

LOCAL PUBLIC HEALTH INDICATORS CRITERIA

The subcommittee established criteria for selecting the set of local public health indicators. These criteria were included on an indicator matrix (Appendix 3) and the subcommittee evaluated each potential indicator against all 11 criteria.

These criteria are:

1. Measures an important aspect, result or outcome of public health's work rated by high (public health can take an active role), medium (public health will coordinate with others who are responsible), or low (public health is a strong advocate but is not directly involved).
2. Population-based.
3. Measurable (able to be defined in standard, specific terms).
4. Feasible to collect, not too expensive.
5. Actionable, meaning that actions or interventions could be taken by public health staff to improve performance against the measure. Measures are actionable if public health has control or influence.
6. Can be reported routinely for at least 90% of local sites and aggregated to the regional and state level, compared to the nation when possible.
7. Indicator may be either a measurement of health determinants or health status.
8. Trend data available to monitor direction of change with annual to biennial updates.
9. Links to and is consistent with local, state, and national measures, like Healthy People 2010.
10. When available, gives demographic detail - age, gender, race/ethnicity, education, and income level - to identify disparities.
11. Indicator is understandable and does not require extensive explanation.

While the criteria were consistently applied to each potential indicator, it is difficult to know the true extent of control or influence that a local jurisdiction can have on an individual's behavior and the related impact on some of the health indicators. Secondly, data validity was added to the criteria matrix chart and became a critical part of the discussion.