<u>3.1.4 B</u> Review prevention and education Information of all types at least every other year.

Goal:

- Achieve compliance with the standard that requires information provided to others by the Health Department is accurate and timely.

Specific Objective:

- Assure that prevention and education information/materials are reviewed at least every other year in selected programs and sections.
- Develop process to check content of information/materials and to revise as needed or to confirm that current information is accurate and appropriate.

Measurable:

- Progress toward this goal will be measured by the documentation established by each work unit's manager with responsibilities over the information/materials being reviewed that the required reviews have been conducted.

Achievable

- The Food Safety, Communicable Disease, and Tobacco program administrators will create a schedule to ensure all "fact sheets" will be reviewed every other year. The schedule, the reviewer, and the documents will be filed electronically when the review is complete. Attached is an example of Public Health – Seattle & King County's *Disease Fact Sheet Tracking List*.

Realistic

- We want to achieve this objective to help assure that information provided to the community is accurate, current, and appropriate.

Time-based

- Program managers will assure their information/materials are reviewed at least every other year.

<u>4.1.3 L</u> Link Stakeholders to technical assistance regarding models of recruiting and engaging with the community as requested.

Goal:

- Achieve compliance with the standard that requires ensuring technical assistance is available and provide evidence of presentations about engaging the community and how technical assistance would be beneficial in recruiting partnership members, building advocacy and developing on-going relationships to address public health problems.

Specific Objective:

- Ensuring technical assistance is available to support partner work in engaging the community.
- Recruiting partnership members, building advocacy and developing on-going relationships to address public health problems.

Measurable:

- Progress toward this goal will be measured by a similar documentation that was established during the implementation for menu labeling. Attached to this document is the table that was used to log the stakeholder's name, contact information, question, the response from the TA team, and the date the response was sent.

Achievable

- Public Health – Seattle & King County provides a great deal of technical assistance (TA)and has established logs to manage and document the requests for technical assistance, as well as the responses. This objective is achievable. Attached is an example of a TA log, Menu Labeling, Transfat, Nutrition Questions/Answers for Date Range 01/01/2008 – 09/23/2011.

Realistic

- We want to achieve this objective to help assure that technical assistance provided to the community is accurate, current, and appropriate.

Time-based

- Responding to request for technical assistance will be managed by the designated TA team. Each stakeholder question and TA response will be logged by a TA team member. When establishing a TA team for a particular project – a response time for all stakeholder questions should be identified and communicated to the stakeholders. In the example of menu labeling – all questions were sent to a designated email address established for the stakeholders. When a question arrived in the email box – an immediate response was sent back to the stakeholder acknowledging the request for TA and stating the timeframe that the stakeholder would receive a response.

<u>6.2.1 B</u> Maintain agency knowledge and consistent application of public health laws.

Goal:

- Achieve compliance with the standard that requires the department effectively educate and enforce public health law.

Specific Objective:

- Assure that the department has adequate knowledge on the law and on the application of the law.
- Sustain staff's knowledge of public health laws and be responsible for enforcing the department's consistent application of public health laws.

Measurable:

- Provide staff training and continuing education to assure staff knowledge of public health laws.
- Progress toward this goal will be measured by consistent application of public health laws and conducting internal audits, documenting enforcement actions, or reviews of case reports.

Achievable

- Field Operations Senior Environmental Health Specialists will routinely review inspection report documentation using reports from the Envision data base. Feedback will be provided to field staff to ensure proper documentation of violations and appropriate use of enforcement.

Realistic

- We want to achieve this objective to help assure that staff knowledge of public health law is accurate, current, and enforced.

Time-based

- The Food Program manager instituted an inspection quality control plan on May 1, 2010 (*Food & Facilities Section Inspection Quality Control*; April 26, 2010). Staff are currently working towards implementation.

5.3.4 L Conduct a comprehensive planning process resulting in a community health improvement plan (CHIP).

Context: The Assessment, Policy Development, and Evaluation (APDE) Section of Public Health applies quantitative and qualitative methodologies to assess and monitor the health of King County residents. Assessment data and information are used by the County as a whole and by sub-county regions (e.g. cities and neighborhoods) in health planning activities. In addition, as of March 2012, non-profit hospitals will be required to conduct Community Health Needs Assessments (CHNAs) that lead to "implementation strategies" as a condition of their federal tax exemption.

Goal:

- The overall goal is to conduct a comprehensive planning process resulting in a community health improvement plan (CHIP) and to evaluate progress related to CHIP strategies.

Specific Objective:

- The APDE Section of Public Health will conduct population-based needs assessments to monitor the health of King County residents. This will include the data collection and dissemination efforts of the Communities Count Initiative, providing indicator data for the King County Equity and Social Justice Initiative, and measurement data for the King County Strategic Plan.

- APDE will engage with King County hospitals in conducting community health needs assessment. Tax-exempt non-profit hospitals must complete a CHNA with input from experts in public health every three years with the first due in 2013, develop a plan to address issues raised by the assessment, support plan implementation, and report on outcomes. PHSKC will engage with King County hospitals in these components of CB and thereby align their currently uncoordinated contributions with current best practices and public health priorities.

Measurable:

- APDE will produce county and sub-county data (i.e., census tract, city, and/or neighborhood level data)

- Progress toward this goal will be measured by the identification of one or more community health improvement plans resulting from work with hospitals on their CHNAs to be evaluated under this standard along with demonstrated and documented progress on evaluation related to CHIP strategies.

Achievable

- This objective is achievable.

Realistic

- The development of a single CHIP for King County is not realistic, given the size and complexity of the county and its many populations, communities, and diverse needs. The Public Health Operational Master Plan (PHOMP) and K.C. Strategic Plan offer overarching strategic and operational plans, and evaluation efforts may serve to satisfy Public Health needs and the intent of this Standard. A CHIP and a Strategic Plan can and should cross-reference one another.

- Community health improvement plan (CHIP) should include:

    - Assessment data about the prevailing health of the population
    - Community health priorities, objectives, improvement strategies and performance measures with measureable and time-framed targets. (Measurable and time-framed targets may be contained in another document such as an annual work plan.)
    - Policy changes needed to accomplish health objectives
    - Individuals and organizations that have accepted responsibility for implementing strategies (does not need to be a formal agreement such as an MOU)
    - Measureable health outcomes or indicators to monitor progress

- Evaluation reports on progress related to strategies in a CHIP include:

    - Monitoring of performance measures
    - Progress related to health improvement indicators
    - Revised CHIP based on evaluation results

Time-base

    - APDE will conform to the objectives and deliverables outlined in the Communities Count Initiative.

8.2.2 L Maintain a competent public health workforce

Goal:

- Develop an overall health department workforce plan that will help achieve compliance with standard 8.2.2 (L) to "implement an agency workforce development plan that addresses the training needs of the staff and development of core competencies."

Specific Objective:

- Assure that all workforce members whose positions require license, registration or certification are entered and tracked in the new DPH credentialing system, the new enterprise PeopleSoft HCM system, or if any new solutions may be needed, so required credentials are current. (If the renewal requires continuing education, it is the employee's responsibility to complete the necessary requirements to maintain licensure, registration or certification.)

- Assure that all workforce members complete annual Compliance Training requirements, including but not limited to federal, state and county laws and policies. Module examples include HIPAA, Deficit Reduction Act, Red Flag Rules, Identity Theft, Email Encryption, and Acceptable Use of King County IT Assets.

- Assure that all Public Health managers and supervisors complete the King County Manager/Supervisor training program. ("This training is intended to familiarize managers and supervisors with concepts, processes and resources important to them in the performance of their jobs.")

- Assure that Public Health's development and roll-out of the new King County EPAS (Employee Performance and Accountability System) appraisal system includes:

    - Appraisal of the employee's progress in achieving King County and/or Public Health core competencies as appropriate to their job;

    - Capacity to document and plan individual training and development objectives appropriate for their job and position-specific technical skills.

Measurable:

- Progress toward this goal will be measured by the approval of a Public Health Policy that establishes requirements for the objectives listed herein as key steps in a department workforce development plan.

Achievable

- These objectives are achievable.

Realistic

- We want to achieve this objective to help assure that workforce members fulfill required training and continuing education as well as work with their supervisors to document and plan their training and development.

Time-based

- Required training and continuing education will occur annually or as needed.
- Documentation and planning for training and development will occur annually as part of the EPAS appraisal process as that is implemented and rolled out for staff.