

Standards for Public Health in Washington State: 2005 Performance Assessment Report Local Health Jurisdictions Report for: Tacoma-Pierce County Health Department

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 strategic plan, tied to staff allocations and budgeting, provides detailed objectives rolling up to overall goals that cross-cut across department activities.
- The assessment capacity of the department, demonstrated through the distribution of the CD-ROM to community partners and the assessment data available on the website provides a solid foundation for assessment activities.
- The utilization of the assessment capacity in the excellent prevention presentations prepared for the BOH and other community groups provides good information for setting priorities.
- The application of assessment capacity to EH issues, including the customer service focus groups, strategic planning focus group and telephone survey provides good information for setting priorities.

- The communications audit and planning process supports updates of website, department materials and the development of the Communications Standards Handbook.
- The revised website provides clear messaging, user friendly content, and access to lots of information for the public and community partners.
- The materials provided for the Administrative Standards demonstrate a high level of administrative capacity.

Areas for Improvement

- Develop a QI plan, and training opportunities for staff in QI methods and tools.
- Develop methods for auditing EH and CD records and integrate them into QI activities.

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.

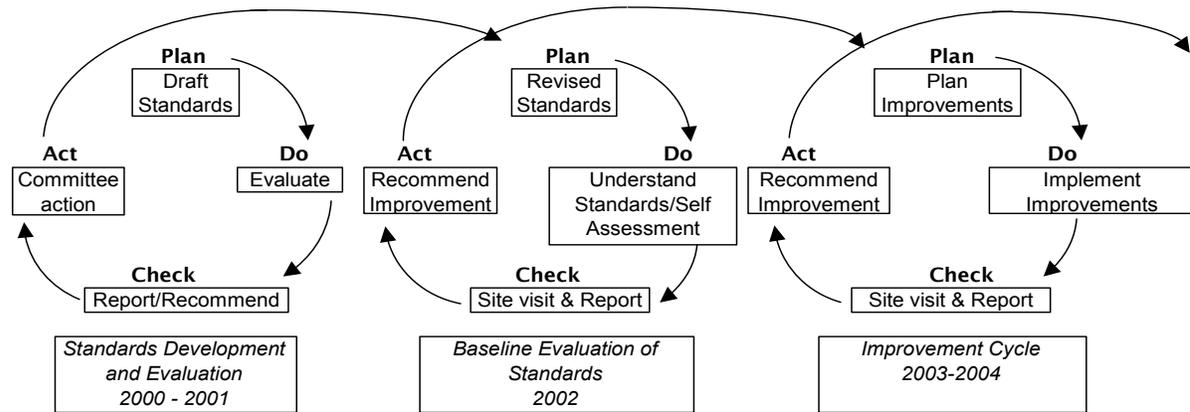
Next, select the areas where you want to improve your performance. All of the information provided in this report is intended to support improvement of your organization’s work on behalf of the citizens in your community and Washington State. After you have had a chance to digest this report and share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

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		2003 Behavioral Health Risks of Pierce County Adults, The Health of Pierce County 2004, mailing list for assessment reports. Assessment CD-ROM	2003 Behavioral Health Risks of Pierce County Adults, The Health of Pierce County 2004, Assessment CD-ROM
AS1.2L	2		Website printout regarding assessment data, contact name and number, phone book listing	
AS1.3L	2		2005 Plan Item 8.80 with assessment goals and objectives	2005 Plan Item 8.80 with assessment goals and objectives, with start and end dates, staff and dollar allocations
AS1.4L	2		Website Assessment Data: Air Quality, Infant Mortality and Data Dictionary for TB and STD	Website Assessment Data, definitions, tables
AS1.5L	2		Listing of assessment staff, job descriptions for GIS analyst, community health assessor, epidemiologist, training logs	

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	2		Health Care Coalition update May 2004, Safe Kids Minutes Jan.2005	Safe Kids Minutes Jan 2005
AS2.2L	2		Health of Pierce County 2004, 2004 Accomplishments by Plan Item, BOH agenda 3/2/05	2004 Accomplishments by Plan Item
AS2.3L	2		Partners in Assessment--Tacoma Pierce County Health Department Community Assessment Plan	Partners in Assessment--Tacoma Pierce County Health Department Community Assessment Plan
AS2.4L	2		Plan items 1.34, 3.48, 8.8, related objectives and tasks	
AS2.5L	2		The Health of Pierce County 2004, Priority Setting in Communicable Disease,2004 Indicator Data	

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	2		2004 Accomplishments, Presentation to BOH in 3/05, Blueprints for Success/Adolescent Health, Presentation to BOH in 4/04	
AS3.2L	2			
AS3.3L	2			

AS3.4L	2	Environmental Health Liaison Staff Meeting Evaluation and Outcomes Training Agenda and Materials	Environmental Health Liaison Staff Meeting Evaluation and Outcomes Training Agenda and Materials
AS3.5L	2	Environmental Health Program Customer Service Focus Groups Summary, Strategic Planning Focus Groups, PHEPR QI Process and Draft Action Report, Surveillance/EPI Progress Report, March 2005	Environmental Health Program Customer Service Focus Groups Summary, December 2003, Strategic Planning Focus Groups, December 2003

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	2		Oral Health Advisory Board list, minutes of 12/17/04, 1/10/05, and 1/26/05	Telephone Survey of Pierce County Residents, Knowledge and Attitudes about EH Programs, Winter 2004
AS4.2L	2		BOH presentation on Obesity and resolution passed by BOH	
AS4.3L	2		Monitoring Population Health Indicators Pertaining to the TPCHD Health Intervention Priorities, 10/04 (update of 2/98 report)	
AS4.4L	2		Public Health Prevention Priorities, 2004 Evaluation Plan	Public Health Prevention Priorities, 2004 Evaluation Plan

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	2	Data sharing agreement with DOH, Child Death Review Confidentiality Agreement
AS5.2L	2	TPCHD contract boilerplate with HIPAA confidentiality requirements, Syndromic Surveillance Project Description, CDRT Guidelines from DOH (2000)

Score Totals for Topic 1. Understanding Health Issues

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	100%	69%	56%
% Partially Demonstrates:	0%	22%	24%
% Does not Demonstrate:	0%	10%	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		Page from phone book with reference to website, Website-contact us at tpchd, CD Manual for Providers, Script for Main LHJ phone law enforcement fax.	CD Manual for Providers includes 24-hour CD reporting number

CD1.2L	2	Contact lists with distribution lists for providers, labs and new providers	
CD1.3L	2	2004 year in review Report to the BOH	2004 year in review
CD1.4L	2	EPI Response Plan-- Section III	EPI Response Plan-- Section III-- excellent protocols for receiving and managing information and Public Information Officer role in III J.
CD1.5L	2	CD 2004 Surveillance and Accomplishments Report CD Planning Tool 2004/2005 Graphs Summary all CDs 1999 to 2004 xls	CD 2004 Surveillance and Accomplishments Report CD Planning Tool 2004/2005
CD1.6L	2	Epi Database Completed case report with submission to DOH	
CD1.7L	2	New CD Nurse Orientation and Training Log, Travel and Training Authorizations with topic agendas	New CD Nurse Orientation and 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 Directory, CD Newsletter and distribution list, Red Book	CD Newsletter and distribution list
CD2.2L	2		CD Manual, Website, Blast Fax	

CD2.3L	2		EPI Response Plan, TPCHD Emergency Plan, Biologic Implementing Procedure, Epi Health Event Flow Sheet, EPIP 2 R2 Notification and Communication manual	Biologic Implementing Procedure, Epi Health Event Flow 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	2		PH and Community Resources list on TPCHD website with link to Referral guide, Dental resources and referral brochure, Immunization sites calendar, TPCHD Referral Brochure	
CD3.2L	2		Fall-Winter 2004 Rounds Summary of Notifiable Conditions 2 05, CD Newsletter March 2005, CD Mailing list- 1/05	Fall-Winter 2004 Rounds Summary of Notifiable Conditions 2 05
CD3.3L	2		CD Resource and Reporting Manual, EPI Response Plan, Emergency Biologics Manual, Epi database case and report to DOH, Pierce County Joint PH and Law Enforcement Response Team	EPI Response Plan-- Section II A. Authority for CD Control, Pierce County Joint PH and Law Enforcement Response Team
CD3.4L	1	No evidence of self-audit of case investigations for compliance with tasks required in protocols	Notifiable Condition Surveillance Evaluation 6-29-04, Surveillance Progress Report	Notifiable Condition Surveillance Evaluation 6-29-04-- Part II of report showing timeliness audit of 100% of pertussis cases.
CD3.5L	2		Contract Deliverables for Contract Clinics, STD Chart Audit Results, STD Chart Audit -2003 Records done in Aug. 2004, Statistical Analysis Chart	STD Chart Audit -2003 Records done in Aug. 2004
CD3.6L	2		Nurse Epidemiologist - Job description	

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		Flu Blast fax 2-05, Dec. 04 Flyer (NR Flu), Website	
CD4.2L	1	No evidence of how these contact lists are available to staff.	All providers contact list, Media contacts list, Public Information Officer Contacts	
CD4.3L	2		Media Relations Policy	Media Relations Policy
CD4.4L	2		Risk Communication List and Training Log, Risk Communication Pre/Post test	

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	2		Pertussis Outbreak resolution and recommendations	
CD5.2L	0		No documentation provided	
CD5.3L	2		Scabies Protocol	
CD5.4L	2		IDU MRSA Outbreak report and AR 2005 Goals and Objectives	
CD5.5L	2		New CD Nurse Orientation and Training Log, Travel And Training Authorizations	

CD5.6L	1	No evidence of actions taken to improve response processes.	PH Emergency Preparedness and Response (PHEPR) QI Process, Piggly-Wiggly After Exercise Report
--------	---	---	--

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:	85%	75%	62%
% Partially Demonstrates:	12%	17%	22%
% Does not Demonstrate:	4%	8%	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		Yellow pages, EH Emergency Contacts List, Voice Mail script on main LHJ number, EPIP 2 - R2-Notification and Communication,	EPIP 2 R2-Notification and Communication,
EH2.2L	1	Unclear how issues found in after action report were used to improve or revise Emergency Plan.	Emergency Plan Final- Rev 3., Piggly-Wiggly After Action Report,	
EH2.3L	1	No documentation of public education on how to access critical services during emergency or after-hours debrief on access to these services.	TPCHD All hazards Emergency Plan, technologic EP Implementing Procedure,	
EH2.4L	2		EPIP 3 RO Activation and Operation of the EOF, Emergency Plan Final Rev. 3, TPCHD Emergency Response Training and 2004 Safety 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	2			
EH3.2L	2			
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		DOH website, TPCHD website, Hard copies available at the front counter, Food Bites Newsletters, and Food Fax	
EH4.2L	2			
EH4.3L	1			
EH4.4L	2			
EH4.5L	2			

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:	81%	63%	53%
% Partially Demonstrates:	19%	29%	30%
% Does not Demonstrate:	0%	8%	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		Pool Advisory Work Plan	Pool Advisory Work Plan
PP1.2L	2		March 2005 BOH Obesity presentation, BOH Obesity Resolution,	
PP1.3L	2		DFAP Plan- 1/05, Feb/Mar phone survey, HYS PAN questions, Tobacco Logic Model, Strategic Plan, Prevention Evaluation Plan and Summary, Tobacco State Quit Lines Summaries, Quarterly Evaluation Report	

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	2		TPCHD Strategic Plan Summary, and Tobacco Strategic Plan	Tobacco Strategic Plan
PP2.2L	1	Difficult to identify clear connection between these trainings and community mobilization skills	Community Mobilization Training List	

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	Public Health and Community Resources website, including sites for immunizations, and tobacco quit line	
PP3.2L	2	BOH report on Dental Health-10-04, ABCD Grant Application for Oral Health Collaborative	
PP3.3L	2	Tobacco Strategic Plan,	
PP3.4L	2	Tobacco Strategic Plan and Summary	Tobacco Strategic Plan and Summary -- Evaluation Plan section

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	2			
PP4.2L	2			
PP4.3L	2			
PP4.4L	1			

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		Domestic Violence Focus Group Summary, Outline Revisions, Focus Group Report, and flyer for crisis line	

PP5.2L	1	No documentation of the process for developing, evaluating or revising health promotion materials. The process for the Family Partnership program includes the elements required here, but for a single program not overall system.	Tobacco Materials distribution list, Quit Line materials distribution report
PP5.3L	2		
PP5.4L	2		

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:	82%	58%	48%
% Partially Demonstrates:	18%	28%	31%
% Does not Demonstrate:	0%	14%	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	2		Access to Care PowerPoint, Healthcare Coalition Report, 5/04, Coalition Outreach Report, TPCHD Plan	
AC1.2L	2		Public Health information Line, website with public health and community resources, brochure for low cost dental, immunization sites calendar, referral guide brochure, family based nurse visit tool	Family Based Nurses Visit Tool
AC1.3L	2		Healthcare Coalition Update 5/04 and meeting minutes, Access to Care review of data, focus on oral health, mental health and CHIP/insurance access	

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	2		Breast and Cervical Cancer Needs Assessment 2004, Immunization Survey 2003, Oral Health Data	
AC2.2L	2		Breast and Cervical Cancer Needs Assessment, Immunization survey, Summary of Oral Health Data, Access to Care review of data, 2003 BRFSS	

AC2.3L	1	BRFSS report focuses mainly on insured status and general access to care, but not on specific CHS access issues, 2004 Accomplishments lists access to medical care as a goal but skips the topic in the detailed part of the presentation	BRFSS report, 2004 Accomplishments, HIV discussion at BOH
--------	---	---	---

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	2		Health Care Coalition 5/04 update, board list, minutes, oral health summit materials	
AC3.2L	2		Health Care Coalition materials, TPCHD/CHC categorical services 2005 contract, immunization coalition materials	
AC3.3L	2		Medicaid Outreach project, objectives in TPSHD Plan, summary data on accomplishments in United Way Annual Report, detailed data table	

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	1	The STD audit reports provide performance measurement regarding three areas of contractor performance, but there is no written quality plan that places the audit in the context of desired improvements in STD services, nor are there any recommended actions	TPCHD Audit of STD record audit, clinic reports, TPSHD/CHC contract	
AC4.2L	0	No documentation provided that is specific to quality improvement methods and processes training	HCC staff trainings, focus group training	

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:	73%	69%	52%
% Partially Demonstrates:	18%	15%	16%
% Does not Demonstrate:	9%	16%	32%

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

Overall Score Totals: Tacoma-Pierce County Health Department

	<i>Specific LHJ Totals:</i>	<i>Peer Group Totals:</i>	<i>Combined LHJ Totals:</i>
% Demonstrates:	86%	67%	55%
% Partially Demonstrates:	12%	22%	25%
% Does not Demonstrate:	2%	10%	20%

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

Monday, September 19, 2005

Page 16 of 16

LHJ: Tacoma-Pierce County Health Department

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	2		WAC 246, Envisions Inspection Report for 2004, Meeting Minutes, graphs of inspection data	
AS3.3L	2		Envision Inspection Reports, Complaint Reports, Meeting Minutes, Report of FSEs not receiving inspection 2004	

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		Web-based information on Consumer Food Safety and Hand washing, Food Bites Newsletter 4th Q 04, Food Fax 1st Q 05	Food Bites Newsletter 4th Q 04, Food Fax 1st Q 05,
EH1.2L	2		Food Advisory Program description-Bylaws, Mission, and 2004	2004 Food and Community Safety Work Plan
EH1.3L	2		PIC training course, Food Rule Revision 2005, Food Fax-2/2005	Food Fax-2/2005

EH1.4L	2	Certified Food Manager Training Course with 3 individual evaluations
--------	---	--

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		Food and Community Safety Online Inspection Reports, Hard copy sent to OSPI annually on school inspections	
EH3.2L	2		Suspected illness EPI Outline and Illness Investigation questionnaires and worksheets, Daily HD Surveillance Briefing, 2004 Accomplishments PPT with trended food and water-borne illnesses data	
EH3.3L	2		Food and Community Safety Programs 1998-2004 Year-End Report, 9-30-04 Food Advisory minutes approving new class, old and new Food Worker Card brochures	

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		Inspection Flow Char-2004, Procedure for re-inspection fees,	
EH4.3L	1	No documentation of the selected causes of enforcement action that were reviewed in the last year, for example a report or summary.	Old Permit Revocations procedure, New 2004 Administrative Hearings procedure, example of use of new procedure	
EH4.4L	2		Envisions EH database PPT with example, Envision Operations Manual, Referred complaint example	

EH4.5L 2

FDA Training for new regulations in Food Safety Chapters 1-9, Attendance sheets for each session and chapters

Overall Program Score Totals: EH: Food Safety

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
92%	8%	0%

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

LHJ: Tacoma-Pierce County Health Department

Program: EH: Drinking Water

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	2		EH Program Quarterly Report 4thQ-04 for Groups A & B, Brad's 2005 Work Plan for Drinking Water, Logic Model for Water Program	EH Program 2005 Work Plan for Drinking Water, Logic Model for Drinking Water Program
AS3.3L	2		Water System Progress Reports, Group A and B, Technical Assistance report to DOH	Water System Progress Reports, Group A and B

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		Regulations online at tpchd.org, Coliform Testing information on website, Nitrates in DW brochure	
EH1.2L	2		Spring 2004 telephone survey- EH questions, Residents Survey-South Tacoma Groundwater, Regional Water Assoc.-- Spanaway Water Company minutes, EH Customer Service focus groups Report-12/2003	EH Customer Service focus groups Report-12/2003, Spring 2004 telephone survey- EH questions, Residents Survey-South Tacoma Groundwater

EH1.3L	2	2004 Tacoma Water outreach and education Work Plan- including EnviroStars, Auto Industry Focus Group, Residential Focus Group Summary Report, Revised brochures, Web-based EH information	2004 Tacoma Water outreach and education Work Plan, Auto Industry Focus Group, Residential Focus Group Summary Report
EH1.4L	2	Technical Assistance Report to DOH, Customer Service focus groups final report, Group B Water System managers' Education Program Evaluation	Group B Water System managers' Education Program 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	2		Map of Potential Contaminant Source Inventory 10-04	
EH3.2L	2		EH Log of Water-borne Illnesses, 10-1-04 Water Complaints and Issues Summary, Health Advisory Summary, 2004 Accomplishments PPT showing water-borne illness trended data	
EH3.3L	2		Wellhead Monitoring review Report, Wellhead Protection tasks for 2005 and Revising the STGPD Ordinance and Education Efforts- Jan. 2005, STGPD Revision Work Plan	STGPD Revision Work Plan

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		Land Use Enforcement Regs, Water System Agreement with DOH	

EH4.3L	0	No documentation provided
EH4.4L	2	Tracking Process-Bacteria, Envision database system
EH4.5L	2	2004 Drinking Water Seminars registration, Sanitary Surveyor Admin Training, NWRO Drinking Water partnership

Overall Program Score Totals: EH: Drinking Water

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
92%	0%	8%

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

LHJ: Tacoma-Pierce County Health Department

Program: PP: First Steps

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	2		First Steps Work Plan, FSP Summary-March 9,2005, 12-04 OBE County Report, 2006 PC VP Application	
AS3.3L	2		12-04 OBE County Report	

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	2		BOH minutes- 1-5-05, 2005 Preliminary Budget Strategic Directions and Goals, FSP Work Plan, GLMH addendum,	
PP4.2L	2		FSP Demographics, P&P- Educational Materials Selection, several brochures in different languages	P&P- Educational Materials Selection
PP4.3L	2		FSP Work Summary, 12-04 OBE County Report, FSP Paperwork 2005	

PP4.4L	1	Job description does not include any qualifications or skills and knowledge, and NCAST materials focus on teaching	PH Nurse I job description, NCAST Teaching Scale description and roster
--------	---	--	---

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	2		ELP Final Grant Report, FSP Summary Health Promo Act, ELP Parent Eval Summary	
PP5.4L	2		PPC Training Schedule Memo, Flyers for training- monthly from Jan-June 04 and Aug. 04, Monthly training attendance logs	PPC Training Schedule Memo, Flyers for training- monthly from Jan-June 04 and Aug. 04, Monthly training attendance logs

Overall Program Score Totals: PP: First Steps

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
88%	13%	0%

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

LHJ: Tacoma-Pierce County Health Department

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	2		Good Sam 2005 Deliverables, CASA letter to contractor regarding immunization audit, CASA tool, and QA form	
AS3.3L	2		Casa Summary-All clinics, Site specific example and QA site specific, Vaccine for Children Annual Report Good Sam 2004, Annual Report Franciscan	

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	2		Annual Plan with budget, BOH minutes-8-04, Franciscan Health System's Annual Immu. Report - Jan-Dec 04	Franciscan Health System's Annual Immu. Report - Jan-Dec 04
PP4.2L	2		Health of Pierce County report-2004, National Adult Literacy Survey (NALS) ppt, P&P Educational material selection	National Adult Literacy Survey (NALS) ppt

PP4.3L	2	CASA letter re: audit, 2004 Immunization Audit List, 2004 I-3 Grant Immunization Report, Phone Immunization Survey for coverage	Phone Immunization Survey for coverage
PP4.4L	2	CD Survey Specialist and CHN II job descriptions, National Immunization Conference-5-04 and travel and Training Authorizations	

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	2		Flu Challenges Forum, Childhood Immunizations-clinical considerations sessions, Immu Audit Report, Basic Immunization In-service Report- 2004, Advanced Immunization In-service Evaluation Report-2004	Basic Immunization In-service Report- 2004, Advanced Immunization In-service Evaluation Report-2004
PP5.4L	2		Travel and Training Authorization 2004, National Immunization Conf., Health Literacy web-cast and registration	

Overall Program Score Totals: PP: Immunizations

% Demonstrates:	% Partially Demonstrates:	% Does not Demonstrate:
100%	0%	0%

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

Tacoma-Pierce County Health Department

1. Understanding Health Issues

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
AS1.1L	2	Demonstrates
AS1.2L	2	Demonstrates
AS1.3L	2	Demonstrates
AS1.4L	2	Demonstrates
AS1.5L	2	Demonstrates
AS2.1L	2	Demonstrates
AS2.2L	2	Demonstrates
AS2.3L	2	Demonstrates
AS2.4L	2	Demonstrates
AS2.5L	2	Demonstrates
AS3.1L	2	Demonstrates
AS3.2L	2	Demonstrates
AS3.3L	2	Demonstrates
AS3.4L	2	Demonstrates
AS3.5L	2	Demonstrates
AS4.1L	2	Demonstrates
AS4.2L	2	Demonstrates
AS4.3L	2	Demonstrates
AS4.4L	2	Demonstrates
AS5.1L	2	Demonstrates
AS5.2L	2	Demonstrates

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	2	Demonstrates

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

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	1	Partially demonstrates
EH2.3L	1	Partially demonstrates
EH2.4L	2	Demonstrates

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

4. Prevention is Best: Promoting Healthy Living

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
PP1.1L	2	Demonstrates
PP1.2L	2	Demonstrates
PP1.3L	2	Demonstrates
PP2.1L	2	Demonstrates
PP2.2L	1	Partially demonstrates
PP3.1L	2	Demonstrates
PP3.2L	2	Demonstrates
PP3.3L	2	Demonstrates
PP3.4L	2	Demonstrates
PP4.1L	2	Demonstrates
PP4.2L	2	Demonstrates
PP4.3L	2	Demonstrates
PP4.4L	1	Partially demonstrates
PP5.1L	2	Demonstrates
PP5.2L	1	Partially demonstrates
PP5.3L	2	Demonstrates
PP5.4L	2	Demonstrates

5. Helping People Get the Services They Need

<i>Measure</i>	<i>Score</i>	<i>Compliance Demonstration</i>
AC1.1L	2	Demonstrates
AC1.2L	2	Demonstrates

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