

# Standards for Public Health in Washington State: 2005 Performance Assessment Report DOH State Programs Report for: Health Systems Quality Assurance, Emergency Medical Services and Trauma System Program

## **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 variety and depth of consultation, technical assistance, and training sessions provided to local levels and other agencies regarding data collecting and analysis including the Data Users Manual
- The data collection and analysis and the graphic display and reporting, especially in the area of safety net activities
- The performance measures identified for EMSTS, including the tracking form, and training process to educate and involve program staff

- The use of literature research and best practices to inform community groups' decisions and to include in grant applications for improved funding.

### ***Areas for Improvement***

- Assure that assessment priorities and activities are included in program goals and objectives, and planning for resources
- Identify and take action on interventions through community groups or vendors to address gaps and to improve access to services
- Provide and document training opportunities for program staff in the areas required by the performance standards

### ***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.

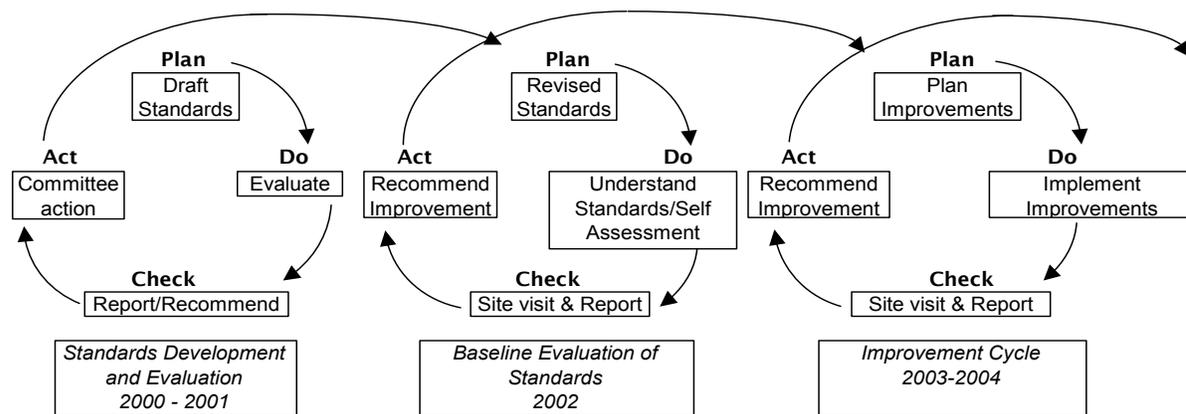
**Next, select the areas where you want to improve your performance.** All of the information provided in this report is intended to support improvement of your organization's work on behalf of the citizens in your community and Washington State. After you have had a chance to digest this report and 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 an electronic tool kit. This material will be available by year-end 2005 at [www.doh.wa.gov/hip/Standards/BestPractices/StandardsExemplaryPractices.htm](http://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: Emergency Medical Services & Trauma

## 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            |                                                                                                                               | Staff log and related emails for 2 staff for TA & consultation, Trauma Network Meeting-4/22/04 agenda-Use of Excel & Data Analysis content, Trauma Data Dictionary-online, Trauma Registry Users Manual | Trauma Data Dictionary-online, Trauma Registry Users Manual                       |
| AS 1.2 S       | 2            |                                                                                                                               | EMS Website pages-Trauma Registry- "Who to Contact", "How to Contact Us" brochure                                                                                                                       | EMS Website pages-Trauma Registry- "Who to Contact", "How to Contact Us" brochure |
| AS 1.3 S       | 1            | Goals #2 & #5 contain objectives for assessment activities, but no readily apparent resources identified to perform the work. | OEMSTS 12/04 & 3/05 retreat summaries                                                                                                                                                                   |                                                                                   |
| AS 1.5 S       | 2            |                                                                                                                               | Epidemiologist 3 position description, Academy of Health Conf agenda, Trauma network meeting agenda-- 4/04                                                                                              |                                                                                   |

**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> |
|----------------|--------------|-----------------|------------------|----------------------------|
|----------------|--------------|-----------------|------------------|----------------------------|

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

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|          |   |                                                                                                                                                                            |                                                                                                                                       |
|----------|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| AS 3.2 S | 2 | EMS&TS Performance Monitoring & Reporting (FY 05), OEMSTS Summary of Performance Measures, Procedure for Performance Measure Tracking, Regional/state QI filters           | EMS&TS Performance Monitoring & Reporting (FY 05), OEMSTS Summary of Performance Measures, Procedure for Performance Measure Tracking |
| AS 3.3 S | 2 | Performance report--copy                                                                                                                                                   |                                                                                                                                       |
| AS 3.4 S | 2 | 2 staff resumes with program eval. expertise, "Creating a Performance Based Org."-- 4/05 training agenda                                                                   |                                                                                                                                       |
| AS 3.5 S | 2 | Vendor contract for EMS exams, sample report from exam scoring, Trauma Medical director's meeting- 9/04; Liver & Spleen Injury algorithm, Trauma Team Activation guideline |                                                                                                                                       |

**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            |                 | Outcomes TAC 12/03 minutes, Regional AC-3/05 minutes, Medical Program Director 6/05 workshop minutes, Trauma data Steering Comm. PPT, Trauma Team Activation PPT |                            |
| AS 4.3 S       | 2            |                 | AED Grant- for 2004-2005, Senate Bill 5708-Admin of Epi by EMT's, Emergency Cardiovascular Care Study & grant application, EMS Registry grant application        |                            |

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**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       | 1            | No documentation of actual data reports showing evidence of use of security procedures were | Data collector encryption specs and data transfer procedure description, NTDB data transmission instructions, Case Review Files and Serving/Receiving Legal Documents flow chart, NTDB screen print | Case Review Files and Serving/Receiving Legal Documents flow chart |

**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       | 1            | No documentation of risk communication training or for ERP training for other staff members | Numerous Emergency response/preparedness courses for 1 staff member |                            |

**Topic: 4. Prevention is Best: Promoting Healthy Living**

**Standard 1: Policies are adopted that support prevention priorities and that reflect consideration of scientifically-based public health literature.**

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i>                                                                                                                              | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| PP 1.1 S       | 2            |                 | Emails re: Airbag Safety, Booster Seats and for Violence Against Women Act, Bike Helmet Safety                                                |                            |
| PP 1.2 S       | 2            |                 | Emails to regions, EMS agencies, and hospitals, Desk Manual for Injury Prevention, OEMSTS website w/ how to contact us, list of coordinators. |                            |

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

**Standard 2: Active involvement of community members is sought in addressing prevention priorities.**

| <i>Measure</i> | <i>Score</i> | <i>Comments</i>                                                                                    | <i>Documents</i>                                                                                                                  | <i>Exemplary Documents</i> |
|----------------|--------------|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| PP 2.2 S       | 2            |                                                                                                    | Statewide EMS/Trauma System Quarterly Reports, Distribution of DASA talking points for underage drinking, IPPE TAC meeting packet |                            |
| PP 2.4 S       | 1            | This measure requires documentation for at least 2 staff members to fully demonstrate the measure. | 1 staff member training in group facilitation-2004, organizing communities-1997/1996                                              |                            |

**Standard 3: Access to high quality prevention services for individuals, families, and communities is encouraged and enhanced by disseminating information about available services and by engaging in and supporting collaborative partnerships.**

| <i>Measure</i> | <i>Score</i> | <i>Comments</i>                                                                                                                                                | <i>Documents</i>                                                                                              | <i>Exemplary Documents</i> |
|----------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------|
| PP 3.1 S       | 2            |                                                                                                                                                                | Injury Prevention/Public Education TAC-2/05 meeting agenda & packet, Best Practices in prevention of injuries |                            |
| PP 3.2 S       | 2            | Regional EMSTC plans contain goals/strategies, county specific information on categories of injuries, and need statements.                                     | Regional EMSTC plans                                                                                          |                            |
| PP 3.3 S       | 1            | Regional reports contain some components of QI planning, but do not provide the OEMSTS program with a comprehensive QI plan for EMSTS services and activities. | Central Region EMS and Trauma Plan-2004-2005, NW regional EMS & TC System Plan- 7/05-6/07                     |                            |

**Standard 4: Prevention, early intervention and outreach services are provided directly or through contracts.**

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i> | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------|------------------|----------------------------|
|----------------|--------------|-----------------|------------------|----------------------------|

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|          |   |                                                                                                                                           |                                                                                                                                                    |
|----------|---|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| PP 4.1 S | 2 |                                                                                                                                           | Traffic Safety grant announcement & distribution, emails re: analysis of injury rates, Regional plan templates, HRSA Evaluation Guidebook          |
| PP 4.2 S | 1 | Unable to identify how consideration of professional requirements and competencies is evaluated in outreach and prevention interventions. | Regional Evaluation Plan templates, Central, NW, and East region plans with reports, Best Practices information on injuries and on bike helmet use |
| PP 4.3 S | 2 |                                                                                                                                           | Regional plans and data reports by county, Performance measures report, OEMSTS plan 3/05                                                           |
| PP 4.4 S | 2 |                                                                                                                                           | Templates for Regional Plans, Data Dictionary and Registry User's Manual,                                                                          |
| PP 4.5 S | 1 | This measure requires documentation for more than 1 staff member.                                                                         | Training documentation for 1 staff member                                                                                                          |

**Standard 5: Health promotion activities are provided directly or through contracts.**

| <i>Measure</i> | <i>Score</i> | <i>Comments</i>                                                             | <i>Documents</i>                                                                                                  | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------|
| PP 5.1 S       | 2            |                                                                             | DUI contracts, EMS and Trauma care regional contracts, Trauma coordinators, injury prevention coordinators groups |                            |
| PP 5.2 S       | 1            | No documentation of distribution of health promotion funding opportunities. | South Central Regional Plan-2004, DASA notification of activities to reduce underage drinking                     |                            |

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

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|          |   |                                                                                                                  |                                                                                             |
|----------|---|------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| PP 5.3 S | 1 | No documentation of EMSTS processes for system to organize, distribute and update health promotion materials.    | Bike Helmet information and handouts, Traffic Safety Grant proposal - 5/05                  |
| PP 5.4 S | 1 | No documentation of number and type of health promotion activities or of use of data to revise program offerings | IPPE TAC mission, goals and objectives summary, Crash Summary Data report for 2004          |
| PP 5.5 S | 1 | This measure requires documentation for more than 1 staff member.                                                | Resume and training information for 1 staff member, IPPE TAC Regional Coordinator's meeting |

## 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       | 2            |                 | Trauma System Survey and Report- 11/04, Survey of Trauma Medical Directors-2004, Regional Emergency Medical services- biennial plan format for 2005-2007 | Trauma System Survey and Report- 11/04 |
| AC 2.4 S       | 2            |                 | Survey of Trauma Medical Directors-2004, Data Reports to Regions of personnel counts and provider lists, Provider email lists                            |                                        |

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**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       | 0            |                 | No documentation provided |                            |
| AC 3.2 S       | 0            |                 | No documentation provided |                            |
| AC 3.4 S       | 0            |                 | No documentation provided |                            |

**Standard 4: Quality measures that address the capacity, process for delivery and outcomes of critical health services are established, monitored, and reported.**

| <i>Measure</i> | <i>Score</i> | <i>Comments</i> | <i>Documents</i>                                                                                                                                          | <i>Exemplary Documents</i> |
|----------------|--------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| AC 4.1 S       | 2            |                 | Clinical Guidelines for Trauma Triage Activation, Trauma Medical Director's agenda & packet- 9/04                                                         |                            |
| AC 4.3 S       | 2            |                 | SWWA Medical Center Trauma Services QA & PI Plan, Klickitat Valley Hospital CQI Plan-ED; WAC 246-- Trauma QI programs for designated trauma care services |                            |

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

## Overall Score Totals

|                              | <i>Overall Program<br/>Totals:</i> | <i>Overall DOH<br/>Totals:</i> |
|------------------------------|------------------------------------|--------------------------------|
| %<br>Demonstrates:           | <b>61%</b>                         | <b>67%</b>                     |
| % Partially<br>Demonstrates: | <b>31%</b>                         | <b>23%</b>                     |
| % Does not<br>Demonstrate:   | <b>8%</b>                          | <b>10%</b>                     |

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

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# Emergency Medical Services & Trauma

## *1. Understanding Health Issues*

| <i>Measure</i> | <i>Score</i> | <i>Compliance</i>      |
|----------------|--------------|------------------------|
| AS 1.1 S       | 2            | Demonstrates           |
| AS 1.2 S       | 2            | Demonstrates           |
| AS 1.3 S       | 1            | Partially 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 4.3 S       | 2            | Demonstrates           |
| AS 5.2 S       | 1            | Partially Demonstrates |

## *3. Assuring a Safe, Healthy Environment for People*

| <i>Measure</i> | <i>Score</i> | <i>Compliance</i>      |
|----------------|--------------|------------------------|
| EH 2.5 S       | 1            | Partially Demonstrates |

## *4. Prevention is Best: Promoting Healthy Living*

| <i>Measure</i> | <i>Score</i> | <i>Compliance</i>      |
|----------------|--------------|------------------------|
| PP 1.1 S       | 2            | Demonstrates           |
| PP 1.2 S       | 2            | Demonstrates           |
| PP 2.2 S       | 2            | Demonstrates           |
| PP 2.4 S       | 1            | Partially Demonstrates |
| PP 3.1 S       | 2            | Demonstrates           |
| PP 3.2 S       | 2            | Demonstrates           |
| PP 3.3 S       | 1            | Partially Demonstrates |

|          |   |                        |
|----------|---|------------------------|
| PP 4.1 S | 2 | Demonstrates           |
| PP 4.2 S | 1 | Partially Demonstrates |
| PP 4.3 S | 2 | Demonstrates           |
| PP 4.4 S | 2 | Demonstrates           |
| PP 4.5 S | 1 | Partially Demonstrates |
| PP 5.1 S | 2 | Demonstrates           |
| PP 5.2 S | 1 | Partially Demonstrates |
| PP 5.3 S | 1 | Partially Demonstrates |
| PP 5.4 S | 1 | Partially Demonstrates |
| PP 5.5 S | 1 | Partially Demonstrates |

*5. Helping People Get the Services They Need*

| <i>Measure</i> | <i>Score</i> | <i>Compliance</i>    |
|----------------|--------------|----------------------|
| AC 2.3 S       | 2            | Demonstrates         |
| AC 2.4 S       | 2            | Demonstrates         |
| AC 3.1 S       | 0            | Does not Demonstrate |
| AC 3.2 S       | 0            | Does not Demonstrate |
| AC 3.4 S       | 0            | Does not Demonstrate |
| AC 4.1 S       | 2            | Demonstrates         |
| AC 4.3 S       | 2            | Demonstrates         |