

Standards for Public Health in Washington State: 2005 Performance Assessment Report DOH State Programs

Report for: Epidemiology, Health Statistics and Public Health Laboratories, Center for Health Statistics

The Standards and the 2005 Performance Assessment

Thank you for participating in the performance assessment of the Standards for Public Health in Washington State. The intent of the Standards is to provide an overarching measurement framework for the many services, programs, legislation, and state and local administrative codes that affect public health. The Washington State Standards for Public Health Performance address all 10 Public Health Essential Services and crosswalk directly to the Centers for Disease Control and Prevention (CDC) Standards for Performance.

The Washington standards and measures exemplify the national goals for public health performance measurement and development of standards—quality improvement, accountability, and science. Points to remember when looking at the reports include:

- The Standards articulate a higher level of performance, often described as stretch standards, not a description of the system as it is performing currently.
- The Standards reflect an improvement cycle; results of the performance assessment should be used to target areas for improvement.

This Report

The site reviews again demonstrated the incredible commitment, creativity and hard work of the people in the public health system. This report is specific to your program and is intended to give you feedback about the materials you provided as a demonstration of how you met each measure. However, before describing the details that are in the report, we want to summarize overall observations regarding your organization's strengths and opportunities for improvement as observed during the site review.

Strengths

- The website is very well done, easy to see how to access information
- The use of process and outcome measures with some of your initiatives—overall the use of performance measures and staff training in performance measurement was impressive
- The process of assigning specific staff to specific goals and initiatives—excellent accountability
- The involvement with community partners, including the Electronic Death and Registry System Advisory Committee

Areas for Improvement

- Clarify consulting and technical assistance roles more explicitly and make this information available on your website, along with information on how to request these services
- Identify components of CHS data where you can contribute to an understanding of the gaps in access to critical healthcare services

The Performance Assessment Approach

The performance assessment included all 35 local health jurisdictions (LHJs) in the state and 26 Department of Health (DOH) program sites selected by DOH for evaluation. Each site was asked to complete a self-assessment tool and to prepare for an on-site visit by organizing the documentation supporting the self-assessment on each measure.

For this cycle of assessment there were two new aspects that were not part of the 2002 Baseline Evaluation; the selection of specific environmental health and prevention and promotion programs for more in-depth review at the local LHJ level, and the evaluation of the new Proposed Administrative Standards and Measures. This expansion of the scope of the assessment was addressed through the training and use of internal DOH and LHJ reviewers working under the supervision of the external consultants.

During the DOH state site review, an independent consultant and an internal LHJ reviewer evaluated the documents and scored the measures. When the reviewer had questions regarding the documentation, an informal interview was conducted with the appropriate manager or staff person. In addition, potential exemplary practice documentation was requested from each site. The on-site reviews concluded with an exit interview in which general strengths and opportunities for improvement were discussed, and feedback on the Standards and assessment process was obtained. All of this information has been compiled into a system-wide report, with recommendations regarding the next steps for the system.

Results of the Site Review

The attached report is organized to follow the Standards format. The Standards have five topic areas (please note that these are not necessarily synonymous with program areas, there are organization-wide measures to be found in each of them). Within each of these five topic areas, four to five standards are identified for the entire governmental public health system. For each standard, specific measures are described for state level programs. For DOH sites, a Matrix was used to identify which measures were applicable to each specific program. Only the applicable measures were evaluated for performance. This report provides detailed results for just those measures that were applicable to the program.

Administrative Standards Results: For the Proposed Administrative Standards, this evaluation cycle was to evaluate the measures themselves and not to report site specific performance. The results of our evaluation of these standards and measures are at the system level only therefore, this report does not contain any results for the Proposed Administrative standards.

Comparability to the 2002 Baseline results: Due to the major revisions in the environmental health topic area of standards, none of the 2005 EH topic area results can be compared to the results of the 2002 Baseline. All the results in the four other topic areas should be considered comparable for DOH program sites.

The topic areas of the standards are often referred to with the following acronyms:

- Assessment = AS
- Communicable Disease = CD
- Environmental Health = EH
- Prevention and Promotion = PP
- Access = AC

This report provides you with the following information:

- *For all measures*: a table listing all the measures with the performance designation to serve as a quick reference tool in identifying the measures that demonstrated performance, those scored as a partial, and those that did not demonstrate performance against the measure.
- *For each measure* (we have not repeated these in the report in order to reduce the number of pages, but have grouped them under their overarching standard): the *score* assigned by the reviewer:
 - 2 = demonstrates the measure,
 - 1 = partially demonstrates the measure,
 - 0 = does not demonstrate the measure,
 - 8 = not applicable,
 - 9 = not able to rate [did not participate at a topic area level]

Comments provide clarification regarding the intent of the measure or the score assigned.

Documents lists, in abbreviated form, the documents that were the basis for the score. When multiple documents were provided and some did not demonstrate the measure or there were many more examples than needed, they are not all listed.

Exemplary documents lists documents requested for review as potential examples in the exemplary practices compendium.

Next Steps

First, celebrate what you have accomplished. In the two and a half year period between the 2002 Baseline Evaluation and this performance assessment, it was clear to the site reviewers that improvements had been developed and implemented. Again, thank you for all of your hard work every day, and especially in preparing for the site reviews.

Next, select the areas where you want to improve your performance. All of the information provided in this report is intended to support improvement of your organization's work on behalf of the citizens in your community and Washington State. After you have had a chance to digest this report and share it with staff, you should review the data again to determine which areas of your work might benefit from a *focused improvement process*. Develop a brief, but specific and doable work plan—don't try to improve everything at once!

In selecting your areas of improvement you will be able to look at your overall strengths and opportunities for improvement (summarized above), or at the scores of specific measures or topic areas. You will be assisted in this effort by several initiatives:

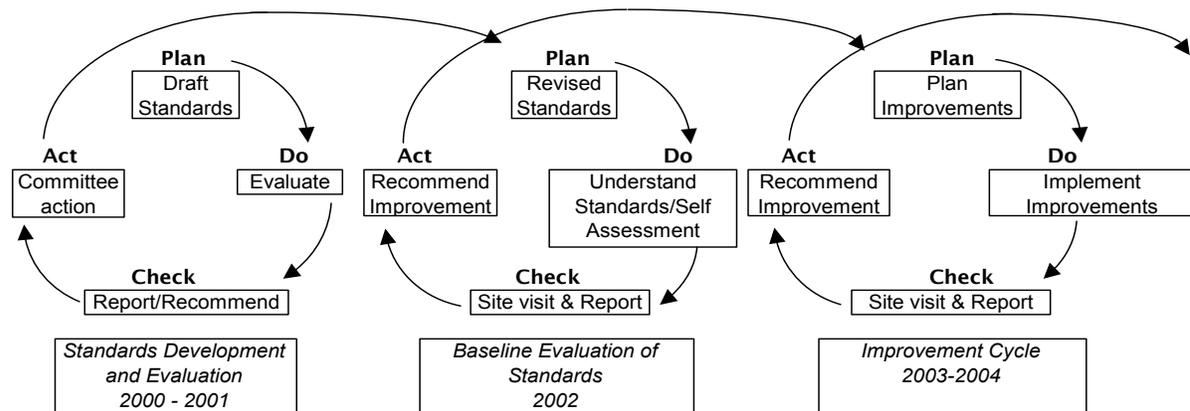
- ***Exemplary practices***: The Exemplary Practices Compendium provides you with documentation from many of the LHJs and DOH programs in Washington State. Potential exemplary practice documents were gathered from each of the sites and the very best

examples for each measure will be organized into a electronic tool kit. This material will be available by year-end 2005 at

www.doh.wa.gov/hip/Standards/BestPractices/StandardsExemplaryPractices.htm .

- **Statewide initiatives** projects such as the implementation of the Public Health Issue Management System (PHIMS) for communicable disease, and the Assessment in Action project to build assessment capacity at the local level also support improvement of practice and documentation. Based on the recommendations in the system-wide report, the PHIP process will adopt additional statewide initiatives related to the measures.

Finally, begin preparing now for the next performance assessment. The assessment process itself has been conducted using quality improvement principles and methods, including the Plan-Do-Check-Act cycle. As shown below, the standards field test in 2000, the baseline in 2002, and this 2005 performance assessment are all part of the cycle of continuous quality improvement. The next cycle is planned for 2006-08, with site visits probably occurring in the spring of 2008.



Strategies for building on your current performance:

- Save the documentation you have used in this assessment as a good starting point for continuing to identify documentation for demonstrating performance.
- Establish an electronic document library for collecting documentation and facilitating the use of an electronic format for the next assessment. Numerous state programs used an electronic format for all their documentation in this cycle.
- Adopt or adapt as many exemplary practices as possible to improve your performance against the measures. There is no reason to “re-invent the wheel”, when another program may have an excellent process or documentation method that you can start using with less time and effort.
- Participate in state-wide improvement efforts that are identified through PHIP work, other multi-disciplinary efforts or by getting technical assistance from other state programs that may have targeted the same areas for improvement. Great gains can be made through sharing ideas and resources.

Again, we thank you for all your work in preparing for this 2005 performance assessment, and especially for the terrific work you do in protecting and promoting the health of the citizens of Washington State that we were privileged to review.

Program: Center for Health Statistics

Topic: 1. Understanding Health Issues

Standard 1: Public health assessment skills and tools are in place in all public health jurisdictions and their level is continuously maintained and enhanced.

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i> | <i>Exemplary Documents</i> |
|----------------|--------------|--|--|----------------------------|
| AS 1.1 S | 2 | | Consultation: Email re drug-related deaths for Pierce Cty PH; Email re death data file to researcher at Univ. of BC; Coordination: Minutes sub-county pop.est. development group; white paper on small area | |
| AS 1.2 S | 0 | Documentation does not describe procedure or protocol for seeking staff consultation | List from VistaPHw website, advisory group /contact number,email;Email to WA-ASSESS listserv to identify the new Vista/CHS data coord.; Cover from annual rept. with contact #;Annual rept. mailing list | |
| AS 1.3 S | 2 | | CHS Project Init. For 03-05 biennium; Vista work plan; AIA grant work plans relating to Vista | |
| AS 1.5 S | 2 | | CV/resumes for 3 staff and manager including requisite skills; coordinated trainings: Pres. 11th Annual Joint Conference;Pres. 2004 Reg. Assessment meeting;Agenda/name tag from NCHS conference | |

Thursday, September 15, 2005

Note: Totals may not equal 100% due to rounding.

Page 1 of 4

Standard 3: Public health programs results are evaluated to document effectiveness.

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i> | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------|---|----------------------------|
| AS 3.2 S | 2 | | Birth Certificate data quality(BDQQ)initiative outlining perf. meas.,goals,sample measures for hospitals;Statewide perinatal advisory committee meeting agenda, presentation on BDQQ system | |
| AS 3.3 S | 2 | | Interviewing Monitoring Sheet used for BRFSS interviews;Customer services issuance reports monitoring issuances of certificates. | |
| AS 3.4 S | 2 | | Certificate in Performance Measure training;list of trainings from personnel records | |
| AS 3.5 S | 2 | | GMAP reports on death registration system | |

Standard 4: Health Policy Decisions are guided by health assessment information, with involvement of representative community members.

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i> | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------|---|----------------------------|
| AS 4.1 S | 2 | | EDRS Advisory Committee meeting minutes;web page write up on how Vista is used in assessment and policy development | |

Thursday, September 15, 2005

Note: Totals may not equal 100% due to rounding.

Standard 5: Health data is handled so that confidentiality is protected and health information systems are secure.

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i> | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------|---|----------------------------|
| AS 5.2 S | 2 | | WACs and policies pertaining to data sharing and confidentiality;two signed data sharing agreements;log on web page for Vista;FTP protocols | |

Topic: 3. Assuring a Safe, Healthy Environment for People

Standard 2: Services are available throughout the state to respond to environmental events or natural disasters that threaten the public's health.

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i> | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------|---|----------------------------|
| EH 2.5 S | 2 | | List documenting participation in risk communication for public health preparedness & response;two signed documents showing completion of emergency response training | |

Topic: 5. Helping People Get the Services They Need

Standard 2: Available information is used to analyze trends, which over time, affect access to critical health services.

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i> | <i>Exemplary Documents</i> |
|----------------|--------------|---|--|----------------------------|
| AC 2.3 S | 0 | Documentation does not demonstrate a gap analysis summary report or the comparison of that data to the current level of access to CHS | Questions taken from BRFSS pertaining to unmet health care needs | |

Thursday, September 15, 2005

Note: Totals may not equal 100% due to rounding.

Standard 3: Plans to reduce specific gaps in access to critical health services are developed and implemented through collaborative efforts.

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i> | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------|--|----------------------------|
| AC 3.1 S | 2 | | Current Charity Care reports and summary of report's distribution list | |

Overall Score Totals

| | <i>Overall Program Totals:</i> | <i>Overall DOH Totals:</i> |
|----------------------------------|--------------------------------|----------------------------|
| % Demonstrates: | 85% | 67% |
| % Partially Demonstrates: | 0% | 23% |
| % Does not Demonstrate: | 15% | 10% |

Center for Health Statistics

1. Understanding Health Issues

| <i>Measure</i> | <i>Score</i> | <i>Compliance</i> |
|----------------|--------------|----------------------|
| AS 1.1 S | 2 | Demonstrates |
| AS 1.2 S | 0 | Does not Demonstrate |
| AS 1.3 S | 2 | Demonstrates |
| AS 1.5 S | 2 | Demonstrates |
| AS 3.2 S | 2 | Demonstrates |
| AS 3.3 S | 2 | Demonstrates |
| AS 3.4 S | 2 | Demonstrates |
| AS 3.5 S | 2 | Demonstrates |
| AS 4.1 S | 2 | Demonstrates |
| AS 5.2 S | 2 | Demonstrates |

3. Assuring a Safe, Healthy Environment for People

| <i>Measure</i> | <i>Score</i> | <i>Compliance</i> |
|----------------|--------------|-------------------|
| EH 2.5 S | 2 | Demonstrates |

5. Helping People Get the Services They Need

| <i>Measure</i> | <i>Score</i> | <i>Compliance</i> |
|----------------|--------------|----------------------|
| AC 2.3 S | 0 | Does not Demonstrate |
| AC 3.1 S | 2 | Demonstrates |