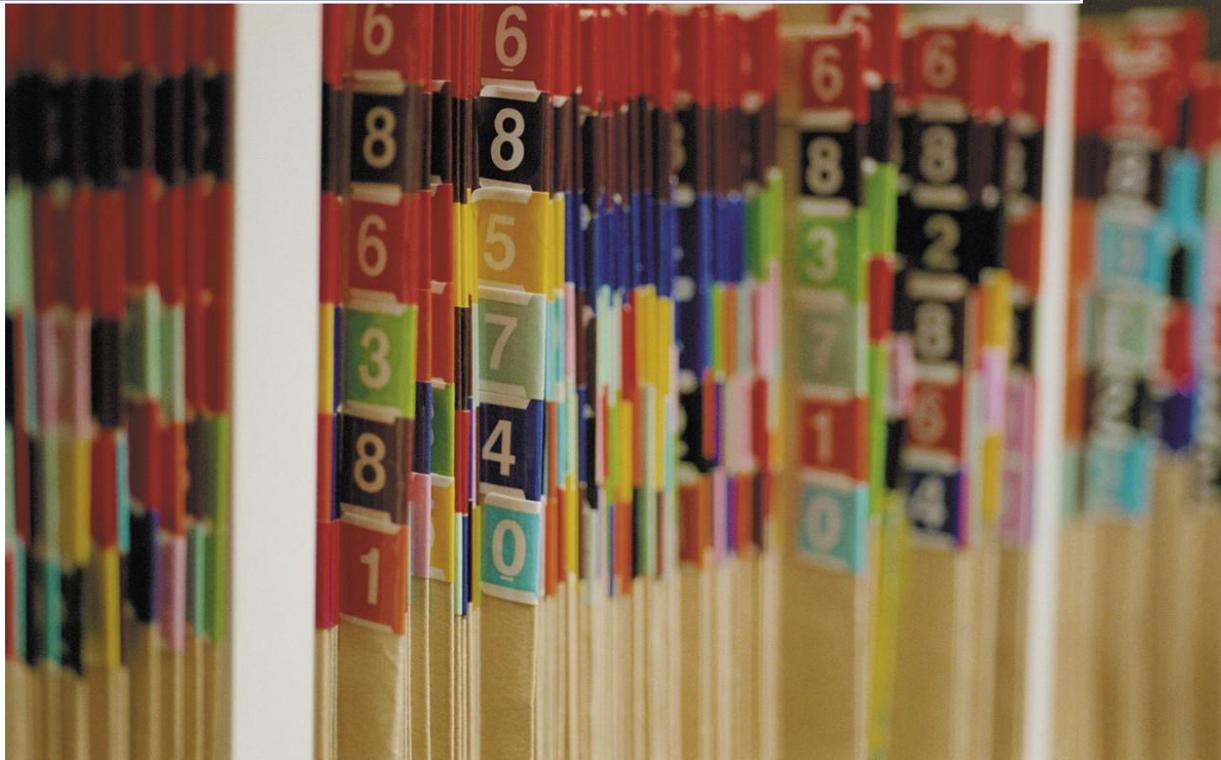




**Version 3.0**

**National Public Health Performance  
Standards**



State Assessment  
Instrument

Note: Modifications introduced in Version 3.0 instruments have been field tested and/or reviewed by subject matter experts or select members of the target audience.



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## Introduction

Thank you for participating in this State Public Health System Performance Assessment! This assessment looks at the functions of not just the state **health department**, but the entire “**public health system**.”

The **public health system** includes all public, private, and voluntary entities that contribute to the public health activities within a given area. These systems are a network of entities with differing roles, relationships, and interactions. (See Figure 1 below for a visual depiction of such a system.) All of the entities within a public health system contribute to the health and well-being of the community.

The Ten Essential Public Health Services provide the framework for this instrument by describing the public health activities that should be undertaken in all states and communities. Hence, the instrument is divided into ten sections, respective of the Essential Services. The standards in each section describe an **optimal level of performance** and capacity to which all public health systems should aspire. This ensures that the contributions of all entities are recognized in assessing the provision of essential public health services. Additionally, the standards stimulate **continuous quality improvement** by serving as a guide for learning about activities throughout the system and determining how to make improvements.

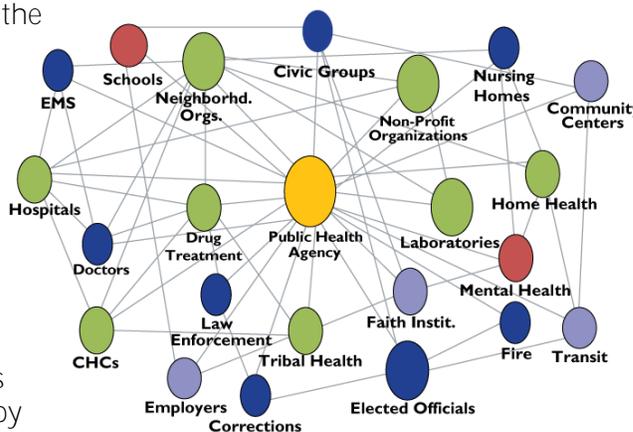


Figure 1: The Public Health System

Dialogue that occurs in answering the questions within the assessment helps state system partners identify the components, competencies, and capacities of their **state’s** public health system.

Completing the assessment can answer questions such as:

- Which partner organizations provide which services within our state?
- How well are we doing?

Identification of system strengths and weaknesses may then be used to improve and better coordinate public health activities throughout the state. In addition, the results gathered provide a better understanding of the state **public health system’s performance**. Most importantly, the results may inform policy and resource decisions leading to an improved public health system.



## Acknowledgements

The National Public Health Performance Standards (NPHPS) Instruments were developed **collaboratively by the program's national partner organizations. The NPHPS partner** organizations include: American Public Health Association (APHA); Association of State and Territorial Health Officials (ASTHO); Centers for Disease Control and Prevention (CDC); National Association of County and City Health Officials (NACCHO); National Association of Local Boards of Health (NALBOH); National Network of Public Health Institutes (NNPHI); and then Public Health Foundation (PHF). We thank the staff of these organizations for their time and expertise in the creation of this guide.

Our deep appreciation is also extended to the many state, local, and board of health representatives who provided their input on the instruments and their subsequent iterations.





## SPHS Essential Service 1: Monitor Health Status to Identify Community Health Problems

*What is going on in our state?  
Do we know how healthy we are?*

### **This service includes**

- Assessment of statewide health status and its determinants, including the identification of health threats and the determination of health service needs
- Analysis of the health of specific groups that are at higher risk for health threats than the general population
- Identification of community assets and resources that support partner organizations in the state public health system (SPHS) to promote health and improve quality of life
- Interpretation and communication of health information to diverse audiences in different sectors
- Collaboration to integrate and manage public health related information systems

### **System partner organizations involved in Essential Service 1 activities may include, but are not limited to:**

- State government agencies with public health responsibilities
- Physicians, nurses, and other reporters of health data
- Hospitals and other health care facilities
- Local public health system organizations involved in data collection and reporting
- Universities or other academic institutions
- Public health institutes
- Public, private, and voluntary organizations that use health data
- Other

As you apply the following model **standards and questions to your state's public health system**, keep in mind that there may be different levels of partner participation for each activity. For example, in some activities, the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



## Model Standard 1.1: Planning and Implementation

SPHS partner organizations work collaboratively to measure, analyze, and communicate about the health status of the **state's** population. Health status is monitored through the collection, analysis, reporting, and use of data describing critical indicators of health, illness, and health resources. Health status data include

- Vital statistics, including births and deaths
- Use of personal health care services
- Environmental and socioeconomic conditions that impact health
- Infectious diseases
- Chronic diseases
- Injuries
- Behavioral risk factors
- Mental health
- Substance abuse
- Policy and practice **indicators (example: CDC's Prevention Status Report)**

These data are analyzed, disseminated, and widely used by systems partners to better understand health needs, focus program and service activities, and assess progress in achieving desired health outcomes. Health monitoring is a collaborative effort involving many state public health partners and local public health systems, including physicians; hospitals and other health care facilities; state and local governmental public health agencies; and other health information reporters and managers. Effective communication of health data and information is a primary goal of all systems partners that participate in this effort to generate new knowledge about health in the state. **End-users' knowledge of a state's health data results for more effective** improvement plans, resource development, and services to meet population health needs.

To accomplish these results, SPHS partner organizations

- Develop and maintain programs that collect health-**related data to measure the state's** health status.
- Produce useful data and information products that are accessible to a variety of data users, including a state health needs assessment (comprehensive, every few years) and state health profiles (shorter, more focused, more frequent) that routinely report on the prevailing health of the people of the state
- Operate a data reporting system to receive and transmit information about reportable diseases and other potential public health threats





### Discussion Items for Model Standard 1.1

Discuss how the SPHS partner organizations maintain data collection and monitoring programs. Does the SPHS monitoring program

- Collect a broad range of data required for monitoring health status?
- Identify roles of state and local governmental agencies and relevant private sector agencies?
- Facilitate access to health-related data for state and local partners, researchers, and other interested groups?
- Protect confidentiality of personal health information?

Discuss how the SPHS partner organizations make health data accessible. Does the SPHS data include

- State comparisons with national health measures, diverse sources, or geo-coding?
- Population health registries?
- A web-based data query system?
- Data reporting capability that encourages electronic data exchange among SPHS partner organizations?
- Widely disseminated data based health reports that describe the prevailing health of the state's population?

Discuss how the SPHS partner organizations work together to maintain a data reporting system. Does the SPHS

- Have written procedures for receiving information on reportable public health threats from the state's public and private laboratories?
- Share information and data regarding reportable public health threats with local and federal public health agencies using National Electronic Disease Surveillance System (NEDSS)-compatible systems?
- Exchange information with partner organizations that may have first contact with public health threats?
- Have the capability to communicate rapidly with potential disease reporters via special alerts (Example: the Health Alert Network)?



## Questions for Model Standard 1.1

1.1.1 How well do SPHS partner organizations maintain data collection and monitoring programs designed to measure the health status of the state's population?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

1.1.2 How well do SPHS partner organizations make health data accessible in useful health data products?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

1.1.3 How well do SPHS partner organizations work together to maintain a data reporting system designed to identify potential public health threats?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

### Model Standard 1.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for local efforts to monitor health status and identify health problems. Many SPHS partner organizations support local agencies to carry out their mission locally, including, but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations actively supports its local members or counterparts, who are themselves partners in local public health systems. Good state-local relationships result in increased local cooperation to collect and use health data for planning and improved service delivery.

To accomplish these results, SPHS partner organizations

- Assist in the interpretation, use, and dissemination of local health data
- Provide a standard set of health-related data to local public health systems and help them access, interpret, and apply these data in policy, planning, and program and service development activities
- Help develop information systems needed to monitor health status at the local level



### Discussion Items for Model Standard 1.2

Discuss how the SPHS partner organizations assist local public health systems with health-related data.

Does the assistance focus on

- Methods to access, analyze, and interpret data, including trends over time?
- Application of state data to local planning and policy activities, including the development of a community health needs assessment and community health profiles?
- Helping media and local constituents understand the meaning of the data?
- Public health informatics competencies for organizational leaders?

Discuss how the SPHS partner organizations work collaboratively to regularly provide local public health systems with data. Do uniform data sets

- Provide comparisons with national and/or state health objectives (Example: Healthy People objectives)
- Become available to local public health systems in a timely fashion?

Discuss how the SPHS partner organizations provide technical support and assistance to local public health systems in the development of information systems. Does the technical support and/or assistance help

- Maintain local health monitoring systems and/or contribute to population health registries?
- Establish criteria and processes for reporting health events?
- Establish electronic health records?

### Questions for Model Standard 1.2

1.2.1 How well do statewide SPHS partner organizations assist (Example: through training or consultations) local public health systems in the interpretation, use, and dissemination of health-related data?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

1.2.2 How well do partner organizations in the SPHS work collaboratively to regularly provide local public health systems with a uniform set of local health-related data?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

1.2.3 How well do SPHS partner organizations provide technical support and assistance to local public health systems in the development of information systems needed to monitor health status at the local level?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |



### Model Standard 1.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their health status monitoring. SPHS partner organizations actively use the information from these reviews to continuously improve the quality of monitoring efforts. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve health status monitoring. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure system-wide performance progress. Active improvement processes based on rigorous reviews of SPHS performance produce more efficient and user-friendly methods to collect data and more effective, relevant data products.

To accomplish these results, SPHS partner organizations

- Review the effectiveness of efforts to monitor health status in order to determine the relevance of existing health data and its effectiveness in meeting user needs
- Manage the overall performance of health status monitoring activities within the state for quality improvement

#### Discussion Items for Model Standard 1.3

Discuss how the SPHS partner organizations work together to review the effectiveness of their efforts to monitor health status. Do these reviews examine the:

- Relevance of existing health-related data?
- Effectiveness of health status monitoring programs use of user feedback to meet needs?
- Changes needed to improve the usefulness of health data, including whether the most effective technology advances are used statewide?

Discuss how the SPHS partner organizations actively manage and improve their collective performance in health status monitoring. Does the SPHS-wide performance management process

- Use relevant standards or benchmarks to establish system-wide expectations for health status monitoring?
- Measure performance and report on progress?
- Conduct ongoing quality improvement activities?



## Questions for Model Standard 1.3

1.3.1 How well do SPHS partner organizations work together to review the effectiveness of their efforts to monitor health status?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

1.3.2 How well do SPHS partner organizations actively manage and improve their collective performance in health status monitoring?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |



### Model Standard 1.4: Public Health Capacity and Resources

SPHS partner organizations effectively invest in and use human, information, technology, organizational, and financial resources to monitor health status and to identify health problems in the state. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts in health status monitoring. The state public health agency enhances the capacity of the SPHS by its leadership in this service. SPHS partner organizations' **workforce** coordinates collective system-wide activities. These investments by all SPHS partner organizations are essential to support a well-functioning system capable of carrying out and improving health status monitoring activities.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources to monitoring health status
- Align organizational relationships to focus statewide assets on monitoring health status
- Use a workforce skilled in collecting, analyzing, disseminating, and communicating health status data and maintaining data management systems

#### Discussion Items for Model Standard 1.4

Discuss how the SPHS partner organizations work together to commit financial resources to monitoring efforts.

- Does the SPHS allocate existing resources, seek new resources, and share financial resources to invest in monitoring efforts?

Discuss how the SPHS partner organizations align and coordinate efforts to monitor health status. Does the SPHS

- Align their strategic plans and coordinate technological resources to improve system performance in monitoring health status?
- Use the leadership of the state public health agency?

Discuss to what extent the SPHS partner organizations have the professional expertise to monitor health status. Is the SPHS partner organizations' workforce

- Skilled in statistics, epidemiology, and information management systems?
- Sufficiently staffed to carry out monitoring of health status activities?



### Questions for Model Standard 1.4

1.4.1 How well do SPHS partner organizations work together to commit financial resources to health status monitoring efforts?

No Activity

Minimal

Moderate

Significant

Optimal

1.4.2 How well do SPHS partner organizations align and coordinate their efforts to monitor health status?

No Activity

Minimal

Moderate

Significant

Optimal

1.4.3 How well do SPHS partner organizations collectively have the professional expertise to carry out health status monitoring activities?

No Activity

Minimal

Moderate

Significant

Optimal



## Summary Notes

## Essential Service 1: Monitor Health Status to Identify Community Health Problems

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/<br>Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|---|---|
| <b>Model Standard 1.1: Planning and Implementation</b>                    |            |   |   |
|   |            |   |   |
| <b>Model Standard 1.2: State-Local Relationships</b>                      |            |   |   |
|   |            |   |   |
| <b>Model Standard 1.3: Performance Management and Quality Improvement</b> |            |   |   |
|   |            |   |   |
| <b>Model Standard 1.4: Public Health Capacity and Resources</b>           |            |   |   |
|   |            |   |   |





## SPHS Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards

*What is going on in our state?*

*Are we ready to respond to health problems or threats?*

### **This service includes**

- Epidemiologic surveillance and investigation of disease outbreaks as well as patterns of infectious and chronic diseases, injuries, and other adverse health conditions
- Population-based screening, case finding, investigation, and the scientific analysis of health problems
- Rapid screening, high volume testing, and active infectious disease epidemiologic investigations

### **System partner organizations involved in Essential Service 2 activities may include, but are not limited to**

- State government agencies with public health responsibilities
- Physicians, nurses, and other reporters of health data
- Hospitals and other health care facilities
- State public health laboratories
- Local public health system organizations involved in disease outbreak investigations, including local health departments and first responders
- State emergency management agency
- Universities or other academic institutions
- Public health institutes
- Public, private, and voluntary organizations that respond to state and community health needs in emergency situations
- Practitioners in epidemiology, chronic disease, infectious disease, injuries, and environmental hazards
- Other

**As you apply the following model standards and questions to your state's public health system,** keep in mind that there may be different levels of partner participation for each activity. For some activities the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



### Model Standard 2.1: Planning and Implementation

State public health system (SPHS) partner organizations work collaboratively to identify and respond to public health threats, including infectious disease outbreaks, chronic disease prevalence, serious injuries, environmental contaminations, natural disasters, risk of exposure to chemical and biological hazards, and other threats. Data collection through surveillance, use of laboratories to examine threats and hazards, and analysis of disease patterns by epidemiologists together form a core diagnostic function in the state public health system. Mounting an appropriate response to disease outbreaks, unacceptable chronic disease prevalence, or a bioterrorism threat requires solid and credible information and analysis to understand the scope and causes of the problem.

Active participation of many SPHS partner organizations is needed for effective diagnosis and investigation of health problems. In addition to the leadership of the state public health agency, the contributions of other entities are essential, including, but not limited to, hospitals, physicians, nurses, emergency management agencies, public and private clinical and environmental laboratories, local health departments, first responders, epidemiologists, and experts in chronic diseases, infectious diseases, injuries, and environmental toxicology.

Maintenance of a well-functioning diagnosis and investigation system within the SPHS produces critically important outputs. Credible information gathering and analysis of health problems **increases the public's understanding and the decision-**makers about appropriate responses. SPHS partner organization responses to health problems can be better targeted to affected populations and designed to address the causes of the problem. The evidence base for collective public health actions begins with a solid diagnosis and investigation function within the SPHS.

To accomplish these results, SPHS partner organizations

- Operate a broad scope of surveillance and epidemiology services to identify and analyze health problems and threats to the health of **the state's population**
- Establish and maintain the capability to initiate enhanced surveillance in the event of an emergency
- Organize public and private laboratories in the state into an effectively functioning laboratory system
- Use public and private laboratories that have the capacity to analyze clinical and environmental specimens in the event of suspected exposures and disease outbreaks
- Respond to public health problems and hazards

Note: The SPHS may operate more than one surveillance system. In the Model Standard and **measures for Model Standard 2.1, "system" should therefore be interpreted broadly to include** the complete collection of surveillance systems operated by the SPHS.



### Discussion Items for Model Standard 2.1

Discuss how the SPHS partner organizations operate surveillance and epidemiology activities. Does the scope of the activities include

- Chronic disease, injury, environmental hazards, maternal and child health, and all-hazards and threats?
- Conducting analysis, examining trends, and integrating the state surveillance with national and local surveillance systems?
- Conducting epidemiological studies of disease patterns, risk factors, and evidence based programs?

Discuss how the SPHS partner organizations maintain the capability to initiate enhanced surveillance. Does the SPHS

- Have the capacity to expand activities when needed and is there a prompt communication process and protocol to initiate enhanced surveillance?
- Have written protocols to assure deployment and coordination of epidemiologic expertise, laboratory capacity, and health care provider participation to identify potential public health threats?
- Have plans in place for deploying state government resources and for enhanced surveillance with efforts coordinated according to emergency management plans?

Discuss how the SPHS partner organizations organize their private and public laboratories. Does the SPHS maintain

- A network of appropriately licensed laboratories, led by the state public health laboratory, that can collectively identify all notifiable diseases and conditions?
- A list or inventory of all laboratories and their analysis capacities, including public health labs, clinical labs, environmental labs, and commercial labs in a portable database that is backed up off-site?
- The confirmed ability to communicate electronically with all clinical laboratories in the state within an hour?
- Linkages among environmental, food, blood, veterinary, and forensic laboratories and does it participate fully in the National Laboratory Response Network?

Discuss how the SPHS partner organizations maintain in-state laboratories with the capacity to analyze clinical and environmental specimens. Do the testing capabilities of the SPHS partner organizations include

- Clinical testing capability, including identifying pathogenic micro-organisms, anti-microbial resistant infections, newborn testing, as well as access to laboratories capable of testing rare infectious agents?
- Environmental testing capability including testing on water, air, and soil, as well as access to laboratories capable of testing rare environmental agents?

Discuss how the SPHS partner organizations work together to respond to identified public health threats. Does the SPHS

- Have plans, protocols, communications systems, and multidisciplinary rapid response teams in place to support effective coordinated response to public health threats?
- Use a communication system designed to alert health officials and inform policymakers of possible threats?
- Maintain agreements to perform testing if the state's capacity becomes overloaded?



## Questions for Model Standard 2.1

2.1.1 How well do SPHS partner organizations operate surveillance and epidemiology activities that identify and analyze health problems and threats to the health of the state's population?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

2.1.2 How well do SPHS partner organizations maintain the capability to rapidly initiate enhanced surveillance when needed for a statewide/regional health threat?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

2.1.3 How well do SPHS partner organizations organize their private and public laboratories (within the state and outside of the state) into a well-functioning laboratory system?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

2.1.4 How well do SPHS partner organizations maintain in-state laboratories with the capacity to analyze clinical and environmental specimens in the event of suspected exposure or disease outbreak?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

2.1.5 How well do SPHS partner organizations work together to respond to identified public health threats?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |





### Model Standard 2.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for local efforts to identify, analyze, and respond to public health problems and threats. Many SPHS partner organizations support local agencies to carry out their mission locally, including, but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members or counterparts, who are themselves partners in local public health systems. Good state-local relationships result in increased cooperation in the collection and use of disease-specific data. Organizations in the local public health system are more prepared to use data and evidence in the design of program interventions to mitigate health problems.

To accomplish these results, SPHS partner organizations

- Assist local public health systems in the interpretation of epidemiologic analyses and laboratory findings
- Provide information and guidance about possible public health threats and appropriate responses to these threats by local public health systems

#### Discussion Items for Model Standard 2.2

Discuss how well the SPHS partner organizations provide assistance to local public health systems regarding epidemiology.

- Does the SPHS provide training or technical assistance on how to access epidemiological services, report data, interpret epidemiological findings, conduct investigations, and access and interpret laboratory data?

Discuss how the SPHS partner organizations provide local public health with information and guidance about public health problems and threats. Does the SPHS offer

- Analysis of the incidence and prevalence of disease and other adverse health conditions?
- Current guidance related to the most effective methods of disease prevention and control?
- Trained personnel to assist local communities in the investigations?
- Guidance for response to emergencies?

#### Questions for Model Standard 2.2

2.2.1 How well do SPHS partner organizations provide assistance (through consultations and/or training) to local public health systems in the interpretation of epidemiologic and laboratory findings?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

2.2.2 How well do SPHS partner organizations provide local public health systems with information and guidance about public health problems and potential public health threats (Examples: health alerts, consultations)?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |



### Model Standard 2.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in diagnosing and investigating health problems. SPHS partner organizations actively use the information from these reviews to continuously improve the quality and responsiveness of their efforts. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve diagnosis and investigation services. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS performance produce more efficient, relevant, and timely analytic products. These products, in turn, enable more effective SPHS investigation and responses to improve population health.

To accomplish these results, SPHS partner organizations

- Review the effectiveness of their state surveillance and investigation procedures using **published guidelines, including CDC's Updated Guidelines for Evaluating Public Health Surveillance Systems and CDC's measures and benchmarks for emergency preparedness**
- Manage the overall performance of diagnosis and investigation activities in the state for the purpose of quality improvement

#### Discussion Items for Model Standard 2.3

Discuss how the SPHS partner organizations review effectiveness of the state surveillance and investigation system.

Does the SPHS examine

- Whether surveillance is based on current public health science?
- The timeliness and relevance of reports and findings?
- Whether the state's investigation and response plans meet national standards?
- Results of table-top exercises, functional exercises, and full-scale exercises?
- Whether surge capacity is sufficient?

Discuss whether the SPHS partner organizations manage and improve their performance in diagnosing and investigating health problems and hazards. Does the SPHS

- Use relevant standards to establish system-wide expectation?
- Measure performance and report on progress to partners?
- Conduct on-going quality improvement activities?



### Questions for Model Standard 2.3

2.3.1 How well do SPHS partner organizations periodically review the effectiveness of the state surveillance and investigation system?

No Activity

Minimal

Moderate

Significant

Optimal

2.3.2 How well do SPHS partner organizations actively manage and improve their collective performance in diagnosing and investigating health problems and hazards?

No Activity

Minimal

Moderate

Significant

Optimal



### Model Standard 2.4: Public Health Capacity and Resources

SPHS partner organizations effectively invest in and use human, information, technology, organizational, and financial resources to diagnose and investigate health problems and hazards **that affect the state's population. Coordinated use of system assets is grounded in the alignment** of organizational strategic plans around collective efforts in diagnosing and investigating health problems. The state public **health agency enhances the SPHS's capacity by its leadership in this service. SPHS partner organizations' workforce coordinates collective system**-wide activities. These investments in diagnosis and investigation services by all SPHS partner organizations are essential for a well-functioning system capable of understanding health problems, responding to them quickly and appropriately, and preventing them in the future.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources for diagnosing and investigating health problems and hazards
- Align organizational relationships to focus statewide assets on diagnosis and investigation of health problems
- Use a workforce skilled in epidemiology and laboratory science to identify and analyze public health problems and hazards and to conduct investigations of adverse public health events

#### Discussion Items for Model Standard 2.4

Discuss how the SPHS partner organizations work together to commit financial resources to support diagnosis and investigation.

- Does the SPHS allocate existing resources, seek new resources, and share financial resources to invest in diagnosis and investigation?

Discuss how well the SPHS partner organizations align and coordinate their efforts to support diagnosis and investigation.

Does the SPHS

- Align their strategic plans and coordinate technological resources to improve system performance in diagnosing and investigation?
- Use the leadership of the state public health agency?

Does the state public health agency work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss to what extent the SPHS partner organizations have the professional expertise to identify and analyze public health threats. Is the SPHS partner organizations' workforce

- Skilled in detecting and investigating health problems?
- Sufficiently staffed to carry out diagnosis and investigation activities?
- Skilled in statistics, epidemiology, and information management systems?
- Sufficiently staffed to carry out monitoring of health status activities?



### Questions for Model Standard 2.4

2.4.1 How well do SPHS partner organizations work together to commit financial resources to support the diagnosis and investigation of health problems and hazards?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

2.4.2 How well do SPHS partner organizations align and coordinate their efforts to diagnose and investigate health hazards and problems?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

2.4.3 How well do SPHS partner organizations collectively have the professional expertise to identify and analyze public health threats and hazards?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |



Summary Notes

Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|--|---|
| <b>Model Standard 2.1: Planning and Implementation</b>                    |            |  |   |
|   |            |  |   |
| <b>Model Standard 2.2: State-Local Relationships</b>                      |            |  |   |
|   |            |  |   |
| <b>Model Standard 2.3: Performance Management and Quality Improvement</b> |            |  |   |
|   |            |  |   |
| <b>Model Standard 2.4: Public Health Capacity and Resources</b>           |            |  |   |
|   |            |  |   |





## SPHS Essential Service 3: Inform, Educate, and Empower People about Health Issues

*What is going on in our state?*

*How well do we keep all people and segments of our state informed about health issues?*

### **This service includes**

- Health information, health education, and health promotion activities designed to reduce health risk and promote better health
- Health communication plans and activities such as media advocacy, social marketing, and risk communication
- Accessible health information and educational resources
- Partnerships with schools, faith communities, work sites, personal care providers, and others to implement and reinforce health education and health promotion programs and messages

### **System partner organizations involved in Essential Service 3 activities may include, but are not limited to**

- State government agencies with public health responsibilities
- Hospitals, physicians, nurses, and other health care providers engaged in health education
- Not-for-profit statewide health associations concerned with education around specific health conditions
- Local public health system partner organizations engaged in community health promotion
- Universities or other academic institutions
- Public health institutes
- Health insurers and foundations that fund health projects
- Health communications professionals
- Other

As you apply the following model standards and questions to your state's public health system, keep in mind that there may be different levels of partner participation for each activity. For example, in some activities, the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



### Model Standard 3.1: Planning and Implementation

State public health system (SPHS) partner organizations actively create, communicate, and deliver health information and preventive health programs and services using customer-centered and science-based strategies to protect and promote the health of diverse populations. SPHS partner organizations support SPHS health improvement objectives and respond to public health issues with health communication and health education and promotion interventions based on the best available evidence of effectiveness in helping people make healthy choices throughout their lives. Partner organizations use the National Prevention Strategy as a blueprint for an approach to prevention within the state. The National Prevention Strategy is a comprehensive plan that includes actions that public and private partners can take to improve **the nation's health all of which are guided by evidence-based strategies**. SPHS partner **organizations are committed to working collaboratively to prevent chronic disease in the state's** population now and, by doing so, reduce the pain, suffering, and costs associated with the treatment of chronic diseases later. SPHS partner organization activities recognize the social determinants of health and use prevention programs to focus on reducing and eliminating health disparities in at-risk populations.

Health education is used extensively to convey information to individuals and groups about steps that they can take to improve their health (Example: information to motivate smokers to enter smoking cessation programs). SPHS partner organizations conduct health promotion as a concerted effort to influence political, regulatory, educational, and civic processes to create living conditions conducive to better health.

**The state's population understands and uses timely health information to** protect and promote their personal health and the health of their families and communities. Health communications are culturally and linguistically appropriate and are delivered through multiple media channels to enhance their effectiveness and reach into high risk populations.

Many SPHS partner organizations conduct activities designed to inform and educate people about health issues.

To maximize effectiveness of health messages and health promotion, organizational work is coordinated among governmental, private and voluntary sector organizations, including state and local health departments, state agencies with public health functions, educational organizations, health care providers, insurers, foundations, associations working to reduce risks for certain diseases, and consumer groups targeted to receive health messages.

Effective health education, promotion, and communication results in a knowledgeable population that can act to reduce health risks associated with chronic disease, infectious disease, and injuries.

To accomplish these results, SPHS partner organizations

- **Implement health education programs and services to help meet the state's health** improvement objectives and promote healthy behaviors
- Implement health promotion initiatives and programs **to help meet the state's health** improvement objectives, reduce risks, and promote better health
- Design and implement health communications to reach wide and diverse audiences with information that enables people to make healthy choices
- Maintain an effective emergency communications capacity to ensure rapid communications response in the event of a crisis



### Discussion Items for Model Standard 3.1

Discuss how the SPHS partner organizations implement health education programs and services. Do the SPHS programs and services

- Have a sound basis in theory, evidence of effectiveness, best practices, and/or consider National Prevention Strategy recommendations?
- Address priorities and objectives in the state health improvement plan?
- Identify at risk populations and reach diverse target populations with higher risk of illness?
- Emphasize health behaviors?
- Get carried out collaboratively?

Discuss how the SPHS partner organizations implement health promotion initiatives and programs. Do the SPHS promotion initiatives

- Have a sound basis in theory, evidence of effectiveness, and/or best practices?
- Use recommendations in the National Prevention Strategy and/or CDC's Guide to Community Preventive Services?
- Focus on understanding the social determinants of health?
- Accomplish state health improvement objectives and priorities?
- Allow modifications by local public health systems?
- Advocate for social, economic, and/or environmental changes?
- Include expertise of multi-disciplinary teams and get carried out collaboratively?

Discuss how the SPHS partner organizations implement health communications. Do the SPHS communications

- Have a basis in established health communication theories and best practices?
- Comply with statewide policies for creating, sharing, and disseminating effective health messages?
- Use a coordinated media strategy, taking advantage of multiple channels for dissemination of health information?
- Focus on understanding the target population?
- Deliver targeted public health messages and materials to at-risk populations with content and materials that are culturally and linguistically appropriate?

Discuss how the SPHS partner organizations maintain a crisis communications plan. Does the SPHS emergency communications plan include

- Responsibilities for emergency communications teams established in accordance with National Incident Management System (NIMS)?
- Policies and procedures to coordinate communications with state and local emergency management agencies and disseminate information among partners and the public?
- Adequate resources to ensure rapid communications response, such as redundant communication devices and trained staff (Example: Health Alert Network)?
- Content for different types of emergencies and content targeted to different audiences?
- Use of risk communication principles in developing health communication messages?



### Questions for Model Standard 3.1

3.1.1 How well do SPHS partner organizations implement health education programs and services designed to promote healthy behaviors?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

3.1.2 How well do SPHS partner organizations implement health promotion initiatives and programs designed to reduce health risks and promote better health?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

3.1.3 How well do SPHS partner organizations implement health communications designed to enable people to make healthy choices?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

3.1.4 How well do SPHS partner organizations maintain a crisis communications plan to be used in the event of an emergency?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |





### Model Standard 3.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for local efforts to inform, educate, and empower people about health issues. Many SPHS partner organizations support local agencies to carry out their mission locally, including but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members or counterparts, who are themselves partners in local public health systems. Good state-local relationships result in increased cooperation with local public health systems to plan and implement effective health education, health promotion, and health communication activities.

To accomplish these results, SPHS partner organizations

- Provide technical assistance to develop skills and strategies for effective local health communication, health education, and health promotion interventions
- Support and assist local public health systems in developing effective emergency communication capabilities

#### Discussion Items for Model Standard 3.2

Discuss how the SPHS partner organizations provide technical assistance to local public health systems to develop skills and strategies to conduct health communication, education, and promotion. Does the SPHS assistance include

- Selecting, planning, and implementing health education and health promotion services using recommendations, such as those from *The Community Guide to Preventive Services*?
- Using evidence of effectiveness to select health communication resources?
- Evaluating health communication, health education, and promotion resources?
- Using social marketing techniques to develop health promotion initiatives?
- Targeting populations at high risk of poor health?

Discuss how the SPHS partner organizations support and assist local public health systems in developing emergency communications capabilities. Does the SPHS support and assistance address

- Development of emergency communications plans that can be used in different types of emergencies policies and procedures for linking with state emergency communications plans?
- Rapid communications response, including the use of a Health Alert Network, redundant communications, and communications surge capacity?
- Training new and current staff in crisis/emergency communications?
- Applying risk communication principles in developing health communication messages?



### Questions for Model Standard 3.2

3.2.1 How well do statewide SPHS partner organizations provide technical support and assistance to local public health systems (through consultations, training, and/or policy changes) to develop skills and strategies to conduct health communication, education, and promotion?

No Activity



Minimal



Moderate



Significant



Optimal



3.2.2 How well do statewide SPHS partner organizations support and assist local public health systems in developing effective emergency communications capabilities?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 3.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in informing, educating, and empowering people about health issues. SPHS partner organizations actively use the information from these reviews to continuously improve the quality of their efforts. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve health education, promotion, and communications activities. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS performance produce more effective efforts to create an environment, in which people can live healthy lives.

To accomplish these results, SPHS partner organizations

- Review the effectiveness and appropriateness of their health communication, education, and promotion services
- Manage the overall performance of SPHS activities to inform, educate, and empower people about health issues for the purpose of quality improvement

#### Discussion Items for Model Standard 3.3

Discuss how the SPHS partner organizations review the effectiveness of health communication, education, and promotion services. Do the SPHS reviews

- Assure that content of health messages is accurate and current?
- Assess the effectiveness and appropriateness of the programs and interventions?
- Include the participation of the populations served by health education and promotion efforts?
- Assess the effectiveness of efforts to target special populations with culturally and linguistically appropriate resource materials?
- Assess the effectiveness of media strategy(s) and other means of distributing health messages?

Discuss how the SPHS partner organizations actively manage and improve their performance to inform, educate, and empower people about health issues. Does the SPHS performance management process

- Use relevant standards or benchmarks to establish system-wide expectations for informing, educating, and empowering people about health issues?
- Measure performance and report on progress?
- Conduct ongoing quality improvement activities using performance information?



### Questions for Model Standard 3.3

3.3.1 How well do SPHS partner organizations periodically review the effectiveness of health communication, education, and promotion services?

No Activity



Minimal



Moderate



Significant



Optimal



3.3.2 How well do SPHS partner organizations actively manage and improve their collective performance to inform, educate, and empower people about health issues?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 3.4: Public Health Capacity and Resources

SPHS partner organizations effectively invest in and use human, technology, information, organizational, and financial resources to inform, educate, and empower people about health issues. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts in health education, promotion, and communication. The state **public health agency enhances the SPHS's capacity its leadership activities in this service. SPHS partner organizations' workforce coordinates collective system-wide activities.** These investments in informing and educating people by all SPHS partner organizations are essential for a well-functioning system capable of empowering people to gain knowledge and act to reduce their health risks.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources to inform, educate, and empower people about health issues
- Align organizational relationships to focus statewide assets on health communication, education, and promotion services
- Use a competent workforce skilled in developing and implementing health communication, education, and promotion interventions

#### Discussion Items for Model Standard 3.4

Discuss how the SPHS partner organizations commit financial resources to health communication, education, and promotion efforts.

- Does the SPHS allocate existing resources, seek new resources, and share financial resources to invest in workforce development?

Discuss how the SPHS partner organizations align and coordinate efforts to implement health communication, education, and promotion services. Does the SPHS

- Align their strategic plans and coordinate technological resources to improve system performance in informing, educating, and empowering people about health issues?
- Use the leadership of the state public health agency?
  - Does the state public health agency work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss how the SPHS partner organizations have the professional expertise to carry out effective health communication, education, and promotion services. Is the SPHS partner organizations' workforce

- Skilled in health education, promotion, and communication?
- Sufficiently staffed to carry out efforts to inform, educate, and empower the public?



### Questions for Model Standard 3.4

3.4.1 How well do SPHS partner organizations work together to commit financial resources to health communication, education, and promotion efforts?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

3.4.2 How well do SPHS partner organizations align and coordinate their efforts to implement health communication, education, and promotion services?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

3.4.3 How well do SPHS partner organizations collectively have the professional expertise to carry out effective health communication, education, and promotion services?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |





## Summary Notes

## Essential Service 3: Inform, Educate, and Empower People about Health Issues

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|--|---|
| <b>Model Standard 3.1: Planning and Implementation</b>                    |            |  |   |
|   |            |  |   |
| <b>Model Standard 3.2: State-Local Relationships</b>                      |            |  |   |
|   |            |  |   |
| <b>Model Standard 3.3: Performance Management and Quality Improvement</b> |            |  |   |
|   |            |  |   |
| <b>Model Standard 3.4: Public Health Capacity and Resources</b>           |            |  |   |
|   |            |  |   |



## SPHS Essential Service 4: Mobilize Partnerships to Identify and Solve Health Problems

### *What is going on in our state? Are we engaging all possible partners?*

This service includes

- Building a statewide partnership collaborating in the performance of public health functions and Essential Services in an effort to use the full range of available human and **material resources for improving the state's health status**
- The leadership and organizational skills to convene statewide partners (including non-traditional partners) to identify public health priorities and create effective solutions for state and local health problems
- Assistance to partners and communities to organize and undertake actions to improve **the health of the state's communities**

System partner organizations involved in **Essential Service 4** activities may include, but are not limited to

- State government agencies with public health responsibilities
- Physicians, nurses, and other personal health care providers
- Hospitals and other health care facilities
- Local health departments and other public health system organizations
- Health insurers
- Universities or other academic institutions
- Public health institutes
- Public, private, and voluntary organizations involved in statewide and local health improvement activities, including faith-based organizations
- Business and labor leaders
- Environmental health organizations
- Organizations that address social determinants of health (Examples: housing, education, infrastructure planning, community development, and transportation)
- Other

**As you apply the following model standards and questions to your state's public health system,** keep in mind that there may be different levels of partner participation for each activity. For example, in some activities, the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



### Model Standard 4.1: Planning and Implementation

State public health system (SPHS) partner organizations conduct a variety of community engagement practices to build and expand statewide partnership alliances. Partnership **relationships are built and sustained by mutual interest in improving the health of the state's population** and in increasing the effectiveness of collective actions designed to improve health. Leaders in the sponsoring organizations recognize the value in collaborative efforts and carry out a vision of inclusion of stakeholders from public, private, and voluntary sectors in the state. Collaborative relationships take tangible forms in task forces, problem-specific coalitions, and ongoing sustained partnerships. The active presence of a formal state public health system partnership that identifies and solves health problems is potentially the most far-reaching of these practices.

A wide variety of SPHS partner organizations are actively engaged in task forces, coalitions, and partnerships, including state governmental agencies, local governmental agencies, private sector organizations, and not-for profit organizations. All of these multi-sector groups come together around issues of importance to their organizations and the well-**being of the state's population**.

Mobilizing effective multi-sector partnerships can produce a number of important results. Greater awareness and understanding of health and public health system problems can help to build a constituency for public health and shared ownership of statewide solutions to those problems. Collective action by many organizations is often necessary to solve difficult problems and partnership activities can be a powerful driving force for joint assessment, planning, advocacy, and implementation.

To accomplish these results, SPHS partner organizations

- Engage and convene organizations into task forces and coalitions to address health problems in the state and build statewide support for solutions
- Organize partnerships for public health to foster the development of state health needs assessments and improvement plans, the sharing of resources, responsibilities, collaborative decision-making, and accountability for delivering the Essential Services at the state and local levels



**Discussion Items for Model Standard 4.1**

Discuss how the SPHS partner organizations build statewide support for public health issues. Do SPHS partner organizations

- Form task forces and coalitions for a wide scope of statewide health issues?
- Identify new and existing partners for specific health concerns?
- Develop a shared understanding of the social determinants of health and risk factors associated with health problems?
- Maintain linkages with stakeholders to facilitate communication and optimize resource sharing?
- Regularly communicate with stakeholders about priority health issues?
- Implement joint efforts to strengthen public health resources at the state and local level?
- Use collaborative processes to brief state and local elected officials on priority health issues?

Discuss how the SPHS partner organizations formalize sustained partnerships. Do these partnerships

- Conduct collaborative decision-making and action?
- Develop a state health needs assessment (See 1.1.2)?
- Develop a state health improvement plan (See 5.1.1 and 5.1.2)?
- Maximize resources to deliver the Essential Public Health Services?
- Collaborate with a broad representation of partners?

**Questions for Model Standard 4.1**

4.1.1 How well do SPHS partner organizations mobilize task forces, ad hoc study groups, and coalitions to build statewide support for public health issues?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

4.1.2 How well do SPHS partner organizations organize formal sustained partnerships to identify and solve health problems?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |





### Model Standard 4.2: State-Local Relationships

SPHS partner organizations engage in robust partnerships with local public health systems to provide technical assistance, capacity building, and resources for local community partnership development. Many SPHS partner organizations support local agencies to carry out their mission locally, including but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members, who are themselves partners in local public health systems. Good state-local relationships result in increasingly effective local collaborations and partnerships focused on improved community health.

To accomplish these results, SPHS partner organizations

- Assist local public health systems to build competencies in community development, advocacy, collaborative leadership, and partnership management
- Provide incentives for local partnership development

#### Discussion Items for Model Standard 4.2

Discuss how the SPHS partner organizations provide assistance local public health systems to build partnerships.

Is assistance provided in

- Effective community (economic and infrastructure) development models?
- Constituency and advocacy development?
- Coalition building and maintenance?
- Media relations?
- Collaborative leadership?

Discuss how the SPHS partner organizations provide incentives for local public health systems partnerships.

Is assistance provided in

- Effective community (economic and infrastructure) development models?
- Constituency and advocacy development?
- Coalition building and maintenance?
- Media relations?
- Collaborative leadership?
- Education?



## Questions for Model Standard 4.2

4.2.1 How well do statewide SPHS partner organizations provide assistance (through consultations and/or trainings) to local public health systems to build partnerships for community health improvement?

No Activity

Minimal

Moderate

Significant

Optimal

4.2.2 How well do statewide SPHS partner organizations provide incentives for broad-based local public health system partnerships (instead of only single-issue task forces) through grant requirements, financial incentives, and/or resource sharing?

No Activity

Minimal

Moderate

Significant

Optimal





### Model Standard 4.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in mobilizing partnerships. SPHS members actively use the information from these reviews to continuously improve the quality of their partnership efforts. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve partnership development. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS performance produce more active and effective engagement of organizations within the SPHS and a better collective effort to improve health and the public health system.

To accomplish these results, SPHS partner organizations

- Review the effectiveness of their partnership efforts
- Manage the overall performance of their partnership activities for the purpose of quality improvement

#### Discussion Items for Model Standard 4.3

Discuss how the SPHS partner organizations review their partnership development activities. Do these reviews examine

- The content of health messages to assure they are accurate and current?
- The participation and commitment of its policy leaders and systems partners (See 4.1.2 for scope of participation)?
- The effectiveness of partnership participation in solving health problems?
- The satisfaction of constituents with SPHS efforts?
- The breadth of understanding of partnership members?

Discuss how the SPHS partner organizations manage and improve their performance in partnership activities.

Does the SPHS performance management process

- Use relevant standards to establish system-wide expectations for partnership efforts?
- Measure performance and report on progress of partner organizations?
- Conduct ongoing quality improvement activities?



### Questions for Model Standard 4.3

4.3.1 How well do SPHS partner organizations review their partnership development activities?

No Activity



Minimal



Moderate



Significant



Optimal



4.3.2 How well do SPHS partner organizations actively manage and improve their collective performance in partnership activities?

No Activity



Minimal



Moderate



Significant



Optimal





#### Model Standard 4.4: Public Health Capacity and Resources

SPHS partner organizations effectively invest in and use human, information, technology, organizational, and financial resources to assure that their partnership mobilization efforts meet **the needs of the state's population**. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts in working within **partnerships**. **The state public health agency enhances the SPHS's capacity by its leadership in this service**. **SPHS partner organizations' workforce coordinates collective system-wide activities**. These investments by all SPHS partner organizations in statewide engagement and mobilization efforts are essential for a well-functioning system capable of carrying out and improving collective action to improve health through partnerships.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources to sustain partnerships and support their actions
- Align organizational relationships to focus statewide assets on partnerships
- Use a workforce skilled in assisting partners to organize and act on behalf of the health of the public

#### Discussion Items for Model Standard 4.4

Discuss how the SPHS partner organizations commit financial resources to sustain partnerships.

- Does the SPHS allocate existing resources, seek new resources, and share financial resources to sustain partnerships?

Discuss how the SPHS partner organizations align and coordinate efforts to mobilize partnerships.

Does the SPHS

- Align their strategic plans and coordinate technological resources to improve system performance in workforce development?
- Work toward partnership growth by incorporating new partners?
- Use the active role of the state public health agency in mobilizing partnerships?
  - Does the state public health agency work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss how the SPHS partner organizations have the expertise to carry out partnership development activities.

Is the SPHS workforce

- Skilled in collaborative groups processes?
- Sufficiently staffed to carry out partnership development activities?



## Questions for Model Standard 4.4

4.4.1 How well do SPHS partner organizations commit financial resources to sustain partnerships?

No Activity



Minimal



Moderate



Significant



Optimal



4.4.2 How well do SPHS partner organizations align and coordinate their efforts to mobilize partnerships?

No Activity



Minimal



Moderate



Significant



Optimal



4.4.3 How well do SPHS partner organizations collectively have the professional expertise to carry out partnership development activities?

No Activity



Minimal



Moderate



Significant



Optimal





## Summary Notes

## Essential Service 4: Mobilize Partnerships to Identify and Solve Health Problems

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|--|---|
| <b>Model Standard 4.1: Planning and Implementation</b>                    |            |  |   |
|   |            |  |   |
| <b>Model Standard 4.2: State-Local Relationships</b>                      |            |  |   |
|   |            |  |   |
| <b>Model Standard 4.3: Performance Management and Quality Improvement</b> |            |  |   |
|   |            |  |   |
| <b>Model Standard 4.4: Public Health Capacity and Resources</b>           |            |  |   |
|   |            |  |   |



## SPHS Essential Service 5: Develop Policies and Plans that Support Individual and Statewide Health Effort

### *What is going on in our state?*

### *How effective are we in planning and in setting health policies?*

This service includes

- Systematic health planning that relies on appropriate data, develops, and tracks measurable health objectives and establishes strategies and actions to guide health improvement at the state and local levels
- Development of legislation, codes, rules, regulations, ordinances, and other policies to enable performance of the Essential Public Health Services, supporting individual, community, and state health efforts
- The process of dialogue, advocacy, and debate among groups affected by the proposed health plans and policies prior to adoption of such plans or policies

System partner organizations involved **Essential Service 5** in activities may include, but are not limited to

- State health department and other state government agencies with public health responsibilities
- Physicians, nurses, and other personal health care providers
- Hospitals and other health care facilities
- Local health departments and other local public health system organizations
- Universities or other academic institutions
- Public health institutes
- State emergency management agency
- Voluntary health associations
- Organizations that address the social determinants of health (Examples: education, housing, transportation, faith community)
- Public, private, and voluntary organizations actively involved in statewide policy development
- State legislature and the governor's office**
- Other

As you apply the following **model standards and questions to your state's public health system**, keep in mind that there may be different levels of partner participation for each activity. For example, in some activities the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



### Model Standard 5.1: Planning and Implementation

State public health system (SPHS) partner organizations work collaboratively to conduct comprehensive and strategic health improvement planning and policy development. Planning processes integrate health status information, public input and communication, analysis of policy options, and recommendations for action based on the best evidence. Planning and policy development activities are conducted by collaborative SPHS groups for disease-specific or issue-oriented problems, such as HIV prevention planning, planning for improvement of physical activity levels, and implementation of health reform programs in the state. SPHS partner organizations use the results of these statewide collaborative processes and develop a state health improvement plan that outlines broad overall health and public health system SPHS priorities. The state health improvement plan also uses the state health needs assessment and the results of systems assessments, such as this NPHPS assessment, to develop its overall blueprint for collective action to improve health and systems performance at the state level. All-hazards plans for statewide emergency preparedness are developed and implemented using similar collaborations with SPHS partner organizations. Policy development is prompted by issue-oriented collaborative groups or statewide improvement plans. Policy development actively involves partner organizations in communication and advocacy for new laws or regulations that will improve population health.

All SPHS partner organizations participate in policy and planning activities in the state. Leadership to convene collaborative groups for planning and policy development is dispersed but coordinated across the system, enabling any SPHS partner organizations to convene planning and policy groups to consider important health system topics. Public, private, and voluntary agencies are included in planning and policy processes and their implementation.

Multi-sector approaches to planning and policy development result in greater acceptability of plans and policy proposals and broader collective responsibility for implementation. Strategic plans developed by SPHS partner organizations recognize and address their role in implementing broad strategies outlined in the state health improvement plan. This alignment of **partners' organizational strategic plans and the SPHS state health improvement plan** provides a powerful foundation for statewide implementation of policy and plan objectives to improve **public health performance and the health of the state's population.**

To accomplish these results, SPHS partner organizations

- Develop statewide health improvement processes that convene partners for collaborative planning and implementation of needed improvements in the public health system
- Produce a state health improvement plan(s) that outlines strategic directions for statewide improvements in health promotion, disease prevention, and response to emerging public health problems
- Establish and maintain system-wide emergency response capacity, plans and protocols for all-hazards, addressing multi-agency coordination and readiness
- Engage in health policy development activities and take necessary actions to **communicate and advocate for policies that affect the public's health**



### Discussion Items for Model Standard 5.1

Discuss how the SPHS partner organizations implement statewide health improvement processes.

Do participants in planning processes

- Include state and community-level leaders as well as populations affected by health improvement efforts?
- Review health data about the problem?
- Consider evidence of best practices in designing implementation options?
- Identify statewide health improvement priorities, recommend measurable objectives, and propose collaborative approaches to accomplish the objectives?

Discuss how the SPHS partner organizations develop health improvement plan(s).

Does the state health improvement plan

- Use the data and information from state health profiles and the state health needs assessment?
- Set priorities from the problems identified in assessments of health status and the performance of the state public health system?
- Address strategies for the state, including strategic health improvement goals and objectives?
- Do these objectives and strategies specify measurable indicators used to monitor progress toward achievement of health objectives?

Discuss how the SPHS partner organizations have in place an all-hazards preparedness plan.

Does the all-hazards preparedness plan

- Align system-wide interdisciplinary planning and implementation of a public health response?
- Identify objectives and strategies and address systems changes to improve the readiness of public health in responding to emergency and disaster situations?
- Specify operational responsibilities for state, local, public, and private organizations in the event of an emergency?

Discuss how the SPHS partner organizations conduct policy development activities.

Do the SPHS partner organizations

- Convene interested stakeholders into collaborative groups to address policy issues of mutual interest?
- Identify policy changes needed to improve the public's health?
- Carry out public communications as they develop policy recommendations?





### Questions for Model Standard 5.1

5.1.1 How well do SPHS partner organizations implement statewide health improvement processes that convene partners and facilitate collaboration among organizations to improve health and the public health system?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

5.1.2 How well do SPHS partner organizations develop one or more state health improvement plan(s) to guide their collective efforts to improve health and the public health system?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

5.1.3 How well do SPHS partner organizations have in place an all-hazards preparedness plan **to guide their activities to protect the state's population in the event of an emergency?**

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

5.1.4 How well do SPHS partner organizations conduct policy development activities?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |



### Model Standard 5.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for their efforts to develop local policies and plans that support individual and statewide health efforts. Many SPHS partner organizations support local agencies to carry out their mission locally, including but not limited to, the state public health agency, hospital association, health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members, who are themselves partners in local public health systems. Good state-local relationships in planning and policy development result in increased awareness of local and state health priorities and more coordination of state and local planning processes. This coordination produces more effective plan implementation based in collaborative state and local action.

To accomplish these results, SPHS partner organizations

- Provide technical assistance and training to local public health systems in the development of community health improvement plans, including assistance in the linking of local plans to the state health improvement plan
- Provide assistance to local public health systems in the development of local all-hazards preparedness plans
- Provide technical assistance and support for conducting local health policy development





### Discussion Items for Model Standard 5.2

Discuss how the SPHS partner organizations provide technical assistance and training to local public health systems for developing community health improvement plans. Does this technical assistance address

- Training in the use of health planning models such as APEXPH (Assessment Protocol for Excellence in Public Health) and MAPP (Mobilizing for Action through Planning and Partnerships)?
- Use of local health data to determine health priorities and objectives?
- Selecting and using effective intervention strategies for addressing local health priorities and objectives?
- Mobilizing communities to implement improvements outlined in the plans?
- Approaches for integrating health issues and improvement strategies into other local community development or planning initiatives?
- Support for linking community health improvement plans to state health improvement plans?

Discuss how the SPHS partner organizations provide technical support and assistance to local public health systems in the development of local all-hazard preparedness plans. Does this technical assistance address

- Continuity of operations?
- Written agreements to assure joint planning, mutual aid, and coordinated response?
- Clear definition of state and local roles and responsibilities?
- Managing across organizational structures during an event?
- Methods for deploying local assets during an emergency event?
- Training on the National Incident Management System (NIMS)?

Discuss how the SPHS partner organizations provide technical assistance in local health policy development.

Does this assistance address

- Using health data in policy development, analyzing policy options, and obtaining public input?
- Developing policies based on proven interventions?
- Informing policymakers of policy issues?
- Drafting rules, regulations, or ordinances needed to protect and promote the health of the public?
- Developing systems linkages between public health and the health care system?



## Questions for Model Standard 5.2

5.2.1 How well do SPHS partner organizations provide technical assistance and training to local public health systems for developing community health improvement plans?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

5.2.2 How well do SPHS partner organizations provide technical assistance in the development of local all-hazards preparedness plans for responding to emergency situations?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

5.2.3 How well do SPHS partner organizations provide technical assistance in local health policy development?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |





### Model Standard 5.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in policy development and planning. SPHS partner organizations actively use the information from these reviews to continuously improve the quality of policy and planning activities in supporting individual and statewide health efforts. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve planning and policy development. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS performance produce more informed, relevant, and collaborative plans and policies that are the basis for collective action by SPHS partner organizations.

To accomplish these results, SPHS partner organizations

- **Regularly monitor the state's progress towards accomplishing its health improvement objectives**
- Review new and existing policies to determine their public health impact
- Conduct exercises and drills to test preparedness response capacity outlined in the **state's all-hazard preparedness plan**
- Manage the overall performance of its policy and planning activities for the purpose of quality improvement

#### Discussion Items for Model Standard 5.3

Discuss how the SPHS partner organizations review progress towards accomplishing health improvement.

- Does the SPHS report annually on actions taken to implement the state's health improvement plan and report progress in meeting the objectives at least every three to five years?

Discuss how the SPHS partner organizations review new and existing policies to determine their impacts.

- Does the SPHS inform policymakers and the public of the impact arising from implementation of those objectives?

Discuss how the SPHS partner organizations conduct exercises and drills on the all-hazards preparedness plan.

- Does the SPHS review their ability to carry out activities outlined in the all-hazards preparedness plan on a regular basis?

Discuss how the SPHS partner organizations manage and improve their performance in planning and policy development.

Does the SPHS

- Use relevant standards to establish expectations for partnership efforts?
- Measure performance and report on progress?
- Conduct on-going quality improvement activities?



### Questions for Model Standard 5.3

5.3.1 How well do SPHS partner organizations review progress towards accomplishing health improvement across the state?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

5.3.2 How well do SPHS partner organizations review new and existing policies to determine their public health impacts (Example: using a health in all policies impact assessment approach)?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

5.3.3 How well do SPHS partner organizations conduct formal exercises and drills of the procedures and protocols linked to its all-hazards preparedness plan and make adjustments based on the results?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

5.3.4 How well do SPHS partner organizations actively manage and improve their collective performance in statewide planning and policy development?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |





### Model Standard 5.4: Public Health Capacity and Resources

SPHS partner organizations effectively invest in and use their human, information, technology, organizational, and financial resources to assure that their health planning and policy practices **meet the needs of the state's population. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts in developing and implementing the statewide improvement plans.** The state public health agency enhances the **capacity of the SPHS by its leadership in this service. SPHS partner organizations' workforce** coordinates collective system-wide activities. These investments in effective and collaborative planning and policy development by all SPHS partner organizations are essential in a well-functioning system capable of setting priorities, designing strategies, and making improvements in their public health system collectively.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources to develop and implement health policies and plans
- Align organizational relationships to focus statewide assets on health planning and policy development
- **Use the SPHS workforce's skills in health improvement planning and in health policy development**

#### Discussion Items for Model Standard 5.4

Discuss how the SPHS partner organizations work together to commit financial resources to health planning and policy development.

- Does the SPHS allocate existing resources, seek new resources, and share financial resources to support planning and policy development?

Discuss how the SPHS partner organizations align and coordinate efforts to implement health planning and policy development. Does the SPHS

- Align their strategic plans and coordinate technological resources to improve system performance in planning and policy development?
- Share information systems that provide data useful to planning and policy development?
- Use the active role of the state public health agency in mobilizing partnerships?
- Work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss to what extent the SPHS partner organizations have the professional expertise to carry out planning and policy development. Is the SPHS partner organizations' workforce

- Skilled in health planning and health policy development?
- Sufficiently staffed to carry out planning and policy activities?



## Questions for Model Standard 5.4

5.4.1 How well do SPHS partner organizations work together to commit financial resources to health planning and policy development efforts?

No Activity



Minimal



Moderate



Significant



Optimal



5.4.2 How well do SPHS partner organizations align and coordinate their efforts to implement health planning and policy development?

No Activity



Minimal



Moderate



Significant



Optimal



5.4.3 How well do SPHS partner organizations collectively have the professional expertise to carry out planning and policy development activities?

No Activity



Minimal



Moderate



Significant



Optimal





## Summary Notes

## Essential Service 5: Develop Policies and Plans that Support Individual and Statewide Health Efforts

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|--|---|
| <b>Model Standard 5.1: Planning and Implementation</b>                    |            |  |   |
|   |            |  |   |
| <b>Model Standard 5.2: State-Local Relationships</b>                      |            |  |   |
|   |            |  |   |
| <b>Model Standard 5.3: Performance Management and Quality Improvement</b> |            |  |   |
|   |            |  |   |
| <b>Model Standard 5.4: Public Health Capacity and Resources</b>           |            |  |   |
|   |            |  |   |



## SPHS Essential Service 6: Enforce Laws and Regulations that Protect Health and Ensure Safety

### *What is going on in our state? Do our laws keep us safe and healthy?*

This service includes

- The review, evaluation, and revision of laws (laws refers to all laws, regulations, statutes, ordinances, and codes) designed to protect health and ensure safety to assure that they reflect current scientific knowledge and best practices for achieving compliance
- Education of persons and entities in the regulated environment to encourage compliance with laws designed to protect health and ensure safety
- Enforcement activities of public health concern, including but not limited to, enforcement of clean air and potable water standards; regulation of health care facilities; safety inspections of workplaces; review of new drug, biological, and medical device applications; enforcement activities occurring during emergency situations; and enforcement of laws governing the sale of alcohol and tobacco to minors, seat belt and child safety seat usage, and childhood immunizations

System partner organizations involved in **Essential Service 6** activities may include, but are not limited to

- State government agencies with responsibilities to enforce laws that protect the **public's** health
- State legislative and executive branch agencies that make and enforce laws, including the office of the state attorney general
- Private sector entities that must comply with laws (Examples: food and restaurant industries, entities involved in maintaining clear air and water)
- Physicians, nurses, and other providers of mandated services (Example: vaccinations)
- Hospitals and other health care facilities
- Local public health system organizations involved enforcing state and local public health laws
- Public health institutes
- Other

**As you apply the following model standards and questions to your state's public health system,** keep in mind that there may be different levels of partner participation for each activity. For example, in some activities the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



### Model Standard 6.1: Planning and Implementation

State public health system (SPHS) partner organizations assure that laws and enforcement activities are based on current public health science and best practices for achieving compliance. Emergency powers are in place providing state and local systems the ability to detect, manage, and contain emergency public health threats. SPHS partner organizations solicit input on reviewed laws from stakeholders including legislators, legal advisors, and the general public, especially persons and entities in the relevant regulated environment. The SPHS partner organizations maintain cooperative relationships between those who enforce laws and those in the regulated environment. Education to all those affected by public health laws is provided to encourage compliance. Regulatory processes that carry out legal mandates are customer-centered and conducted openly and fairly.

Key participants in enforcing laws and regulations are government entities, that are mandated **to enforce laws that protect the public's health (Examples: state and local public health, police)**, and the regulated entities that must comply with laws. Regulated entities include many organizations within the SPHS, such as hospitals, businesses, food establishments, schools, and members of the public. All have a responsibility to comply with public health and safety laws.

Laws based on current scientific knowledge about the best ways to protect the health of the population form a strong legal basis for both routine and emergency public health activities carried out within the SPHS. Universal compliance with and effective enforcement of public health laws and regulations will result in a safer, healthier environment in the state, and a healthier population.

To accomplish these results, SPHS partner organizations

- Review and update existing and proposed state laws to assure laws have a sound basis in science and best practice
- Review and update laws to assure appropriate emergency powers are in place
- Foster cooperation among persons and entities in the regulated environment and persons and entities that enforce laws, for the purpose of supporting compliance and assuring that laws and regulations accomplish their health and safety purposes
- Ensure that administrative processes, such as those for permits and licenses, are customer-centered for convenience, cost, and quality of service, and that these processes are administered according to written guidelines



### Discussion Items for Model Standard 6.1

Discuss how the SPHS partner organizations assure existing and proposed state laws are designed to protect the public.

Does the SPHS conduct legal reviews that

- Address whether laws have a sound basis in current public health science and/or best practice for achieving compliance?
- Propose collaborative approaches for accomplishing objectives?
- Evaluate the intended and unintended impacts of enforcing laws using input from key stakeholders, and inform the appropriate legal body of the results?

Discuss how the SPHS partner organizations assure that laws give state and local authorities the power to prevent, detect, manage, and contain health threats. Do laws related to emergency powers

- Align system wide interdisciplinary planning and implementation of a public health response?
- Define the roles, responsibilities and authority of the SPHS partners in responding to public health emergencies?
- Clearly define what constitutes a public health emergency and who has the authority to declare one?
- Require the development of a comprehensive public health emergency response plan and the participation of SPHS partners in its development?
- Address whether the authority granted to public health officials includes all critical elements of the emergency response, including care and treatment of ill or exposed persons, isolation/quarantine, appropriation of property/resources, and liability protection for workers?

Discuss to what extent the SPHS partner organizations have cooperative relationships between regulatory bodies and entities in the regulated environment to encourage compliance and assure laws accomplish their purposes.

Do these relationships

- Support training to support compliance of laws?
- Foster dialogue about new research findings and/or promising new practices to improve the effectiveness of regulatory activities?

Discuss how the SPHS partner organizations ensure that administrative processes are customer-centered.

- Are administrative processes offered at convenient times and locations, available through electronic processing, accompanied by user fees that balance affordability with sustainability, offered with directions for achieving compliance, and administered according to written guidelines?



### Questions for Model Standard 6.1

6.1.1 How well do SPHS partner organizations assure that existing and proposed state laws are designed to protect the public's health and ensure safety?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

6.1.2 How well do SPHS partner organizations assure that laws give state and local authorities the power and ability to prevent, detect, manage, and contain emergency health threats?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

6.1.3 How well do SPHS partner organizations establish cooperative relationships between regulatory bodies and entities in the regulated environment to encourage compliance and assure that laws accomplish their health and safety purposes (Example: the relationship between the state public health agency and hospitals)?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

6.1.4 How well do SPHS partner organizations ensure that administrative processes are customer-centered (Example: obtaining permits and licenses)?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |



### Model Standard 6.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for local efforts to enforce laws that protect health and safety. Many SPHS partner organizations support local agencies to carry out their mission locally, including but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members, who are themselves partners in local public health systems. Good state-local relationships result in increased compliance with laws and better coordination of regulatory and enforcement efforts.

To accomplish these results, SPHS partner organizations

- Offer technical assistance to local public health systems based on current scientific knowledge and best practices for achieving compliance in both routine and complex enforcement operations
- Assist local governing bodies to develop local laws that incorporate current scientific knowledge and best practices for achieving compliance

#### Discussion Items for Model Standard 6.2

Discuss how the SPHS partner organizations provide technical assistance and training to local public health systems in compliance and enforcement of laws. Does the technical assistance focus on

- Educational methods for increasing compliance by local organizations?
- Enforcement of protocols that incorporate current scientific knowledge and best practices?
- Consultations in both routine enforcement situations and complex enforcement operations?
- Training to keep skills up to date?

Discuss how the SPHS partner organizations assist local governing bodies in incorporating current scientific knowledge and best practices in local laws. Does the assistance focus on

- Reviewing, improving, and modernizing local laws that incorporate current scientific knowledge and best practices?
- Assuring local officials have the appropriate legal authority to prevent, detect, manage, and contain emergency health threats?

#### Questions for Model Standard 6.2

6.2.1 How well do SPHS partner organizations provide technical assistance and training to local public health systems on best practices in compliance and enforcement of laws that protect health and ensure safety?

No Activity



Minimal



Moderate



Significant



Optimal



6.2.2 How well do SPHS partner organizations assist local governing bodies in incorporating current scientific knowledge and best practices in local laws?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 6.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in complying with and enforcing laws that protect health and safety. SPHS partner organizations actively use the information from these reviews to continuously improve the quality of both compliance and enforcement efforts. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve the legal basis for public health action and all the activities needed to assure compliance with laws and regulations. In their efforts to measure and improve system performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS performance produce more effective and efficient compliance and enforcement efforts and a healthier, safer population.

To accomplish these results, SPHS partner organizations

- Review the effectiveness of its laws and its compliance and enforcement activities, using resources such as the Model State Public Health Act and Model State Emergency Powers Act
- Manage the overall performance of its compliance and enforcement activities for the purpose of quality improvement

#### Discussion Items for Model Standard 6.3

Discuss how the SPHS partner organizations review the effectiveness of their regulatory, compliance, and enforcement activities. Do these reviews address whether

- Gaps in regulatory activities are addressed through new laws or administrative rules?
- Cooperative relationships with persons and entities in the regulated environment have resulted in improved compliance?
- State enforcement activities are appropriately coordinated with the enforcement at the local level and are performed professionally?

Discuss how the SPHS partner organizations actively manage and improve performance in legal, compliance, and enforcement activities. Does the process

- Use relevant standards to establish performance in enforcement activities?
- Measure performance and report on progress?
- Conduct on-going quality improvement activities?



### Questions for Model Standard 6.3

6.3.1 How well do SPHS partner organizations review the effectiveness of their regulatory, compliance, and enforcement activities?

No Activity



Minimal



Moderate



Significant



Optimal



6.3.2 How well do SPHS partner organizations actively manage and improve their collective performance in legal, compliance, and enforcement activities?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 6.4: Public Health Capacity and Resources

SPHS partner organizations effectively invest in and use their human, information, technology, organizational, and financial resources to assure a sound legal basis for public health action and to enforce laws that protect health and safety in the state. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts in compliance and enforcement of laws. The state public health agency enhances the capacity of the **SPHS by its leadership in this service. SPHS partner organizations' workforce coordinates** collective system-wide activities. These investments by all SPHS partner organizations are essential to support a well-functioning system capable of carrying out and improving the development, enforcement of, and compliance with laws designed to protect public health and safety.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources for the enforcement of laws that protect health and ensure safety
- Align organizational relationships to focus statewide assets on enforcement activities
- Use workforce expertise to effectively carry out the review, development, and implementation of public health laws

#### Discussion Items for Model Standard 6.4

Discuss how the SPHS partner organizations commit financial resources to the enforcement of laws. Does the SPHS allocate existing resources, seek new resources, and share financial resources to support enforcement activities?

Discuss how the SPHS partner organizations align and coordinate efforts to comply with and enforce laws. Do the SPHS partner organizations

- Align their strategic plans and coordinate technological resources to improve system performance in compliance and enforcement?
- Use the leadership of the state public health agency?
  - Does the state public health agency work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss to what extent the SPHS partner organizations have the professional expertise to review, develop, and implement public health laws. Is the SPHS partner organizations' workforce

- Skilled in administration of legal and regulatory programs?
- Sufficiently staffed to carry out planning and policy development activities?



## Questions for Model Standard 6.4

6.4.1 How well do SPHS partner organizations commit financial resources to the enforcement of laws that protect health and ensure safety?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

6.4.2 How well do SPHS partner organizations align and coordinate their efforts to comply with and enforce laws and regulations?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

6.4.3 How well do SPHS partner organizations collectively have the professional expertise to review, develop, and implement public health laws?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |





## Summary Notes

## Essential Service 6: Enforce Laws and Regulations that Protect Health and Ensure Safety

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|--|---|
| <b>Model Standard 6.1: Planning and Implementation</b>                    |            |  |   |
|   |            |  |   |
| <b>Model Standard 6.2: State-Local Relationships</b>                      |            |  |   |
|   |            |  |   |
| <b>Model Standard 6.3: Performance Management and Quality Improvement</b> |            |  |   |
|   |            |  |   |
| <b>Model Standard 6.4: Public Health Capacity and Resources</b>           |            |  |   |
|   |            |  |   |



## SPHS Essential Service 7: Link People to Needed Personal Health Services and Assure the Provision of Health Care When Otherwise Unavailable

### *What is going on in our state?*

### *Are people receiving the medical care they need?*

This service includes

- **Assessment of access to and availability of quality personal health services for the state's population**
- Assurances that access is available in a coordinated system of quality care which includes outreach services to link populations to preventive and curative care, medical services, case management, enabling social and mental health services, culturally and linguistically appropriate services, and health care quality review programs
- Partnership with public, private, and voluntary sectors to provide populations with a coordinated system of health care
- Development of a continuous improvement process to assure the equitable distribution of resources for those in greatest need

System partner organizations involved in **Essential Service 7** activities may include, but are not limited to

- State government agencies with public health and personal health care responsibilities
- Physicians, nurses, and other providers of personal health care
- Hospitals and other health care facilities, including federally-qualified health centers
- Local public health system organizations involved in services designed to increase access to personal health care
- Health insurers
- Universities or other academic institutions
- Public health institutes
- Public, private, and voluntary organizations that work with underserved or vulnerable populations
- Organizations that coordinate care, through case management of other types of coordination of care efforts
- Other

As you apply **the following model standards and questions to your state's public health system**, keep in mind that there may be different levels of partner participation for each activity. For example, in some activities the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



### Model Standard 7.1: Planning and Implementation

States public health system (SPHS) partner organizations assess the availability of personal **health services for the state's population and work collaboratively among state and local** partners to assure that the entire state population has access to high quality personal health care. SPHS partner organizations work together to assure that all residents of the state have access to the health care services they need, ranging from primary prevention to rehabilitative care. Barriers to personal health care, the needs of underserved populations, and health disparities are continuously assessed so that appropriate action can be taken by SPHS partner organizations to improve health service access. SPHS partner organizations are active in responding to policy changes in the health insurance environment and other emerging issues that potentially alter the availability of and access to health care.

Coordination of SPHS partner organization activities to improve health care delivery reduces fragmentation of effort across the system and provides a clear and unified voice on issues of access, availability, and effectiveness of personal health care in the state. SPHS partner organizations maintain an active partnership in linking people to needed health services. Key players are state agencies (public health, insurance, and Medicaid), hospitals, physicians, dentists, and other health professionals, local health departments, and other members of local public health systems, insurers, community organizations representing underserved populations, and organizations providing case management, outreach services, and coordination of care.

A robust SPHS partnership engaged in assessment and active policy and program initiatives **improves health care delivery in the state. The state's population health improves over time as a result of SPHS partner organizations' efforts. As access to health care and prevention become** increasingly accessible to the population, health disparities are reduced.

To accomplish these results, the partner organizations in the SPHS

- Assess the availability of and access to personal health services for all persons living in the state, including underserved populations
- Work collaboratively to deliver personal health services and to take policy and programmatic action to assure access, utilization, and quality of health care for persons living in the state
- Work together to improve access to personal health care by establishing and maintaining a statewide health insurance exchange
- Mobilize to reduce health disparities in the state, including meeting the needs of vulnerable populations in the event of an emergency



### Discussion Items for Model Standard 7.1

Discuss how the SPHS partner organizations assess the availability of and access to personal health services.

Does the assessment

- Identify medically underserved areas or health professional shortage areas?
- Address barriers to access among populations with special needs?
- Consider barriers with respect to age, gender, sexual orientation, literacy level, financial status, culture/race/ethnicity, geographic location, language, religion, national origin, insurance status, and physical or mental disabilities?
- Address the availability of personal health care services throughout the state including outreach services, primary medical care, case management, hospital care, tertiary medical care, restorative/rehabilitative care, social services, mental health services, substance abuse services, and oral health care services?

Discuss how the SPHS partner organizations take policy and programmatic action to eliminate barriers to access personal health care services. Do the actions

- Improve personal health service delivery?
- Inform policy makers of the barriers to personal health care access, recommend needed changes in state policy to increase access, improve the working relationship among public health, personal health care, and insurance organizations in state and local public health systems?
- Prepare for hospital and health professional surge capacity in the event of an emergency?

Discuss how the SPHS partner organizations work together to establish and maintain a statewide health insurance exchange. Does the system

- Align system wide interdisciplinary planning and implementation of a public health response?.
- Organize a centralized exchange for the purchase of affordable private health insurance and assure that insurance plans offer in the exchange an “essential health benefits package” includes ambulatory care, emergency care, hospitalization, maternity and newborn care, mental health and substance abuse treatment, prescription drugs, rehabilitative services, laboratory services, chronic disease management (including prevention and wellness), and pediatric services (including oral and vision care)?).
- Establish and operate a system to certify health insurance plans that meet criteria for the exchange, provide standardized comparative information on each plan’s relative quality and price, and maintain a robust capacity for consumer protections?.

Discuss how the SPHS partner organizations mobilize their assets to reduce health disparities.

Does the system produce

- A plan for reducing or eliminating health disparities using the National Stakeholder for Achieving Health Equity as a strategy?
- A preparedness plan for meeting the needs of vulnerable populations in the event of a natural disaster or other emergency?



### Questions for Model Standard 7.1

7.1.1 How well do SPHS partner organizations assess the availability of and access to personal health services in the state?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

7.1.2 How well do SPHS partner organizations collectively take policy and programmatic action to eliminate barriers to access personal health care services?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

7.1.3 How well does SPHS organizations work together to establish and maintain a statewide health insurance exchange to assure access to insurance coverage for personal health care services?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

7.1.4 How well do SPHS organizations mobilize their assets, including local public health systems, to reduce health disparities in the state?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |



### Model Standard 7.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for local efforts to identify underserved populations and develop innovative approaches for meeting their personal health care needs. Many SPHS partner organizations support local agencies to carry out their mission locally, including but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members, who are themselves partners in local public health systems. Good state-local relationships result in increased effectiveness at the local level in assessing health disparities, in meeting the needs of underserved populations, and improved personal health care service delivery.

To accomplish these results, SPHS partner organizations

- Provide technical assistance in methods for identifying and meeting personal health care needs of underserved populations
- Provide technical assistance to local personal health care providers serving underserved populations to improve personal health care service delivery

#### Discussion Items for Model Standard 7.2

Discuss how the SPHS partner organizations provide technical support and assistance to local public health systems on assessing and meeting the needs of underserved populations. Does the assistance address

- Local partnership development to coordinate personal health service delivery, assessment methods for identifying underserved populations, planning tools for designing programs or initiatives to reduce barriers to health care access, and approaches to coordinate complementary programs?
- Methods for identifying surge capacity needs and recommendations on how best to plan for the needs of vulnerable populations in the event of an emergency?

Discuss how the SPHS partner organizations provide technical assistance to providers who deliver personal health care to the underserved.

- Does the technical assistance focus on implementing culturally and linguistically accessible services, case and self-management, needs of underserved populations, quality improvement processes, and improving and modernizing local laws that incorporate current scientific knowledge and best practices and assuring local officials have appropriate legal authority to address emergency health threats?



### Questions for Model Standards 7.2

7.2.1 How well do SPHS partner organizations provide technical assistance to local public health systems on methods for assessing and meeting the needs of underserved populations?

No Activity

Minimal

Moderate

Significant

Optimal

7.2.2 How well do SPHS partner organizations provide technical assistance to providers who deliver personal health care to underserved populations?

No Activity

Minimal

Moderate

Significant

Optimal



### Model Standard 7.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in the provision of **personal health care to the state's population**. **SPHS partner organizations actively use the** information from these reviews to continuously improve the quality of their efforts to link people to needed personal health services. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve the process of linking people to needed services. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS performance produce better quality of personal health care and more effective approaches to meeting the needs of underserved populations and reducing health disparities.

To accomplish these results, SPHS partner organizations

- Review health care quality (using such resources as Health Plan and Employer Data and Information Set (HEDIS), the National Strategy for Quality Improvement in Health Care, and Guide to Clinical Preventive Services)
- Review changes in barriers to personal health care, focusing on the effects of SPHS actions to improve access to care
- Manage the overall performance of its activities to link people to needed health services for the purpose of quality improvement

#### Discussion Items for Model Standard 7.3

Discuss how the SPHS partner organizations work together to review the quality of personal health care services.

- Do these reviews examine reports on the extent and quality of preventive services in managed care (Example: HEDIS reports), hospital report cards, patient safety reports, extent to which guidelines in the Guide to Clinical Preventive Services are followed, and other quality reports at the state and national levels that address opportunities to improve health care quality?

Discuss how the SPHS partner organizations work together to review changes in barriers to personal health care. Do these reviews examine

- Reports on state or national health care disparities (including National Stakeholder Strategy for Achieving Health Equity), changes in the availability, timeliness, and use by underserved populations?
- Feedback from service recipients?
- Impact of interventions to improve access?

Discuss how the SPHS partner organizations actively manage and improve their performance in linking people with personal health care services. Does the process

- Use relevant standards to establish expectations for partnership efforts?
- Measure performance and report on progress?
- Conduct on-going quality improvement activities?



### Questions for Model Standard 7.3

7.3.1 How well do SPHS partner organizations work together to review the quality of personal health care services?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

7.3.2 How well do SPHS partner organizations work together to review changes in barriers to personal health care?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

7.3.3 How well do SPHS partner organizations actively manage and improve their collective performance in linking people to needed personal health care services?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |



### Model Standard 7.4: Public Health Capacity and Resources

SPHS partner organizations effectively invest in and use their human, information, technology, organizational, and financial resources to assure the provision of personal health care to meet **the needs of the state's population. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts to link people to the services they need. The state public health agency enhances the capacity of the SPHS by its leadership in this service. SPHS partner organizations' workforce coordinates collective system-wide activities.** These investments by all SPHS partner organizations are essential to support a well-functioning system capable of carrying out and improving personal health care service delivery to better meet the needs of the entire population.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources for the provision of needed personal health care
- Align organizational relationships to focus statewide assets on linking people to needed personal health care and assuring the provision of health care
- Use a workforce skilled in the evaluation, analysis, delivery, and management of personal health services

#### Discussion Items for Model Standard 7.4

Discuss how the SPHS partner organizations work together to commit financial resources to assure provision of personal health care.

- Does the SPHS allocate existing resources, seek new resources and share financial resources for health care provision where service gaps are identified?

Discuss how the SPHS partner organizations align and coordinate their efforts to provide personal health care. Does the SPHS:

- Align their strategic plans and coordinate technological resources to improve system performance in linking people to health care services
- Use the leadership of the state public health agency?
- Does the state public health agency work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss how the SPHS partner organizations have the professional expertise to carry out the functions of linking people to personal health care. Is the workforce

- Skilled in health care monitoring, analysis, management, and service delivery?
- Sufficiently staffed to carry out activities to link people to personal health services?



### Questions for Model Standards 7.4

7.4.1 How well do SPHS partner organizations work together to commit financial resources to assure the provision of needed personal health care?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

7.4.2 How well do SPHS partner organizations align and coordinate their efforts to provide personal health care?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

7.4.3 How well do SPHS partner organizations collectively have the professional expertise to carry out the functions of linking people to needed personal health care?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |



Summary Notes

Essential Service 7: Link People to Needed Personal Health Services and Assure the Provision of Health Care When Otherwise Unavailable

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|--|---|
| <b>Model Standard 7.1: Planning and Implementation</b>                    |            |  |   |
|   |            |  |   |
| <b>Model Standard 7.2: State-Local Relationships</b>                      |            |  |   |
|   |            |  |   |
| <b>Model Standard 7.3: Performance Management and Quality Improvement</b> |            |  |   |
|   |            |  |   |
| <b>Model Standard 7.4: Public Health Capacity and Resources</b>           |            |  |   |
|   |            |  |   |





## SHPS Essential Service 8: Assure a Competent Public and Personal Health Care Workforce

### *What is going on in our state? Is our workforce informed and up-to-date?*

This service includes

- Education, training, development, and assessment of health professionals (including partners, volunteers, and community health workers) to meet statewide needs for public and personal health services
- Efficient processes for credentialing technical and professional health personnel
- Adoption of continuous quality improvement and life-long learning programs
- Partnerships among professional workforce development programs to assure relevant learning experiences for all participants
- Continuing education in management, cultural competence, and leadership development programs

System partner organizations involved in **Essential Service 8** activities may include, but are not limited to

- State government agencies with public health responsibilities
- Local public health system organizations
- Physicians, nurses, and personal health care providers
- Hospitals and other health care facilities
- Human resource professionals
- Universities or other academic institutions active in training the future public health workforce (Examples: schools of public health, medical, and nursing schools)
- Public health institutes
- Public, private, and voluntary health organizations that provide public health services and have an interest in workforce issues
- Other

As you apply the following model standards and questions to your **state's public health system**, keep in mind that there may be different levels of partner participation for each activity. For example, in some activities the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



### Model Standard 8.1: Planning and Implementation

State public health system (SPHS) partner organizations identify the public health workforce needs of the state and implement recruitment and retention policies to fill those needs. The public health workforce is defined broadly as the array of personnel providing population-based and personal (clinical) health services in public and private settings across the state, all working to **improve the public's health through community prevention and clinical prevention services**. More specifically, the population-based workforce are public health professionals involved in the provision of population-based health programs and services designed to prevent disease or injury and promote health among groups of persons. The personal health care workforce are medical, nursing, and allied health professionals, who are engaged in the delivery of clinic or hospital based primary, secondary, or tertiary services designed to protect or remediate **individuals' health**. **SPHS partner organizations provide a dynamic workforce development environment**, featuring training to improve competencies, continuing education, and lifelong learning opportunities to assure that the workforce effectively delivers the Essential Public Health Services.

All SPHS partner organizations conduct workforce assessment, planning, and development activities. Key partners in these endeavors are educational programs at all levels that prepare the workforce, partner organizations that employ and develop the workforce, and key professional groups that have unique perspectives on workforce needs. Academic-practice collaborations are an important vehicle for SPHS partner organizations to meet their workforce needs.

A competent population-based and personal health care workforce works at the highest levels of **proficiency in meeting the health needs of the state's population**. **The workforce is knowledgeable and committed to solving problems and achieving overall SPHS health improvement priorities.**

To accomplish these results, SPHS partner organizations

- Based on assessments of workforce needs, develop a statewide workforce plan(s) that establishes strategies and actions needed to recruit, maintain, and sustain a competent and diverse personal health care workforce
- Provide human resource development programs focused on enhancing the skills and competencies of the workforce
- **Assure that the state's population**-based and personal health care workforce attain the highest level of knowledge and functioning in the practice of their professions
- Support continuous professional development through programs focused on life-long learning





## Discussion Items for Model Standard 8.1

Discuss how the SPHS partner organizations work together to assess and develop a statewide population-based workforce plan that guides improvement activities. Does the SPHS statewide workforce plan

- Show evidence of collaboration in both academic and practice settings?
- Use findings from workforce assessments?
- Address long-term strategies to recruit and retain qualified personnel?
- Address SPHS partner organizations' strengths and weaknesses in core competencies needed to deliver the Essential Services?
- Address initiatives to meet the education needs of the current workforce and improve the education of the future workforce?
- Identify actions to improve the quality and diversity of the workforce?
- Identify actions to improve the understanding of the Public Health Code of Ethics?

Discuss how the SPHS partner organizations work together to assess and develop a statewide personal health care workforce plan that guides improvement activities. Does the SPHS statewide workforce plan

- Show Evidence of collaboration in both academic and practice settings?
- Use findings from workforce assessments?
- Address long-term strategies to recruit and retain qualified personnel?
- Address SPHS partner organizations' strengths and weaknesses in core competencies needed to deliver the Essential Services?
- Address initiatives to meet the education needs of the current workforce and improve the education of the future workforce?
- Identify actions to improve the quality and diversity of the workforce?
- Identify actions to improve the understanding of the Public Health Code of Ethics?

Discuss how the SPHS partner organizations' human resource programs provide training to enhance competencies of the workforce. Does the SPHS training address the following

- Leadership and management skills?
- Understanding of the social determinants of health?
- Use of information technologies?
- Roles in incident and command system?
- Core competencies to deliver the Essential Services?
- Bridging medicine and public health training in medical schools and schools of public health?
- Learning management systems supporting distance learning and management of training needs and resources?

Discuss how the SPHS partner organizations assure individuals in the workforce achieve the highest level of professional practice. Does the SPHS assure competencies through the following

- Educational requirements in the hiring process?
- Professional certifications, licenses, or credentialing?
- Recognition for completion of advanced competency-based training?
- Organizational reviews that recognize workforce competencies such as accreditation?

Discuss how the SPHS partner organizations encourage life-long learning. Do the SPHS life-long learning initiatives include

- Career ladders and other development programs to provide advancement opportunities?
- Coaching or mentoring programs?
- Funds for time off to participate in educational programs?
- Marketing continuing education opportunities?
- Encouragement to apply leadership skills within their communities-outside of the agency?



## Questions for Model Standard 8.1

8.1.1 How well do SPHS partner organizations work together to develop a statewide workforce plan that guides improvement activities in population-based workforce development, using results from assessments of the workforce needed to deliver the Essential Services?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

8.1.2 How well do SPHS organizations work together to develop a statewide workforce plan(s) that guides improvement activities in personal health care workforce development, using results from assessments of the workforce needed to deliver effective personal health care services?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

8.1.3 How well do SPHS partner human resources development programs provide training to enhance the technical and professional competencies of the workforce?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

8.1.4 How well do SPHS partner organizations assure that individuals in the population-based and personal health care workforce achieve the highest level of professional practice?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

8.1.5 How well do SPHS partner organizations support initiatives that encourage life-long learning?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |





### Model Standard 8.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for local efforts to assure a competent population-based and personal health care workforce. Many SPHS partner organizations support local agencies to carry out their mission locally, including but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members, who are themselves partners in local public health systems. Good state-local relationships result in increased workforce competency and knowledge and a sufficiently-staffed public health system better able to meet the health needs of the state's population.

To accomplish these results, SPHS partner organizations

- Assist local public health systems in planning for the future needs for population-based and personal health care workforces, based on workforce assessments
- Provide assistance to local public health systems in recruitment, retention, and performance improvement strategies to improve the availability and competency of the local public health system workforce

#### Discussion Items for Model Standard 8.2

Discuss how the SPHS partner organizations assist the local public health systems in assessing their workforce needs.

Does the SPHS assistance address

- Using competency based workforce standards?
- Conducting employee recruitment and retention?

Discuss how the SPHS partner organizations assist the local public health systems with workforce development. Does the SPHS assistance address

- Improving workforce performance?
- Assuring educational course work and training are available?

#### Questions for Model Standard 8.2

8.2.1 How well do SPHS partner organizations assist local public health systems in planning for their future needs for population-based and personal health care workforces, based on workforce assessments?

No Activity



Minimal



Moderate



Significant



Optimal



8.2.2 How well do SPHS partner organizations assist local public health system organizations with workforce development?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 8.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in assuring a competent population-based and personal health care workforce. SPHS partner organizations actively use the information from these reviews to continuously improve the quality of workforce development efforts. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve workforce development. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS performance produce a better-prepared, more knowledgeable workforce.

To accomplish these results, SPHS partner organizations

- Review the implementation of its workforce development activities to determine their effectiveness in improving the availability and competency of the workforce
- Through academic-practice collaborations, evaluate the preparation of personnel entering the workforce
- Manage the overall performance of their workforce development activities for the purpose of quality improvement

#### Discussion Items for Model Standard 8.3

Discuss how the SPHS partner organizations review their workforce development activities. Do the SPHS reviews examine whether

- Skilled personal health care and population based workers are available to meet the state's needs?
- Recruitment and retention of personal health care and population-based workers is effective?
- Education, training, and credentialing programs are of high quality?
- Learning management systems are used to identify competency-based training and education opportunities?

Discuss how the SPHS academic practice collaborations evaluate the preparation of personnel entering the workforce. Do the academic practice collaborations review whether

- Entry level workforce is adequately prepared?
- Practitioners and faculty assure that curriculum meets the needs of practice including addressing the public health core competencies?
- Instructors are competent to prepare entry level workforce?
- Education programs are properly accredited?

Discuss how the SPHS partner organizations manage and improve their performance in workforce development.

Does the SPHS performance management process

- Use relevant standards to establish system-wide expectations for workforce development?
- Measure performance?
- Report on progress of partner organizations?
- Conduct ongoing quality improvement activities?



## Questions for Model Standard 8.3

8.3.1 How well do SPHS partner organizations review their workforce development activities?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

8.3.2 How well do SPHS academic-practice collaborations evaluate the preparation of personnel entering the SPHS workforce?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |

8.3.3 How well do SPHS partner organizations actively manage and improve their collective performance in workforce development?

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
| <input type="radio"/> |



### Model Standard 8.4: Public Health Capacity and Resources

SPHS partner organizations effectively invest in and use their human, information, technology, organizational, and financial resources to assure a competent population-based and personal health care workforce. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts in workforce development. The state **public health agency enhances the SPHS's capacity its leadership in this service. SPHS partner organizations' workforce coordinates collective system**-wide activities. These investments by all SPHS partner organizations are essential to support a well-functioning system capable of improving workforce competency and effectiveness.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources to support workforce development
- Align organizational relationships to focus state-wide assets on workforce development
- Use the skills of the SPHS workforce in the management of human resources and workforce development programs supporting the delivery of high quality personal health care and population-based services throughout the state

#### Discussion Items for Model Standard 8.4

Discuss how the SPHS partner organizations commit financial resources to workforce development efforts.

- Does the SPHS allocate existing resources, seek new resources, and share financial resources to invest in workforce development?

Discuss how the SPHS partner organizations align and coordinate efforts to conduct workforce development activities.

Does the SPHS

- Align their strategic plans and coordinate technological resources to improve system performance in workforce development?
- Use the leadership of the state public health agency?
  - Does the state public health agency work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss to what extent the SPHS partner organizations have the professional expertise to carry out workforce development activities. Is the SPHS partner organizations' workforce

- Skilled in human resource development?
- Sufficiently staffed to carry out workforce development activities?



### Questions for Model Standard 8.4

8.4.1 How well do SPHS partner organizations commit financial resources to workforce development efforts?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

8.4.2 How well do SPHS partner organizations align and coordinate their efforts to effectively conduct workforce development activities?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

8.4.3 How well do SPHS partner organizations collectively have the professional expertise to carry out workforce development activities?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |



Summary Notes

**Essential Service 8: Assure a Competent Public and Personal Health Care Workforce**

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|--|---|
| <b>Model Standard 8.1: Planning and Implementation</b>                    |            |  |   |
|   |            |  |   |
| <b>Model Standard 8.2: State-Local Relationships</b>                      |            |  |   |
|   |            |  |   |
| <b>Model Standard 8.3: Performance Management and Quality Improvement</b> |            |  |   |
|   |            |  |   |
| <b>Model Standard 8.4: Public Health Capacity and Resources</b>           |            |  |   |
|   |            |  |   |





## SPHS Essential Service 9: Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services

### *What is going on in our state?*

### *How are our services performing?*

This service includes

- Evaluation and critical review of health programs, services, and systems to determine program effectiveness and to provide information necessary for allocating resources and reshaping programs for improved efficiency, effectiveness, and quality
- **Assessment of and quality improvement in the state public health system's State Public Health System's performance and capacity**

System partner organizations involved in **Essential Service 9** activities may include, but are not limited to

- State government agencies with public health responsibilities
- Physicians, nurses and other providers of personal health care services
- Hospitals and other health care facilities
- Local public health system organizations
- Universities or other academic institutions
- Public, private and voluntary organizations that provide public health services
- Public health institutes
- Quality improvement professionals
- Other

As you apply the following model standards and **questions to your state's public health system**, keep in mind that there may be different levels of partner participation for each activity. For example, in some activities the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.



### Model Standard 9.1: Planning and Implementation

State public health system (SPHS) partner organizations conduct evaluations to improve the effectiveness of population-based services and personal health care services within the state. Evaluation is considered a core activity of the public health system and is essential to **understand how to improve the quality of services for the state's population. Whether focused** on the entire population or on individual patients, evaluations use relevant nationally-recognized standards of best practices and program effectiveness as benchmarks for current performance. Evaluation designs incorporate state, local, and consumer perspectives into reviews of services and systems. Credentials of the population-based and personal health care workforce are monitored and up-to-date with current standards. In addition to performance, the effectiveness of services in improving the health of the population is also evaluated. Routine evaluations identify strengths and weaknesses in programs, services, and the public health system overall, and these findings are actively used in quality and performance improvement.

All SPHS partner organizations conduct monitoring and evaluation activities within their own organizations and contribute to a coordinated approach, evidenced by collaborative evaluations **of the state's public health system and its effectiveness in meeting the health needs of the state's** population. All SPHS partner organizations participate in implementing performance improvement activities, both in their own organizations and together to address public health system performance.

The conduct of and active use of monitoring and evaluations to improve the quality of health services and the public health system produces a dynamic environment of performance **assessment, evaluation and improvement. The state's population benefits from a public health** system whose partner organizations strive to attain the highest level of effectiveness.

To accomplish these results, SPHS partner organizations

- Evaluate population-based health services within the state (Examples: injury prevention, promotion of physical activity, tobacco control and prevention, immunizations) using resources, such as Guide to Community Preventive Services
- Evaluate the effectiveness of personal health care services within the state using **resources, such as CDC's Guide to Clinical Preventive Services**
- Evaluate the performance of the state public health system in delivering **Essential Public Health Services to the state's population**
- Seek third-party evaluation of organizational effectiveness, through certification, accreditation, licensing, or other means of striving for the highest levels of performance

**Note:** Also see *Essential Service Number 7* for personal health care services evaluation.



### Discussion Items for Model Standard 9.1

Discuss how the SPHS partner organizations evaluate population-based health services. Does the SPHS

- Use evaluation designs that involve stakeholders in the program?
- Compare current experience with nationally recognized standards?
- Address consumer satisfaction with population-based services?
- Use evidence-based programs as described in the Guide to Community Preventive Services?
- Evaluate effectiveness of population based programs?
- Monitor credential and licenses of population-based health professionals?
- Use evaluation findings regularly in state health improvement activities?

Discuss how the SPHS partner organizations evaluate the effectiveness of personal health services. Does the SPHS

- Address a broad scope of personal health care facilities and services (Examples: primary care, in-patient, emergency department, ambulatory, rehabilitative, home health, long-term, hospice)?
- Monitor credentials and licenses of health care professionals?
- Address use of evidence-based services as described in the Guide to Clinical Preventive Services?
- Regularly use evaluation findings in state health improvement activities?

Discuss how the SPHS partner organizations evaluate the performance of the SPHS. Does the SPHS:

- Use standards for the evaluation of systems, capacity, and infrastructure?
- Address the effectiveness of the delivery of the Essential Public Health Services throughout the state?
- Identify strengths and areas of needed improvement?
- Assess the extent to which partner organizations operate as a system taking into consideration the partnership's strength, communication, resource sharing, and adoption of shared objectives in strategic plans?.
- Does the state public health agency play a key leadership role in SPHS?
- Does the local public health system provide feedback on the SPHS performance?

Discuss how the SPHS partner organizations seek appropriate third-party evaluations.



## Questions for Model Standard 9.1

9.1.1 How well do SPHS partner organizations routinely evaluate population-based health services in the state?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

9.1.2 How well do SPHS partner organizations evaluate the effectiveness of personal health services in the state?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

9.1.3 How well do SPHS organizations evaluate the performance of the state public health system?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

9.1.4 How well do SPHS partner organizations seek appropriate certifications, accreditation, licensure, or other third-party evaluations and designations of high-performing organizations?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |





### Model Standard 9.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for local efforts to evaluate the performance and effectiveness of population-based programs, personal health care services, and local public health systems. Many SPHS partner organizations support local agencies to carry out their mission locally, including but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members, who are themselves partners in local public health systems. Good state-local relationships in evaluation activities result in improved understanding of program effects to inform service delivery decisions. The effectiveness of local service delivery and the performance of the local public health system improve in a dynamic environment of evaluation information and improvement.

To accomplish these results, SPHS partner organizations

- Provide technical assistance to local public health systems in their evaluation activities, encompassing population-based programs, personal health care services, and overall local public health systems performance, using performance resources, such as the Baldrige National Quality Program and the National Public Health Performance Standards
- Share results of state-level performance evaluations with local public health systems for use in local health improvement and strategic planning processes
- Assist local organizations in achieving third-party evaluations of their organizational performance, through certification, accreditation, licensing, or other designations of high performance (Examples: the state public health agency assists local public health agencies in accreditation, the state Red Cross evaluates local Red Cross chapters, the state hospital association assists local member hospitals in maintaining licensure and accreditation)

#### Discussion Items for Model Standard 9.2

Discuss how the SPHS partner organizations provide technical assistance on evaluation activities to local public health systems. Does the SPHS address

- Increasing evaluation competencies?
- Designing evaluation studies?
- Methods for routine monitoring of population-based programs?
- Use of nationally developed assessment instruments such as the National Public Health Performance Standards?
- Use of state based performance assessment tools?
- Using evaluation findings in performance improvement processes?
- Conducting consumer satisfaction studies?
- Evaluating organizational performance?

Discuss how the SPHS partner organizations share results of state-level performance evaluations with local public health systems.

Discuss how the SPHS partner organizations assist their local counterparts to achieve third-party designations.



## Questions for Model Standard 9.2

9.2.1 How well do SPHS partner organizations provide technical assistance (Example: consultations, training) to local public health systems in their evaluation activities, including evaluations of population-based and personal health services and the local public health system?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

9.2.2 How well do SPHS partner organizations share results of state-level performance evaluations with local public health systems for use in local planning processes?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |

9.2.3 How well do SPHS partner organizations assist their local counterparts to achieve certifications, accreditation, licensure, or other third-party designations of high-performing organizations?

| No Activity           | Minimal               | Moderate              | Significant           | Optimal               |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> |





### Model Standard 9.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in evaluating the effectiveness, accessibility, and quality of population-based programs, personal health care services, and public health systems. SPHS partner organizations actively use the information from these reviews to continuously improve the quality of evaluation efforts. System-wide collaborative approaches for review and performance management are essential to improve evaluation. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS evaluation performance produce more meaningful and useful evaluations that are relevant to programs, services, and systems improvement activities. The culture of quality improvement that is present throughout the state public health system results in more effective programs and services to meet the health needs of the population.

To accomplish these results, SPHS partner organizations

- Review the effectiveness of their evaluation activities to assure there is a broad scope of evaluation activities and use of appropriate evaluation methods, using nationally **recognized resources, such as CDC's Principles** of Program Evaluation
- Manage the overall performance of its evaluation activities for the purpose of quality improvement
- Promote systematic quality improvement processes throughout the state public health system

#### Discussion Items for Model Standard 9.3

Discuss how the SPHS partner organizations work together to review effectiveness of evaluation activities. Does the SPHS examine

- The scope of evaluations?
- The use of robust evaluation methodologies?
- Evaluation protocol used when weaknesses become apparent?
- Whether evaluation results are used in quality improvement processes?

Discuss how the SPHS partner organizations actively manage and improve performance. Does the SPHS

- Use relevant standards to establish system-wide expectations for workforce development?
- Measure performance and report on progress?

Discuss how the SPHS partner organizations promote systematic quality improvement processes.

- Does the SPHS conduct ongoing quality improvement activities using performance information?



### Questions for Model Standard 9.3

9.3.1 How well do SPHS partner organizations work together to regularly review the effectiveness of their evaluation activities?

No Activity



Minimal



Moderate



Significant



Optimal



9.3.2 How well do SPHS partner organizations actively manage and improve their collective performance in evaluation activities?

No Activity



Minimal



Moderate



Significant



Optimal



9.3.3 How well do SPHS partner organizations promote systematic quality improvement processes throughout the state public health system?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 9.4: Public Health Evaluation Capacity and Resources

SPHS partner organizations in the SPHS effectively invest in and use their human, information, technology, organizational, and financial resources to evaluate the effectiveness, accessibility, and quality of population-based and personal health care services. Evaluations are appropriately resourced so they can be routinely conducted. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts in evaluation. The state public health agency enhances the capacity of the SPHS by its leadership in this service. SPHS **partner organizations' workforce** coordinates collective system-wide activities. These investments by all SPHS partner organizations are essential to support a well-functioning system capable of carrying out and improving evaluation activities.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources for evaluation activities
- Align organizational relationships to focus statewide assets on evaluating population-based and personal health care services
- Use a workforce skilled in monitoring and analyzing the performance and capacity of the state public health system and its programs and services

#### Discussion Items for Model Standard 9.4

Discuss how the SPHS partner organizations work together to commit financial resources for evaluation.

- Does the SPHS allocate, share and seek new resources for evaluation activities?

Discuss how the SPHS partner organizations align and coordinate efforts to evaluate health care services (individual and population-based). Does the SPHS

- Align their organizational strategic plan and coordinate technology to effectively conduct evaluation?
- Use the leadership of the state health agency in conducting evaluations?
- Work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss the collective expertise of the SPHS partner organizations to carry out evaluation activities.

- Is the SPHS workforce skilled in evaluation? Does the SPHS workforce include
  - Quantitative and qualitative evaluation methods?
  - Service-specific and public health systems performance standards development?
  - Database development, data collection and evaluation analysis?
  - Application of findings to quality improvement activities?
- Is the SPHS workforce sufficiently staffed to carry out evaluations?



## Questions for Model Standard 9.4

9.4.1 How well do SPHS partner organizations work together to commit financial resources for evaluation?

No Activity



Minimal



Moderate



Significant



Optimal



9.4.2 How well do SPHS partner organizations align and coordinate their efforts to conduct evaluations of population-based and individual health care services?

No Activity



Minimal



Moderate



Significant



Optimal



9.4.3 How well do SPHS partner organizations collectively have the professional expertise to carry out evaluation activities?

No Activity



Minimal



Moderate



Significant



Optimal





## Summary Notes

## Essential Service 9: Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services

| Strengths   | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|---|------------|--|---|
| <b>Model Standard 9.1: Planning and Implementation</b>                    |            |  |   |
|   |            |  |   |
| <b>Model Standard 9.2: State-Local Relationships</b>                      |            |  |   |
|   |            |  |   |
| <b>Model Standard 9.3: Performance Management and Quality Improvement</b> |            |  |   |
|   |            |  |   |
| <b>Model Standard 9.4: Public Health Capacity and Resources</b>           |            |  |   |
|   |            |  |   |



## SPHS Essential Service 10: Research for New Insights and Innovative Solutions to Health Problems

### *What's going on in our state? Do we participate in research activities?*

This service includes

- A full continuum of research ranging from field-based efforts to foster improvements in public health practice to formal scientific research
- Linkage with research institutions and other institutions of higher learning to identify and apply innovative solutions and cutting-edge research to improve public health performance
- Internal capacity to mount timely epidemiologic and economic analyses and conduct needed health services research

System partner organizations involved in **Essential Service 10** activities may include, but are not limited to

- State government agencies with public health responsibilities, including staff who conduct practice-based studies
- Physicians, nurses, and other providers of personal health care
- Hospitals and other health care facilities
- Local public health system organizations
- Universities or other academic institutions, including health professional and health sciences schools (Examples: medicine, nursing, dentistry, public health)
- Public health institutes
- Non-traditional but health-related practice and academic organizations (from a social determinants of health perspective), such as urban planning, community development, social work
- Public, private, and voluntary organizations interested in innovative and evidence-based approaches to health problems
- Other

As you apply the following model standards and questions to your **state's public health system**, keep in mind that there may be different levels of partner participation for each activity. For example, in some activities the state health agency or one partner organization may take the lead for the state, while other activities may require active engagement from multiple partner organizations.





### Model Standard 10.1: Planning and Implementation

State public health system (SPHS) partner organizations contribute to public health science (both population-based and personal health care) by identifying and participating in research activities. These research activities address new insights into the most effective approaches to implement the Essential Public Health Services. SPHS partner organizations foster innovation by continuously using new information and the best scientific knowledge about effective practice **in their work to improve the health of the state's population.**

Academic-practice collaborations are in place in medical, nursing, public health, and other disciplines within the SPHS. These collaborations bridge the interests of the research community and the needs of the practice community, by identifying practice-relevant research agendas, promoting practice-based research, and disseminating practice-relevant research findings. Practice-based research studies the effectiveness, efficiency, and equity of public health strategies and medical care innovations in real-world practice settings.

SPHS partner organizations most involved in research and innovations are university-based health sciences schools and other related university-based disciplines that are health-related, such as urban planning, social work, and community development. On the practice side, physician, nursing and other clinical professional groups, state and local public health departments, and hospital associations are key SPHS partner organizations in practice-based research.

Active interest in relevant research and new knowledge by SPHS partner organizations enables them to stay current and use the most modern methods of practice to improve both evidence-based decision-making and effectiveness in delivering population-based and personal health care services.

To accomplish these results, SPHS the partner organizations

- Foster innovations by developing public health research agendas and disseminating and applying research findings and new knowledge to improve service delivery, through the work of statewide academic-practice collaborations
- Conduct and participate in practice-based research to maximize learning about more **effective methods of improving the health of the state's population**



### Discussion Items for Model Standard 10.1

10.1.1 Discuss how well the SPHS partner organizations organize, disseminate, and use research findings through the work of active academic-practice collaborations.

Does the SPHS

- Develop public health (both population-based and personal health care) research agendas?
- Disseminate research findings to the practice community using a variety of methods?
- Does the academic-practice collaboration produce joint research projects, facilitate faculty staff exchanges, promote academic health departments, produce reports that translate research findings into specific practice applications, and conduct statewide dissemination processes for sharing research findings?

10.1.2 Discuss how well the SPHS partner organizations participate in and conduct research.

Does the SPHS

- Contribute to the design of research studies?
- Implement and/or participate in research studies to identify or test innovative population-based or personal health care interventions?
- Publish research findings in recognized public health literature?

### Questions for Model Standard 10.1

10.1.1 How well do SPHS partner organizations organize research activities and disseminate and use innovative research findings in practice, through the work of active academic-practice collaborations?

No Activity



Minimal



Moderate



Significant



Optimal



10.1.2 How well do SPHS partner organizations participate in and conduct research to discover more effective methods of **improving the public's health**?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 10.2: State-Local Relationships

SPHS partner organizations work with local public health systems to provide assistance, capacity building, and resources for local efforts to carry out research for new insights and innovative solutions to health problems. Many SPHS partner organizations support local agencies to carry out their mission locally, including but not limited to, the state public health agency, hospital association, mental health and substance abuse agency, heart association, United Way, and Red Cross. Each of these statewide organizations is active in support of its local members, who are themselves partners in local public health systems. Good state-local relationships in research and innovations result in increased capability of local organizations to use new evidence and knowledge to improve their delivery of services.

To accomplish these results, SPHS partner organizations

- Assist local public health systems in their research activities, including promoting community-based participatory research
- Assist local public health systems in the use of research findings to improve public health practice at the local level

#### Discussion Items for Model Standard 10.2

Discuss focus on how well the SPHS partner organizations provide technical assistance to local public health systems. Does the SPHS

- Build skills in research design and methods?
- Partner with research organizations?
- Conduct population-based research studies?
- Conduct community-based participatory research projects, including incentives for communities to get involved in community-based participatory research?

Discuss how the SPHS partner organizations assist local public health systems in use of research findings.

- Does the SPHS help in the interpretation, dissemination, and application of research studies and findings?



## Questions for Model Standard 10.2

10.2.1 How well do SPHS partner organizations provide technical assistance to local public health systems in research activities?

No Activity



Minimal



Moderate



Significant



Optimal



10.2.2 How well do SPHS partner organizations assist local public health systems in their use of research findings?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 10.3: Performance Management and Quality Improvement

SPHS partner organizations review the effectiveness of their performance in conducting and using research for new insights and innovative solutions to health problems. SPHS partner organizations actively use the information from these reviews to continuously improve the quality of research efforts. System-wide collaborative approaches for review, evaluation, and performance management are essential to improve health research and the use of new evidence in practice. In their efforts to measure and improve performance, SPHS partner organizations use performance management approaches in their respective organizations and contribute to collective SPHS activities to measure progress in system-wide performance. Active improvement processes based on rigorous reviews of SPHS performance support the introduction of relevant innovations into practice (both population-based and personal health care services). The health of the population improves when the most current scientific knowledge is used to inform service delivery decisions.

To accomplish these results, SPHS partner organizations

- Regularly monitor their research activities for relevance to current issues in practice and for appropriateness in scope and methodology
- Manage the overall performance of research activities for the purpose of quality improvement

#### Discussion Items for Model Standard 10.3

Discuss how the SPHS partner organizations work together to review research activities.

- Does the SPHS review the relevance, scope, implementation, dissemination, and monitoring of research findings?

Discuss how the SPHS partner organizations manage and improve their performance in research.

Does the SPHS

- Use relevant standards or benchmarks to establish system-wide expectations for research?
- Measure performance milestones?
- Report on progress to SPHS partner organizations?
- Conduct ongoing quality improvement activities using performance information?



### Questions for Model Standard 10.3

10.3.1 How well do SPHS partner organizations work together to review their public health research activities?

No Activity



Minimal



Moderate



Significant



Optimal



10.3.2 How well do SPHS partner organizations actively manage and improve their collective performance in research and innovation?

No Activity



Minimal



Moderate



Significant



Optimal





### Model Standard 10.4: Public Health Research Capacity and Resources

SPHS partner organizations effectively invest, manage, and use their human, information, technology, organizational, and financial resources for the conduct of research to find more innovative and effective service delivery processes. Coordinated use of system assets is grounded in the alignment of organizational strategic plans around collective efforts in research and **dissemination of new evidence and innovations. The state public health agency enhances SPHS's capacity by its leadership in this service. SPHS partner organizations' workforce coordinates** collective system-wide activities. These investments by all SPHS partner organizations are essential to support a well-functioning system capable of carrying out research activities and improving practice by introducing evidence-based innovations into service delivery.

To accomplish these results, SPHS partner organizations

- Commit adequate financial resources for research to foster innovations in public health practice
- Align organizational relationships to focus statewide assets on research and applying new evidence to practice
- Use a workforce skilled in conducting and applying research relevant to the practice of the Essential Public Health Services

#### Discussion Items for Model Standard 10.4

Discuss how the SPHS partner organizations work together to commit financial resources to research.

- Does the SPHS allocate existing resources, share financial resources, and seek new resources for research activities?

Discuss how the SPHS partner organizations work to coordinate their research. Does the SPHS

- Align their organizational strategic plans and coordinate technology resources to effectively conduct research?
- Use the leadership of the state public health agency in conducting, participating, and using public health research?
  - Does the state public health agency work collaboratively, provide leadership, invest in professional expertise, and promote evidence-based solutions?

Discuss the collective experience of the SPHS partner organizations to carry out research. Is the SPHS

- Skilled in research activities? Do workforce skills include
  - Epidemiology, biostatistics, public health systems research, and health services research?
  - Does this workforce include the availability of doctoral-level expertise?
  - Applying research findings to practice?
  - Writing research proposals to pursue funding?
- Sufficiently staffed to carry out research activities?



### Questions for Model Standard 10.4

10.4.1 How well do SPHS partner organizations work together to commit financial resources to research relevant to health improvement?

No Activity



Minimal



Moderate



Significant



Optimal



10.4.2 How well do SPHS partner organizations align and coordinate their efforts to conduct research?

No Activity



Minimal



Moderate



Significant



Optimal



10.4.3 How well do SPHS partner organizations collectively have the professional expertise to carry out research activities?

No Activity



Minimal



Moderate



Significant



Optimal





## Summary Notes

## Essential Service 10: Research for New Insights and Innovative Solutions to Health Problems

| Strengths  | Weaknesses | Opportunities for Immediate Improvements/ Partnerships | Priorities or Longer Term Improvement Opportunities |
|--|------------|--|---|
| <b>Model Standard 10.1: Planning and Implementation</b>                    |            |  |   |
|  |            |  |   |
| <b>Model Standard 10.2: State-Local Relationships</b>                      |            |  |   |
|  |            |  |   |
| <b>Model Standard 10.3: Performance Management and Quality Improvement</b> |            |  |   |
|  |            |  |   |
| <b>Model Standard 10.4: Public Health Capacity and Resources</b>           |            |  |   |
|  |            |  |   |



## National Public Health Performance Standards Program State Public Health System Assessment Agency Contribution Questionnaire

**OVERVIEW:** This optional questionnaire is made available so that sites may consider the contribution that the state health department has to each model standard. This information may serve to catalyze or strengthen the performance improvement activities resulting from the assessment process.

**INSTRUCTIONS:** Using a similar scale used to assess the model standards in the assessment, use the following scale:

- 0 – for no contribution to the model standard
- 25 – for agency contribution of 0-25%
- 50 – for agency contribution of 26-50%
- 75 – for agency contribution of 51-75%
- 100 – for agency contribution of 76-100%

Sites may complete this questionnaire in a single group, either at the same time of the assessment or shortly thereafter, so that there is a consistent approach to responding to the questions across the model standards.

| Essential Service #1 - Monitor health status to identify health problems                                       |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency? |  |          |
| <b>A1.1</b>  | Planning and Implementation                    |          |
| <b>A1.2</b>  | State-Local Relationships                      |          |
| <b>A1.3</b>  | Performance Management and Quality Improvement |          |
| <b>A1.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #2 - Diagnose and investigate health problems and health hazards                             |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency? |  |          |
| <b>A2.1</b>  | Planning and Implementation                    |          |
| <b>A2.2</b>  | State-Local Relationships                      |          |
| <b>A2.3</b>  | Performance Management and Quality Improvement |          |
| <b>A2.4</b>  | Public Health Capacity and Resources           |          |



| Essential Service #3 – Inform, educate and empower people about health issues                                  |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency? |  |          |
| <b>A3.1</b>  | Planning and Implementation                    |          |
| <b>A3.2</b>  | State-Local Relationships                      |          |
| <b>A3.3</b>  | Performance Management and Quality Improvement |          |
| <b>A3.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #4 – Mobilize partnerships to identify and solve health problems                             |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency? |  |          |
| <b>A4.1</b>  | Planning and Implementation                    |          |
| <b>A4.2</b>  | State-Local Relationships                      |          |
| <b>A4.3</b>  | Performance Management and Quality Improvement |          |
| <b>A4.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #5 – Develop policies and plans that support individual and statewide health efforts         |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency? |  |          |
| <b>A5.1</b>  | Planning and Implementation                    |          |
| <b>A5.2</b>  | State-Local Relationships                      |          |
| <b>A5.3</b>  | Performance Management and Quality Improvement |          |
| <b>A5.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #6 – Enforce laws and regulations that protect health and ensure safety                      |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency? |  |          |
| <b>A6.1</b>  | Planning and Implementation                    |          |
| <b>A6.2</b>  | State-Local Relationships                      |          |
| <b>A6.3</b>  | Performance Management and Quality Improvement |          |
| <b>A6.4</b>  | Public Health Capacity and Resources           |          |



| Essential Service #7 – Link people to needed personal health services and assure the provision of health care when otherwise unavailable |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency?                           |  |          |
| <b>A7.1</b>  | Planning and Implementation                    |          |
| <b>A7.2</b>  | State-Local Relationships                      |          |
| <b>A7.3</b>  | Performance Management and Quality Improvement |          |
| <b>A7.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #8 – Assure a competent public health and personal health care workforce                     |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency? |  |          |
| <b>A8.1</b>  | Planning and Implementation                    |          |
| <b>A8.2</b>  | State-Local Relationships                      |          |
| <b>A8.3</b>  | Performance Management and Quality Improvement |          |
| <b>A8.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #9 – Evaluate effectiveness, accessibility, and quality of personal and population-based health services |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency?             |  |          |
| <b>A9.1</b>  | Planning and Implementation                    |          |
| <b>A9.2</b>  | State-Local Relationships                      |          |
| <b>A9.3</b>  | Performance Management and Quality Improvement |          |
| <b>A9.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #10 – Research for new insights and innovative solutions to health problems                  |  | Response |
|--|--|----------|
| How much of each model standard is achieved through the direct contribution of the state public health agency? |  |          |
| <b>A10.1</b>   | Planning and Implementation                    |          |
| <b>A10.2</b>   | State-Local Relationships                      |          |
| <b>A10.3</b>   | Performance Management and Quality Improvement |          |
| <b>A10.4</b>   | Public Health Capacity and Resources           |          |



## National Public Health Performance Standards Program

### State Public Health System Assessment Priority of Model Standards Questionnaire

**OVERVIEW:** This questionnaire is made available so that sites may consider the priority of each model standard to their system. Sites choosing to complete this supplemental questionnaire will receive an additional component to their reports which will depict their performance scores in relation to how they have prioritized model standards. This information may serve to catalyze or strengthen the performance improvement activities resulting from the assessment process.

**INSTRUCTIONS:** Using a scale of 1 to 10 (with 1 being the lowest and 10 being the highest), please rate the priority of each model standard without regard to performance scores or rank order. In considering this questionnaire, the following questions may be helpful for participants. **Example A: “On a scale of 1 to 10, what is the priority of this model standard to our public health system?” Example B: “On a scale of 1 to 10, how important is it to improve our performance in this activity (e.g., through a quality improvement process, increased emphasis or resources)?”** Sites may complete this questionnaire in a single group, either at the same time of the assessment or shortly thereafter, so that there is a consistent approach to responding to the questions across the model standards.

| Essential Service #1 - Monitor health status to identify health problems                              |  | Response |
|---|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system? |  |          |
| <b>P1.1</b>   | Planning and Implementation                    |          |
| <b>P1.2</b>   | State-Local Relationships                      |          |
| <b>P1.3</b>   | Performance Management and Quality Improvement |          |
| <b>P1.4</b>   | Public Health Capacity and Resources           |          |

| Essential Service #2 - Diagnose and investigate health problems and health hazards                    |  | Response |
|---|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system? |  |          |
| <b>P2.1</b>   | Planning and Implementation                    |          |
| <b>P2.2</b>   | State-Local Relationships                      |          |
| <b>P2.3</b>   | Performance Management and Quality Improvement |          |
| <b>P2.4</b>   | Public Health Capacity and Resources           |          |



| Essential Service #3 – Inform, educate and empower people about health issues                         |  | Response |
|---|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system? |  |          |
| <b>P3.1</b>   | Planning and Implementation                    |          |
| <b>P3.2</b>   | State-Local Relationships                      |          |
| <b>P3.3</b>   | Performance Management and Quality Improvement |          |
| <b>P3.4</b>   | Public Health Capacity and Resources           |          |

| Essential Service #4 – Mobilize partnerships to identify and solve health problems                    |  | Response |
|---|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system? |  |          |
| <b>P4.1</b>   | Planning and Implementation                    |          |
| <b>P4.2</b>   | State-Local Relationships                      |          |
| <b>P4.3</b>   | Performance Management and Quality Improvement |          |
| <b>P4.4</b>   | Public Health Capacity and Resources           |          |

| Essential Service #5 – Develop policies and plans that support individual and statewide health efforts |  | Response |
|--|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system?  |  |          |
| <b>P5.1</b>  | Planning and Implementation                    |          |
| <b>P5.2</b>  | State-Local Relationships                      |          |
| <b>P5.3</b>  | Performance Management and Quality Improvement |          |
| <b>P5.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #6 – Enforce laws and regulations that protect health and ensure safety             |  | Response |
|---|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system? |  |          |
| <b>P6.1</b>   | Planning and Implementation                    |          |
| <b>P6.2</b>   | State-Local Relationships                      |          |
| <b>P6.3</b>   | Performance Management and Quality Improvement |          |
| <b>P6.4</b>   | Public Health Capacity and Resources           |          |



| Essential Service #7 – Link people to needed personal health services and assure the provision of health care when otherwise unavailable |  | Response |
|--|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system?                                    |  |          |
| <b>P7.1</b>  | Planning and Implementation                    |          |
| <b>P7.2</b>  | State-Local Relationships                      |          |
| <b>P7.3</b>  | Performance Management and Quality Improvement |          |
| <b>P7.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #8 – Assure a competent public health and personal health care workforce            |  | Response |
|---|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system? |  |          |
| <b>P8.1</b>   | Planning and Implementation                    |          |
| <b>P8.2</b>   | State-Local Relationships                      |          |
| <b>P8.3</b>   | Performance Management and Quality Improvement |          |
| <b>P8.4</b>   | Public Health Capacity and Resources           |          |

| Essential Service #9 – Evaluate effectiveness, accessibility, and quality of personal and population-based health services |  | Response |
|--|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system?                      |  |          |
| <b>P9.1</b>  | Planning and Implementation                    |          |
| <b>P9.2</b>  | State-Local Relationships                      |          |
| <b>P9.3</b>  | Performance Management and Quality Improvement |          |
| <b>P9.4</b>  | Public Health Capacity and Resources           |          |

| Essential Service #10 – Research for new insights and innovative solutions to health problems         |  | Response |
|---|--|----------|
| On a scale of 1 to 10, what is the priority of each model standard to our state public health system? |  |          |
| <b>P10.1</b>  | Planning and Implementation                    |          |
| <b>P10.2</b>  | State-Local Relationships                      |          |
| <b>P10.3</b>  | Performance Management and Quality Improvement |          |
| <b>P10.4</b>  | Public Health Capacity and Resources           |          |