

Program Development 3

PD 3: Proportion of health department programs that are currently implementing evidence-based interventions

Why measure this?

This indicator will help health department leaders to know how many of their programs are implementing evidence based interventions. This information can assure health department leadership that programs are using resources on those initiatives that have been found to be most effective and impactful. The use of evidence-based practices also ensures that agency resources are being used effectively and lend credibility.¹

Measurement specifications: The number of health department programs currently implementing evidence-based interventions divided by the total number of health department interventions.

Reporting Period: Annually

PHAB Alignment

10.1.1 A: Identify and use applicable evidence-based and/or promising practices when implementing new or revised processes, programs and/or interventions

This indicator contributes to the PHAB measures by providing health department leadership with an overall accounting of all programs currently implementing evidence-based interventions.

Operational Definitions

Health department programs: In the context of this indicator, health department programs may include a focus on: (1) prevention and health promotion (e.g., tobacco, HIV, nutrition, injury, physical activity, sexually transmitted disease counseling, diabetes, hypertension, violence, unintended pregnancy, childhood and adult immunizations, environmental epidemiology, newborn screening, and emergency preparedness); (2) clinical and diagnostic services (e.g., access to health care, screening for disease conditions, treatment for diseases, and laboratory services); and (3) surveillance (epidemiology). Health departments may also provide technical assistance, training, research and evaluation services for any and all of these program areas. Programs should have at least one staff person assigned and represent a discrete area of agency focus.

Currently Implementing Evidence-based interventions: Within the health department's 12-month cycle, the program is implementing evidence-based intervention. Evidence-based interventions are those that have demonstrated effectiveness in accomplishing intended outcomes through systematic selection, implementation, and evaluation of strategies, programs and policies with evidence from the

¹ PHAB (2011). Op Cit.

scientific literature.² The selection of evidence-based interventions requires that a health department use the best available evidence in making decisions and in ensuring the effectiveness of processes, programs, and interventions. Health agencies can identify evidence-based from (1) The Guide to Community Preventive Services, (2) the result of an information search (web, library, literary review), or (3) result of interaction with consultants, academic faculty, researchers, other health departments, or other experts (PHAB page 209). Some health agencies may need to adapt evidence-based interventions to better serve and reflect their surrounding communities' cultural values, beliefs, and traditional practices. Established promising practices may be include in the numerator as an evidence-based intervention.

Annually: This indicator should be reported during a 12-month cycle (i.e., calendar year, fiscal year, etc.).

Possible data sources: Health departments will need to review program documentation (potentially housed in a performance management IT system) for the programs included in the denominator for consideration for the numerator.

² CDC (2007). National Public Health Performance Standards Program, Acronyms, Glossary, and Reference Terms. Available at <http://www.cdc.gov/nphpsp/PDF/Glossary.pdf>