

# Public Health Performance Standards: Results and Lessons from Arkansas

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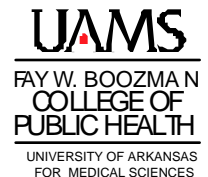
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**American Public Health Association**

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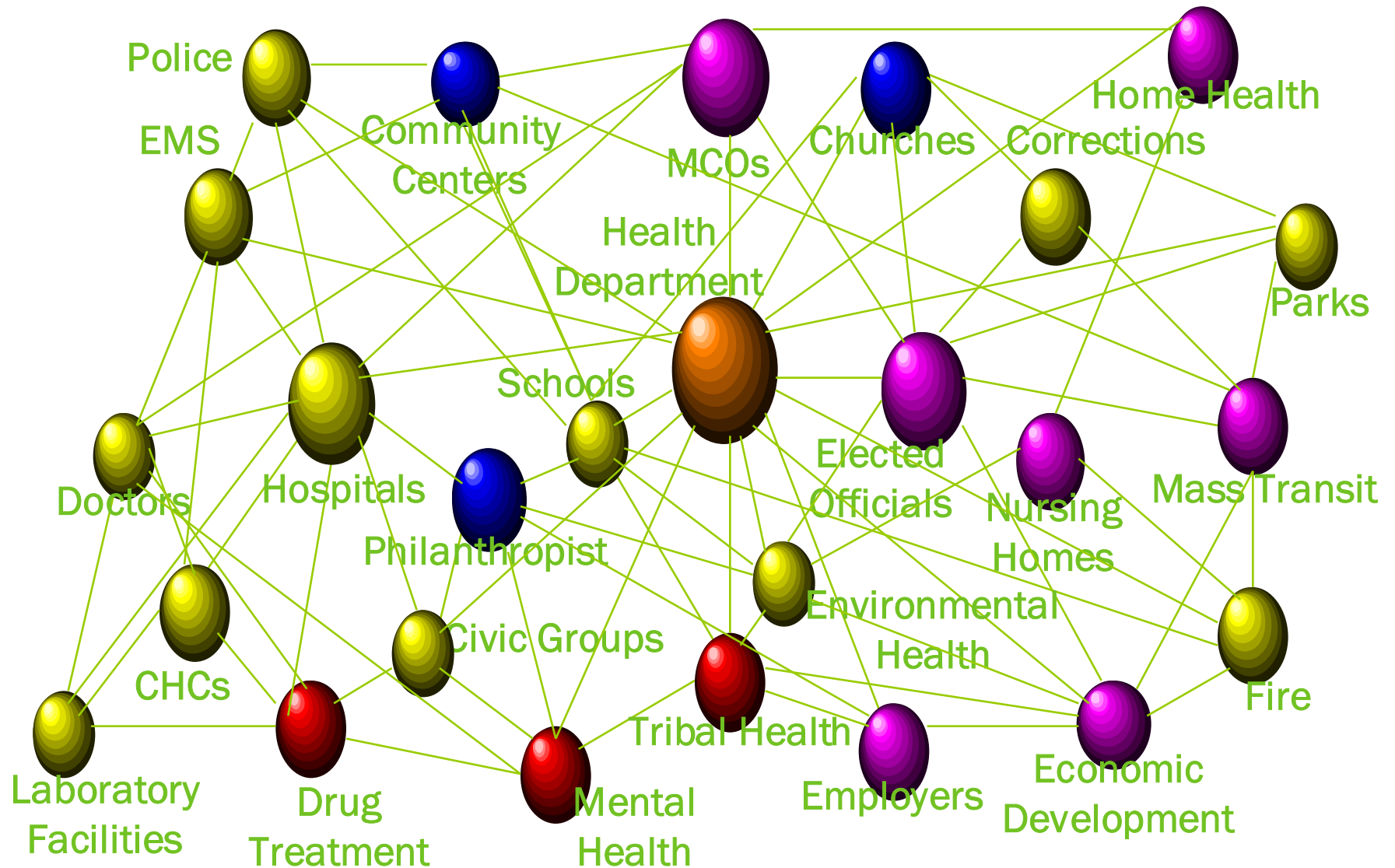
# Goals of the Public Health Performance Standards Initiative

- Provide performance standards for public health systems
- Encourage partnerships to build a stronger foundation for public health preparedness
- Promote continuous quality improvement of public health systems
- Strengthen the science base for public health practice improvement

# Essential Public Health Services (EPHS)

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and to assure the provision of health care when otherwise unavailable.
8. Assure a competent public and personal health care workforce.
9. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services.
10. Conduct research for new insights and innovative solutions to health problems

# Assessment Utilized a Broad Definition of the Public Health System



# Methodology

- **Process delineated in the “NPHPSP Users Guide” was implemented**
- **State/Local Planning Committees formed**
- **Staff trained (leaders aty CDC)**
- **Representatives of the “broadly defined Local Public Health System were invited to participate.**
- **Meetings conducted**  
(State - Nov 2005; Local - Jan, Feb, and Mar 2006)
- **Participants compare their state/local public health system against each standard.**
- **Data sent to CDC for scoring on the extent to which the “model” standards are being met**

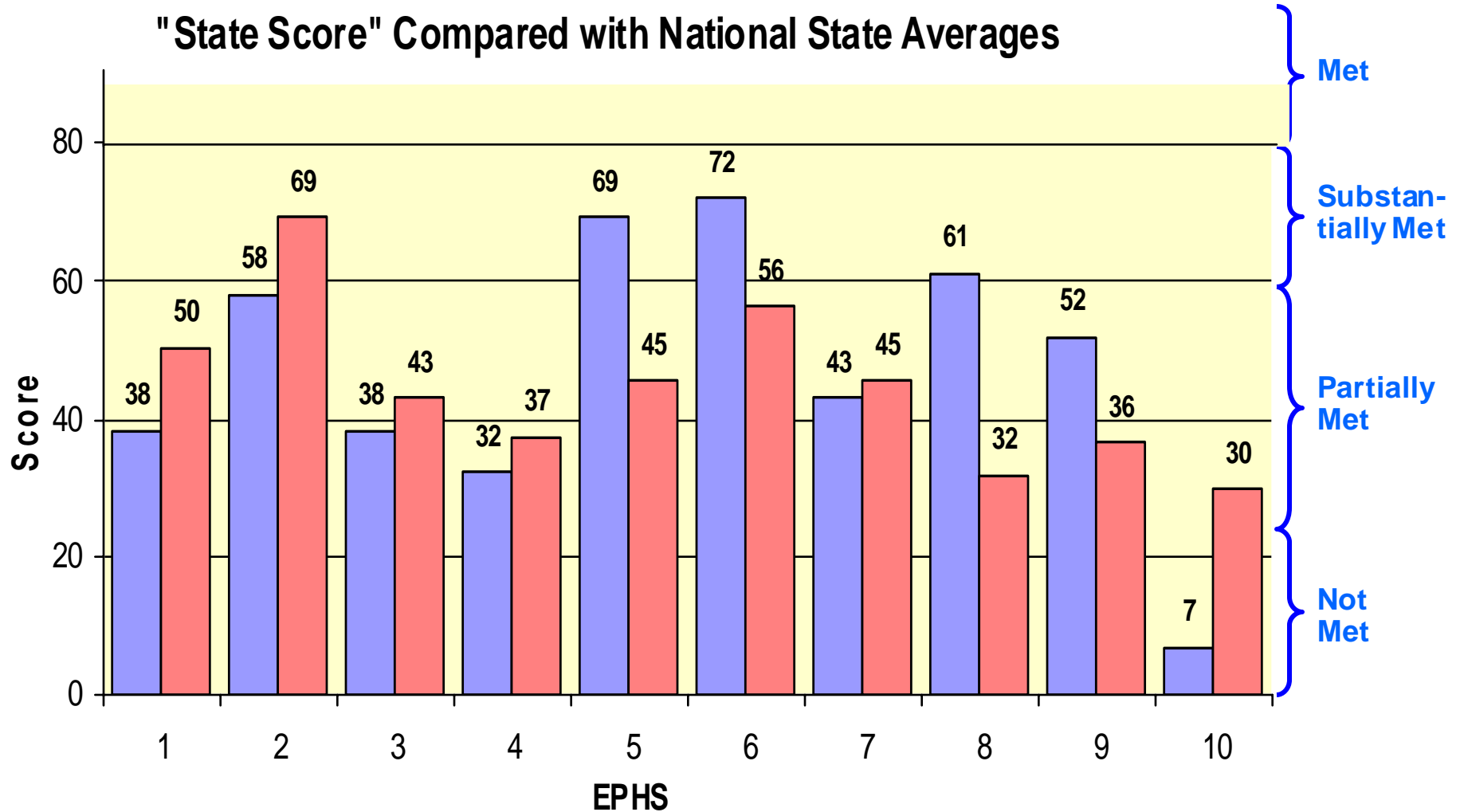
# Limitations

- **Representation missing from some groups/areas**
- **Lengthy tool/process**
- **Scores were subject to biases & perspectives of those who agreed to participate**
- **The majority vote did not accurately capture everyone's viewpoints**
- **Changes in the public health system at all levels constantly occur. This is a snapshot approach.**

# State Assessment

# National Public Health Performance Standards Arkansas

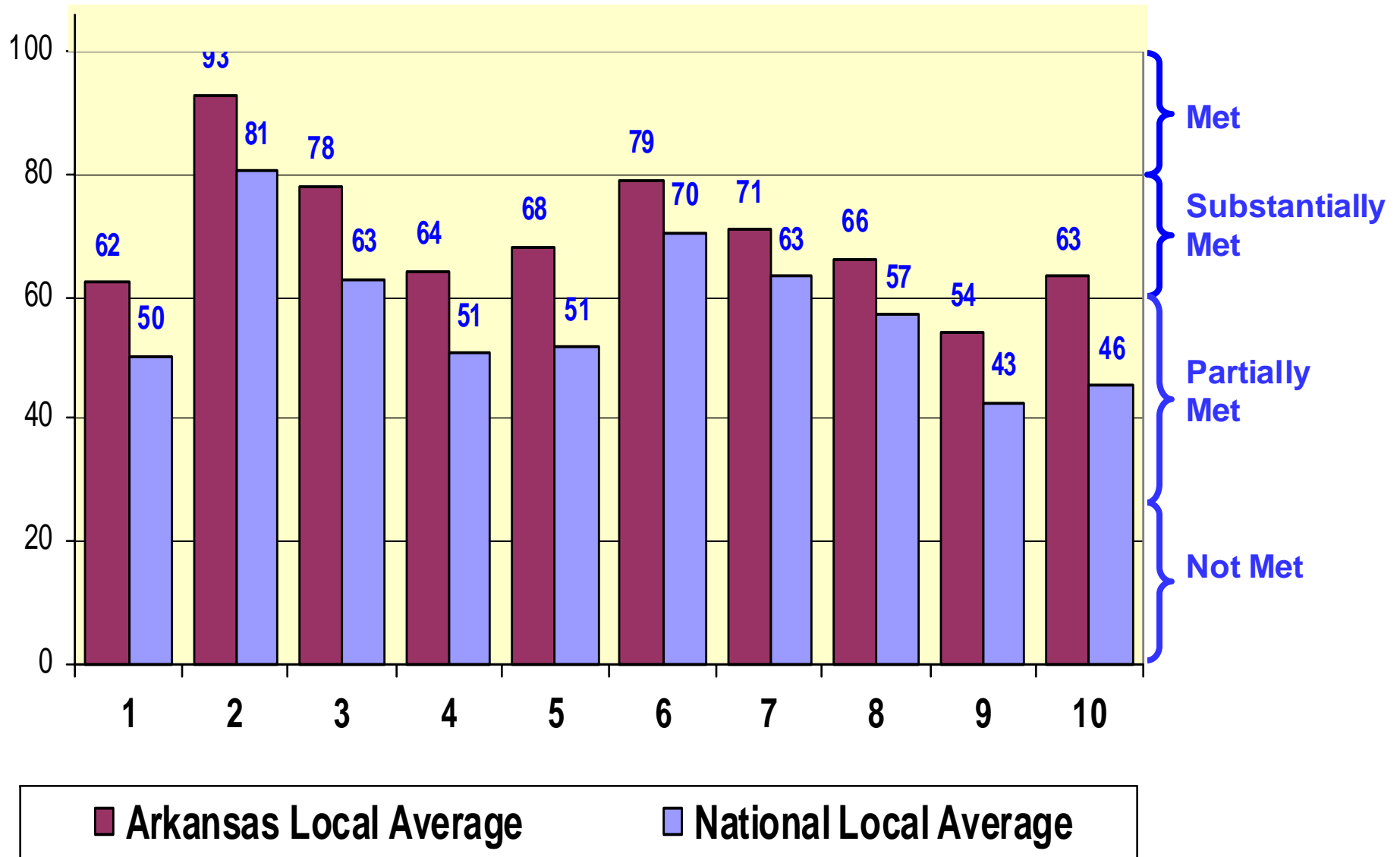
## "State Score" Compared with National State Averages



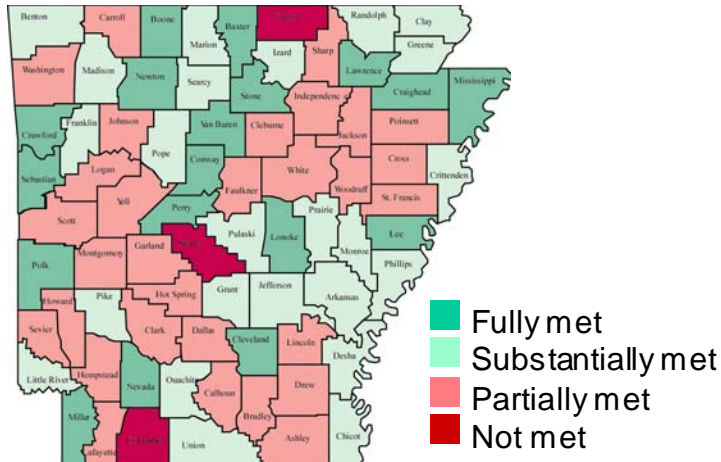


# Local Assessment

# National Public Health Performance Standards Arkansas Local Average vs National Local Average



# EPHS 1: Monitor Health Status



**Avg. Performance Score: 62.0 - (Substantially Met)**

**However, at the county level, only 56.0% “Met or Substantially met” EPHS 1.**

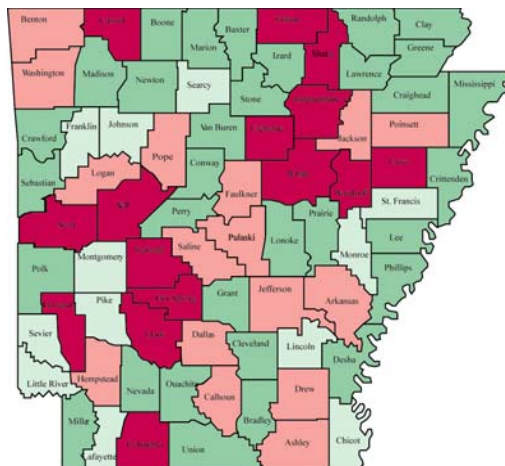
**Looking at the components of EPHS 1:**

**60.0% “Met or Substantially met” EPHS 1.1;**

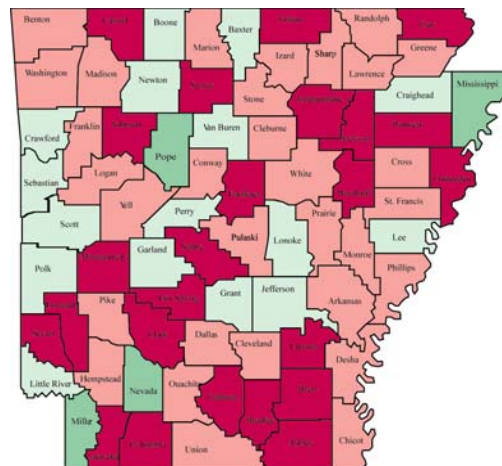
**26.7% “Met or Substantially met” EPHS 1.2;**

**92.0% “Met or Substantially met” EPHS 1.3.**

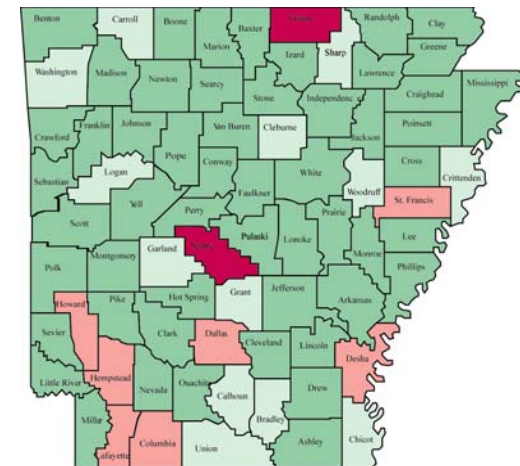
EPHS 1: Monitor Health Status (56.0% M/SM)



1.1 Population Based Community Health Profile (60.0% M/SM)

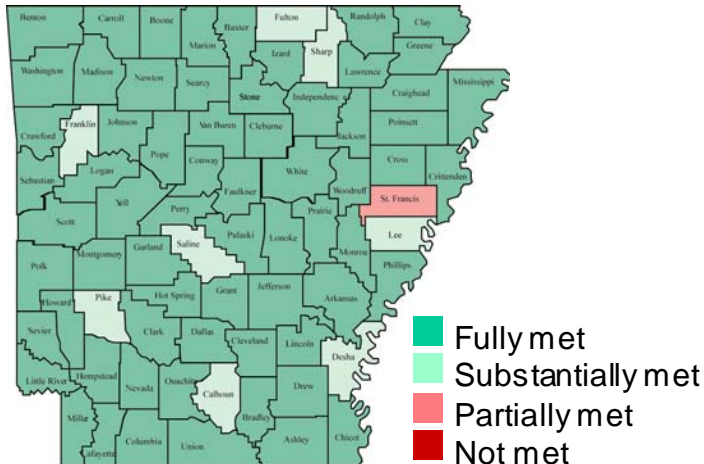


1.2 Access to and Utilization of Current Technology (26.7% M/SM)



1.3 Maintenance of Population Health Registries (92.0% M/SM)

# EPHS 2: Diagnose & Investigate Health Problems



EPHS 2: Diagnose and Investigate Health Problems (98.7% M/SM)

**Avg. Performance Score: 93.0 - (Met)**

**Overall only 98.7% of the counties “Met or Substantially met” EPHS 2.**

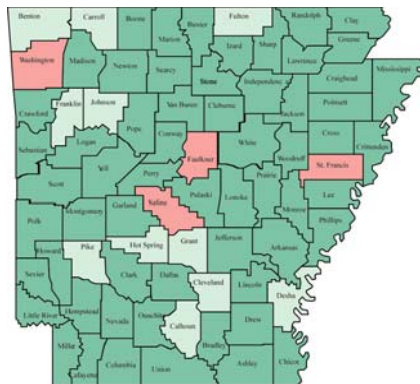
**Looking at the components of EPHS 2:**

**94.7% “Met or Substantially met” EPHS 2.1;**

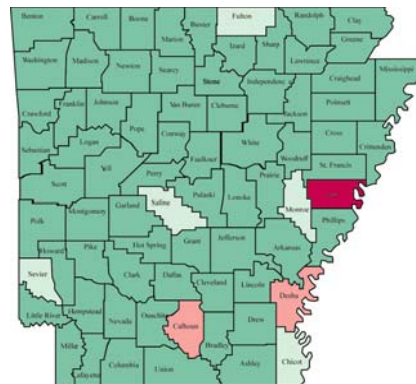
**96.0% “Met or Substantially met” EPHS 2.2;**

**100.0% “Met or Substantially met” EPHS 2.3;**

**98.7% “Met or Substantially met” EPHS 2.4.**



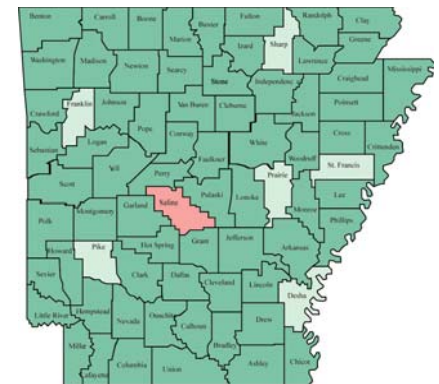
**2.1 Identification and Surveillance of Health Threats (94.7% M/SM)**



**2.2 Plan for Public Health Emergencies (96.0% M/SM)**

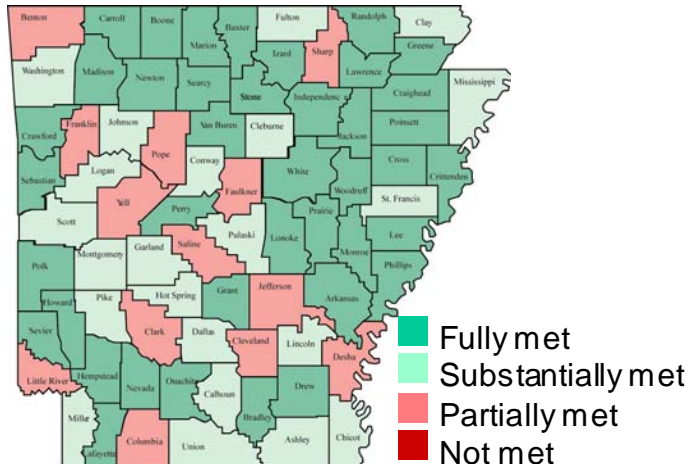


**2.3 Investigate & Respond to Public Health Emergencies (100.0% M/SM)**



**2.4 Laboratory Support for Investigation of Health Threats (98.7% M/SM)**

# EPHS 3: Inform, Educate, and Empower People



**Avg. Performance Score: 77.6 - (Substantially Met)**

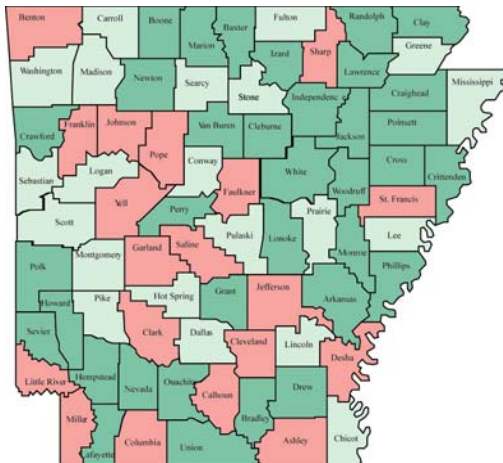
**Overall 82.7% of the counties “Met or Substantially Met” EPHS 3.**

**Looking at the components of EPHS 3:**

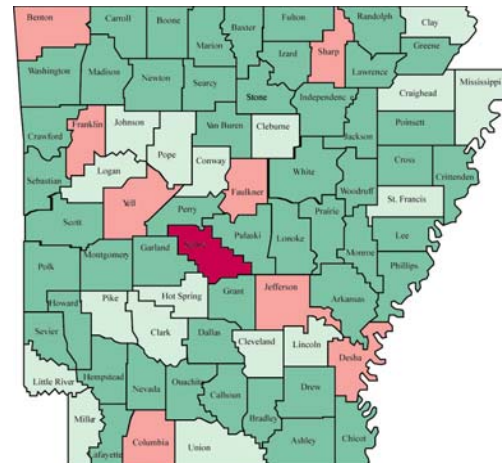
**74.7% “Met or Substantially met” EPHS 3.1;**

**78.0% “Met or Substantially met” EPHS 3.2.**

EPHS 3: Inform, Educate, and Empower People (82.7% M/SM)

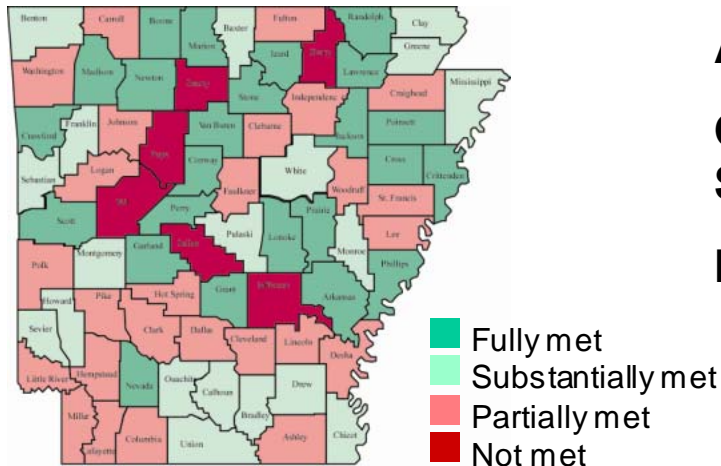


3.1 Health Education  
(74.7% M/SM)



3.2 Health Promotion Activities  
(78.0% M/SM)

# EPHS 4: Mobilize Community Partnerships



**Avg. Performance Score: 64.2 - (Substantially Met)**

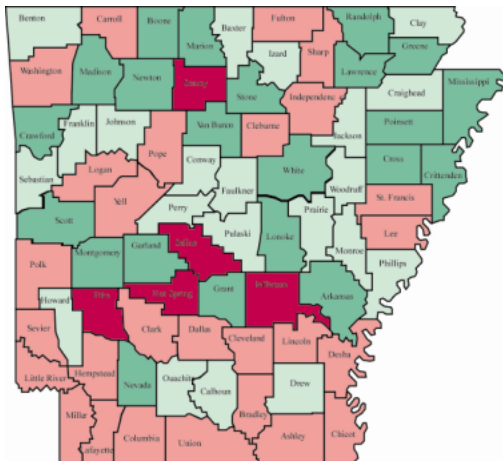
**Overall 57.3% of the counties “Met or Substantially met” EPHS 4.**

**Looking at the components of EPHS 4:**

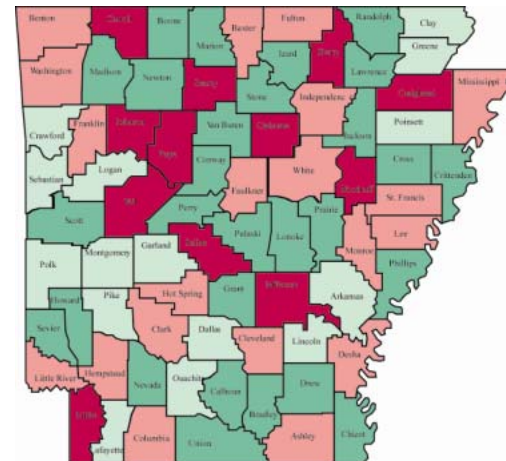
**57.3% “Met or Substantially met” EPHS 4.1;**

**57.3% “Met or Substantially met” EPHS 4.2.**

EPHS 4: Mobilize Community Partnerships (57.3% M/SM)

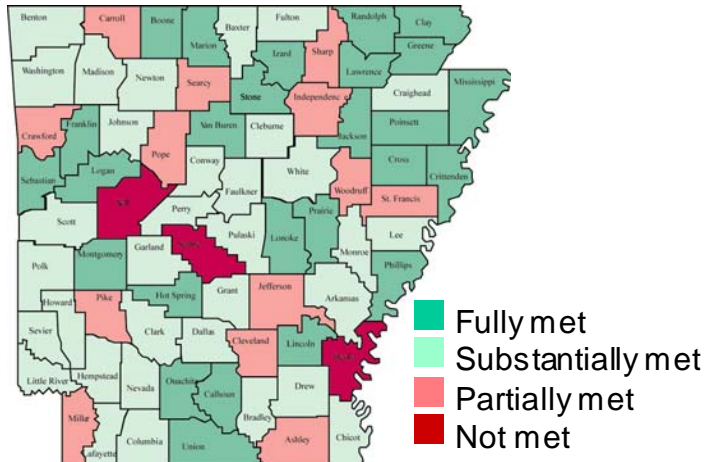


4.1 Constituency Development (57.3% M/SM)



4.2 Community Partnerships (57.3% M/SM)

# EPHS 5: Develop Policies and Plans



EPHS 5: Develop Policies & Plans  
(78.7% M/SM)

**Avg. Performance Score: 68.5 - (Substantially Met)**

**Overall 78.7% of the counties “Met or Substantially met” EPHS 5.**

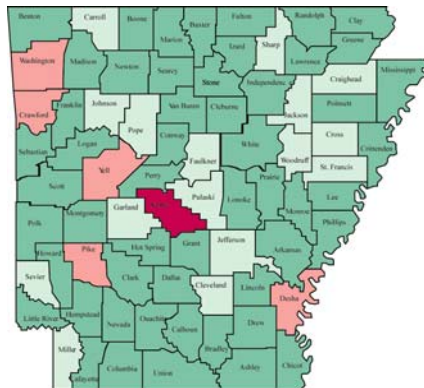
**Looking at the components of EPHS 5:**

**92.0% “Met or Substantially met” EPHS 5.1;**

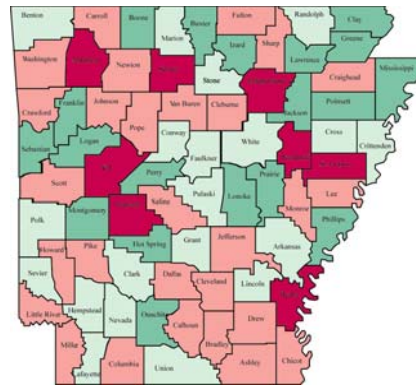
**52.0% “Met or Substantially met” EPHS 5.2;**

**68.8% “Met or Substantially met” EPHS 5.3;**

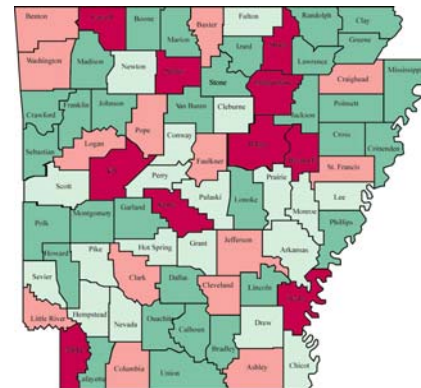
**61.3% “Met or Substantially met” EPHS 5.4.**



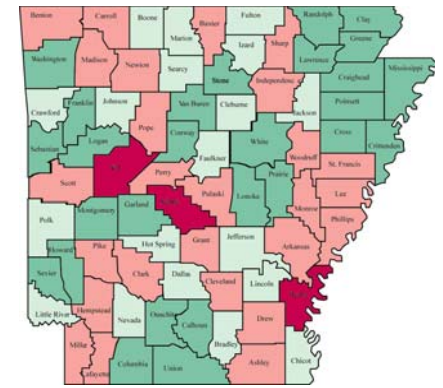
**5.1 Governmental Presence at Local Level**  
(92.0% M/SM)



**5.2 Public Health Policy Development**  
(52.0% M/SM)

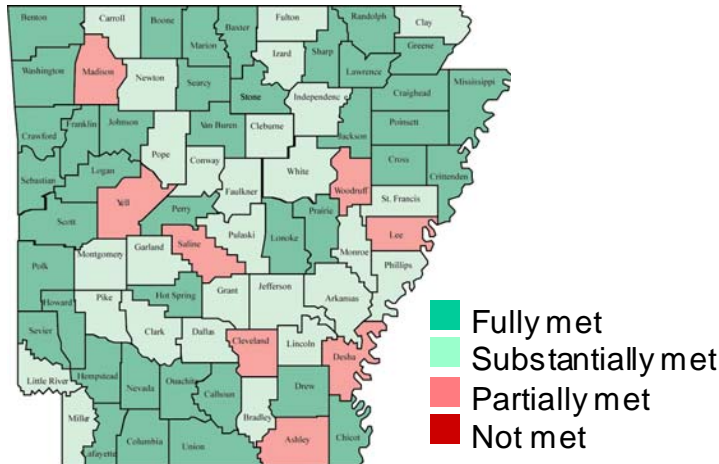


**5.3 Community Health Improvement Process**  
(68.0% M/SM)



**5.4 Strategic Planning and Alignment**  
(61.3% M/SM)

# EPHS 6: Enforce Laws and Regulations



**Avg. Performance Score: 79.4 - (Substantially Met)**

**Overall, 89.3% of the counties “Met or Substantially met” EPHS 6.**

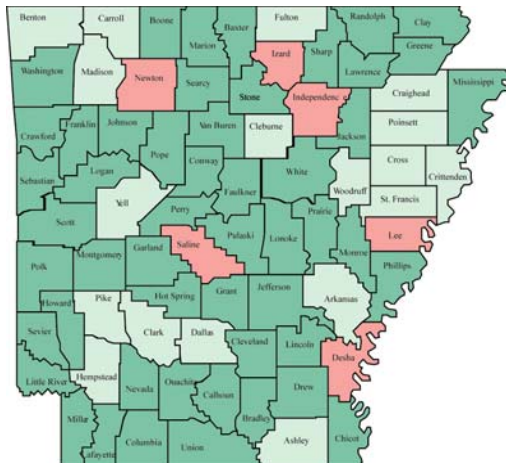
**Looking at the components of EPHS 6:**

**92.0% “Met or Substantially met” EPHS 6.1;**

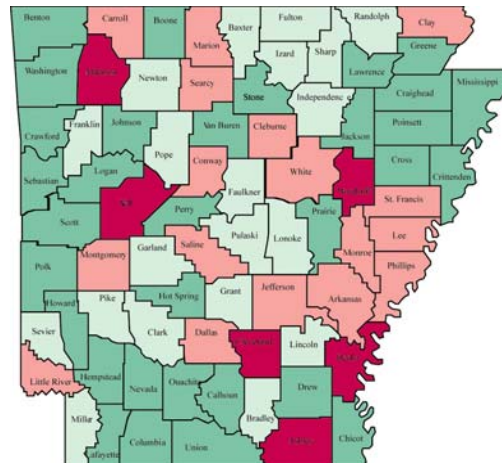
**69.3% “Met or Substantially met” EPHS 6.2;**

**93.3% “Met or Substantially met” EPHS 6.3.**

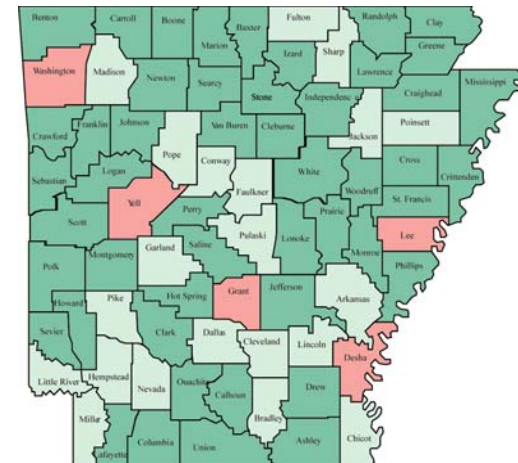
EPHS 6: Enforce Laws and Regulations (89.3% M/SM)



6.1 Review & Evaluate Laws, Regulations, & Ordinances (92.0% M/SM)



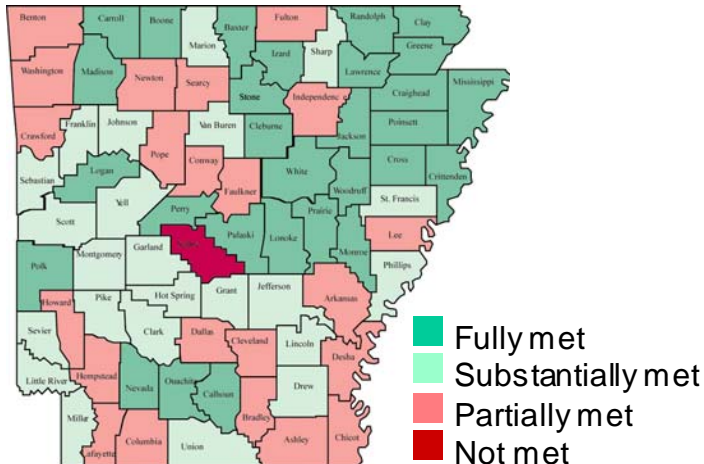
6.2 Involvement in Improvement of Laws, Regs & Ordinances (69.3% M/SM)



6.3 Enforce laws, Regulations and Ordinances (93.3% M/SM)



# EPHS 7: Link People to Needed Personal Health Services



**Avg. Performance Score: 79.4 - (Substantially Met)**

**Overall, 69.3% of the counties “Met or Substantially met” EPHS 7.**

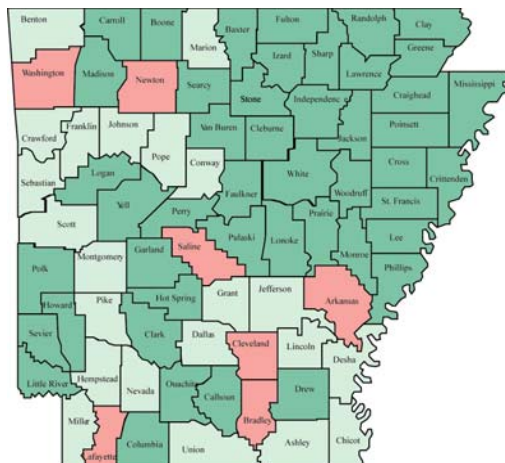
**Looking at the components of EPHS 7:**

**90.7% “Met or Substantially met” EPHS 7.1;**

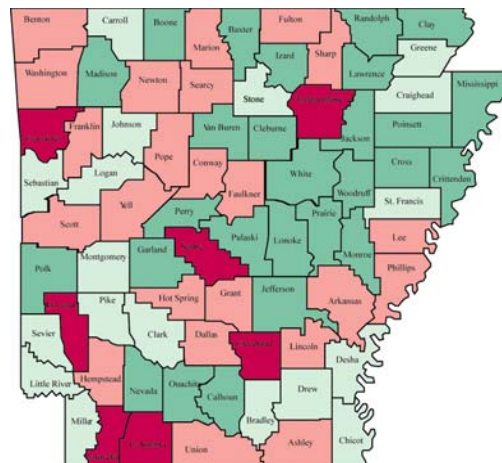
**40.0% “Met or Substantially met” EPHS 7.2;**

**50.7% “Met or Substantially met” EPHS 7.3.**

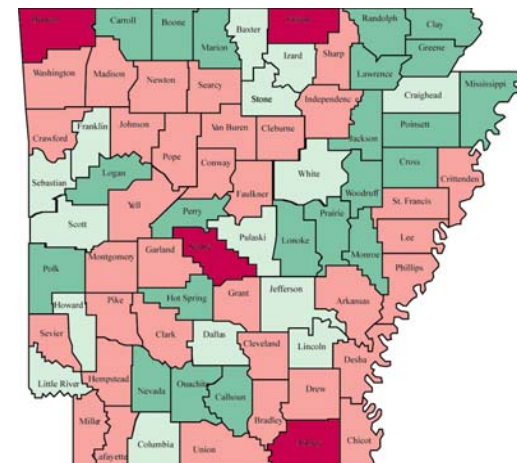
EPHS 7: Link People to Needed Personal Health Services (69.3% M/SM)



7.1 Identification of Populations with Barriers to System (90.7% M/SM)

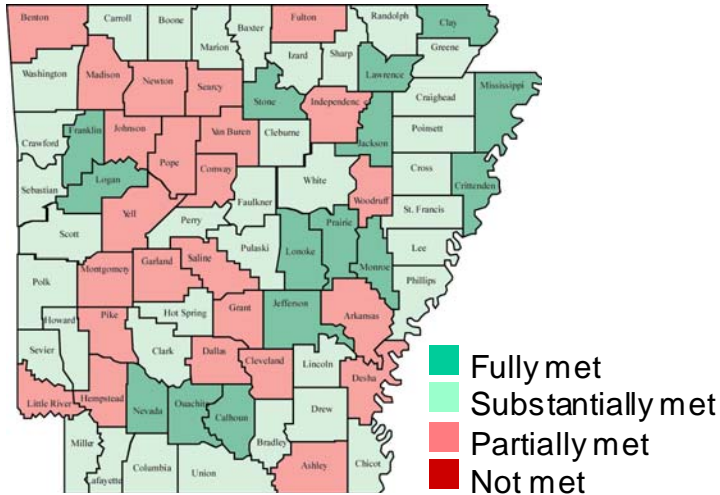


7.2 Identifying Personal Health Service Needs of Population (40.0% M/SM)



7.3 Assuring Linkage of People to Personal Health Services (50.7% M/SM)

# EPHS 8: Assure a Competent Workforce



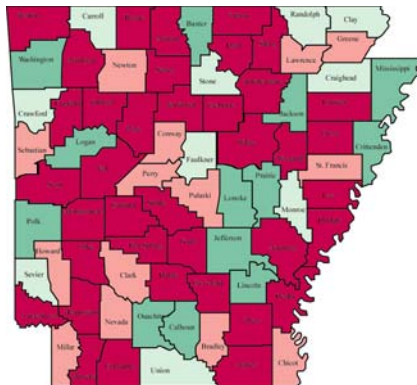
**Avg. Performance Score: 65.6 - (Substantially Met)**

**Overall 68.0% of the counties “Met or Substantially met” EPHS 8.**

**Looking at the components of EPHS 8:**

- 30.7% “Met or Substantially met” EPHS 8.1;**
- 100.0% “Met or Substantially met” EPHS 8.2;**
- 67.0% “Met or Substantially met” EPHS 8.3;**
- 46.7% “Met or Substantially met” EPHS 8.4.**

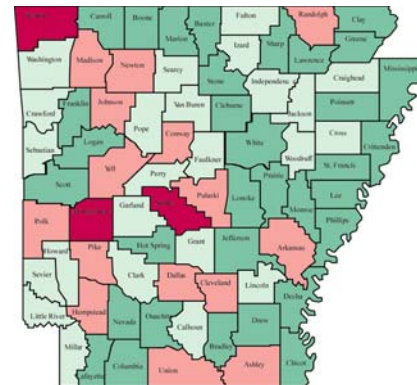
EPHS 8: Assure a Competent Workforce (68.0% M/SM)



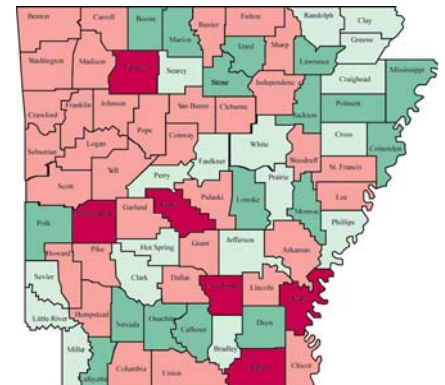
**8.1 Workforce Assessment (30.7% M/SM)**



**8.2 Public Health Workforce Standards (100.0% M/SM)**

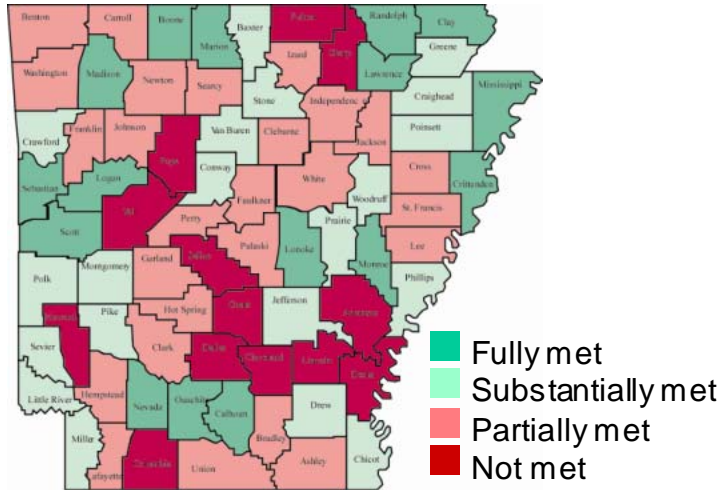


**8.3 Continuing Education, Training & Mentoring (76.0% M/SM)**



**8.4 Public Health Leadership Development (46.7% M/SM)**

# EPHS 9: Evaluate Effectiveness, Accessibility & Quality



**Avg. Performance Score: 54.5 - (Partially Met)**

**Overall, 48.0% of the counties “Met or Substantially met” EPHS 9.**

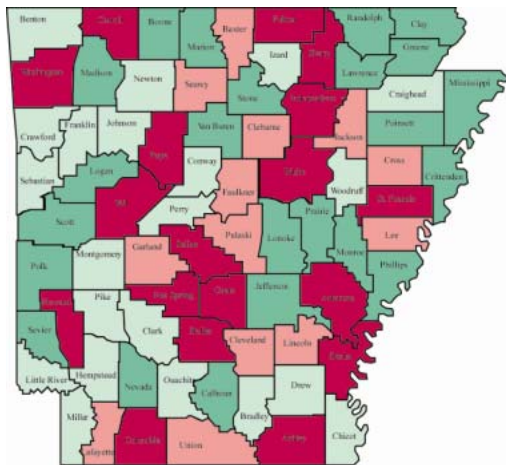
**Looking at the components of EPHS 9:**

**58.7% “Met or Substantially met” EPHS 9.1;**

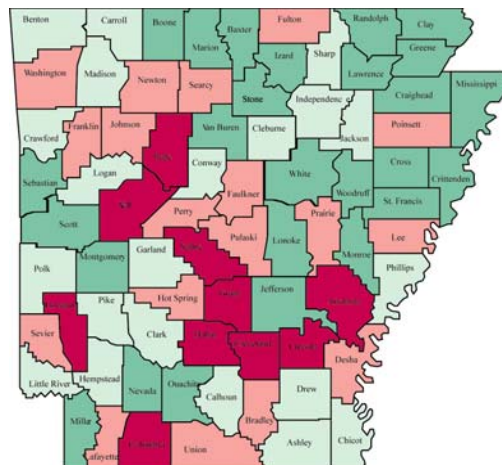
**62.7% “Met or Substantially met” EPHS 9.2;**

**33.3% “Met or Substantially met” EPHS 9.3.**

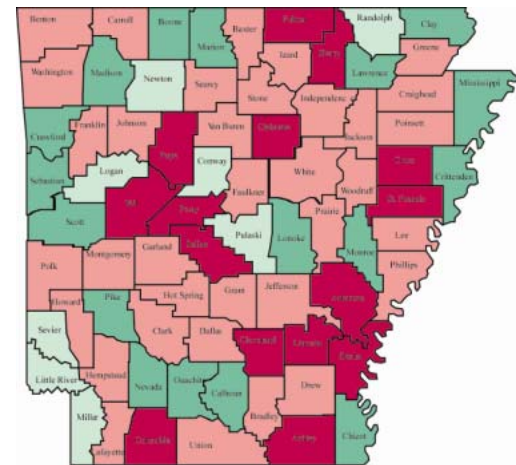
EPHS 9: Evaluate Effectiveness, Accessibility & Quality (48.0% M/SM)



9.1 Evaluation of Population-Based Services (58.7% M/SM)

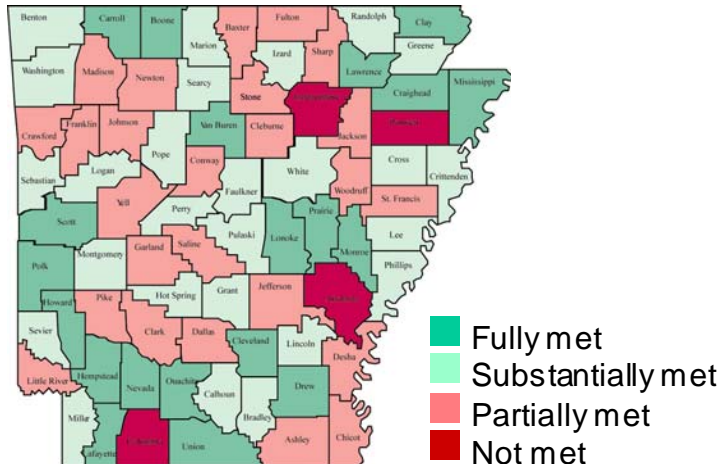


9.2 Evaluation of Personal Health Care Services (62.7% M/SM)



9.3 Evaluation of Local Public Health System (33.3% M/SM)

# EPHS 10: Research for New Insights & Innovative Solutions



**Avg. Performance Score: 63.1 - (Substantially Met)**

**Overall, 61.3% of the counties “Met or Substantially met” EPHS 10.**

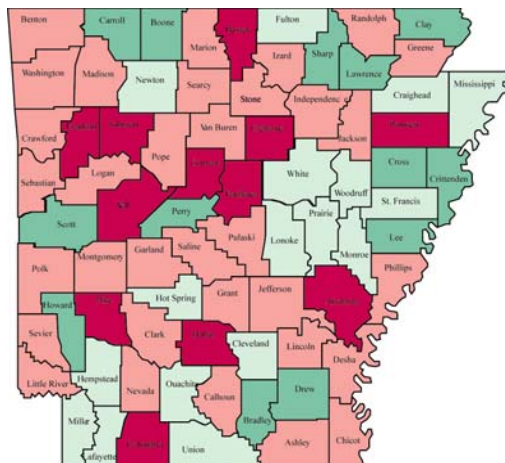
**Looking at the components of EPHS 10:**

**39.7% “Met or Substantially met” EPHS 10.1;**

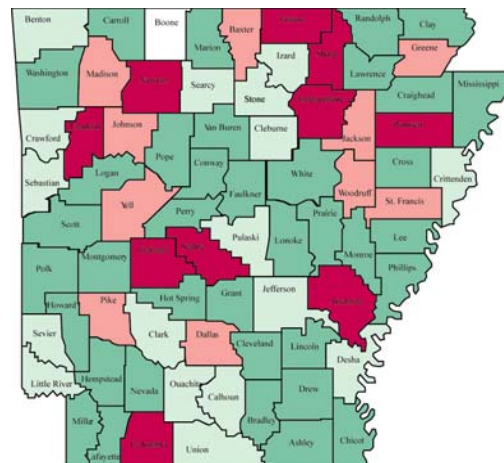
**74.7% “Met or Substantially met” EPHS 10.2;**

**56.0% “Met or Substantially met” EPHS 10.3.**

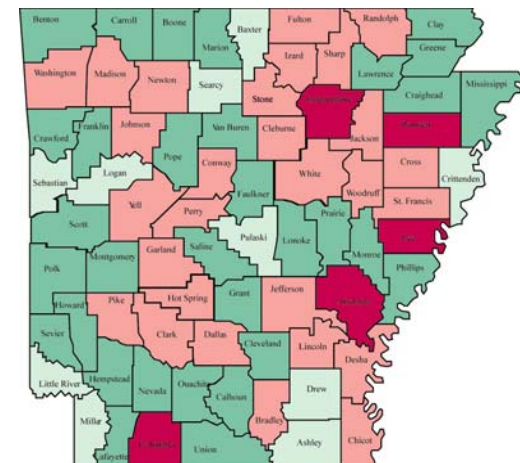
EPHS 10: Research for New Insights and Innovative Solutions (61.3% M/SM)



10.1 Fostering Innovation (39.7% M/SM)

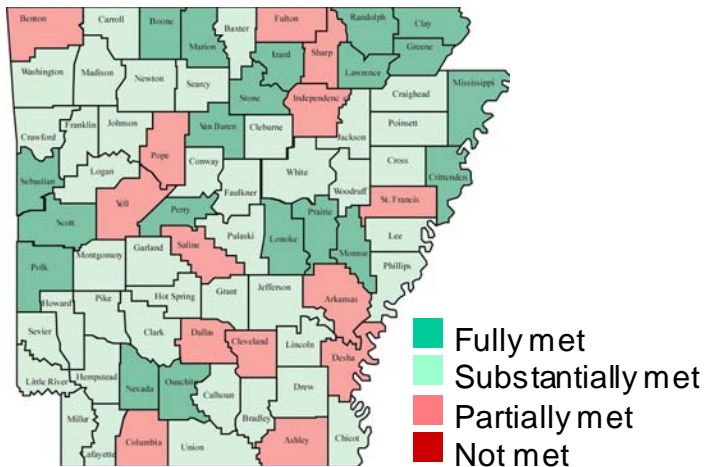


10.2 Linkage with Institutions of Higher Learning & Research (74.7% M/SM)



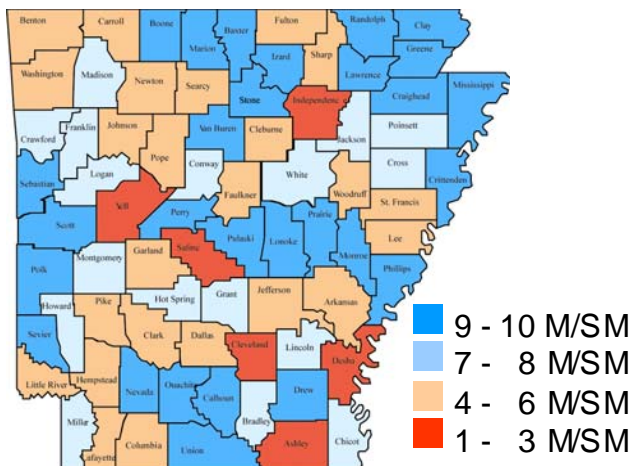
10.3 Capacity for Epidemiological, Policy and Service Research (56.0% M/SM)

# Overall Results: Average Score and # of Standards “M / PM”

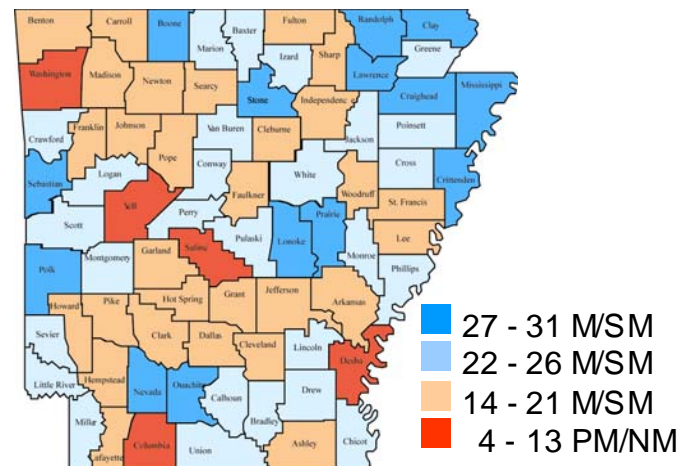


EPHS OVERALL SCORE

- 1) Based on Overall score, 81.3% of the counties “Met” or “Substantially Met” the EPHS Standards. (upper left figure)
- 2) Based on # of Standards, 60.0% of the counties “Met” or “Substantially Met” 7 or more of the standards. (lower left figure)
- 3) Based on # of Components, 54.7% of the of the counties “Met” or “Substantially Met” 22 or more of the Components of the Standards. (lower right figure)



Number of Standards  
“Met” or “Substantially Met”



Number of Components  
“Partially Met” on “Not Met”

# Efforts to explain County Level performance

## Dependent Variables:

- Total Score; Total score for each EPHS; etc.
- # of Standards “M/SM;”
- # of Components “M/SM;” etc.

## Independent Variables:

- County Population
- Percent African-American
- Region
- Number of FTE employees in each county
- LHU Budget
- Services provided (# Clinic Visits; # WIC Patients; Env. Services; etc.)
- Number of participants involved in the assessment
- Participation rate
- County classification (Metropolitan, Micropolitan, Non-metropolitan)
- Other

# Conclusions

- **The results do provide insight for initiatives to strengthen state and local public health infrastructure and performance.**
- **The Arkansas “State” results were similar to the “State” results in the National sample.**
- **The Arkansas “Local” results exceeded the “Local” results in the National sample.**
- **Aggregate performance scores hide considerable local variation.**
- **It is important to perform the entire “local” assessment.**

# Conclusions

- **Efforts to explain local performance were limited by the number of observations.**
  - **Very few variables were significant in multivariate analyses.**
- **Ongoing “Stakeholder Analysis” indicates the importance of certain constituencies for some Public Health Performance Standards.**



**QUESTIONS**

**- - -**

**COMMENTS**

# Next Steps

- **Use the results of the assessment to set priorities for system performance improvement through the State Health Improvement Plan process.**
- **Implement performance improvement strategies to achieve the improvement goals.**
- **Measure and report on outcomes of the improvement activities to assure a process of continuous quality improvement.**
- **Undertake systems building efforts through the proactive identification of opportunities to coordinate and integrate action on the priorities that emerge from the state health improvement plan.**

# Next Steps (continued)

- **Conduct more detailed analysis of the system assessment scores to identify particular areas for immediate and long-term performance improvement opportunities.**
- **Utilize the results of the assessment to enhance and support DOH's strategic initiatives project activities focusing on community engagement and strengthening the public health infrastructure.**
- **Encourage and support local communities' use of the National Public Health Performance Standards and strategic health improvement planning processes.**
- **Explore how combined state and local improvement activities.**