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

Q & A with Julia Gray, Public Health Foundation

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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
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

- Log in using
  - User ID
  - Self-selected password
Access Reports of Results

www.nphpsp-results.org

- 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

1. 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)

<table>
<thead>
<tr>
<th>EPHS</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitor Health Status To Identify Community Health Problems</td>
<td>65</td>
</tr>
<tr>
<td>Diagnose And Investigate Health Problems and Health Hazards</td>
<td>96</td>
</tr>
<tr>
<td>Inform, Educate, And Empower People about Health Issues</td>
<td>73</td>
</tr>
<tr>
<td>Mobilize Community Partnerships to Identify and Solve Health Problems</td>
<td>41</td>
</tr>
<tr>
<td>Develop Policies and Plans that Support Individual and Community Health Efforts</td>
<td>65</td>
</tr>
<tr>
<td>Enforce Laws and Regulations that Protect Health and Ensure Safety</td>
<td>65</td>
</tr>
<tr>
<td>Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable</td>
<td>72</td>
</tr>
<tr>
<td>Assure a Competent Public and Personal Health Care Workforce</td>
<td>55</td>
</tr>
<tr>
<td>Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services</td>
<td>55</td>
</tr>
</tbody>
</table>

Overall Performance Score

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

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

**EPHS 1. Monitor Health Status**
- 1.1 Community Profile: 29%
- 1.2 Current Technology: 88%
- 1.3 Registries: 85%
- Overall: 88%

**EPHS 2. Diagnose/Investigate**
- 2.1 Identification/Surveillance: 88%
- 2.2 Emergency Response: 99%
- 2.3 Laboratories: 100%
- Overall: 96%

**EPHS 3. Educate/Empower**
- 3.1 Health Ed./Promotion: 64%
- 3.2 Health Communication: 63%
- 3.3 Risk Communication: 94%
- Overall: 73%

**EPHS 4. Mobilize Partnerships**
- 4.1 Constituency Dev.: 52%
- 4.2 Com. Partnerships: 31%
- Overall: 41%

**EPHS 5. Develop Policies/Plans**
- 5.1 Gov. Presence: 78%
- 5.2 Policy Development: 63%
- 5.3 CHIP/Strat Planning: 42%
- 5.4 Emergency Plan: 96%
- Overall: 69%

**EPHS 6. Enforce Laws**
- 6.1 Review Laws: 100%
- 6.2 Improve Laws: 58%
- 6.3 Enforce Laws: 98%
- Overall: 85%
### Reports of Results

<table>
<thead>
<tr>
<th>Essential Public Health Service</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPHS 1. Monitor Health Status To Identify Community Health Problems</td>
<td>65</td>
</tr>
<tr>
<td>1.1 Population-Based Community Health Profile (CHP)</td>
<td>77</td>
</tr>
<tr>
<td>1.1.1 Community health assessment</td>
<td>84</td>
</tr>
<tr>
<td>1.1.2 Community health profile (CHP)</td>
<td>76</td>
</tr>
<tr>
<td>1.1.3 Community-wide use of community health assessment or CHP data</td>
<td>71</td>
</tr>
<tr>
<td>1.2 Access to and Utilization of Current Technology to Manage, Display, Analyze and Communicate Population Health Data</td>
<td>29</td>
</tr>
<tr>
<td>1.2.1 State-of-the-art technology to support health profile databases</td>
<td>50</td>
</tr>
<tr>
<td>1.2.2 Access to geocoded health data</td>
<td>38</td>
</tr>
<tr>
<td>1.2.3 Use of computer-generated graphics</td>
<td>0</td>
</tr>
<tr>
<td>1.3 Maintenance of Population Health Registries</td>
<td>88</td>
</tr>
<tr>
<td>1.3.1 Maintenance or/and contribution to population health registries</td>
<td>100</td>
</tr>
<tr>
<td>1.3.2 Use of information from population health registries</td>
<td>75</td>
</tr>
<tr>
<td>EPHS 2. Diagnose And Investigate Health Problems and Health Hazards</td>
<td>96</td>
</tr>
<tr>
<td>2.1 Identification and Surveillance of Health Threats</td>
<td>88</td>
</tr>
<tr>
<td>2.1.1 Surveillance system(s) to monitor health problems and identify health threats</td>
<td>83</td>
</tr>
<tr>
<td>2.1.2 Submission of reportable disease information in a timely manner</td>
<td>100</td>
</tr>
<tr>
<td>2.1.3 Resources to support surveillance and investigation activities</td>
<td>81</td>
</tr>
<tr>
<td>2.2 Investigation and Response to Public Health Threats and Emergencies</td>
<td>99</td>
</tr>
<tr>
<td>2.2.1 Written protocols for case finding, contact tracing, source identification, and containment</td>
<td>97</td>
</tr>
<tr>
<td>2.2.2 Current epidemiological case investigation protocols</td>
<td>100</td>
</tr>
<tr>
<td>2.2.3 Designated Emergency Response Coordinator</td>
<td>100</td>
</tr>
<tr>
<td>2.2.4 Rapid response of personnel in emergency/disasters</td>
<td>97</td>
</tr>
<tr>
<td>2.2.5 Evaluation of public health emergency response</td>
<td>100</td>
</tr>
<tr>
<td>2.3 Laboratory Support for Investigation of Health Threats</td>
<td>100</td>
</tr>
<tr>
<td>2.3.1 Ready access to laboratories for routine diagnostic and surveillance needs</td>
<td>100</td>
</tr>
<tr>
<td>2.3.2 Ready access to laboratories for public health threats, hazards, and emergencies</td>
<td>100</td>
</tr>
<tr>
<td>2.3.3 Licenses and/or credentialed laboratories</td>
<td>100</td>
</tr>
<tr>
<td>2.3.4 Maintenance of guidelines or protocols for handling laboratory samples</td>
<td>100</td>
</tr>
<tr>
<td>EPHS 3. Inform, Educate, And Empower People about Health Issues</td>
<td>73</td>
</tr>
<tr>
<td>3.1 Health Education and Promotion</td>
<td>64</td>
</tr>
<tr>
<td>3.1.1 Provision of community health information</td>
<td>69</td>
</tr>
<tr>
<td>3.1.2 Health education and/or health promotion campaigns</td>
<td>73</td>
</tr>
<tr>
<td>3.1.3 Collaboration on health communication plans</td>
<td>50</td>
</tr>
<tr>
<td>3.2 Health Communication</td>
<td>63</td>
</tr>
<tr>
<td>3.2.1 Development of health communication plans</td>
<td>50</td>
</tr>
<tr>
<td>3.2.2 Relationships with media</td>
<td>50</td>
</tr>
<tr>
<td>3.2.3 Designation of public information officers</td>
<td>88</td>
</tr>
<tr>
<td>3.3 Risk Communication</td>
<td>54</td>
</tr>
<tr>
<td>3.3.1 Emergency communications plan(s)</td>
<td>100</td>
</tr>
<tr>
<td>3.3.2 Resources for rapid communications response</td>
<td>100</td>
</tr>
<tr>
<td>3.3.3 Crisis and emergency communications training</td>
<td>75</td>
</tr>
<tr>
<td>3.3.4 Policies and procedures for public information officer response</td>
<td>100</td>
</tr>
</tbody>
</table>

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

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

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.
# Essential Service by priority rating and performance score, with areas for attention

<table>
<thead>
<tr>
<th>Essential Service</th>
<th>Priority Rating</th>
<th>Performance Score (level of activity)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Quadrant I (High Priority/Low Performance)</strong> - These important activities may need increased attention.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Monitor Health Status To Identify Community Health Problems</td>
<td>9</td>
<td>65 (Significant)</td>
</tr>
<tr>
<td>4. Mobilize Community Partnerships to Identify and Solve Health Problems</td>
<td>9</td>
<td>41 (Moderate)</td>
</tr>
<tr>
<td>5. Develop Policies and Plans that Support Individual and Community Health Efforts</td>
<td>9</td>
<td>69 (Significant)</td>
</tr>
<tr>
<td><strong>Quadrant II (High Priority/High Performance)</strong> - These activities are being done well, and it is important to maintain efforts.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Diagnose And Investigate Health Problems and Health Hazards</td>
<td>10</td>
<td>96 (Optimal)</td>
</tr>
<tr>
<td>3. Inform, Educate, And Empower People about Health Issues</td>
<td>10</td>
<td>73 (Significant)</td>
</tr>
<tr>
<td>6. Enforce Laws and Regulations that Protect Health and Ensure Safety</td>
<td>9</td>
<td>85 (Optimal)</td>
</tr>
<tr>
<td>8. Assure a Competent Public and Personal Health Care Workforce</td>
<td>9</td>
<td>72 (Significant)</td>
</tr>
<tr>
<td><strong>Quadrant III (Low Priority/High Performance)</strong> - These activities are being done well, but the system can shift or reduce some resources or attention to focus on higher priority activities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Research for New Insights and Innovative Solutions to Health Problems</td>
<td>8</td>
<td>79 (Optimal)</td>
</tr>
<tr>
<td><strong>Quadrant IV (Low Priority/Low Performance)</strong> - These activities could be improved, but are of low priority. They may need little or no attention at this time.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable</td>
<td>8</td>
<td>65 (Significant)</td>
</tr>
<tr>
<td>9. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services</td>
<td>8</td>
<td>55 (Significant)</td>
</tr>
</tbody>
</table>
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>
<thead>
<tr>
<th>Essential Service</th>
<th>LHD Contribution</th>
<th>Performance Score</th>
<th>Consider Questions for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monitor Health Status To Identify Community Health Problems</td>
<td>75%</td>
<td>Significant (65)</td>
<td>Quadrant I</td>
</tr>
<tr>
<td>2. Diagnose And Investigate Health Problems and Health Hazards</td>
<td>100%</td>
<td>Optimal (96)</td>
<td>Quadrant II</td>
</tr>
<tr>
<td>3. Inform, Educate, And Empower People about Health Issues</td>
<td>75%</td>
<td>Significant (73)</td>
<td>Quadrant II</td>
</tr>
<tr>
<td>4. Mobilize Community Partnerships to Identify and Solve Health Problems</td>
<td>75%</td>
<td>Moderate (41)</td>
<td>Quadrant I</td>
</tr>
<tr>
<td>5. Develop Policies and Plans that Support Individual and Community Health Efforts</td>
<td>81%</td>
<td>Significant (69)</td>
<td>Quadrant I</td>
</tr>
<tr>
<td>6. Enforce Laws and Regulations that Protect Health and Ensure Safety</td>
<td>100%</td>
<td>Optimal (85)</td>
<td>Quadrant II</td>
</tr>
<tr>
<td>7. Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable</td>
<td>100%</td>
<td>Significant (65)</td>
<td>Quadrant I</td>
</tr>
<tr>
<td>8. Assure a Competent Public and Personal Health Care Workforce</td>
<td>75%</td>
<td>Significant (72)</td>
<td>Quadrant II</td>
</tr>
<tr>
<td>9. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services</td>
<td>75%</td>
<td>Significant (55)</td>
<td>Quadrant I</td>
</tr>
<tr>
<td>10. Research for New Insights and Innovative Solutions to Health Problems</td>
<td>50%</td>
<td>Optimal (79)</td>
<td>Quadrant III</td>
</tr>
<tr>
<td>Quadrant</td>
<td>Questions to Consider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I. Low Performance/High</td>
<td>• Is the Department’s level of effort truly high, or do they just do more than anyone else?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department Contribution</td>
<td>• Is the Department effective at what it does, and does it focus on the right things?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Is the level of Department effort sufficient for the jurisdiction’s needs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Should partners be doing more, or doing different things?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• What else within or outside of the Department might be causing low performance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II. High Performance/High</td>
<td>• What does the Department do that may contribute to high performance in this area?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department Contribution</td>
<td>• Could any of these strategies be applied to other areas?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Is the high Department contribution appropriate, or is the Department taking on what should be partner responsibilities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Could the Department do less and maintain satisfactory performance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>III. High Performance/Low</td>
<td>• Who are the key partners that contribute to this area?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department Contribution</td>
<td>• What do they do that may contribute to high performance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Could any of these strategies be applied to other areas?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Does the low Department contribution seem right for this area, or are partners picking up slack for Department responsibilities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Does the Department provide needed support for partner efforts?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Could the key partners do less and maintain satisfactory performance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IV. Low Performance/Low</td>
<td>• Who are the key partners that contribute to this area?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department Contribution</td>
<td>• Are their contributions truly high, or do they just do more than the Department?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Is the total level of effort sufficient for the jurisdiction’s needs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Are partners effective at what they do, and do they focus on the right things?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Does the low Department contribution seem right for this area, or is it likely to be contributing to low performance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Does the Department provide needed support for partner efforts?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• What else might be causing low performance?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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
How Did We Perform in the Ten Areas of Essential Public Health Services (EPHS)?

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

1. Monitor Health Status
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 41%
   - Significant: 59%
   - Optimal: 84%

2. Diagnose/Investigate
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 30%
   - Significant: 59%
   - Optimal: 94%

3. Educate/Empower
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 59%
   - Significant: 59%
   - Optimal: 78%

4. Mobilize Partnerships
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 20%
   - Significant: 61%
   - Optimal: 73%

5. Develop Policies/Plans
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 30%
   - Significant: 62%
   - Optimal: 71%

6. Enforce Laws
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 20%
   - Significant: 73%
   - Optimal: 94%

7. Link to Health Services
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 59%
   - Significant: 78%
   - Optimal: 100%

8. Assure Workforce
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 78%
   - Significant: 84%
   - Optimal: 94%

9. Evaluate Services
   - No Activity: 0%
   - Minimal: 10%
   - Moderate: 45%
   - Significant: 59%
   - Optimal: 84%
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

<table>
<thead>
<tr>
<th>Overall Essential Service #1 Score</th>
<th>47</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 Population-Based Community Health Profile</td>
<td>14</td>
</tr>
<tr>
<td>1.2 Access to and Utilization of Current Technology</td>
<td>30</td>
</tr>
<tr>
<td>1.3 Maintenance of Population Health Registries</td>
<td>96</td>
</tr>
</tbody>
</table>

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 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:

1. Who the responsible entity is for developing the CHP.
2. How buy-in is to be achieved in the process.
3. How the process is organized so that the CHP is used to direct/guide budget decisions.
4. 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 |
| Low                       | IV               
|                            | Low Priority    
|                            | Low Performance |
|                           |                 |
|                           |                 |

<table>
<thead>
<tr>
<th>Current Level of Performance (1 – 100)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
</tr>
</tbody>
</table>

|                           | High   |
|                           | II     |
|                           | III    |

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

<table>
<thead>
<tr>
<th>Team Specific Process and Performance Improvement Projects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team: ___________________________ Date: ____________________</td>
</tr>
</tbody>
</table>

**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)**

<table>
<thead>
<tr>
<th>What will be done? (brief description)</th>
<th>Who will do it?</th>
<th>By When?</th>
</tr>
</thead>
<tbody>
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</table>

**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

www.phf.org/nphpsp
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 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 topics 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

- Teresa Daub and Sonal Doshi
  - Centers for Disease Control and Prevention
- Julia Joh Elligers
  - National Association of County and City Health Officials
- Julia Gray
  - Public Health Foundation
- DOH Office of Performance Improvement
- All Participants