

Standards for Public Health in Washington State: 2005 Performance Assessment Report Local Health Jurisdictions Report for: Skagit County Department of Health

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

- Due to the limited review, there was not a sufficient overview to comment on strengths and opportunities—one initiative that deserves mention is EH development of overall community involvement (rather than homeowner-specific) in dealing with failing OSS systems that impact the quality of shared recreational water areas.

Areas for Improvement

- N/A

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.

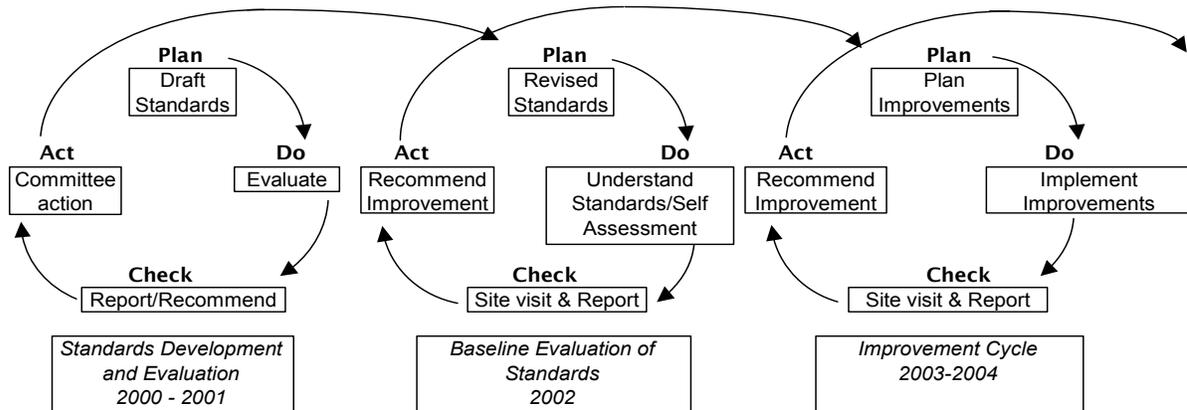
Next, select the areas where you want to improve your performance. All of the information provided in this report is intended to support improvement of your organization's work on behalf of the citizens in your community and Washington State. After you have had a chance to digest this report and share 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/phil/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: Skagit County Department of Health

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	9			
AS1.2L	9			
AS1.3L	9			
AS1.4L	9			
AS1.5L	9			

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	9			
AS2.2L	9			

AS2.3L 9

AS2.4L 9

AS2.5L 9

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	9			
AS3.2L	9			
AS3.3L	9			
AS3.4L	9			
AS3.5L	9			

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	9			
AS4.2L	9			

AS4.3L 9

AS4.4L 9

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	9			
AS5.2L	9			

Score Totals for Topic 1. Understanding Health Issues

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:		63%	56%
% Partially Demonstrates:		20%	24%
% Does not Demonstrate:		17%	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		Emergency Phone list for emergency, police, sheriff; Telephone number in phone book; Emergency Telephone Numbers-Emergency Mgmt Plan	
CD1.2L	2		Communicable Disease Reporting Packet: Communicable Disease Process and Contacts for Consultation Sheet; Report a Notifiable Condition Sheet; Website pages on notifiable conditions	
CD1.3L	2		BOH meeting agenda-2/04 includes CD update for 2003; Reported Conditions Sheets for 2004	
CD1.4L	2	Flow chart on releasing information to the public includes management of communications for four risk levels (0 through 3).	Facts by FAX to health providers and schools-Pertussis; Public Information Release Protocol Flow Chart; Page 30 of Skagit County Emergency Management Plan	
CD1.5L	1	Documentation provided includes tracking of data, but no evidence of data analysis and its use.	2001 through 2004 Reported Conditions Sheet	
CD1.6L	1	Hand written log does not document all elements of this measure. In the future, a PHIMS report should be used as documentation.	CD Tracking log	
CD1.7L	0		No documentation provided	

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 Red Book; Communicable Disease Reporting Packet to health care providers; Phone number in telephone book (refers to emergency number); SCHED Emergency Telephone Numbers Sheet	
CD2.2L	1	Information distributed to health care providers, but no evidence if information was sent to public safety officials.	Communicable Disease Contacts for Consultation Sheet	
CD2.3L	1	Documentation provided addresses some of the elements in this measure; should include more information on back-up staff, case investigation, and surveillance.	Public Information Release Protocol Flow Chart; SCHED responsibilities Sheet	

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	1	Health care provider list should be updated for use by LHJ staff	2001 Provider List	
CD3.2L	2		Facts by FAX-Pertussis, 5/05; Fax transmittal sheet	
CD3.3L	0		No documentation provided	
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		Facts by FAX-Pertussis, 5/05; FAX transmittal sheet	
CD4.2L	0		No documentation provided	
CD4.3L	1	Documentation does not include timeframes for communications or guidelines for accuracy/clarity of messages.	Public Information Release Protocol Flow Chart	
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	1	Report on TB outbreak on BOH agenda, but documentation provided did not include information on response evaluation or recommendations.	BOH agenda-5/05	
CD5.3L	0		No documentation provided	
CD5.4L	0		No documentation provided	
CD5.5L	0		No documentation provided	

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:	27%	49%	62%
% Partially Demonstrates:	27%	25%	22%
% Does not Demonstrate:	46%	26%	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	2			
EH1.2L	2			
EH1.3L	2			

EH1.4L 2

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		Laminated card with telephone numbers, Bioterrorism Plan emergency response sheet documents that 911 has contact numbers	
EH2.2L	2		SC Emergency Mgmt Plan list of HD responsibilities, after-action on flood 03, with specific HD listing of issues	
EH2.3L	2		SCHD responsibilities in local DEM plan, flood after-action, 05 flood emergency information sheet	
EH2.4L	1	No documentation available that all staff have been trained annually	Bioterrorism Response Plan 03, emergency telephone numbers, PIO flow chart, responsibility list from DEM plan, training log	PIO flow chart

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	1			
EH3.2L	1			
EH3.3L	2			

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>
EH4.1L	2		SC website, SCHD OSS page, new or remodeled food service application packet	new or remodeled food service application packet
EH4.2L	1			
EH4.3L	1			
EH4.4L	2			
EH4.5L	1			

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:	63%	56%	53%
% Partially Demonstrates:	38%	26%	30%
% Does not Demonstrate:	0%	18%	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	9			
PP1.2L	9			
PP1.3L	9			

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	9			
PP2.2L	9			

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	9			
PP3.2L	9			

PP3.3L 9

PP3.4L 9

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	9			
PP4.2L	9			
PP4.3L	9			
PP4.4L	9			

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	9			
PP5.2L	9			
PP5.3L	9			
PP5.4L	9			

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:		43%	48%
% Partially Demonstrates:		32%	31%
% Does not Demonstrate:		25%	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	9			
AC1.2L	9			
AC1.3L	9			

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	9			
AC2.2L	9			
AC2.3L	9			

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	9			
AC3.2L	9			
AC3.3L	9			

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	9			
AC4.2L	9			

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:		60%	52%
% Partially Demonstrates:		10%	16%
% Does not Demonstrate:		29%	32%

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

Overall Score Totals: Skagit County Department of Health

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	40%	54%	55%
% Partially Demonstrates:	31%	24%	25%
% Does not Demonstrate:	29%	23%	20%

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

Monday, September 19, 2005

LHJ: Skagit County Department of Health

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	9	No documentation available		
AS3.3L	9	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	2		SCHD website, new food code regulation postcard	
EH1.2L	2		New food code training, state and locally sponsored classes, local attendance list and announcement	
EH1.3L	2		Food meeting minutes (11/03), revised Farmer's Market handouts	revised Farmer's Market handouts
EH1.4L	2		Food Safety Workshop 10/04, summary evaluation	Food Safety Workshop 10/04, summary evaluation

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	1	No documentation of how data is available to community	Complaints log, some FBI data in food safety workshop	
EH3.2L	1	Not clear how data ties to key indicators	Food borne Disease Outbreak Investigation Guidelines packet	Food borne Disease Outbreak Investigation Guidelines packet
EH3.3L	2		2003 Food Staff retreat agenda and minutes, revised Farmer's Market packet	2003 Food Staff retreat agenda and minutes, revised Farmer's Market packet

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	2		Procedures regarding new operator licensing in a FSE, re-inspection of FSE with critical violations	
EH4.3L	1	This measure envisions using a sampling of actions to review compliance and identify issues that may not have surface to date The staff discussions in the minutes seem to focus on known "hot button" issues	Food meeting minutes 7/13/04, 1/11/05	
EH4.4L	2		Complaints logging system	
EH4.5L	2		Training in new food code	

Overall Program Score Totals: EH: Food Safety

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
73%	27%	0%

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

LHJ: Skagit County Department of Health

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	9	No documentation available		
AS3.3L	9	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	2	The tabloid is one of the best pieces seen of EH social marketing!	Website SS Resources page, Keep Skagit Waters Clean Tabloid	
EH1.2L	2		Community Septic Liaison Program information, summaries of community meetings and correspondence	Community Septic Liaison Program information
EH1.3L	2		Septics 101 PowerPoint, workshop evaluation form	workshop evaluation form
EH1.4L	2		Septics 101, evaluation form	

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	2		Yokeko, Dewey Beach and Quite Cover community map and e-mails re: potluck	
EH3.2L	0	no documentation available		
EH3.3L	2		E-mails regarding potluck and data also contain information on development of the Community Septic Liaison program	

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	1	The flow diagram is terrific, but is missing the steps to take if system is in failure	OSS flow diagram	OSS flow diagram
EH4.3L	0	No documentation available		
EH4.4L	2		Complaints logging system	
EH4.5L	0	No documentation available		

Overall Program Score Totals: EH: Wastewater Management

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
64%	9%	27%

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

LHJ: Skagit County Department of Health Program:

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	9			
AS3.3L	9			

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	9			
PP4.2L	9			
PP4.3L	9			
PP4.4L	9			

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	9			
PP5.4L	9			

Overall Program Score Totals:

% Demonstrates: % Partially Demonstrates: % Does not Demonstrate:

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

LHJ: Skagit County Department of Health Program:

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	9			
AS3.3L	9			

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	9			
PP4.2L	9			
PP4.3L	9			
PP4.4L	9			

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	9			
PP5.4L	9			

Overall Program Score Totals:

% Demonstrates: % Partially Demonstrates: % Does not Demonstrate:

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

Skagit County Department of Health

1. Understanding Health Issues

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
AS1.1L	9	Not able to Rate
AS1.2L	9	Not able to Rate
AS1.3L	9	Not able to Rate
AS1.4L	9	Not able to Rate
AS1.5L	9	Not able to Rate
AS2.1L	9	Not able to Rate
AS2.2L	9	Not able to Rate
AS2.3L	9	Not able to Rate
AS2.4L	9	Not able to Rate
AS2.5L	9	Not able to Rate
AS3.1L	9	Not able to Rate
AS3.2L	9	Not able to Rate
AS3.3L	9	Not able to Rate
AS3.4L	9	Not able to Rate
AS3.5L	9	Not able to Rate
AS4.1L	9	Not able to Rate
AS4.2L	9	Not able to Rate
AS4.3L	9	Not able to Rate
AS4.4L	9	Not able to Rate
AS5.1L	9	Not able to Rate
AS5.2L	9	Not able to Rate

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	2	Demonstrates
CD1.4L	2	Demonstrates
CD1.5L	1	Partially demonstrates

CD1.6L	1	Partially demonstrates
CD1.7L	0	Does not demonstrate
CD2.1L	2	Demonstrates
CD2.2L	1	Partially demonstrates
CD2.3L	1	Partially demonstrates
CD3.1L	1	Partially demonstrates
CD3.2L	2	Demonstrates
CD3.3L	0	Does not demonstrate
CD3.4L	0	Does not demonstrate
CD3.5L	0	Does not demonstrate
CD3.6L	0	Does not demonstrate
CD4.1L	2	Demonstrates
CD4.2L	0	Does not demonstrate
CD4.3L	1	Partially demonstrates
CD4.4L	0	Does not demonstrate
CD5.1L	0	Does not demonstrate
CD5.2L	1	Partially demonstrates
CD5.3L	0	Does not demonstrate
CD5.4L	0	Does not demonstrate
CD5.5L	0	Does not demonstrate
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	2	Demonstrates
EH1.2L	2	Demonstrates
EH1.3L	2	Demonstrates
EH1.4L	2	Demonstrates
EH2.1L	2	Demonstrates
EH2.2L	2	Demonstrates
EH2.3L	2	Demonstrates
EH2.4L	1	Partially demonstrates

EH3.1L	1	Partially demonstrates
EH3.2L	1	Partially demonstrates
EH3.3L	2	Demonstrates
EH4.1L	2	Demonstrates
EH4.2L	1	Partially demonstrates
EH4.3L	1	Partially demonstrates
EH4.4L	2	Demonstrates
EH4.5L	1	Partially demonstrates

4. Prevention is Best: Promoting Healthy Living

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
PP1.1L	9	Not able to Rate
PP1.2L	9	Not able to Rate
PP1.3L	9	Not able to Rate
PP2.1L	9	Not able to Rate
PP2.2L	9	Not able to Rate
PP3.1L	9	Not able to Rate
PP3.2L	9	Not able to Rate
PP3.3L	9	Not able to Rate
PP3.4L	9	Not able to Rate
PP4.1L	9	Not able to Rate
PP4.2L	9	Not able to Rate
PP4.3L	9	Not able to Rate
PP4.4L	9	Not able to Rate
PP5.1L	9	Not able to Rate
PP5.2L	9	Not able to Rate
PP5.3L	9	Not able to Rate
PP5.4L	9	Not able to Rate

5. Helping People Get the Services They Need

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
AC1.1L	9	Not able to Rate
AC1.2L	9	Not able to Rate

AC1.3L	9	Not able to Rate
AC2.1L	9	Not able to Rate
AC2.2L	9	Not able to Rate
AC2.3L	9	Not able to Rate
AC3.1L	9	Not able to Rate
AC3.2L	9	Not able to Rate
AC3.3L	9	Not able to Rate
AC4.1L	9	Not able to Rate
AC4.2L	9	Not able to Rate