2014-15 County Health Department Performance Snapshot Manatee County

CY = CY 2014, FY = FY 2013 - 14

Product, Service and Process Outcomes								
Measure	Timeframe	County	State	Target or DOH Standard	County Quartile 1=most favorable 4=least favorable	Status	County Trend	Link to Program
Percent of 2-year-old CHD clients fully immunized	CY	97.00%	92.00%	95%	2	Meets Standard	View 5-Year Trend	
Percent of CHD wasted/spoiled/expired/unaccounted for vaccine	CY	0.30%	0.29%	<=3%	2	Meets Standard	View 5-Year Trend	
Percent of CHD STD cases treated according to the most recent STD guidelines within 14 days of diagnosis	CY	87.60%	88.50%	>=90%	4	Needs Review	View 5-Year Trend	
The percentage of ADAP clients in a county that picked up ADAP medications for each month of the year.	CY	89.00%		85.0%	1	Meets Standard	View 5-Year Trend	
Percent of sputum-smear positive TB patients initiating treatment within 7 days of specimen collection	CY	75.00%	90.28%	92%	2	Needs Review	View 5-Year Trend	
Percent of TB cases with a documented HIV test result	CY	100.00%	86.72%	88.7%	1	Meets Standard	View 5-Year Trend	
Annual Comprehensive Environmental Health Score (ACEHS)	CY	93.58%	94.00%	90%	3	Meets Standard	View 3-Year Trend	
Composite Annual Score of Core Epidemiology Measures	CY	86.00%	93.00%	67%	3	Meets Standard	View 5-Year Trend	
Composite Annual Preparedness Score	CY	5.00	4.70	4	1	Meets Standard	View 5-Year Trend	
Percent of WIC infants who are ever breastfed	CY	77.90%	77.50%	77.40%	2	Meets Standard	View 5-Year Trend	
Percent of teen CHD family planning clients who adopt an effective or higher method of birth control	CY	77.99%	81.26%	>80%	3	Needs Review	View 3-Year Trend	
Percent of CHD family planning clients served who have documentation of race in their records	CY	98.03%	93.42%	>95%	1	Meets Standard	View 4-Year Trend	
Customer-Focused Outcomes								
Measure	Timeframe	County	State	Target or DOH Standard	County Quartile 1=most favorable 4=least favorable	Status	County Trend	Link to Program
A documented process to address external customer satisfaction and complaints exists	FY	Yes		Yes		Meets Standard	No Trend	
Percent of completed customer satisfaction surveys with a satisfactory or better rating	FY	93.90%		90%	3	Meets Standard	View 5-Year Trend	
Percent of documented customer complaints acknowledged by end of next business day	FY	95.70%		100%	3	Needs Review	View 5-Year Trend	
Workforce-Focused Outcomes	,	,					,	
Measure	Timeframe	County	State	Target or DOH Standard	County Quartile 1=most favorable 4=least favorable	Status	County Trend	Link to Program
A documented process to address employee satisfaction exists	CY	Yes		Yes		Meets Standard	No Trend	
Rate of workers' compensation incidents per 100 employees	FY	8.11%	6.08%	8.8%	4	Meets Standard	View 3-Year Trend	
Leadership and Governance Outcomes								
Measure	Timeframe	County	State	Target or DOH Standard	County Quartile 1=most favorable 4=least favorable	Status	County Trend	Link to Program
CHD has implemented a collaborative community health assessment process resulting in a community health improvement plan with measureable outcomes and goals within the last 5 years	CY	Yes	Yes	Yes		Meets Standard	No Trend	
Percent of items in compliance with DOH information security and privacy standards, as defined in the annual information security and privacy assessment	CY	91.00%		100%	4	Needs Review	No Trend	
Financial and Market Outcomes								

Measure	Timeframe	County	State	Target or DOH Standard	County Quartile 1=most favorable 4=least favorable	Status	County Trend	Link to Program
Supervisor and employees certify accuracy of time recorded on EARS/DARS within 7 calendar days of end of pay period	CY	97.55%		90%	1	Meets Standard	View 3-Year Trend	
Manage Schedule C OCA cash balances: Federal funds - zero balance 60 days after grant period ends	FY	100.00%		100%	1	Meets Standard	View 3-Year Trend	
Manage Schedule C OCA cash balances: State General Revenue and Trust funds – no negative cash balance	FY	100.00%		100%	1	Meets Standard	View 3-Year Trend	

The County Performance Snapshot (CPS) is organized by the results category of the Sterling Criteria for Organizational Performance Excellence.

Column Descriptions:

Measure: Provides numerical information that quantifies input, output and/or performance. The measure is also a hyperlink to a report with the data for all 67 CHDs.

Timeframe: Indicates the reporting period for the indicator. CY = Calendar Year (January through December) and FY = Fiscal Year (July through June).

County: Displays the most current data for the measure in the specified county.

State: Provides the most current data for the state. The state rate may not be available for all measures.

Target or DOH Standard: Provides the desired performance level.

County Quartile: Compares data for the latest year from one county to another in the state. Quartiles are calculated by ordering all 67 counties' data for a measure from most favorable to least favorable and dividing the list into 4 equal-size groups. In this report, a low quartile number (1) always represents more favorable health situations while fours (4) represent less favorable situations. County quartile may not be available for all measures.

Most favorable situat	ion Average	Least favorable situation				
1	2 or 3	4				
(25% of counties)	(50% of counties)	(25% of counties)				

Status: Compares the most current county rate with the DOH target. "Needs Review" means that the County Rate does not meet or exceed the Target or DOH Standard; "Meets Standard" means that the County Rate does meet or exceed the Target or DOH Standard.

County Trend: The trend for an indicator is calculated using three to five years of data. No trend means the three most recent years of data are not available or the data are categorical (i.e., Yes or No responses). Each available trend is a hyperlink to a trend graph.

Link to Program: This is a website link to the DOH program that uses the indicator.