

SEMINOLE COUNTY

Local Public Health System Assessment

2019



Seminole County Local Public Health System Assessment June 2019

Contributing Staff

Patricia Mondragon, BS
*Performance Management & Quality
Improvement*

Tania Slade, MPH
*Epidemiology, TB & Refugee Health
Manager*

Zeenat Rahman, MPH, MBBS, CIC
Epidemiologist

Mehiret Wondimu, MPH
Epidemiologist

Jesse Johnson, MHS
Epidemiologist

Mirna Chamorro, BS
Public Information Officer

Donna Walsh, MPA, BSN, RN
Health Officer

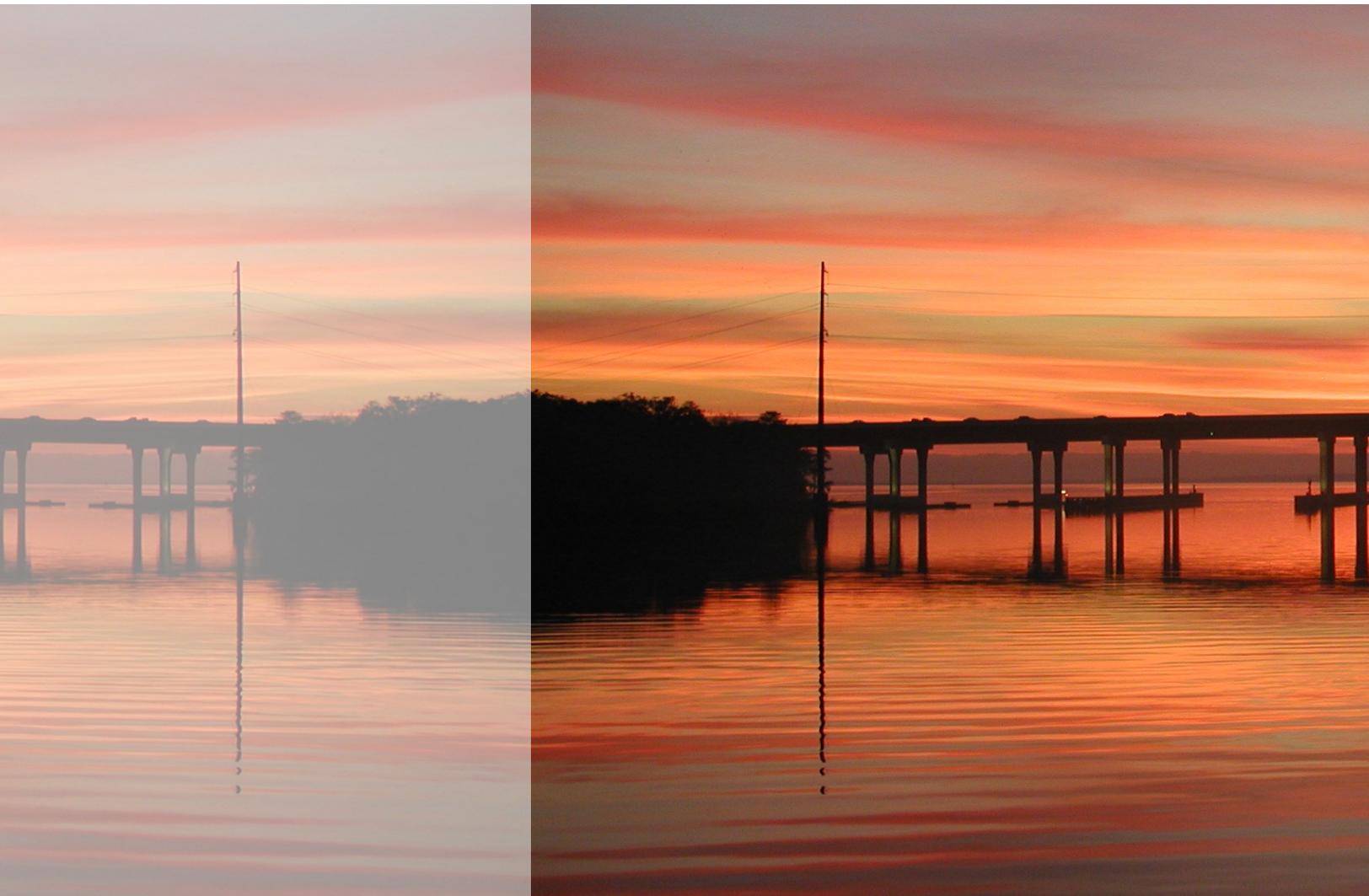


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17-92 Over Lake Monroe
Photo Courtesy of Seminole County Government



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Shepherd's Hope

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True Health



EXECUTIVE SUMMARY

The local public health system assessment (LPHSA) is a process for evaluating and documenting how well the local public health system is organized, governed, and fulfills the essential services of public health. The Florida Department of Health in Seminole County facilitated this process in order to do the following: (1) learn about how well the public health system in our community currently works and (2) find ways to improve the performance of the system by working together with other agencies throughout the community.

The Ten Essential Public Health Services provided the framework for this assessment which informed the session. A total of 20 attendees representing 17 organizations participated in the workshop which took place over two days, June 7 and 14. A diverse and balanced composition of public health partners were represented, and the assessment was well received among the participants. Community investment in the assessment process was proportionate to departmental effort.

The local public health system was scored by perceived performance. Common themes of discussion across all services and standards were identified. An optimal level of performance is the level to which all local public health systems should aspire. The current evaluation of the overall local public health system in Seminole County places in the *Significant Activity* performance category.

The highest ranked service was **Essential Service 2 Diagnose and Investigate Health Problems and Health Hazards** with a score of 100%. The two lowest ranked services were **Essential Service 7, Link People to Needed Personal Health Services and Assure Provision of Healthcare When Otherwise Unavailable** and **Essential Service 10, Research for New Insights and Innovation Solutions to Health Problems**. Only two (20%) essential services scored in the optimal ranking in the 2017 LPHSA compared to eight (80%) services in the 2019 LPHSA. This assessment folds into the Mobilizing for Action through Planning and Partnerships (MAPP) model of community health improvement as one of four types of assessments that informs the community's strategic planning for health. It helps the department to identify strengths and weaknesses in our local public health system.

“We are pleased with the collaboration that took place with stakeholders and community partners to evaluate the local public health system. Routine assessment of key community health indicators is core to public health and remains a critical component to identify significant health issues affecting a community. This is another step in the right direction to collectively impact the health of the communities we serve.”

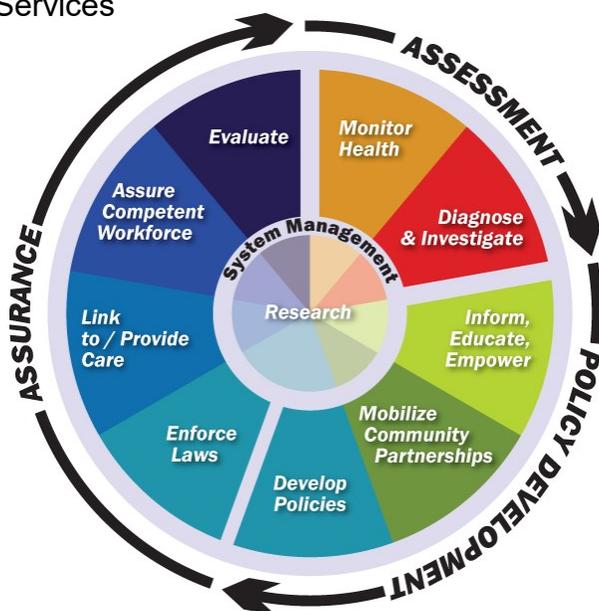
-Donna Walsh, Health Officer

BACKGROUND

The National Public Health Performance Standards (NPHPS) Local Public Health System Assessment report is designed to help health departments and public health system partners create a snapshot of where they are relative to the National Public Health Performance Standards and to progressively move toward refining and improving outcomes for performance across the public health system.

The NPHPS state, local and governance instruments also offer opportunity and robust data to link health departments, public health systems partners and/or community-wide strategic planning processes, as well as the Public Health Accreditation Board (PHAB) standards. For example, assessment of the environment external to the public health organization is a key component of all strategic planning and the NPHPS assessment readily provides a structured process and an evidence-base upon which key organizational decisions may be made and priorities established. The assessment may also be used as a component of community health improvement planning processes, such as Mobilizing for Action through Planning and Partnerships (MAPP) or other community-wide strategic planning efforts, including state health improvement planning and community health improvement planning. The NPHPS process also drives assessment and improvement activities that may be used to support a health department in meeting PHAB standards. Regardless of whether using NAPP or another health improvement process, partners should use the NPHPS results to support quality improvement.

Figure 1. The 10 Essential Public Health Services



The self-assessment is structured around the Model Standards for each of the ten Essential Public Health Services (EPHS), hereafter referred to as the Essential Services, which were developed through a comprehensive, collaborative process involving input from national, state and local experts in public health. Altogether, for the local assessment 30 Model Standards serve as quality indicators that are organized into the ten essential public health service areas in the instrument and address the three core functions of public health.

OVERVIEW

The Local Instrument is a valuable tool for identifying areas for system improvement, strengthening local partnerships, and assuring that a strong system is in place for effective delivery of day-to-day public health services and response to public health emergencies.

Identifying system strengths and weaknesses may then be used to improve and better coordinate public health activities at the community level. In addition, the results provide a better understanding of the local public health system (LPHS)'s performance. Most importantly, the results may inform policy and resource decisions leading to an improved LPHS.

The Performance Standards focus on the overall public health system, rather than a single organization. A public health system includes all public, private, and voluntary entities that contribute to public health activities within a given area. The Performance Standards set a benchmark for all these entities to contribute to the delivery of the 10 Essential Public Health Services (Essential Services).

Additionally, the Performance Standards describe an optimal level of performance rather than provide minimum expectations. This ensures that the Performance Standards may be used for continuous quality improvement by serving as a guide for learning about public health activities throughout the system and determining how to make improvements. All communities have areas upon which they can improve their performance. The Performance Standards assist communities in identifying unique assets and areas to improve.

The following elements comprise each section of the Local Instrument:

- Essential Service - includes a bulleted list of activities and common public health system partners engaged in the activities for the particular Essential Service.
- Model Standard - represents the major components or practice areas of the Essential Service. Generally, there are two to four Model Standards for each Essential Service.
- Performance Measures - determine the level at which the system performs related to the Model Standard via a specific score that is based on LPHS partners' consensus. These measures are essentially the assessment questions to which participants respond.

Table 1. Performance Measures Response Options

Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

RESULTS

Performance Scores

Essential Services: Summary Overview

A summary overview of performance scoring by essential service is listed below. An optimal level of performance is the level to which all local public health systems should aspire.

Table 2. Summary of Average Essential Public Health Service Performance Score

Optimal Activity (76-100%)	ES2 Diagnosis & Investigation, 100% ES3 Educate/Empower, 97.2% ES4 Mobilize Partnerships, 96.9% ES5 Develop Policies/Plans, 93.8% ES1 Monitor Health Status, 90.3% ES9 Evaluate Services, 80.8% ES6 Enforce Laws, 79.3% ES8 Assure Workforce, 77.1%
Significant Activity (51-75%)	ES7 Link to Health Services, 75.0% ES10 Research/Innovations, 61.1%
Overall Average Assessment Score	85.1%

Essential Services: Highest Ranking Performance

The highest ranked service was **Essential Service 2**, *Diagnose and Investigate Health Problems and Health Hazards* with a score of 100%. Eight of the ten essential services were ranked in the Optimal Activity level. All of the essential services scored as having Significant Activity or above indicating that 51% or more of the model standard activities are being met. The average overall assessment score was 85.1%. This places the overall local public health system in the Optimal Activity performance category for all essential services.

Essential Services: Lowest Ranking Performance

The two lowest ranking services were **Essential Service 7**, *Link People to Needed Personal Health Services and Assure Provision of Healthcare When Otherwise Unavailable* and **Essential Service 10**, *Research for New Insights and Innovation Solutions to Health Problems*.

Model Standards

Table 3 presents each score at the Essential Service level as a calculated average of the respective Model Standard scores within that Essential Service.

Model Standards by Essential Services	Performance Scores	Performance Ranking
ES 1: Monitor Health Status	90.3	Optimal
1.1 Community Health Assessment	100.0	Optimal
1.2 Current Technology	83.3	Optimal
1.3 Registries	87.5	Optimal
ES 2: Diagnose and Investigate	100.0	Optimal
2.1 Identification/Surveillance	100.0	Optimal
2.2 Emergency Response	100.0	Optimal
2.3 Laboratories	100.0	Optimal
ES 3: Educate/Empower	97.2	Optimal
3.1 Health Education/Promotion	91.7	Optimal
3.2 Health Communication	100.0	Optimal
3.3 Risk Communication	100.0	Optimal
ES 4: Mobilize Partnerships	96.9	Optimal
4.1 Constituency Development	93.8	Optimal
4.2 Community Partnerships	100.0	Optimal
ES 5: Develop Policies/Plans	93.8	Optimal
5.1 Governmental Presence	100.0	Optimal
5.2 Policy Development	75.0	Significant
5.3 CHIP/Strategic Planning	100.0	Optimal
5.4 Emergency Plan	100.0	Optimal
ES 6: Enforce Laws	79.3	Optimal
6.1 Review Laws	81.3	Optimal
6.2 Improve Laws	66.7	Significant
6.3 Enforce Laws	90.0	Optimal
ES 7: Link to Health Services	75.0	Significant
7.1 Personal Health Service Needs	75.0	Significant
7.2 Assure Linkage	75.0	Significant
ES 8: Assure Workforce	77.1	Optimal
8.1 Workforce Assessment	75.0	Significant
8.2 Workforce Standards	83.3	Optimal
8.3 Continuing Education	75.0	Significant
8.4 Leadership Development	75.0	Significant
ES 9: Evaluate Services	80.8	Optimal
9.1 Evaluation of Population Health	75.0	Significant
9.2 Evaluation of Personal Health	80.0	Optimal
9.3 Evaluation of LPHS	87.5	Optimal
ES 10: Research/Innovations	61.1	Significant
10.1 Foster Innovation	68.8	Significant
10.2 Academic Linkages	58.3	Significant
10.3 Research Capacity	56.3	Significant
Average Overall Score	85.1	Optimal
Median Score	85.6	Optimal

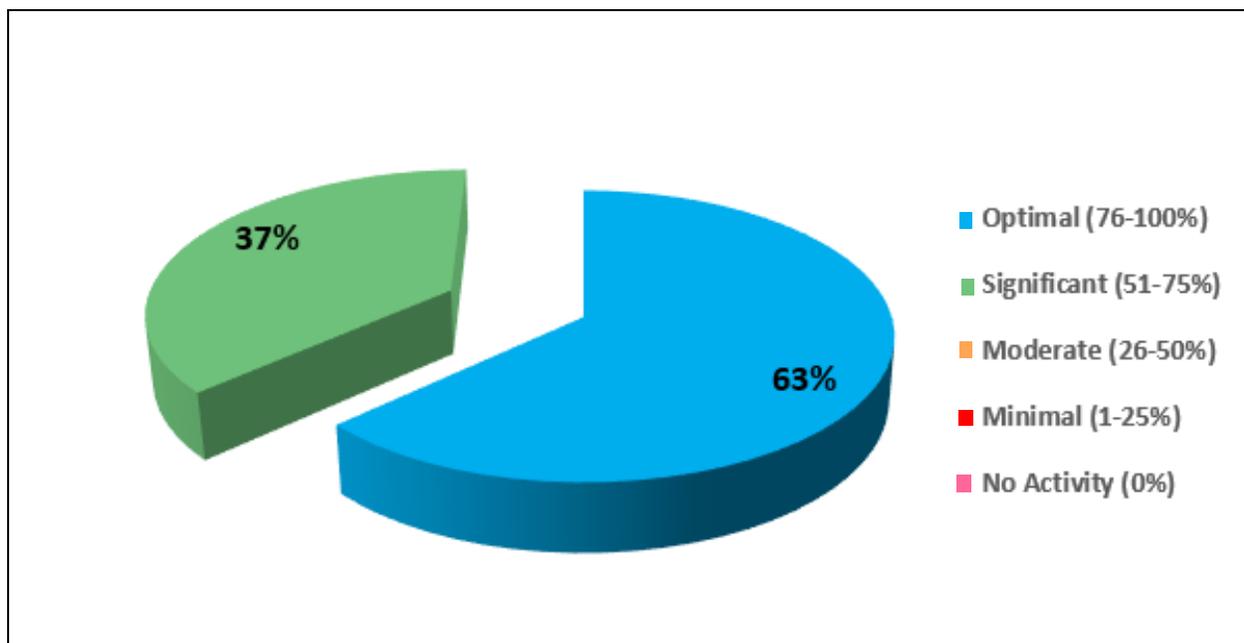
Model Standards

Model standards represent the major components or practice areas of each essential service. Generally there are two to four model standards for each essential service.

Model Standards: Highest Ranking Performance

Several model standards were scored to have optimal performance. The top scoring standards, with a score of 100, were **Model Standard 1.1 Community Health Assessments**, all of **Essential Service 2 Model Standards** (2.1 Identifying and Monitoring Health Threats, 2.2 Investigating and Responding to Public Health Threats and Emergencies and 2.3 Laboratory Support for Investigating Health Threats), **Model Standard 3.2 Health Communication**, **3.3 Risk Communication**, **Model Standard 4.2 Community Partnerships**, and **Model Standards 5.3 Community Health Improvement Process and Strategic Planning** and **5.4 Plan for Public Health Emergencies**.

Figure 2. Percentage of the system's Model Standard scores that fall within the five activity categories.



Model Standards: Lowest Ranking Performance

Thirteen (37%) of model standards were scored as significant performance, indicating that greater than 50%, but no more than 75% of the activity described were met. None of the model standards were scored as Moderate, Minimal or No Activity. The lowest scoring model standards were **Model Standard 10.3 Capacity to Initiate or Participate in Research**, **Model Standard 10.2 Linking with Institutions of Higher Learning and/or Research** and **Model Standard 6.2 Involvement in the Improvement of Laws, Regulations, and Ordinances**.

LPHSA 2017 VS. 2019 COMPARISON

The previous LPHSA was performed in 2017. The 2017 LPHSA resulted in an overall score of 72.7%, resulting in an overall performance ranking of Significant Activity. Only two (20%) essential services scored in the optimal ranking in 2017 compared to eight (80%) services in 2019. The essential services which saw the greatest improvement in ranking was **Essential Service 1, Monitoring Health Status** and **Essential Service 4, Mobilizing Community Partnerships**. **Essential Service 2, Diagnose and Investigate** and **Essential Service 7 Link Healthcare Services** saw no net change in their scores. The table below details the changes in perceived system performance by essential service.

Table 4. Essential Services Performance Rankings 2017 versus 2019.

No.	Essential Service	2017 Score	2017 Ranking	2019 Score	2019 Ranking	Change
1	Monitor Health Status	58.3	Significant	90.3	Optimal	32.0
2	Diagnose and Investigate	100.0	Optimal	100.0	Optimal	0
3	Educate/Empower	72.2	Significant	97.2	Optimal	25.0
4	Mobilize Partnerships	75.0	Significant	96.9	Optimal	21.9
5	Develop Policies/Plans	89.6	Optimal	93.8	Optimal	4.2
6	Enforce Laws	72.2	Significant	79.3	Optimal	7.1
7	Link Health Services	75.0	Significant	75.0	Significant	0
8	Assure Workforce	61.9	Significant	77.1	Optimal	15.2
9	Evaluate Services	67.1	Significant	80.8	Optimal	13.7
10	Research/Innovations	55.6	Significant	61.1	Significant	5.5
	Overall	72.7	Significant	85.1	Optimal	12.4

DISCUSSION NOTES: STRENGTHS & AREAS FOR IMPROVEMENT

The community partners participating in the LPHSA were involved in robust discussions surrounding each model standard. The following are strengths and areas of improvement identified during the discussions.

Strengths

- General knowledge of the 10 essential services among participants
- Use of the Community Health Assessment to guide organization's long-term planning
- Analysis of data for programmatic and epidemiologic purposes
- Availability and use of FLHealthCHARTS
- Use of mySidewalk and LiveStories to make data more translatable to the community
- Availability and use of the Cancer Registry

- Epidemiology surveillance systems including ESSENCE, Epi-X, PRISM, Merlin, and EpiCom
- Use of blast fax system to send provider alerts
- Collaboration of DOH-Seminole with community partnerships to provide health screenings and vaccinations
- DOH-Seminole is Project Public Health Ready certified
- Effectiveness of communication for public health and emergency preparedness
- Multiple hospitals and laboratories available during disasters
- Social media presence of community partners
- Alert Seminole and electric billboard use during emergencies
- 211 system for community information and resources
- Seminole Resource Directory
- Multiple services available at Shepherd's Hope/Sharing Center plaza
- Outreach to non-for-profit organizations
- No smoking policies
- County ordinance requiring long-term care facilities to implement disaster planning
- Health Council referral database
- Health centers partnering with independent pharmacies to provide affordable medication
- UCF FL Nurse Workforce
- Seminole State College community paramedicine program
- Internship, training, and employment opportunities for students
- Community Needs Assessment
- Assessing families for various needs during visits
- SCORE Team drug-overdose response - Seminole County Sheriff's Office
- John E. Polk Jail drug treatment pod (O pod)

Areas for Improvement

- FLHealthCHARTS not user-friendly for the general public
- Concern for lack of disease reporting amongst some partners
- Lack of familiarity with emergency preparedness personnel
- Lack of electronic communication during disasters
- Lack of resources in Portuguese and Haitian Creole
- Lack of assistance for low-cost prescriptions
- Difficulty with transportation to access care

- Access to behavioral health services
- Need for personal care services for homeless
- Lack of a public health program in Central Florida
- Lack of electronic health records
- No foundations in Seminole County providing private funding
- Need more collaboration with colleges for research opportunities

DATA LIMITATIONS

There are a number of limitations to the assessment data due to self-reporting, wide variations in the breadth of knowledge of participants, the variety of assessment methods used, and differences in interpretations of assessment questions. Data and resultant information should not be interpreted to reflect the capacity or performance of any single agency or organization within the public health system or used for comparisons between jurisdictions or organizations. Use of the generated data and associated recommendations are limited to guiding an overall public health infrastructure and performance improvement process for the public health system as determined by organizations involved in the assessment.

All performance scores are an average. Model Standards scores are an average of the question scores within that Model Standard; Essential Service scores are an average of the Essential Service scores. The responses to the questions within the assessment are based upon processes that utilize input from diverse system participants with different experiences and perspectives. The gathering of these inputs and the development of a response for each question incorporates an element of subjectivity, which may be minimized through the use of particular assessment methods. Additionally, while certain assessment methods are recommended, processes differ among sites. The assessment methods are not standardized and these differences in administration of the self-assessment may introduce an element of measurement error. In addition, there are differences in knowledge about the public health system among assessment participants. This may lead to some interpretation differences and issues for some questions, potentially introducing a degree of random non-sampling error.

APPENDIX A. INDIVIDUAL QUESTIONS AND RESPONSES

ESSENTIAL SERVICE 1: Monitor Health Status to Identify Community Health Problems		
1.1	Model Standard: Population-Based Community Health Assessment (CHA) <i>At what level does the local public health system:</i>	
1.1.1	Conduct regular community health assessments?	100
1.1.2	Continuously update the community health assessment with current information?	100
1.1.3	Promote the use of the community health assessment among community members and partners?	100
1.2	Model Standard: Current Technology to Manage and Communicate Population Health Data <i>At what level does the local public health system:</i>	
1.2.1	Use the best available technology and methods to display data on the public's health?	100
1.2.2	Analyze health data, including geographic information, to see where health problems exist?	75
1.2.3	Use computer software to create charts, graphs, and maps to display complex public health data (trends over time, sub-population analyses, etc.)?	75
1.3	Model Standard: Maintenance of Population Health Registries <i>At what level does the local public health system:</i>	
1.3.1	Collect data on specific health concerns to provide the data to population health registries in a timely manner, consistent with current standards?	100
1.3.2	Use information from population health registries in community health assessments or other analyses?	75

ESSENTIAL SERVICE 2: Diagnose and Investigate Health Problems and Health Hazards		
2.1	Model Standard: Identification and Surveillance of Health Threats <i>At what level does the local public health system:</i>	
2.1.1	Participate in a comprehensive surveillance system with national, state and local partners to identify, monitor, share information, and understand emerging health problems and threats?	100
2.1.2	Provide and collect timely and complete information on reportable diseases and potential disasters, emergencies and emerging threats (natural and manmade)?	100

2.1.3	Assure that the best available resources are used to support surveillance systems and activities, including information technology, communication systems, and professional expertise?	100
2.2	Model Standard: Investigation and Response to Public Health Threats and Emergencies <i>At what level does the local public health system:</i>	
2.2.1	Maintain written instructions on how to handle communicable disease outbreaks and toxic exposure incidents, including details about case finding, contact tracing, and source identification and containment?	100
2.2.2	Develop written rules to follow in the immediate investigation of public health threats and emergencies, including natural and intentional disasters?	100
2.2.3	Designate a jurisdictional Emergency Response Coordinator?	100
2.2.4	Prepare to rapidly respond to public health emergencies according to emergency operations coordination guidelines?	100
2.2.5	Identify personnel with the technical expertise to rapidly respond to possible biological, chemical, or and nuclear public health emergencies?	100
2.2.6	Evaluate incidents for effectiveness and opportunities for improvement?	100
2.3	Model Standard: Laboratory Support for Investigation of Health Threats <i>At what level does the local public health system:</i>	
2.3.1	Have ready access to laboratories that can meet routine public health needs for finding out what health problems are occurring?	100
2.3.2	Maintain constant (24/7) access to laboratories that can meet public health needs during emergencies, threats, and other hazards?	100
2.3.3	Use only licensed or credentialed laboratories?	100
2.3.4	Maintain a written list of rules related to laboratories, for handling samples (collecting, labeling, storing, transporting, and delivering), for determining who is in charge of the samples at what point, and for reporting the results?	100

ESSENTIAL SERVICE 3: Inform, Educate, and Empower People about Health Issues

3.1	Model Standard: Health Education and Promotion <i>At what level does the local public health system:</i>	
3.1.1	Provide policymakers, stakeholders, and the public with ongoing analyses of community health status and related recommendations for health promotion policies?	75

3.1.2	Coordinate health promotion and health education activities to reach individual, interpersonal, community, and societal levels?	100
3.1.3	Engage the community throughout the process of setting priorities, developing plans and implementing health education and health promotion activities?	100
3.2	Model Standard: Health Communication <i>At what level does the local public health system:</i>	
3.2.1	Develop health communication plans for relating to media and the public and for sharing information among LPHS organizations?	100
3.2.2	Use relationships with different media providers (e.g. print, radio, television, and the internet) to share health information, matching the message with the target audience?	100
3.2.3	Identify and train spokespersons on public health issues?	100
3.3	Model Standard: Risk Communication <i>At what level does the local public health system:</i>	
3.3.1	Develop an emergency communications plan for each stage of an emergency to allow for the effective dissemination of information?	100
3.3.2	Make sure resources are available for a rapid emergency communication response?	100
3.3.3	Provide risk communication training for employees and volunteers?	100

ESSENTIAL SERVICE 4: Mobilize Community Partnerships to Identify and Solve Health Problems

4.1	Model Standard: Constituency Development <i>At what level does the local public health system:</i>	
4.1.1	Maintain a complete and current directory of community organizations?	100
4.1.2	Follow an established process for identifying key constituents related to overall public health interests and particular health concerns?	75
4.1.3	Encourage constituents to participate in activities to improve community health?	100
4.1.4	Create forums for communication of public health issues?	100

4.2	Model Standard: Community Partnerships <i>At what level does the local public health system:</i>	
4.2.1	Establish community partnerships and strategic alliances to provide a comprehensive approach to improving health in the community?	100
4.2.2	Establish a broad-based community health improvement committee?	100
4.2.3	Assess how well community partnerships and strategic alliances are working to improve community health?	100

ESSENTIAL SERVICE 5: Develop Policies and Plans that Support Individual and Community Health Efforts

5.1	Model Standard: Governmental Presence at the Local Level <i>At what level does the local public health system:</i>	
5.1.1	Support the work of a local health department dedicated to the public health to make sure the essential public health services are provided?	100
5.1.2	See that the local health department is accredited through the national voluntary accreditation program?	100
5.1.3	Assure that the local health department has enough resources to do its part in providing essential public health services?	100
5.2	Model Standard: Public Health Policy Development <i>At what level does the local public health system:</i>	
5.2.1	Contribute to public health policies by engaging in activities that inform the policy development process?	100
5.2.2	Alert policymakers and the community of the possible public health impacts (both intended and unintended) from current and/or proposed policies?	100
5.2.3	Review existing policies at least every three to five years?	100
5.3	Model Standard: Community Health Improvement Process and Strategic Planning <i>At what level does the local public health system:</i>	
5.3.1	Establish a community health improvement process, with broad-based diverse participation, that uses information from both the community health assessment and the perceptions of community members?	100
5.3.2	Develop strategies to achieve community health improvement objectives, including a description of organizations accountable for specific steps?	100
5.3.3	Connect organizational strategic plans with the Community Health Improvement Plan?	100

5.4	Model Standard: Plan for Public Health Emergencies <i>At what level does the local public health system:</i>	
5.4.1	Support a workgroup to develop and maintain preparedness and response plans?	100
5.4.2	Develop a plan that defines when it would be used, who would do what tasks, what standard operating procedures would be put in place, and what alert and evacuation protocols would be followed?	100
5.4.3	Test the plan through regular drills and revise the plan as needed, at least every two years?	100

ESSENTIAL SERVICE 6: Enforce Laws and Regulations that Protect Health and Ensure Safety

6.1	Model Standard: Review and Evaluation of Laws, Regulations, and Ordinances <i>At what level does the local public health system:</i>	
6.1.1	Identify public health issues that can be addressed through laws, regulations, or ordinances?	75
6.1.2	Stay up-to-date with current laws, regulations, and ordinances that prevent, promote, or protect public health on the federal, state, and local levels?	75
6.1.3	Review existing public health laws, regulations, and ordinances at least once every five years?	75
6.1.4	Have access to legal counsel for technical assistance when reviewing laws, regulations, or ordinances?	100
6.2	Model Standard: Involvement in the Improvement of Laws, Regulations, and Ordinances <i>At what level does the local public health system:</i>	
6.2.1	Identify local public health issues that are inadequately addressed in existing laws, regulations, and ordinances?	75
6.2.2	Participate in changing existing laws, regulations, and ordinances, and/or creating new laws, regulations, and ordinances to protect and promote the public health?	75
6.2.3	Provide technical assistance in drafting the language for proposed changes or new laws, regulations, and ordinances?	50

6.3	Model Standard: Enforcement of Laws, Regulations, and Ordinances <i>At what level does the local public health system:</i>	
6.3.1	Identify organizations that have the authority to enforce public health laws, regulations, and ordinances?	100
6.3.2	Assure that a local health department (or other governmental public health entity) has the authority to act in public health emergencies?	100
6.3.3	Assure that all enforcement activities related to public health codes are done within the law?	100
6.3.4	Educate individuals and organizations about relevant laws, regulations, and ordinances?	75
6.3.5	Evaluate how well local organizations comply with public health laws?	75

ESSENTIAL SERVICE 7: Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable

7.1	Model Standard: Identification of Personal Health Service Needs of Populations <i>At what level does the local public health system:</i>	
7.1.1	Identify groups of people in the community who have trouble accessing or connecting to personal health services?	75
7.1.2	Identify all personal health service needs and unmet needs throughout the community?	75
7.1.3	Defines partner roles and responsibilities to respond to the unmet needs of the community?	75
7.1.4	Understand the reasons that people do not get the care they need?	75
7.2	Model Standard: Assuring the Linkage of People to Personal Health Services <i>At what level does the local public health system:</i>	
7.2.1	Connect (or link) people to organizations that can provide the personal health services they may need?	75
7.2.2	Help people access personal health services, in a way that takes into account the unique needs of different populations?	75
7.2.3	Help people sign up for public benefits that are available to them (e.g., Medicaid or medical and prescription assistance programs)?	75
7.2.4	Coordinate the delivery of personal health and social services so that everyone has access to the care they need?	75

ESSENTIAL SERVICE 8: Assure a Competent Public and Personal Health Care Workforce

8.1	Model Standard: Workforce Assessment, Planning, and Development <i>At what level does the local public health system:</i>	
8.1.1	Set up a process and a schedule to track the numbers and types of LPHS jobs and the knowledge, skills, and abilities that they require whether those jobs are in the public or private sector?	75
8.1.2	Review the information from the workforce assessment and use it to find and address gaps in the local public health workforce?	75
8.1.3	Provide information from the workforce assessment to other community organizations and groups, including governing bodies and public and private agencies, for use in their organizational planning?	75
8.2	Model Standard: Public Health Workforce Standards <i>At what level does the local public health system:</i>	
8.2.1	Make sure that all members of the public health workforce have the required certificates, licenses, and education needed to fulfill their job duties and meet the law?	100
8.2.2	Develop and maintain job standards and position descriptions based in the core knowledge, skills, and abilities needed to provide the essential public health services?	75
8.2.3	Base the hiring and performance review of members of the public health workforce in public health competencies?	75
8.3	Model Standard: Life-Long Learning through Continuing Education, Training, and Mentoring <i>At what level does the local public health system:</i>	
8.3.1	Identify education and training needs and encourage the workforce to participate in available education and training?	75
8.3.2	Provide ways for workers to develop core skills related to essential public health services?	75
8.3.3	Develop incentives for workforce training, such as tuition reimbursement, time off for class, and pay increases?	75
8.3.4	Create and support collaborations between organizations within the public health system for training and education?	75
8.3.5	Continually train the public health workforce to deliver services in a cultural competent manner and understand social determinants of health?	75

8.4	Model Standard: Public Health Leadership Development <i>At what level does the local public health system:</i>	
8.4.1	Provide access to formal and informal leadership development opportunities for employees at all organizational levels?	75
8.4.2	Create a shared vision of community health and the public health system, welcoming all leaders and community members to work together?	75
8.4.3	Ensure that organizations and individuals have opportunities to provide leadership in areas where they have knowledge, skills, or access to resources?	75
8.4.4	Provide opportunities for the development of leaders representative of the diversity within the community?	75

ESSENTIAL SERVICE 9: Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services

9.1	Model Standard: Evaluation of Population-Based Health Services <i>At what level does the local public health system:</i>	
9.1.1	Evaluate how well population-based health services are working, including whether the goals that were set for programs were achieved?	75
9.1.2	Assess whether community members, including those with a higher risk of having a health problem, are satisfied with the approaches to preventing disease, illness, and injury?	75
9.1.3	Identify gaps in the provision of population-based health services?	75
9.1.4	Use evaluation findings to improve plans and services?	75
9.2	Model Standard: Evaluation of Personal Health Services <i>At what level does the local public health system:</i>	
9.2.1	Evaluate the accessibility, quality, and effectiveness of personal health services?	75
9.2.2	Compare the quality of personal health services to established guidelines?	75
9.2.3	Measure satisfaction with personal health services?	100
9.2.4	Use technology, like the internet or electronic health records, to improve quality of care?	75

9.2.5	Use evaluation findings to improve services and program delivery?	75
9.3	Model Standard: Evaluation of the Local Public Health System <i>At what level does the local public health system:</i>	
9.3.1	Identify all public, private, and voluntary organizations that provide essential public health services?	100
9.3.2	Evaluate how well LPHS activities meet the needs of the community at least every five years, using guidelines that describe a model LPHS and involving all entities contributing to essential public health services?	100
9.3.3	Assess how well the organizations in the LPHS are communicating, connecting, and coordinating services?	75
9.3.4	Use results from the evaluation process to improve the LPHS?	75

ESSENTIAL SERVICE 10: Research for New Insights and Innovative Solutions to Health Problems

10.1	Model Standard: Fostering Innovation <i>At what level does the local public health system:</i>	
10.1.1	Provide staff with the time and resources to pilot test or conduct studies to test new solutions to public health problems and see how well they actually work?	75
10.1.2	Suggest ideas about what currently needs to be studied in public health to organizations that do research?	75
10.1.3	Keep up with information from other agencies and organizations at the local, state, and national levels about current best practices in public health?	75
10.1.4	Encourage community participation in research, including deciding what will be studied, conducting research, and in sharing results?	50
10.2	Model Standard: Linkage with Institutions of Higher Learning and/or Research <i>At what level does the local public health system:</i>	
10.2.1	Develop relationships with colleges, universities, or other research organizations, with a free flow of information, to create formal and informal arrangements to work together?	75
10.2.2	Partner with colleges, universities, or other research organizations to do public health research, including community-based participatory research?	50

10.2.3	Encourage colleges, universities, and other research organizations to work together with LPHS organizations to develop projects, including field training and continuing education?	50
10.3	Model Standard: Capacity to Initiate or Participate in Research <i>At what level does the local public health system:</i>	
10.3.1	Collaborate with researchers who offer the knowledge and skills to design and conduct health-related studies?	50
10.3.2	Support research with the necessary infrastructure and resources, including facilities, equipment, databases, information technology, funding, and other resources?	75
10.3.3	Share findings with public health colleagues and the community broadly, through journals, websites, community meetings, etc?	50
10.3.4	Evaluate public health systems research efforts throughout all stages of work from planning to impact on local public health practice?	50

APPENDIX B. RESOURCES

General

Association of State and Territorial Health Officers (ASTHO)

<http://www.astho.org/>

CDC/Office of State, Tribal, Local, and Territorial Support (OSTLTS)

<http://www.cdc.gov/ostlts/programs/index.html>

Guide to Clinical Preventive Services

<http://www.ahrq.gov/clinic/pocketgd.htm>

Guide to Community Preventive Services

www.thecommunityguide.org

National Association of City and County Health Officers (NACCHO)

<http://www.naccho.org/topics/infrastructure/>

National Association of Local Boards of Health (NALBOH)

<http://www.nalboh.org>

Being an Effective Local Board of Health Member: Your Role in the Local Public Health System

<http://www.nalboh.org/pdffiles/LBOH%20Guide%20-%20Booklet%20Format%202008.pdf>

Public Health 101 Curriculum for governing entities http://www.nalboh.org/pdffiles/Bd%20Gov%20pdfs/NALBOH_Public_Health101Curriculum.pdf

Accreditation

ASTHO's Accreditation and Performance Improvement resources

<http://astho.org/Programs/Accreditation-and-Performance/>

NACCHO Accreditation Preparation and Quality Improvement <http://www.naccho.org/topics/infrastructure/accreditation/index.cfm>

Public Health Accreditation Board

www.phaboard.org

Health Assessment and Planning (CHIP/ SHIP)

Healthy People 2010 Toolkit:

Communicating Health Goals and Objectives

<http://www.healthypeople.gov/2010/state/toolkit/12Marketing2002.pdf>

Setting Health Priorities and Establishing Health Objectives

<http://www.healthypeople.gov/2010/state/toolkit/09Priorities2002.pdf>

Healthy People 2020:

www.healthypeople.gov

MAP-IT: A Guide To Using Healthy People 2020 in Your Community

<http://www.healthypeople.gov/2020/implementing/default.aspx>

Mobilizing for Action through Planning and Partnership:

<http://www.naccho.org/topics/infrastructure/mapp/>

MAPP Clearinghouse

<http://www.naccho.org/topics/infrastructure/mapp/framework/clearinghouse/>

MAPP Framework

<http://www.naccho.org/topics/infrastructure/mapp/framework/index.cfm>

National Public Health Performance Standards Program

<http://www.cdc.gov/nphpsp/index.html>

Performance Management /Quality Improvement

American Society for Quality; Evaluation and Decision Making Tools: Multi-voting

<http://asq.org/learn-about-quality/decision-making-tools/overview/overview.html>

Improving Health in the Community: A Role for Performance Monitoring

<http://www.nap.edu/catalog/5298.html>

National Network of Public Health Institutes Public Health Performance Improvement Toolkit

<http://nnphi.org/tools/public-health-performance-improvement-toolkit-2>

Public Health Foundation – Performance Management and Quality Improvement

<http://www.phf.org/focusareas/Pages/default.aspx>

Turning Point

<http://www.turningpointprogram.org/toolkit/content/silostosystems.htm>

US Department of Health and Human Services Public Health System, Finance, and Quality Program

<http://www.hhs.gov/ash/initiatives/quality/finance/forum.html>

Evaluation

CDC Framework for Program Evaluation in Public Health

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr4811a1.htm>

Guide to Developing an Outcome Logic Model and Measurement Plan (United Way)

http://www.yourunitedway.org/media/Guide_for_Logic_Models_and_Measurements.pdf

National Resource for Evidence Based Programs and Practices

www.nrepp.samhsa.gov

W.K. Kellogg Foundation Evaluation Handbook

<http://www.wkkf.org/knowledge-center/resources/2010/W-K-Kellogg-Foundation-Evaluation-Handbook.aspx>

W.K. Kellogg Foundation Logic Model Development Guide

<http://www.wkkf.org/knowledge-center/resources/2006/02/WK-Kellogg-Foundation-Logic-Model-Development-Guide.aspx>