

Indicators at a Glance

ASTHO Performance Dashboard Factsheet and Final Metrics

The ASTHO Performance Dashboard (PD) is intended to serve as a tool for state health agency executives, Health Officials and Senior Deputies, to utilize and track comparable benchmarks that can be used toward improved decision making, leading to more efficient and quality health services. The ASTHO PD is designed to measure internal organizational health, inform management decisions, and facilitate quality improvement. The dashboard utilizes a core set of 30 internal administrative, business process, and operational indicators that can be compared and improved upon using quality improvement processes and methods.

- The ASTHO PD solely focuses on health agency operations, indicating the "health of the agency," rather than population health, and identifies practices and processes that can support the comparability of agencies using an 'apples to apples' approach.
- ASTHO members expressed a need for these types of metrics. Many agencies want to assess their internal performance, but do not have the internal capacity or expertise to develop their own indicators.
- The ASTHO Performance Policy Committee (PPC) a workgroup of state public health leaders with expertise an interest in health agency performance and infrastructure policy - championed the PD work and served as an advisory group. ASTHO members serving in key leadership positions, and subject matter experts provided input and refined the final indicators, i.e. chief financial officers, HR directors, informatics officers, and performance improvement managers.
- The ASTHO PD serves as a catalyst for health agencies to begin to identify best practices that improve efficiency and effectiveness, and establish industry standards, benchmarks, and performance goals, specific to public health agencies.
- Development of ASTHO PD indicators took place over three phases:
 - Phase 1: Environmental Scan Initial Indicator Selection
 - Phase 2: Pilot Testing in Select State and Territorial Health Agencies
 - Phase 3: Indicator Refinement by Subject Matter Experts and Finalization
- ASTHO is currently working with a Performance Management and Quality Improvement peer network to facilitate use of the PD and identify successful QI projects and processes that improve performance in each of the indicators. ASTHO is also exploring opportunities to align PD indicators with the Profile data that states currently share with ASTHO.

Customer Satisfaction



CS1: Proportion of health department programs conducting a systematic process to assess external customer satisfaction

CS2: Proportion of health department programs conducting a systematic process to assess external customer complaints

CS3: Average number of business days required for health department to respond to customer complaints

CS4: Proportion of health department systemic issues identified through customer complaints

Vital Statistics



VS1: Proportion of health department birth certificates filed electronically

VS2: Proportion of health department death certificate filed electronically

VS3: Average number of days for health department staff to process citizen's vital statistics records through any means of request

Financial Management



FM1: Annual health department organizational expenditures. Drill Down Categories: Funding Source, Expenditure Categories, Functional Expense

FM2: Annual health department organizational revenue. Drill Down Categories: Funding Source, Expenditure Categories, Functional Expense Categories

FM3: Proportion of invoices paid on time according to established health department

FM4: Proportion of purchase requests processed on time according to established health department policy

Grants and Contracting



GC 1: Proportion of contracts executed on time according to established health department policy

Human Capital



HC 1: Proportion of authorized health department staff employment positions filled. Drill Down Category: Type of Position

HC 2: Proportion of health department managers and supervisors who have completed a leadership training within the past year

HC 3: Proportion of health department staff who have formal training in their area of work

HC 4: Proportion of health department employees with 0-3, 4-9, 10-24, and 25+ years of service

HC 5: Average number of days from health department job requisition to hired employee start date. *Drill Down Category: Timeliness*.

HC 6: Proportion of health department employees who rate their overall level of job satisfaction as "very satisfied" or "satisfied"

HC 7: Proportion of health department staff who engage in career development and/or skills building activities

HC 8: Proportion of health department employees leaving the agency

HC 9: Proportion of health department employee performance evaluations complete on-time



Information Services and Technology



IST 1: Average number of days to resolve internal health department helpdesk tickets

IST 2: Development of state public health department Information Technology Strategic Plan

Program Development



PD 1: Proportion of health department programs that utilize performance targets for continuous program improvement

PD 2: Proportion of health department programs that utilize performance measures for continuous program improvement

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

PD 4: Proportion of health department programs that have internal partnerships

PD 5: Proportion of health department programs that have external partnerships

Process Improvement



PI 1: Proportion of health department programs using evaluation methods to improve program outcomes

PI 2: Proportion of health department programs using a proven quality improvement (QI) model

