

Standards for Public Health in Washington State: 2005 Performance Assessment Report Local Health Jurisdictions Report for: Asotin County Health District

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 local health jurisdiction 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 partnerships developed in community, as represented by the Oral Health Coalition and the Child Care programs, demonstrate the commitment to community involvement.
- The website provides a foundation for future development of information for the public.

Areas for Improvement

- Consider developing a brief strategic plan, to focus your efforts on the few high priority improvements to be made over the next year.
- Develop assessment and measurement capacity.

- Develop EH protocols that are consistent with state law and regulation, enforcement procedures and tracking logs.
- Develop goals, objectives and measurable performance indicators for all program areas.

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, 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 site review, an independent consultant and an internal DOH reviewer evaluated the documents and scored each measure. 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 local health jurisdictions. For LHJs, all measures were applicable; however, some (for example those that required certain actions related to an outbreak) were not applicable if an event had not occurred.

Program Review Results: For the measures that were assessed through program review, the scores for all programs reviewed for the individual measure were aggregated to calculate an “agency-wide” score for the measure. For these measures the LHJ detail shows only the aggregate score for the measure as the detailed comments for these measures are included in the program reports. Attached to this summary report are four program specific reports with the detailed scoring for each measure evaluated for each program, with related comments.

Administrative Standards Results: For the Administrative Standards, this evaluation cycle was to evaluate the Proposed Administrative Standards and 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, and to the program review method of evaluation used for numerous measures, only some of the 2005 results can be compared to the results of the 2002 Baseline. The measures that are considered comparable between the two cycles are:

- All Assessment (AS) measures, except AS 3.2 and AS 3.3, which were evaluated through program review
- All Communicable Disease (CD) measures
- Prevention and Promotion (PP) measures in standards PP1, PP2, and PP3
- All Access (AC) measures

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.

- *For each topic area:* at the end of each topic area, there is a roll-up of the scores on all *applicable, rated* measures in the topic area (the percent of measures scored as *demonstrates*, the percent scored as *partially demonstrates*, the percent scored as *does not demonstrate*). Next to your roll-up for the topic area is a roll-up for peer counties, and then a statewide roll-up. Your peer counties are identified below, based on the DOH analysis of Dominant Rural Urban Commuting Area Codes (for detail on this methodology, please go to the DOH website <http://www.doh.wa.gov/Data/Guidelines/RuralUrban.htm>). There is no intent, in an improvement-focused effort, to compare specific organizations to one another. However, this roll-up data does provide each site reviewed with performance benchmarks.

- *For all topic areas:* the final segment of this part of the report provides you with a roll-up of all topic areas, with the same benchmark data from the peer group and statewide roll-ups.

Peer Groupings

<i>Small Town/Rural</i>	<i>Mixed Rural</i>	<i>Large Town</i>	<i>Urban</i>
Adams	Clallam	Asotin	Benton/Franklin
Columbia	Grays Harbor	Chelan/Douglas	Clark
Garfield	Island	Grant	Cowlitz
Jefferson	Mason	Kittitas	King
Klickitat	Skagit	Lewis	Kitsap
Lincoln	Skamania	Walla Walla	Pierce
NE Tri-County		Whitman	Snohomish
Okanogan			Spokane
Pacific			Thurston
San Juan			Whatcom
Wahkiakum			Yakima

Next Steps

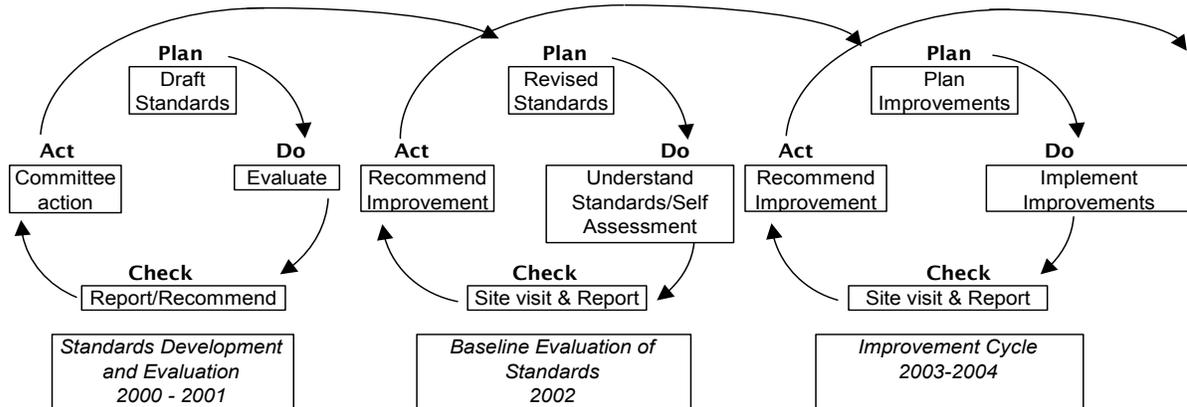
First, celebrate what you have accomplished. In the two and a half year period between the 2002 Baseline Evaluation and this performance assessment, it was clear to the site reviewers that improvements had been developed and implemented. Again, thank you for all of your hard work every day, and especially 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 and your Board of Health, 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 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/phip/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. This cycle there were three LHJs that used an electronic format for all their documentation. These sites stated that the electronic preparation was much easier and helpful to the process than making paper copies of the documentation.
- 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 LHJ may have an excellent process or documentation method that you can start using with less time and effort.
- Participate in regional or state-wide improvement efforts that are identified through PHIP work, or other multi-disciplinary efforts, such as the recent Assessment in Action effort to build capacity for assessment at the local level.
- Identify methods for getting technical assistance from state programs, or from other LHJs 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.

LHJ: Asotin County Health District

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>
AS1.1L	2		Southeastern Washington ABCD Partnership for Dental Health	
AS1.2L	0	No documentation provided.		
AS1.3L	0	No documentation provided.		
AS1.4L	0	No documentation provided.		
AS1.5L	0	No documentation provided.		

Standard 2: Information about environmental threats and community health status is collected, analyzed and disseminated at intervals appropriate for the community.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
AS2.1L	0	No documentation provided.		
AS2.2L	0	No documentation provided.		

AS2.3L	0	No documentation provided.
AS2.4L	0	No documentation provided.
AS2.5L	0	No documentation provided.

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>
AS3.1L	0	No documentation provided.		
AS3.2L	0			
AS3.3L	0			
AS3.4L	0	No documentation provided.		
AS3.5L	0	No documentation provided.		

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>
AS4.1L	0	No documentation provided.		
AS4.2L	0	No documentation provided.		

AS4.3L	0	No documentation provided.
AS4.4L	0	No documentation provided.

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>
AS5.1L	0	This measure is about data that is being moved and assuring its confidentiality. It is not about individual confidentiality.		
AS5.2L	0	This measure is about the data procedures and protocols for data transfer and evidence of data sharing show evidence of use of confidentiality.		

Score Totals for Topic 1. Understanding Health Issues

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	5%	36%	56%
% Partially Demonstrates:	0%	26%	24%
% Does not Demonstrate:	95%	38%	20%

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

Topic: 2. Protecting People from Disease

Standard 1: A surveillance and reporting system is maintained to identify emerging health issues.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
CD1.1L	2		Asotin County Web Page, Letter to Law Enforcement and distribution list	
CD1.2L	2		Website and Letters to Physicians with Notifiable Conditions, Procedure for Finding & Notifying New Providers of Requirements for Reportable Diseases	Process for Finding & Notifying New Providers of Requirements for Reportable Diseases
CD1.3L	0	No documentation provided.		
CD1.4L	2		Notifiable Conditions Reporting and Surveillance Book and Asotin Notifiable Conditions Protocol	
CD1.5L	0	No documentation provided.		
CD1.6L	2		Information from Salmonella Outbreak	
CD1.7L	2		CD 101 Training Log	

Standard 2: Response plans delineate roles and responsibilities in the event of communicable disease outbreaks and other health risks that threaten the health of people.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
CD2.1L	2		DOH Emergency Contact Red Book, Webpage, and Distribution to Local Agencies	

CD2.2L	2	Phone list distributed to health care providers and on Website.
CD2.3L	2	Asotin Communicable Disease Notifiable Conditions Protocol

Standard 3: Communicable disease investigation and control procedures are in place and actions documented.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
CD3.1L	2		Lewis-Clark Resource Book and YWCA Resource Book	
CD3.2L	1	No documentation provided for newsletters about managing reportable conditions.	Public Health Alert for Salmonella	
CD3.3L	1	No documentation for process to exercise legal authority.	Communicable Disease Reporting Manual	
CD3.4L	0	No documentation provided.		
CD3.5L	0	No documentation provided.		
CD3.6L	0	No documentation provided.		

Standard 4: Urgent public health messages are communicated quickly and clearly and actions documented.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
CD4.1L	2		Meningitis 9/03 and Newspaper article	
CD4.2L	1	Media list needs to be updated at least annually.	2003 Emergency Response Plan, Physician List	

CD4.3L	1	No clear roles for the media.	2003 Emergency Response Plan
CD4.4L	0	No documentation provided.	

Standard 5: Communicable disease and other health risk responses are routinely evaluated for opportunities for improving public health system response.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
CD5.1L	0	No documentation provided.		
CD5.2L	0	No documentation provided.		
CD5.3L	0	No documentation provided.		
CD5.4L	0	No documentation provided.		
CD5.5L	2		Log for staff attendees for CD 101	
CD5.6L	0	No documentation provided.		

Score Totals for Topic 2. Protecting People from Disease

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	42%	52%	62%
% Partially Demonstrates:	15%	25%	22%
% Does not Demonstrate:	42%	23%	16%

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

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

Standard 1: Environmental health education is a planned component of public health programs.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
EH1.1L	1			
EH1.2L	0			
EH1.3L	0			
EH1.4L	1			

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>
EH2.1L	2		Website provides beeper information, also available on phone line	
EH2.2L	2		Emergency Response Plan 2003, after action report	
EH2.3L	0	No documentation available		
EH2.4L	1	The measure calls for all LHJ staff to be trained annually in the emergency response plan--the CERT training included some, but not all staff and occurred in 2003.	Emergency Response Plan, CERT training	

Standard 3: Both environmental health risks and environmental health illnesses are tracked, recorded, and reported.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
EH3.1L	0			
EH3.2L	0			
EH3.3L	0			

Standard 4: Compliance with public health regulations is sought through enforcement actions.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
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EH4.1L	0	No documentation available on how available to public, no updating apparent of local code	RCWs, WACs, local ordinance adopted in 1984
EH4.2L	0		
EH4.3L	0		
EH4.4L	1		
EH4.5L	0		

Score Totals for Topic 3. Assuring a Safe, Healthy Environment for People

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	13%	45%	53%
% Partially Demonstrates:	25%	32%	30%
% Does not Demonstrate:	63%	23%	16%

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

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>
PP1.1L	2		Childcare program with partners identified	
PP1.2L	0	No documentation available		
PP1.3L	0	No documentation available		

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>
PP2.1L	0	No documentation available		
PP2.2L	0	No documentation available		

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>
PP3.1L	2		YWCA Resource Guide, website	
PP3.2L	0	No documentation available		
PP3.3L	0	No documentation available		

PP3.4L 0 No documentation available

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>
PP4.1L	0			
PP4.2L	1			
PP4.3L	1			
PP4.4L	2			

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>
PP5.1L	2		Child care program	
PP5.2L	1	No documentation of methods to organize, etc. health promotion materials	STARS training announcements and logs	
PP5.3L	1			
PP5.4L	1			

Score Totals for Topic 4. Prevention is Best: Promoting Healthy Living

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	24%	38%	48%
% Partially Demonstrates:	29%	32%	31%
% Does not Demonstrate:	47%	30%	21%

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

Topic: 5. Helping People Get the Services They Need

Standard 1: Information is collected and made available at both the state and local level to describe the local health system, including existing resources for public health protection, health care providers, facilities, and support services.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
AC1.1L	0	No evidence in documentation provided to meet this measure.		
AC1.2L	2		YMCA Resource Guide and L & Clark Health Resource Handbook	
AC1.3L	0	No meeting minutes or analysis of current access to critical health services and conclusions for future needs.		

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>
AC2.1L	0	No documentation provided.		
AC2.2L	0	No documentation provided.		
AC2.3L	0	No documentation provided.		

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>
AC3.1L	0	No documentation provided.		
AC3.2L	0	No documentation provided.		
AC3.3L	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>
AC4.1L	0	No documentation provided.		
AC4.2L	0	No documentation provided regarding training in quality improvement.		

Score Totals for Topic 5. Helping People Get the Services They Need

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	9%	28%	52%
% Partially Demonstrates:	0%	17%	16%
% Does not Demonstrate:	91%	55%	32%

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

Overall Score Totals: Asotin County Health District

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	21%	41%	55%
% Partially Demonstrates:	14%	27%	25%
% Does not Demonstrate:	65%	32%	20%

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

Friday, September 16, 2005

LHJ: Asotin County Health District

Program: EH: Food Safety

Topic: 1. Understanding Health Issues

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>
AS3.2L	0	No documentation available		
AS3.3L	0	No documentation available		

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

Standard 1: Environmental health education is a planned component of public health programs.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
EH1.1L	1	Materials have not been updated or expanded, do not reflect current regulations	Yellow ACHD flyer listing publications dated 8/02	
EH1.2L	0	No documentation available		
EH1.3L	0	No documentation available		
EH1.4L	1	Materials are from 2002, no documentation of evaluations	Food education PowerPoint	

Standard 3: Both environmental health risks and environmental health illnesses are tracked, recorded, and reported.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
EH3.1L	0	No documentation available		
EH3.2L	0	No documentation available		
EH3.3L	0	No documentation available		

Standard 4: Compliance with public health regulations is sought through enforcement actions.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
EH4.2L	0	No documentation available		
EH4.3L	0	No documentation available		
EH4.4L	1	Most elements are not being tracked	manual log	
EH4.5L	0	No documentation available		

Overall Program Score Totals: EH: Food Safety

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
0%	23%	77%

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

LHJ: Asotin County Health District

Program: EH: Wastewater Management

Topic: 1. Understanding Health Issues

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>
AS3.2L	0	No documentation available		
AS3.3L	0	No documentation available		

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

Standard 1: Environmental health education is a planned component of public health programs.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
EH1.1L	1	Materials have not been updated or expanded	Yellow ACHD flyer listing publications dated 8/02	
EH1.2L	0	No documentation available		
EH1.3L	0	No documentation available		
EH1.4L	0	No documentation available		

Standard 3: Both environmental health risks and environmental health illnesses are tracked, recorded, and reported.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
EH3.1L	0	No documentation available		
EH3.2L	0	No documentation available		
EH3.3L	0	No documentation available		

Standard 4: Compliance with public health regulations is sought through enforcement actions.

<i>Measure</i>	<i>Score</i>	<i>Comments</i>	<i>Documents</i>	<i>Exemplary Documents</i>
EH4.2L	0	No documentation available		
EH4.3L	0	No documentation available		
EH4.4L	1	Most elements are not being tracked	manual log	
EH4.5L	0	No documentation available		

Overall Program Score Totals: EH: Wastewater Management

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
0%	15%	85%

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

LHJ: Asotin County Health District

Program: PP: Child Care

Topic: 1. Understanding Health Issues

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>
AS3.2L	0	No documentation available		
AS3.3L	0	No documentation available		

Topic: 4. Prevention is Best: Promoting Healthy Living

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>
PP4.1L	0	No documentation available regarding the role of the BOH in supporting this program		
PP4.2L	1	No other materials available in Spanish, no information about how to select appropriate materials	One Spanish language VCR tape	
PP4.3L	1	No documentation available for program evaluation against performance measures	Consultant notes, provider action plans	
PP4.4L	2		STARS training certification	

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>
PP5.3L	1	No documentation of evaluation of training or other aspects of the program	Child Care statement of work, provider action plan, consultant daily encounter form, monthly report	
PP5.4L	1	It is not clear whether the content of this symposium was on health promotion skill development (for example, social marketing) or on program content (for example, issues in child care settings)	Certificate for Symposium	

Overall Program Score Totals: PP: Child Care

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
13%	50%	38%

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

LHJ: Asotin County Health District

Program: PP: Immunizations

Topic: 1. Understanding Health Issues

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>
AS3.2L	0	No documentation available		
AS3.3L	0	No documentation available		

Topic: 4. Prevention is Best: Promoting Healthy Living

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>
PP4.1L	0	No documentation available regarding the role of the BOH in supporting this program		
PP4.2L	1	No information about how staff selects appropriate materials	Immunization brochures in Spanish	
PP4.3L	0	No documentation available		
PP4.4L	2		CD 101 training	

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>
PP5.3L	0	No documentation available		
PP5.4L	0	This measure looks for training in population based health promotion methods, rather than specific clinical skills		

Overall Program Score Totals: PP: Immunizations

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
13%	13%	75%

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

Asotin County Health District

1. Understanding Health Issues

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
AS1.1L	2	Demonstrates
AS1.2L	0	Does not demonstrate
AS1.3L	0	Does not demonstrate
AS1.4L	0	Does not demonstrate
AS1.5L	0	Does not demonstrate
AS2.1L	0	Does not demonstrate
AS2.2L	0	Does not demonstrate
AS2.3L	0	Does not demonstrate
AS2.4L	0	Does not demonstrate
AS2.5L	0	Does not demonstrate
AS3.1L	0	Does not demonstrate
AS3.2L	0	Does not demonstrate
AS3.3L	0	Does not demonstrate
AS3.4L	0	Does not demonstrate
AS3.5L	0	Does not demonstrate
AS4.1L	0	Does not demonstrate
AS4.2L	0	Does not demonstrate
AS4.3L	0	Does not demonstrate
AS4.4L	0	Does not demonstrate
AS5.1L	0	Does not demonstrate
AS5.2L	0	Does not demonstrate

2. Protecting People from Disease

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
CD1.1L	2	Demonstrates
CD1.2L	2	Demonstrates
CD1.3L	0	Does not demonstrate
CD1.4L	2	Demonstrates
CD1.5L	0	Does not demonstrate

CD1.6L	2	Demonstrates
CD1.7L	2	Demonstrates
CD2.1L	2	Demonstrates
CD2.2L	2	Demonstrates
CD2.3L	2	Demonstrates
CD3.1L	2	Demonstrates
CD3.2L	1	Partially demonstrates
CD3.3L	1	Partially demonstrates
CD3.4L	0	Does not demonstrate
CD3.5L	0	Does not demonstrate
CD3.6L	0	Does not demonstrate
CD4.1L	2	Demonstrates
CD4.2L	1	Partially demonstrates
CD4.3L	1	Partially demonstrates
CD4.4L	0	Does not demonstrate
CD5.1L	0	Does not demonstrate
CD5.2L	0	Does not demonstrate
CD5.3L	0	Does not demonstrate
CD5.4L	0	Does not demonstrate
CD5.5L	2	Demonstrates
CD5.6L	0	Does not demonstrate

3. Assuring a Safe, Healthy Environment for People

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
EH1.1L	1	Partially demonstrates
EH1.2L	0	Does not demonstrate
EH1.3L	0	Does not demonstrate
EH1.4L	1	Partially demonstrates
EH2.1L	2	Demonstrates
EH2.2L	2	Demonstrates
EH2.3L	0	Does not demonstrate
EH2.4L	1	Partially demonstrates

EH3.1L	0	Does not demonstrate
EH3.2L	0	Does not demonstrate
EH3.3L	0	Does not demonstrate
EH4.1L	0	Does not demonstrate
EH4.2L	0	Does not demonstrate
EH4.3L	0	Does not demonstrate
EH4.4L	1	Partially demonstrates
EH4.5L	0	Does not demonstrate

4. Prevention is Best: Promoting Healthy Living

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
PP1.1L	2	Demonstrates
PP1.2L	0	Does not demonstrate
PP1.3L	0	Does not demonstrate
PP2.1L	0	Does not demonstrate
PP2.2L	0	Does not demonstrate
PP3.1L	2	Demonstrates
PP3.2L	0	Does not demonstrate
PP3.3L	0	Does not demonstrate
PP3.4L	0	Does not demonstrate
PP4.1L	0	Does not demonstrate
PP4.2L	1	Partially demonstrates
PP4.3L	1	Partially demonstrates
PP4.4L	2	Demonstrates
PP5.1L	2	Demonstrates
PP5.2L	1	Partially demonstrates
PP5.3L	1	Partially demonstrates
PP5.4L	1	Partially demonstrates

5. Helping People Get the Services They Need

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
AC1.1L	0	Does not demonstrate
AC1.2L	2	Demonstrates

AC1.3L	0	Does not demonstrate
AC2.1L	0	Does not demonstrate
AC2.2L	0	Does not demonstrate
AC2.3L	0	Does not demonstrate
AC3.1L	0	Does not demonstrate
AC3.2L	0	Does not demonstrate
AC3.3L	0	Does not demonstrate
AC4.1L	0	Does not demonstrate
AC4.2L	0	Does not demonstrate