 Investigation and Response to Public Health Threats and Emergencies	99
2.2.1 Written protocols for case finding, contact tracing, source identification, and containment	97
2.2.2 Current epidemiological case investigation protocols	100
2.2.3 Designated Emergency Response Coordinator	100
2.2.4 Rapid response of personnel in emergency / disasters	97
2.2.5 Evaluation of public health emergency response	100
2.3 Laboratory Support for Investigation of Health Threats	100
2.3.1 Ready access to laboratories for routine diagnostic and surveillance needs	100
2.3.2 Ready access to laboratories for public health threats, hazards, and emergencies	100
2.3.3 Licenses and/or credentialed laboratories	100
2.3.4 Maintenance of guidelines or protocols for handling laboratory samples	100
EPHS 3. Inform, Educate, And Empower People about Health Issues	73
3.1 Health Education and Promotion	64
3.1.1 Provision of community health information	69
3.1.2 Health education and/or health promotion campaigns	73
3.1.3 Collaboration on health communication plans	50
3.2 Health Communication	63
3.2.1 Development of health communication plans	50
3.2.2 Relationships with media	50
3.2.3 Designation of public information officers	88
3.3 Risk Communication	94
3.3.1 Emergency communications plan(s)	100
3.3.2 Resources for rapid communications response	100
3.3.3 Crisis and emergency communications training	75
3.3.4 Policies and procedures for public information officer response	100

Reports of Results

III. Overall, how well is the system achieving optimal activity level

Figure 5: Percentage of Essential Services scored in each level of activity

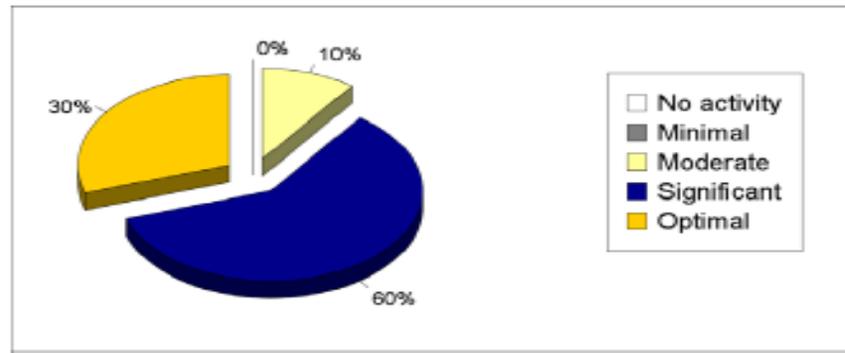


Figure 6: Percentage of model standards scored in each level of activity

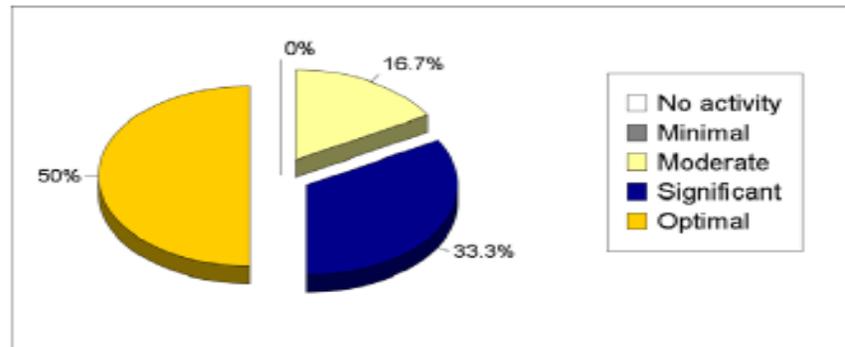
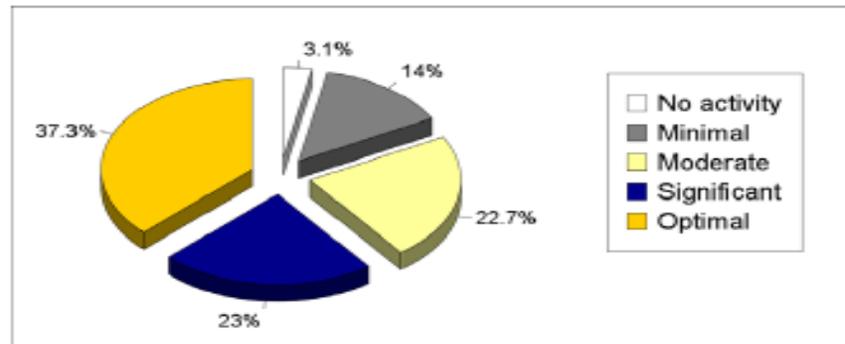


Figure 7: Percentage of all questions scored in each level of activity



Reports of Results

Optional Priority Rating Results

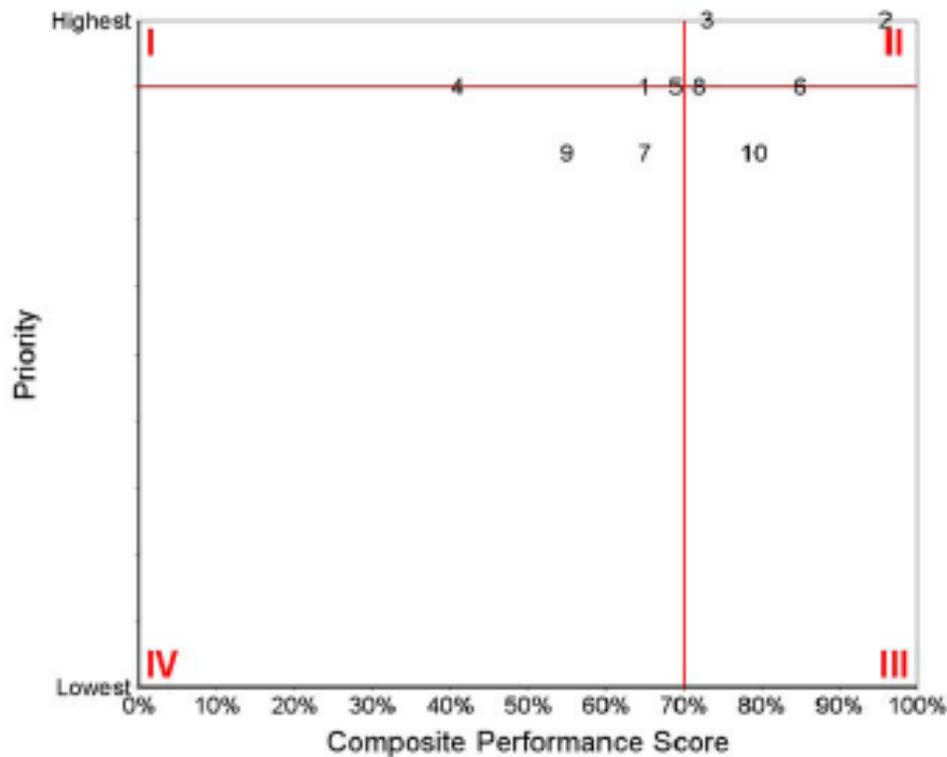
Table 3: Essential Service by priority rating and performance score, with areas for attention

Essential Service	Priority Rating	Performance Score (level of activity)
Quadrant I (High Priority/Low Performance) - These important activities may need increased attention.		
1. Monitor Health Status To Identify Community Health Problems	9	65 (Significant)
4. Mobilize Community Partnerships to Identify and Solve Health Problems	9	41 (Moderate)
5. Develop Policies and Plans that Support Individual and Community Health Efforts	9	69 (Significant)
Quadrant II (High Priority/High Performance) - These activities are being done well, and it is important to maintain efforts.		
2. Diagnose And Investigate Health Problems and Health Hazards	10	96 (Optimal)
3. Inform, Educate, And Empower People about Health Issues	10	73 (Significant)
6. Enforce Laws and Regulations that Protect Health and Ensure Safety	9	85 (Optimal)
8. Assure a Competent Public and Personal Health Care Workforce	9	72 (Significant)
Quadrant III (Low Priority/High Performance) - These activities are being done well, but the system can shift or reduce some resources or attention to focus on higher priority activities.		
10. Research for New Insights and Innovative Solutions to Health Problems	8	79 (Optimal)
Quadrant IV (Low Priority/Low Performance) - These activities could be improved, but are of low priority. They may need little or no attention at this time.		
7. Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	8	65 (Significant)
9. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	8	55 (Significant)

Reports of Results

Optional Priority Rating Results

Figure 8: Scatter plot of Essential Service scores and priority ratings



I (High Priority/Low Performance) - may need increased attention.

II (High Priority/High Performance) - important to maintain efforts.

III (Low Priority/High Performance) - potential areas to reduce efforts.

IV (Low Priority/Low Performance) - may need little or no attention.

Reports of Results

Optional agency contribution results

Table 5: Essential Service by perceived LHD contribution and score

Essential Service	LHD Contribution	Performance Score	Consider Questions for:
1. Monitor Health Status To Identify Community Health Problems	75%	Significant (65)	Quadrant I
2. Diagnose And Investigate Health Problems and Health Hazards	100%	Optimal (96)	Quadrant II
3. Inform, Educate, And Empower People about Health Issues	75%	Significant (73)	Quadrant II
4. Mobilize Community Partnerships to Identify and Solve Health Problems	75%	Moderate (41)	Quadrant I
5. Develop Policies and Plans that Support Individual and Community Health Efforts	81%	Significant (69)	Quadrant I
6. Enforce Laws and Regulations that Protect Health and Ensure Safety	100%	Optimal (85)	Quadrant II
7. Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	100%	Significant (65)	Quadrant I
8. Assure a Competent Public and Personal Health Care Workforce	75%	Significant (72)	Quadrant II
9. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	75%	Significant (55)	Quadrant I
10. Research for New Insights and Innovative Solutions to Health Problems	50%	Optimal (79)	Quadrant III

Reports of Results

Optional agency contribution results

Quadrant		Questions to Consider
I.	Low Performance/High Department Contribution	<ul style="list-style-type: none"> • Is the Department's level of effort truly high, or do they just do more than anyone else? • Is the Department effective at what it does, and does it focus on the right things? • Is the level of Department effort sufficient for the jurisdiction's needs? • Should partners be doing more, or doing different things? • What else within or outside of the Department might be causing low performance?
II.	High Performance/High Department Contribution	<ul style="list-style-type: none"> • What does the Department do that may contribute to high performance in this area? Could any of these strategies be applied to other areas? • Is the high Department contribution appropriate, or is the Department taking on what should be partner responsibilities? • Could the Department do less and maintain satisfactory performance?
III.	High Performance/Low Department Contribution	<ul style="list-style-type: none"> • Who are the key partners that contribute to this area? What do they do that may contribute to high performance? Could any of these strategies be applied to other areas? • Does the low Department contribution seem right for this area, or are partners picking up slack for Department responsibilities? • Does the Department provide needed support for partner efforts? • Could the key partners do less and maintain satisfactory performance?
IV.	Low Performance/Low Department Contribution	<ul style="list-style-type: none"> • Who are the key partners that contribute to this area? Are their contributions truly high, or do they just do more than the Department? • Is the total level of effort sufficient for the jurisdiction's needs? • Are partners effective at what they do, and do they focus on the right things? • Does the low Department contribution seem right for this area, or is it likely to be contributing to low performance? • Does the Department provide needed support for partner efforts? • What else might be causing low performance?

Reports of Results

- Use data for
 - Quality improvement
 - Agency accreditation preparation
 - Inform agency strategic planning
 - Guiding development of overall public health system infrastructure
 - Performance improvement process for public health system
 - Incorporation into community-wide health improvement planning (MAPP-based processes)

Using Results Overview

1. Organize participation for performance improvement
2. Prioritize Areas for Action
3. Explore “root causes” of performance
4. Develop and implement improvement plans
5. Regularly monitor and report progress

Organize Participation for Performance Improvement

- Leadership support: communicate vision, commitment, and expectations
- Create a structure for success
 - Incorporate into broader planning process such as MAPP
 - Form a steering committee to oversee larger performance management system and assign subcommittees or improvement teams

Organize Participation for Performance Improvement

- Options for sharing information and gathering additional input
 - Hold large debriefing meetings
 - Create public forums, surveys, or webcasts
 - Most important thing is to sustain momentum!
- Be transparent with partners about process, expectations, and timeframe

Prioritize Areas for Action

- Use the bar graphs, charts, and summary info in the report
- May be useful to ask if anyone is surprised by scores for each essential service
- Can look to see if there are common system issues that span several essential services
- Detailed examination may be referred to a work group after identifying general priorities

NPHPSP Reports

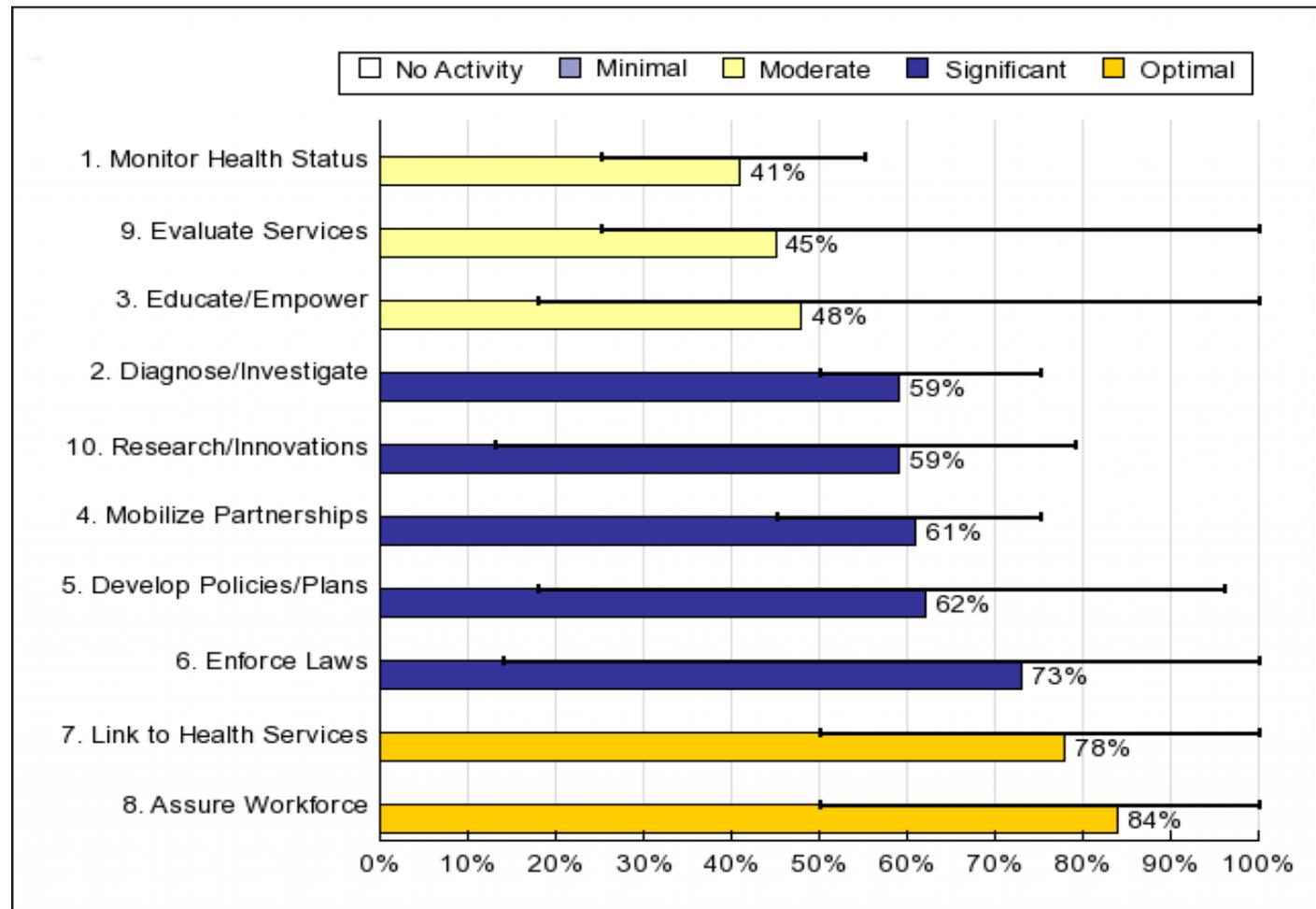
How Did We Perform in the Ten Areas of Essential Public Health Services (EPHS)?

EPHS		Score
1	Monitor Health Status to Identify Community Health Problems	45
2	Diagnose and Investigate Health Problems and Health Hazards	82
3	Inform, Educate, and Empower People about Health Issues	32
4	Mobilize Community Partnerships to Identify and Solve Health Problems	16
5	Develop Policies and Plans that Support Individual and Community Health Efforts	81
6	Enforce Laws and Regulations that Protect Health and Ensure Safety	97
7	Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	60
8	Assure a Competent Public and Personal Health Care Workforce	56
9	Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	35
10	Research for New Insights and Innovative Solutions to Health Problems	60
Overall Performance Score		56

NPHPSP Reports

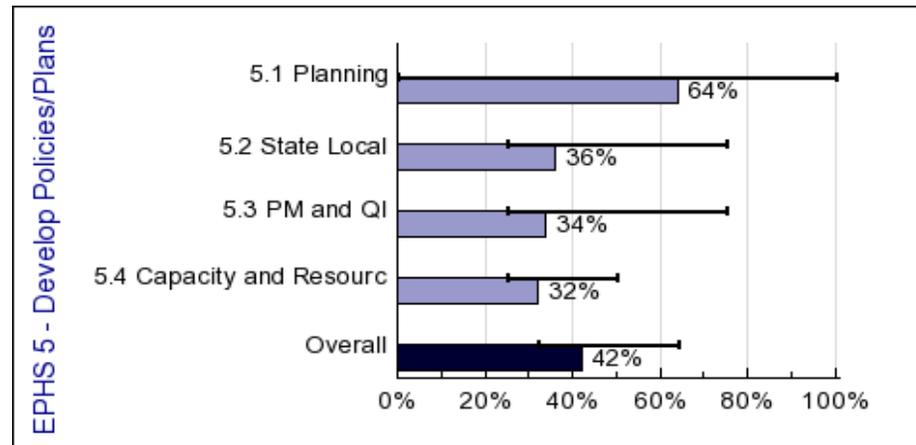
Where Do We Excel? Where Do We Need To Take A Closer Look?

Rank
ordered
performance
scores for
each
Essential
Service, by
level of
activity



Drill Deeper to Focus Improvement

Performance scores for questions within each model standard/Essential Service



- Use data file to pinpoint specific weaknesses
- Model Standard Scores may mask variation:
 - Collaborative planning processes
 - State Health Improvement Plan
 - All-Hazards preparedness capacity
 - Policy development activities

Prioritize Areas for Action

- Use comments and ideas captured during the assessment
- Discuss pressing health needs and related issues affecting the county
- Think about priorities, strategic opportunities, and initiatives
- Consider assessment in the context of other MAPP assessments

Tip! Prepare a briefing sheet to present scores with contextual analysis and notes from the assessment process!

Example – Briefing Sheet

- Essential Service description
- Scoring analysis
- Possible causes
- Possible action steps

Improvement Team Briefing Sheet (Example)

Spring County Local Public Health System Assessment

Essential Service #1:

Monitor Health Status to Identify Community Health Problems

This service evaluates to what extent the LPHS conducts regular community health assessments to monitor progress towards health-related objectives. This service is measured by whether or not the LPHS gathers information from community assessment activities and compiles the data into a Community Health Profile (CHP). This service is also measured by how well the LPHS utilizes current technology to manage, display, analyze, and communicate population health data. Finally, this service is measured by whether or not the LPHS develops, maintains, and regularly contributes to health-related registries to track health related events such as disease patterns and vaccine coverage.

Scoring Analysis

Overall Essential Service #1 Score	47
1.1 Population-Based Community Health Profile	14
1.2 Access to and Utilization of Current Technology	30
1.3 Maintenance of Population Health Registries	96

This service ranked 7th overall and is one of the weaker essential services for Spring County. Indicator 1.1 which measures the population-based community health profile (CHP) is one of the overall weakest scoring indicators. One of the key discussion points for this indicator was the lack of a comprehensive community health profile, which is reflected in the scoring. The score for indicator 1.2 was also weak, since the lack of a CHP means the county lacks certain data and thus the technology used to track and/or analyze the data. Results do indicate Spring County scored well on the maintenance of population health registries, which indicates the local health department is doing a good job of maintaining these.

Possible Causes and Opportunities (Based on Participant Comments)

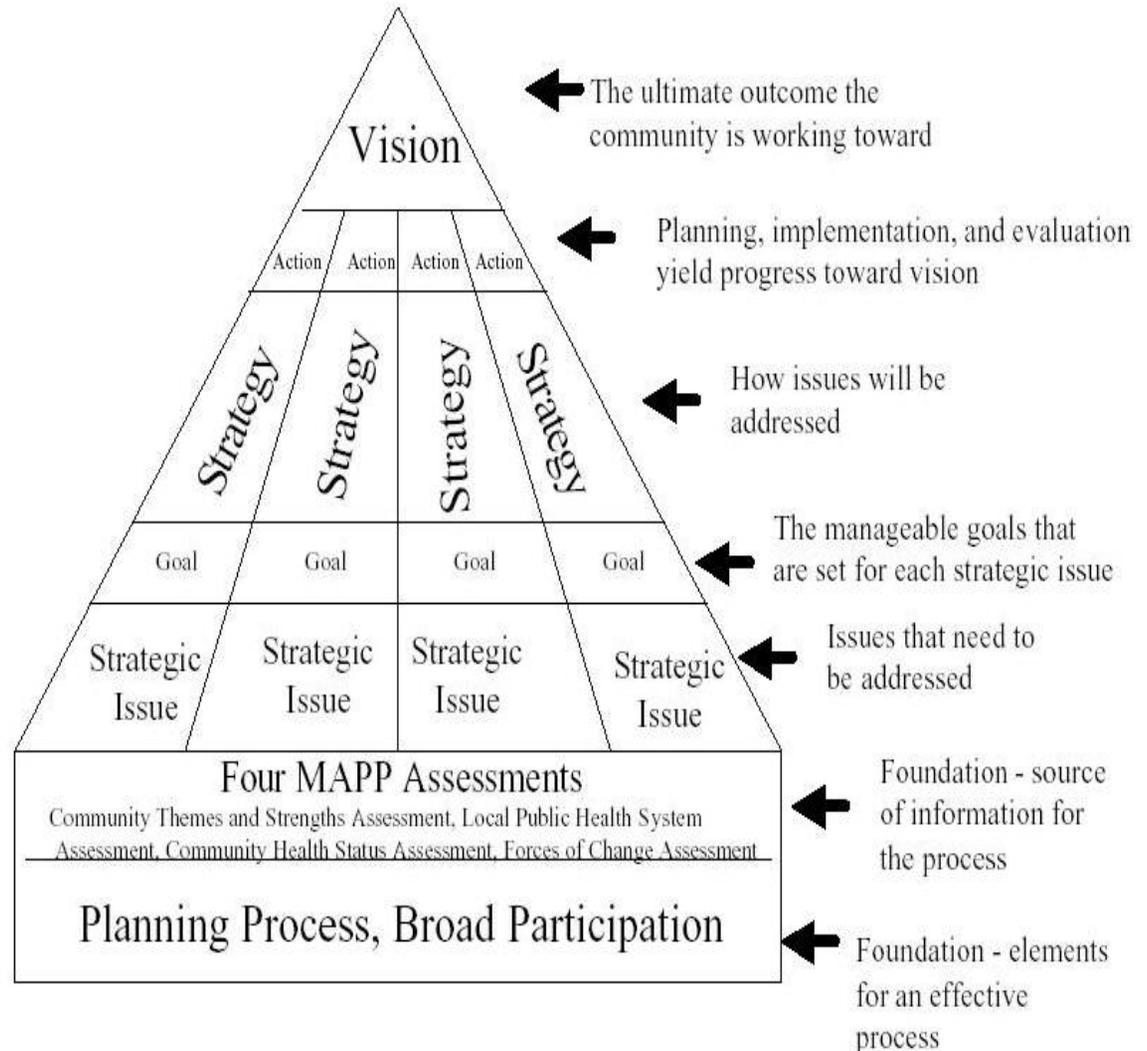
- A comprehensive health profile does not exist because an overall health assessment has not been conducted on a regular basis in Spring County; it should be noted that Spring County does have several agencies/organizations that conduct community assessments for specific population groups and/or targeted diseases.
- There is an absence of coordination to define local community health priorities in Spring County.
- Information/data is not always shared; some information is reported due to state mandates, however this information is not always used in the decision making process.
- Health resources have not been concentrated in the mental health and substance abuse arenas.

Possible Action Steps

Develop a comprehensive community health profile. In order to do this, the LPHS will have to determine a) who the responsible entity is for developing the CHP, b) how buy-in is to be achieved in the process, c) how the process is organized so that the CHP is used to direct/guide budget decisions, and d) how often the profile is to be updated.

Prioritize Areas for Action (cont.)

- **Context of MAPP assessments**
- **Assessments result in**
 - Strategic issues
 - Goals
 - Strategies
 - Action
 - Achieving vision



Prioritize Areas for Action

- **Set Priorities:** The NPHPSP report provides numeric scores – it is up to you to decide what's important!
- **Variety of priority-setting methods:**
 - Optional priority questionnaire
 - Rate priority and performance
 - Use discussion and consensus
 - Use a priority setting matrix

Priority Rating vs. Performance

- **Quadrant I** –
May need increased attention
- **Quadrant II** –
May be important to maintain efforts
- **Quadrant III** –
May shift or reduce some resources or attention to focus on higher priority activities
- **Quadrant IV** –
May need little or no attention at this time

Perceived Priority (1-10)	High	I High Priority Low Performance	II High Priority High Performance
	Low	IV Low Priority Low Performance	III Low Priority High Performance
		Low	High
		Current Level of Performance (1 – 100)	



Source: *NPHPSP User Guide*

Prioritize Areas for Action

- **Tips!**
 - **Limit the number of priority areas**
 - **Consider where areas of activity can be consolidated**
 - **Be careful not to exhaust a large group with detailed rating schemes or an overwhelming amount of data or options**
 - **For items being performed well, you can look for increased efficiencies through coordination or quality improvement efforts**

Explore Root Causes of Performance

A team generates possible root causes:

- **Brainstorm**
- **Organize causes into similar categories**
- **Chart causes and effects graphically (example fishbone diagram in Appendix H of Users Guide)**
- **Check assumptions**

Contributing Factors?

Resources
Information
Expectations, feedback
Materials
Methods (processes)
Knowledge and skill
Incentives

Develop and Implement Action Plans

Participants need to agree on the following:

- The most compelling priority to address
- Organizations or entities responsible
- A goal statement that defines the desired results
- Measurable objectives and interim performance measures
- Strategies with a time line that details how and when goal will be accomplished
- How, and how often, progress will be checked and reported on

Tip! Keep action plans brief and flexible!

Develop and Implement Action Plans

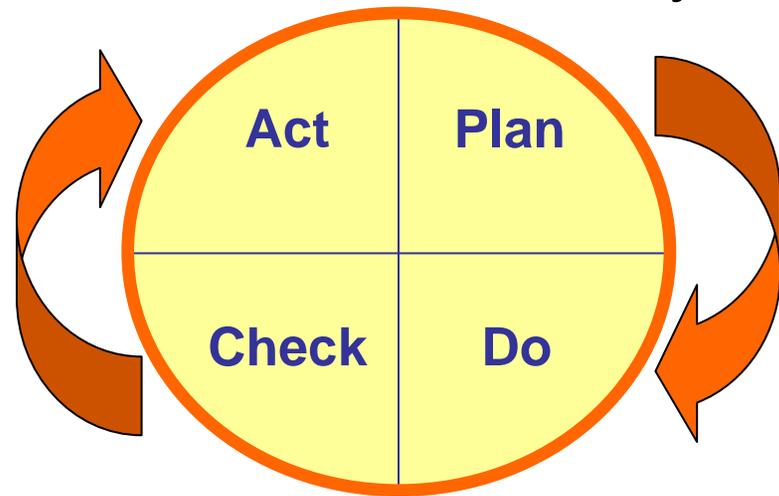
Plan: plan changes aimed at improvement, matched to root causes;

Do: Carry out changes

Check: See if you get desired results

Act: Make changes based on what you learned

- Plan-Do-Check-Act Cycle



Example – Action Plan Template for Performance Improvement Projects

Team Specific Process and Performance Improvement Projects		
Team: _____		Date: _____
Performance Improvement TOPIC:		
How did you decide this is important (what baseline data are being used)?		
Specific Aim or Purpose		
Desired Outcome or Improvement Target		
Plan to Achieve Target - Action Steps (who, will do what, by when)		
What will be done? (brief description)	Who will do it?	By When?
How will you measure success and continue to monitor the process?		

Regularly Monitor and Report Progress

Providing the right people with the right information at the right time:

- Promotes accountability for results
- Helps sustain momentum
- Enables decision making around improvement efforts

Potential target audiences for regular communication:

- **NPHPSP steering or MAPP committee**
- **Assessment participants**
- **Improvement work groups**
- **Local or state health officials**
- **Boards of health**
- **Legislators**
- **Media and the public**
- **Funders**
- **Organizational partners**
- **Other stakeholders**

Regularly Monitor and Report Progress

Different formats for different audiences

Options:

- One-page “scorecard” with small set of quantitative measures
- High-level update on performance improvement plans and work group measures
- A detailed update

Characteristics of Successful Performance Improvement Efforts

- Leadership support
- Ability to find, use, or hire experts
- Ability to form partnerships/involvement of the community
- Small steps toward system improvements
- Experience with related efforts such as MAPP
- Regular performance improvement meetings with feedback

Online Resource Center

- Find info and tools to improve on any
 - EPHS
 - Model Standard
 - Topic or keyword
- Resources for states, locals, or boards
- All links reviewed for relevance to NPHPSP

The screenshot shows the homepage of the National Public Health Performance Standards Program (NPHPSP) Online Resource Center. The header includes the program name and a navigation menu with options: Home, Keyword Search, Model Standard Search, EPHS Search, All State Resources, All Local Resources, and All Governance Resources. The main content area features a welcome message, a section titled 'Tools and Resources for Performance Improvement' with a brief description, and a section titled 'Start finding the information you need to improve!' with a search guide. A highlighted box contains 'Looking for more information...' with links to the NPHPSP website, the Public Health Infrastructure Resource Center, and various resource categories like workforce capacity and performance management. Below this, there is a section for 'post-assessment phase' resources, including a toolkit and a user guide.

www.phf.org/nphpsp

More Resources for NPHPSP Users

- This page included in NPHPSP report document

APPENDIX: RESOURCES FOR NEXT STEPS

The NPHPSP offers a variety of information, technical assistance, and training resources to assist in quality improvement activities. Descriptions of these resources are provided below. Other resources and websites that may be of particular interest to NPHPSP users are also noted below.

- **Technical Assistance and Consultation** - NPHPSP partners are available for phone and email consultation to state and localities as they plan for and conduct NPHPSP assessment and performance improvement activities. Contact 1-800-747-7649 or phpsp@cdc.gov.
- **NPHPSP User Guide** - The NPHPSP User Guide section, "After We Complete the Assessment, What Next?" describes five essential steps in a performance improvement process following the use of the NPHPSP assessment instruments. The NPHPSP User Guide may be found on the NPHPSP website (<http://www.cdc.gov/NPHPSP/PDF/UserGuide.pdf>).
- **NPHPSP Online Tool Kit** - Additional resources that may be found on, or are linked to, the NPHPSP website (<http://www.cdc.gov/NPHPSP/generalResources.html>) under the "Post Assessment/ Performance Improvement" link include sample performance improvement plans, quality improvement and priority-setting tools, and other technical assistance documents and links.
- **NPHPSP Online Resource Center** - Designed specifically for NPHPSP users, the Public Health Foundation's online resource center (www.phf.org/nphpsp) for public health systems performance improvement allows users to search for State, Local, and Governance resources by model standards, essential public health service, and keyword.;
- **NPHPSP Monthly User Calls** - These calls feature speakers and dialogue on topic of interest to users. They also provide an opportunity for people from around the country to learn from each other about various approaches to the NPHPSP assessment and performance improvement process. Calls occur on the third Tuesday of each month, 2:00 - 3:00 ET. Contact phpsp@cdc.gov to be added to the email notification list for the call.
- **Annual Training Workshop** - Individuals responsible for coordinating performance assessment and improvement activities may attend an annual two-day workshop held in the spring of each year. Visit the NPHPSP website (<http://www.cdc.gov/nphpsp/annualTrainingWorkshop.html>) for more information.
- **Public Health Improvement Resource Center at the Public Health Foundation** - This website (www.phf.org/improvement) provides resources and tools for evaluating and building the capacity of public health systems. More than 100 accessible resources organized here support the initiation and continuation of quality improvement efforts. These resources promote performance management and quality improvement, community health information and data systems, accreditation preparation, and workforce development.
- **Mobilizing for Action through Planning and Partnerships (MAPP)** - MAPP has proven to be a particularly helpful tool for sites engaged in community-based health improvement planning. Systems that have just completed the NPHPSP may consider using the MAPP process as a way to launch their performance improvement efforts. Go to www.naccho.org/topics/infrastructure/MAPP to link directly to the MAPP website.

Tools and Tip Sheets



- User's Guide
- PHF Online Resource Center:
<http://www.phf.org/nphpsp/>
- NPHPSP Online Took Kit at
<http://www.cdc.gov/NPHPSP/improving.html>
for sample performance improvement plans, and
resources for priority setting and quality
improvement activities



www.doh.state.fl.us/COMPASS

For More Information

- Visit COMPASS website
www.doh.state.fl.us/COMPASS
- CDC website www.cdc.gov/nphpsp
- NACCHO web site: www.naccho.org
- Public Health Foundation: www.phf.org
 - System Support Center: 202-218-4411; nphpsp-support@phf.org
- Contact DOH Office of Health Statistics and Assessment
 - Christine Abarca at 850-245-4444 ext 2071, e-mail: Christine_Abarca@doh.state.fl.us
 - Daphne Holden at 850-245-4444 ext. 2036, e-mail: Daphne_Holden@doh.state.fl.us

Thank You

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- DOH Office of Performance Improvement
- All Participants