

PUBLIC HEALTH IMPROVEMENT PARTNERSHIP

PUBLIC HEALTH INDICATORS

HIGHLIGHTS OF THE 2009 LOCAL PUBLIC HEALTH INDICATORS DATA UPDATE

How healthy are we?

That is the question the Public Health Workgroup attempts to answer.

32 indicators included in the Local Public Health Indicators (LPHI) database provide a snapshot of health status, health behavior, and public health system performance at the local level. Local public health agencies can use these data to help evaluate their work and decide where to invest limited public health resources to improve community health. The indicators also reveal how health status or determinants of health compare across Washington State.

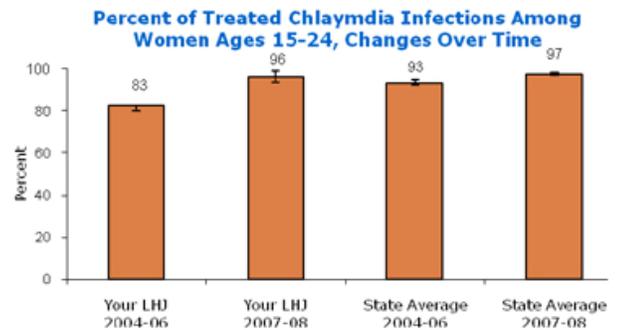
The database is also designed to work in conjunction with Washington's Standards for Public Health, a measurement of statewide system capacity. Together, the indicators reveal how healthy we are and the performance standards examine the process that makes us so. Washington's Public Health Improvement Plan (PHIP) requires local measurement of health status or determinants of health.

The 32 Local Public Health Indicators measure 5 key aspects of public health

- Communicable Disease (4 indicators)
- Prevention and Health Promotion (8 indicators)
- Environmental Health (3 indicators)
- Maternal and Child Health (9 indicators)
- Access to Care (8 indicators)

Local health jurisdictions (LHJs) are using Local Public Health Indicator data to identify or confirm health issues; develop action plans and evaluate progress; and for community education. Most jurisdictions are interested in how their LHJ compares to the state as a whole, and many share their local boards of health and community groups.

This chart is an example of how county indicator data can be used to highlight benchmarks, goals and strategies for improvement. In this example, an LHJ described as "Your LHJ" proposed to their local Board of Health in 2007 that they work to limit the spread of disease by focusing on contact and follow-up with cases of Chlamydia among their highest risk population (women ages 15-24). As a result, the percentage of treated Chlamydia cases increased significantly from 83% in 2004-06 to 96% in 2007-08, and is now comparable to the state average of 97%.



More information is available at www.doh.wa.gov/hip/khi/lphi/overview.htm

CO-CHAIRS

Lyndia Tye, Spokane Regional Health District

Christie Spice, Washington State Department of Health

WORKGROUP COORDINATOR

Jane Lee, Washington State Department of Health

WORKGROUP MEMBERS

Amy Diaz, Kittitas County Public Health

Amy Riffe, Spokane Regional Health District

Art Starry, Thurston County Public Health & Social Services Department

Carrie McLachlan, Island County Public Health Department

Cindan Gizzi, Tacoma-Pierce County Health Department

Debbie Riley, Mason County Public Health

Glen Patrick, Washington State Department of Health

Marcia Goldoft, Washington State Department of Health

Maxine Hayes, Washington State Department of Health

Michael Davisson, Washington State Department of Health

Riley Peters, Washington State Department of Health

Susan Ramsey, Washington State Department of Health

January 2010

PUBLIC HEALTH
ALWAYS WORKING FOR A SAFER AND
HEALTHIER WASHINGTON