

Introduction

The 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 towards refining and improving outcomes for performance across the public health system.

The self-assessment was structured around the Model Standards for each of the 10 Essential Public health Services; 30 Model Standards which served as quality indicators that are organized into the 10 Essential Public Health Service areas in the instrument and address the three core functions of Public Health; Priority of Model standards questionnaire and a Local Health Department contribution to the 10 Essential Services questionnaire for Department of Health Employees.

Purpose

The Primary purpose of the LPHSA is to promote continuous improvements that will result in positive outcomes for system performance. These results will be used to

- Better understand current system functioning and performance
- Identify and prioritize areas of strengths, weakness, and opportunities for improvements
- Articulate the value that quality improvement initiatives will bring to the public health system
- Develop an initial work plan with specific quality improvement strategies to achieve goals;
- Re-asses the progress of improvements efforts at regular intervals.

This report is designated to facilitate communication and sharing among and within programs, partners, and organizations. This shared frame of reference will help build commitment and focus for setting priorities and improving public health system performance.

Data Limitations

When reviewing the results, it's important to keep in mind the data limitations:

- Wide variation in the breadth and knowledge of participants
- Difference in interpretation of assessment questions
- Difference in knowledge about the Public Health System

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.

Participants

On March 16th 2016 the following organizations contributed to the scores these results:

- Orange County Public Schools
- 4C
- Head Start
- Orange County Drug free office
- NACDD
- Department of Transportation
- OC Medical Examiner
- Healthy Start
- Orlando Health
- Metro Plan Orlando
- East Central Florida Regional Planning Council
- Shepherd Hope
- Mt Sinai Church
- OC Fire Department
- Interfaith Council
- Healthy Start
- LYNX
- UF/IFAS Cooperative Extension
- True Health
- City of Orlando Police Department
- Second Harvest
- Early Learning Coalition of OC
- Community Member
- Orlando Health
- UCF College of Medicine
- Visionary Vanguard Group
- Orange County Jail
- OC Govt.
- City of Orlando
- OC office of aging
- Community member
- Center for Change
- United way
- American Lung Association
- Mt Zion Missionary Baptist Church
- Children's Home Society
- Hunters Creek Nursing & Rehab

Results

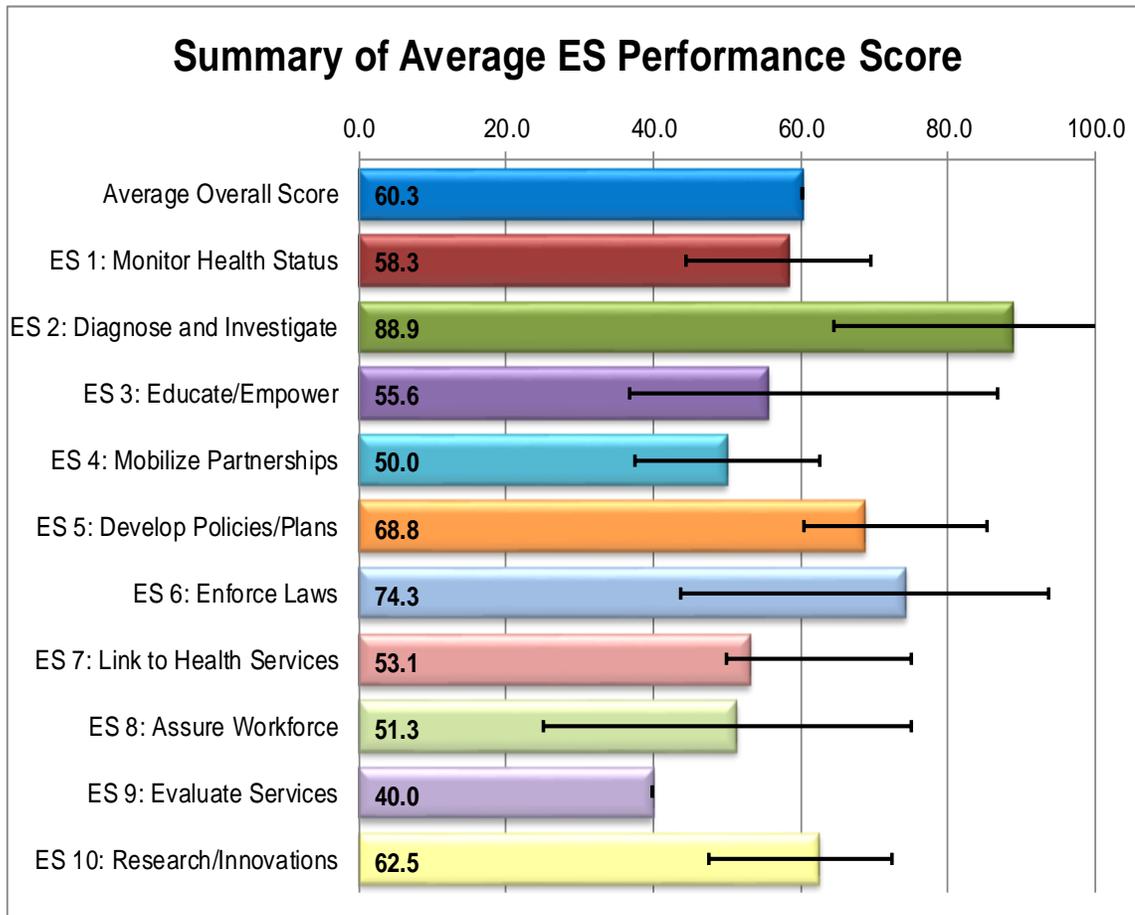
Based upon the responses the participants provided during the assessment, an average was calculated by combining all the scores from each model standard performance measure score. The average score was then inputted in the National Public Health Performance Standards database, where it then generated the average score to each Essential Service and overall. The Scores ranged as followed:

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.

Overall Scores for Each Essential Public Health Service

How well did the system perform on the ten Essential Public health Services (EPHS)?

Take a look at the overall performance scores for each Essential Service. Examination of these scores can immediately give a sense of the local public health system's greatest strengths and weaknesses.

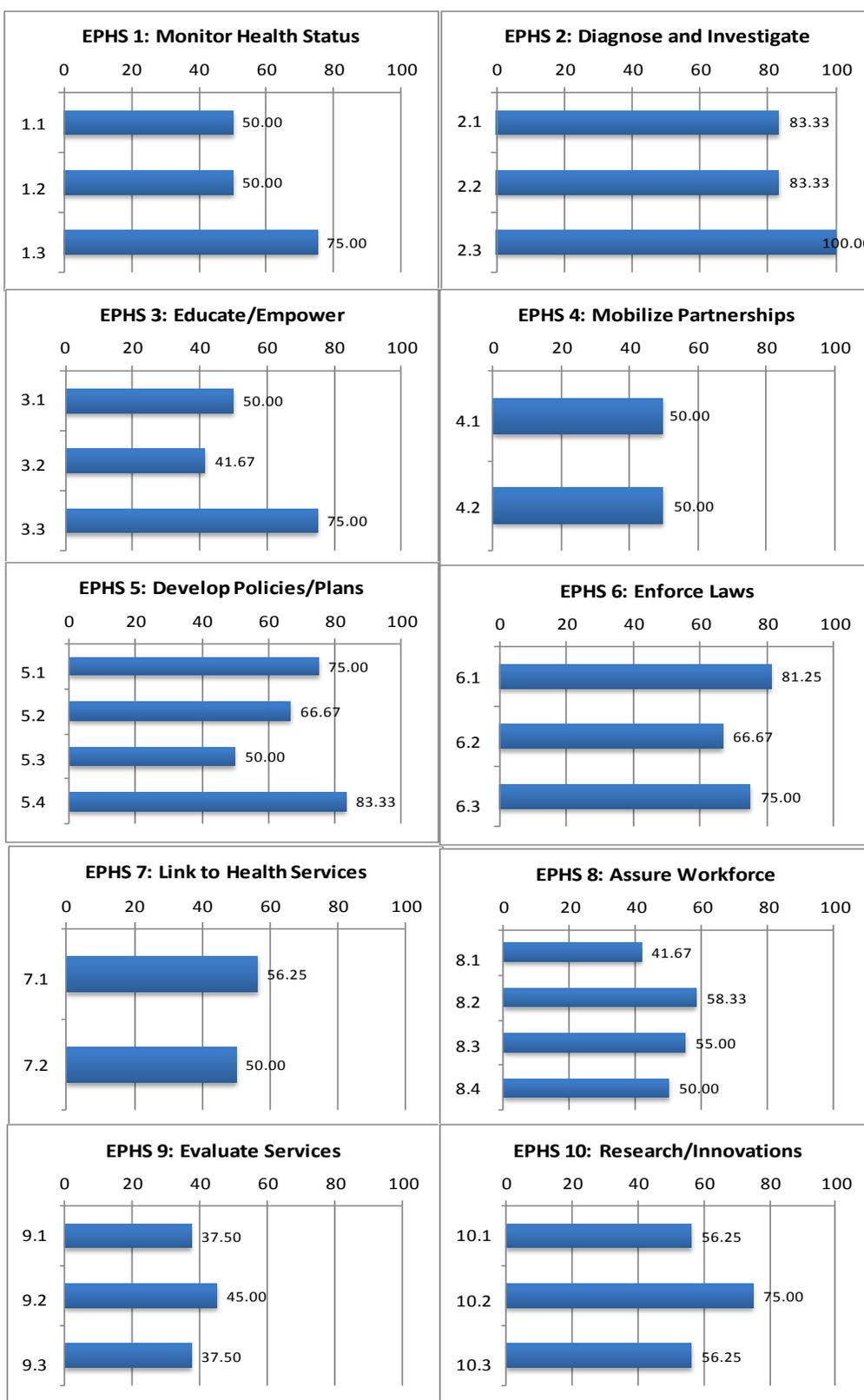


Note: The black bars that identify the range of reported performance score responses within each Essential Service.

Performance Scores by Essential Public Health Service for each model standard

How well did the system perform on specific model standards?

The following displays the average performance score for each of the Model standards within each Essential Service. This helps to identify specific activities that contributed to high or low performance within each Essential Service.

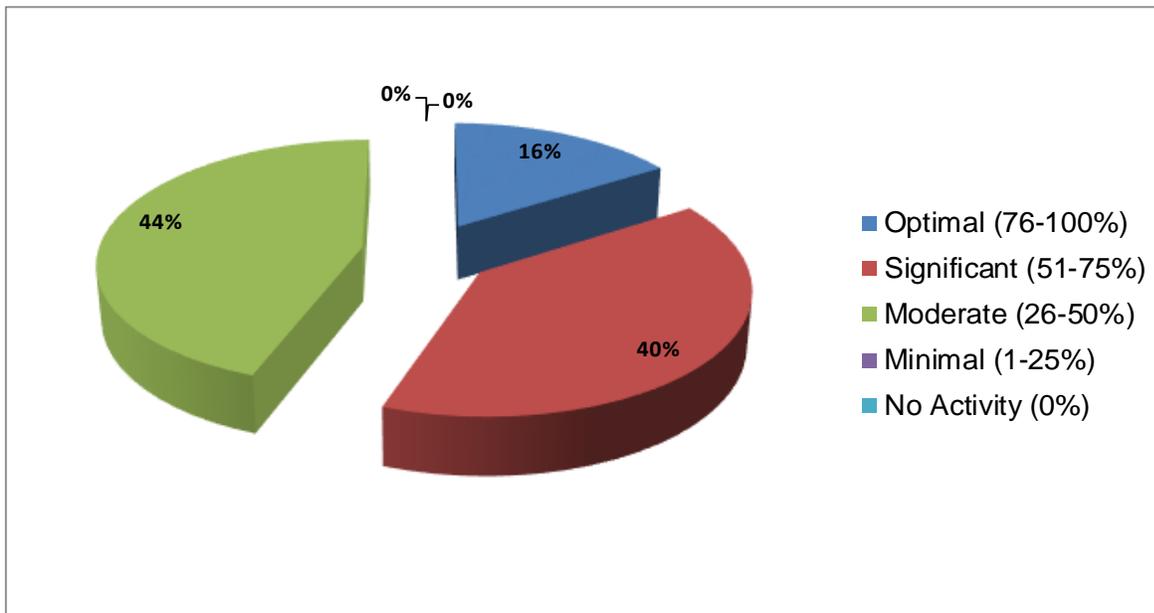
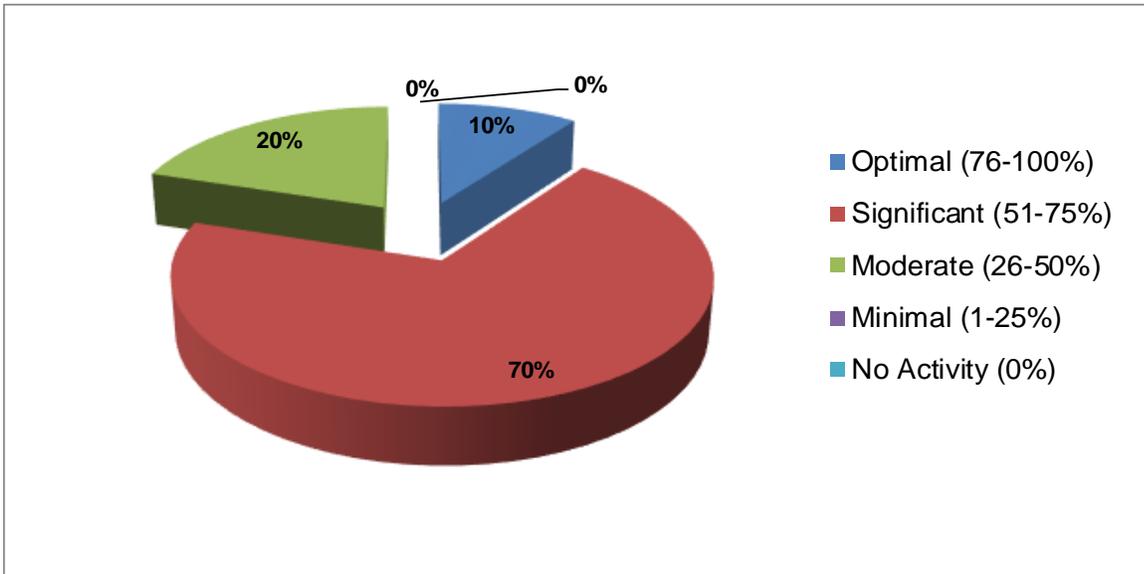


Optimal Activity (76-100%)	Greater than 75% of the activity described within the question is met.
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Performance Relative to Optimal Activity

Overall, how well is the system achieving optimal activity levels?

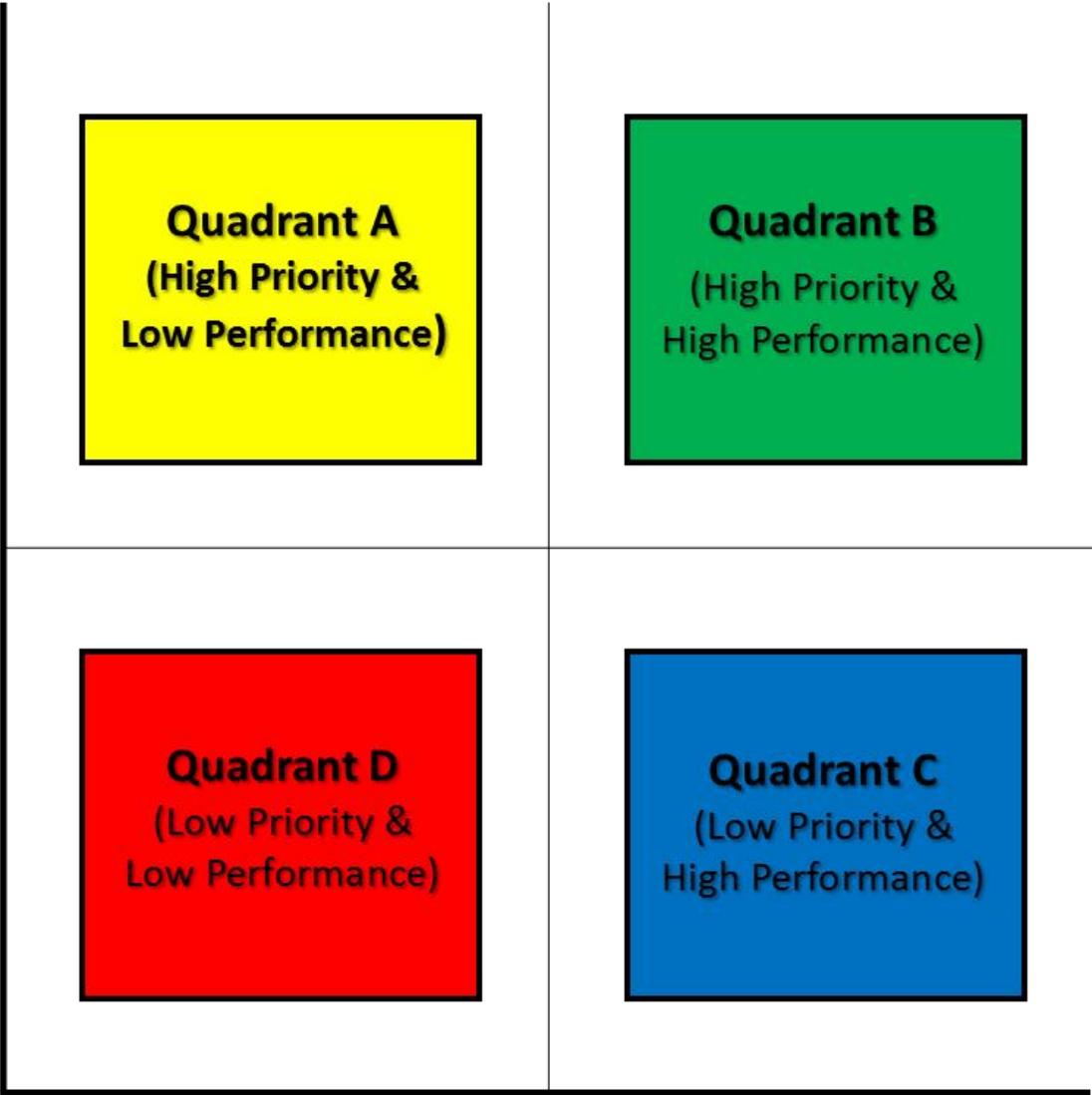
The following figures display the proportion of performance measures that met specified thresholds of achievements for performance standards. The five threshold levels of achievement used in scoring these measures are shown in the legend below. For example, measures receiving a composite score between 76-100% were classified as meeting performance standards at the optimal level.

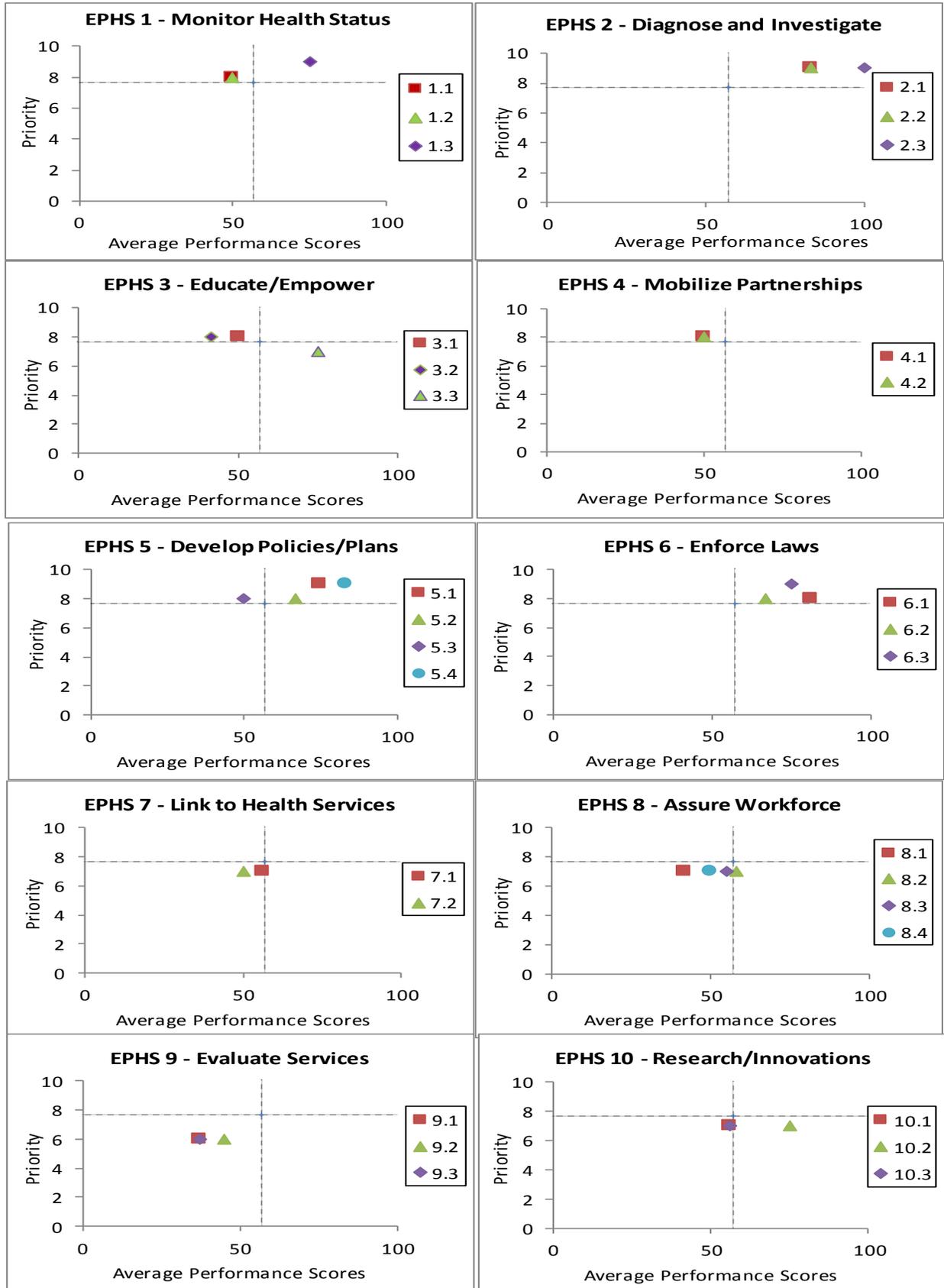


Priority of Model Standards Questionnaire Section

What are potential areas for attention, based on the priority ratings and performance scores?

The following four quadrants, which are based on how the performance of each Essential Service and/or Model standards compares with the priority rating, should provide guidance in considering areas for attention and next steps for improve.



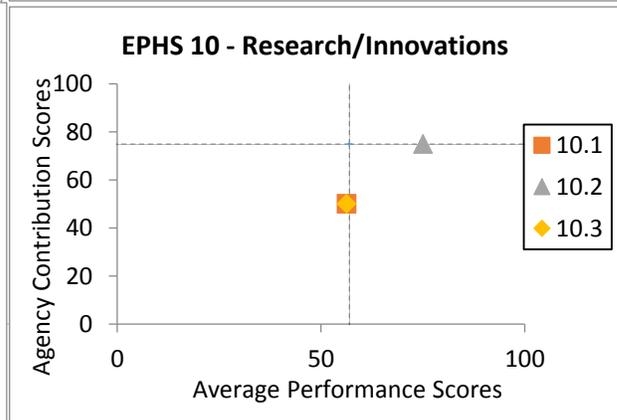
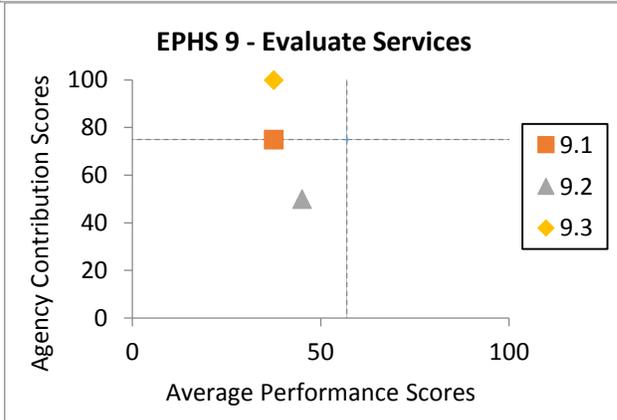
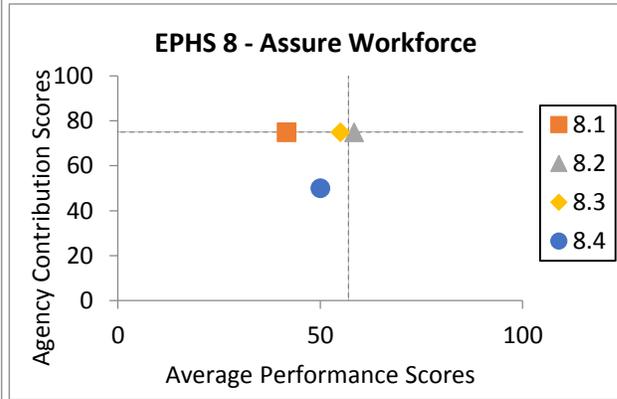
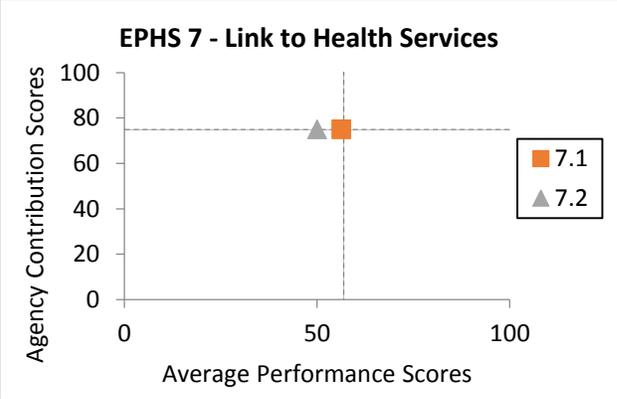
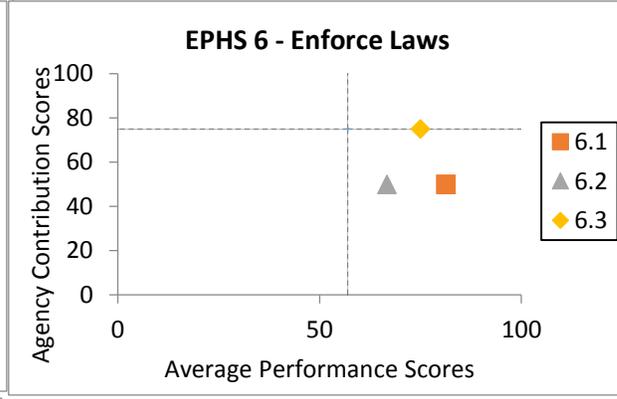
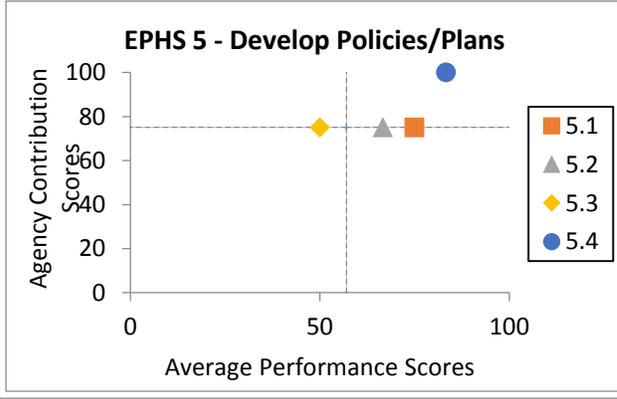
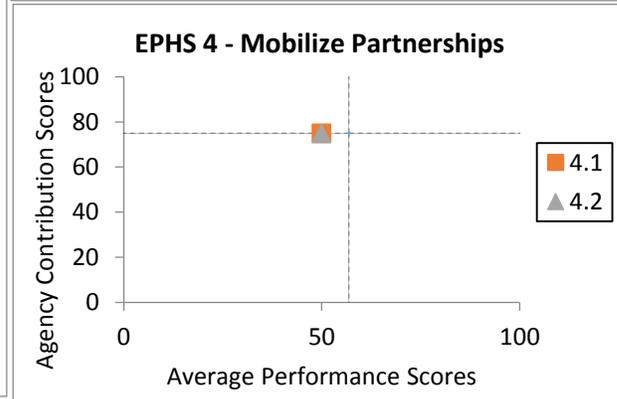
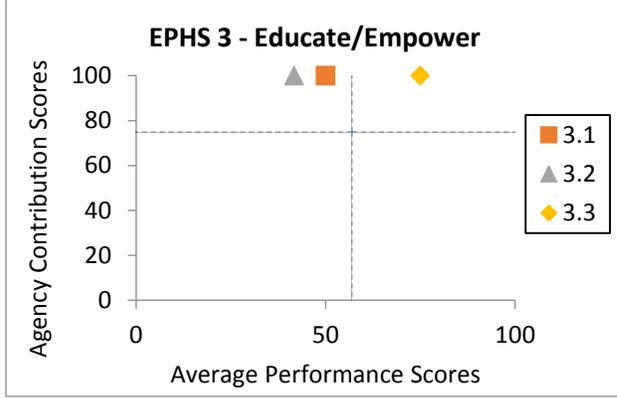
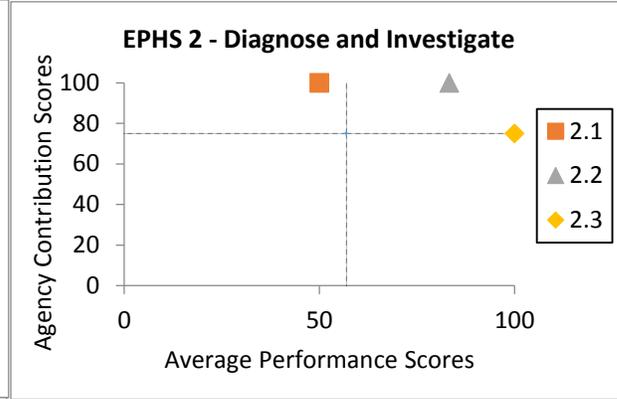
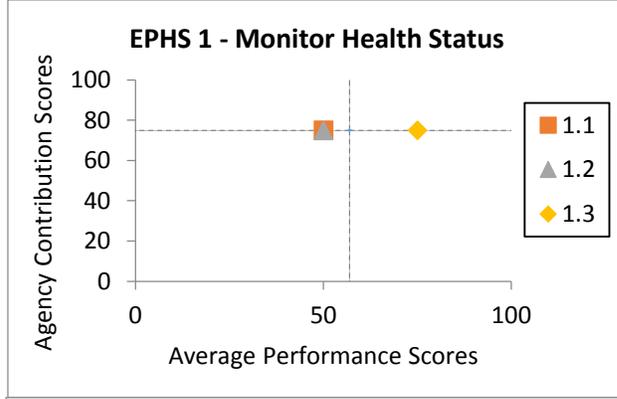


The table below displays priority ratings (as related by participants on a scale of 1-10, with 10 being the highest priority) and performance scores for model standards, arranged under the four quadrants.

Quadrant	Model Standard	Performance Score (%)	Priority Rating
Quadrant A	5.3 CHIP/Strategic Planning	50.0	8
Quadrant A	4.2 Community Partnerships	50.0	8
Quadrant A	4.1 Constituency Development	50.0	8
Quadrant A	3.2 Health Communication	41.7	8
Quadrant A	3.1 Health Education/Promotion	50.0	8
Quadrant A	1.2 Current Technology	50.0	8
Quadrant A	1.1 Community Health Assessment	50.0	8
Quadrant B	6.3 Enforce Laws	75.0	9
Quadrant B	6.2 Improve Laws	66.7	8
Quadrant B	6.1 Review Laws	81.3	8
Quadrant B	5.4 Emergency Plan	83.3	9
Quadrant B	5.2 Policy Development	66.7	8
Quadrant B	5.1 Governmental Presence	75.0	9
Quadrant B	2.3 Laboratories	100.0	9
Quadrant B	2.2 Emergency Response	83.3	9
Quadrant B	2.1 Identification/Surveillance	83.3	9
Quadrant B	1.3 Registries	75.0	9
Quadrant C	10.2 Academic Linkages	75.0	7
Quadrant C	3.3 Risk Communication	75.0	7
Quadrant D	10.3 Research Capacity	56.3	7
Quadrant D	10.1 Foster Innovation	56.3	7
Quadrant D	9.3 Evaluation of LPHS	37.5	6
Quadrant D	9.2 Evaluation of Personal Health	45.0	6
Quadrant D	9.1 Evaluation of Population Health	37.5	6
Quadrant D	8.4 Leadership Development	50.0	7
Quadrant D	8.3 Continuing Education	55.0	7
Quadrant D	8.2 Workforce Standards	58.3	7
Quadrant D	8.1 Workforce Assessment	41.7	7
Quadrant D	7.2 Assure Linkage	50.0	7
Quadrant D	7.1 Personal Health Services Needs	56.3	7

The table and figures on the following pages display Essential Service and Model Standard Scores arranged by Local Health Department contribution, priority and performance scores.

Quadrant	Model Standard	LHD Contribution (%)	Performance Score (%)
Quadrant A	9.3 Evaluation of LPHS	100.0	37.5
Quadrant A	3.2 Health Communication	100.0	41.7
Quadrant A	3.1 Health Education/Promotion	100.0	50.0
Quadrant B	5.4 Emergency Plan	100.0	83.3
Quadrant B	3.3 Risk Communication	100.0	75.0
Quadrant B	2.2 Emergency Response	100.0	83.3
Quadrant B	2.1 Identification/Surveillance	100.0	83.3
Quadrant C	10.2 Academic Linkages	75.0	75.0
Quadrant C	6.3 Enforce Laws	75.0	75.0
Quadrant C	6.2 Improve Laws	50.0	66.7
Quadrant C	6.1 Review Laws	50.0	81.3
Quadrant C	5.2 Policy Development	75.0	66.7
Quadrant C	5.1 Governmental Presence	75.0	75.0
Quadrant C	2.3 Laboratories	75.0	100.0
Quadrant C	1.3 Registries	75.0	75.0
Quadrant D	10.3 Research Capacity	50.0	56.3
Quadrant D	10.1 Foster Innovation	50.0	56.3
Quadrant D	9.2 Evaluation of Personal Health	50.0	45.0
Quadrant D	9.1 Evaluation of Population Health	75.0	37.5
Quadrant D	8.4 Leadership Development	50.0	50.0
Quadrant D	8.3 Continuing Education	75.0	55.0
Quadrant D	8.2 Workforce Standards	75.0	58.3
Quadrant D	8.1 Workforce Assessment	75.0	41.7
Quadrant D	7.2 Assure Linkage	75.0	50.0
Quadrant D	7.1 Personal Health Services Needs	75.0	56.3
Quadrant D	5.3 CHIP/Strategic Planning	75.0	50.0
Quadrant D	4.2 Community Partnerships	75.0	50.0
Quadrant D	4.1 Constituency Development	75.0	50.0
Quadrant D	1.2 Current Technology	75.0	50.0
Quadrant D	1.1 Community Health Assessment	75.0	50.0



Model Standards by Essential Services	Performance Scores	Priority Rating	Agency Contribution Scores
ES 1: Monitor Health Status	58.3	8.3	75.0
1.1 Community Health Assessment	50.0	8.0	75.0
1.2 Current Technology	50.0	8.0	75.0
1.3 Registries	75.0	9.0	75.0
ES 2: Diagnose and Investigate	88.9	9.0	91.7
2.1 Identification/Surveillance	83.3	9.0	100.0
2.2 Emergency Response	83.3	9.0	100.0
2.3 Laboratories	100.0	9.0	75.0
ES 3: Educate/Empower	55.6	7.7	100.0
3.1 Health Education/Promotion	50.0	8.0	100.0
3.2 Health Communication	41.7	8.0	100.0
3.3 Risk Communication	75.0	7.0	100.0
ES 4: Mobilize Partnerships	50.0	8.0	75.0
4.1 Constituency Development	50.0	8.0	75.0
4.2 Community Partnerships	50.0	8.0	75.0
ES 5: Develop Policies/Plans	68.8	8.5	81.3
5.1 Governmental Presence	75.0	9.0	75.0
5.2 Policy Development	66.7	8.0	75.0
5.3 CHIP/Strategic Planning	50.0	8.0	75.0
5.4 Emergency Plan	83.3	9.0	100.0
ES 6: Enforce Laws	74.3	8.3	58.3
6.1 Review Laws	81.3	8.0	50.0
6.2 Improve Laws	66.7	8.0	50.0
6.3 Enforce Laws	75.0	9.0	75.0
ES 7: Link to Health Services	53.1	7.0	75.0
7.1 Personal Health Service Needs	56.3	7.0	75.0
7.2 Assure Linkage	50.0	7.0	75.0
ES 8: Assure Workforce	51.3	7.0	68.8
8.1 Workforce Assessment	41.7	7.0	75.0
8.2 Workforce Standards	58.3	7.0	75.0
8.3 Continuing Education	55.0	7.0	75.0
8.4 Leadership Development	50.0	7.0	50.0
ES 9: Evaluate Services	40.0	6.0	75.0
9.1 Evaluation of Population Health	37.5	6.0	75.0
9.2 Evaluation of Personal Health	45.0	6.0	50.0
9.3 Evaluation of LPHS	37.5	6.0	100.0
ES 10: Research/Innovations	62.5	7.0	58.3
10.1 Foster Innovation	56.3	7.0	50.0
10.2 Academic Linkages	75.0	7.0	75.0
10.3 Research Capacity	56.3	7.0	50.0
Average Overall Score	60.3	7.7	75.8
Median Score	56.9	7.8	75.0

The Table above displays all assessment scores (performance, priority, and contribution scores)

Optimal Activity (76-100%); Significant Activity (51-75%), Moderate Activity (26-50%); Minimal Activity (1-25%); No activity (0%).

Next Steps

As noted in the introduction of this report, NPHPS data may be used to inform a variety of organizations for their planning and improvement process. Both quantitative data and qualitative data from the assessment may be used to identify improvement opportunities. The Florida Department of Health in Orange County will include the results of this assessment to the Community Health Assessment (CHA) and will be used in the upcoming Community Health Improvement Plan (CHIP).