



Healthy Mendocino CHIP Progress Measures

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+ Objectives

Define a goal

Define performance measures

Learn about the relationship between goals and performance measures

See it all put together

Goal Definition in Public Health Accreditation Board's Glossary of Terms

- + Goals are general statements expressing a program's aspirations or intended effect on one or more health problems, often stated without time limits. (Turnock, B.J. Public Health: What It Is and How It Works. 4th ed. Sudbury, MA: Jones and Bartlett; 2009.)

+ Goals

- State what is desired
- Many times are directional and tend to start with:
 - Increase
 - Decrease
 - Reduce
 - Improve
- Should be able to measure progress with supporting measurable objectives – this is where the link with performance metrics comes in





Some Examples of Goals from Healthy Mendocino



Health Priority	Goal
Housing	Successfully develop additional housing stock for all economic sectors and each geographic area (including North Coast, South Coast, Laytonville/Leggett, Willits, Ukiah area, Anderson Valley, and Round Valley) of the County
Childhood trauma	Reduce the impact of adverse childhood experiences (ACES)

Health Improvement Planning Determines Priorities & Goals

- What are the priority health issues in Our County?
- What are the behaviors and outcomes related to these issues that we want for people who live in Our County?
- How can we measure these conditions?





*“If you don’t know
where you are
going, you’ll end
up some place
else”*

Yogi Berra



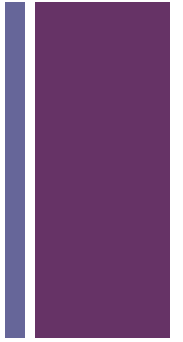
Performance Based Measurement



- Integrated system of data use in reporting progress
- Emphasis on measurement at program, organization, and community levels
 - Data integration
 - IT solutions (e.g., dashboards)
- Routine review of results to drive decision-making

+ Poll: Does your organization have a standardized way to collect, track, and report performance data

1. Yes
2. No

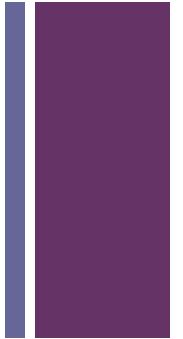


+ Two types of measures

**TOTAL
POPULATION INDICATORS**
(measures of population-level
health outcomes, behaviors,
and environments)

AND

PERFORMANCE MEASURES
(measures of program
effort and output)





How Do We Measure Our Goals?

- Community level indicators
 - Health outcomes
 - Behaviors
 - Environment
- Program level measures
 - Effort & Output
 - Outcomes

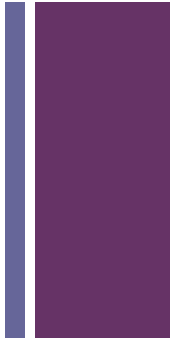


Total Population Indicators

- Life expectancy
- Quality of life
- Health equity
- Disease rates
- Premature death
- Tobacco use
- Affordable housing

**TOTAL POPULATION
HEALTH OUTCOMES ,
BEHAVIORS, AND
ENVIRONMENTS**

+ Examples of Population Indicators



- Percent of adults with health insurance
- Age-adjusted death rate due to lung cancer
- Breast cancer incidence rate
- Percent of adults with diabetes
- Percent of 7th grade students who are physically fit
- Percent of adults consuming fast food
- Teen birth rate

+ Common Data Sources



Population Indicators

Examples:

- Disease specific surveillance systems
- Vital Records
- CA Health Interview Survey
- OSHPD (Healthcare Utilization data)
- BRFSS
- YRBS
- National Immunization Survey

Program Performance Measures



- # of policies created
- # of people informed
- % knowledge gained
- # of partners engaged
- Amount of surveillance performed
- # of investigations completed
- Wait times
- Client satisfaction

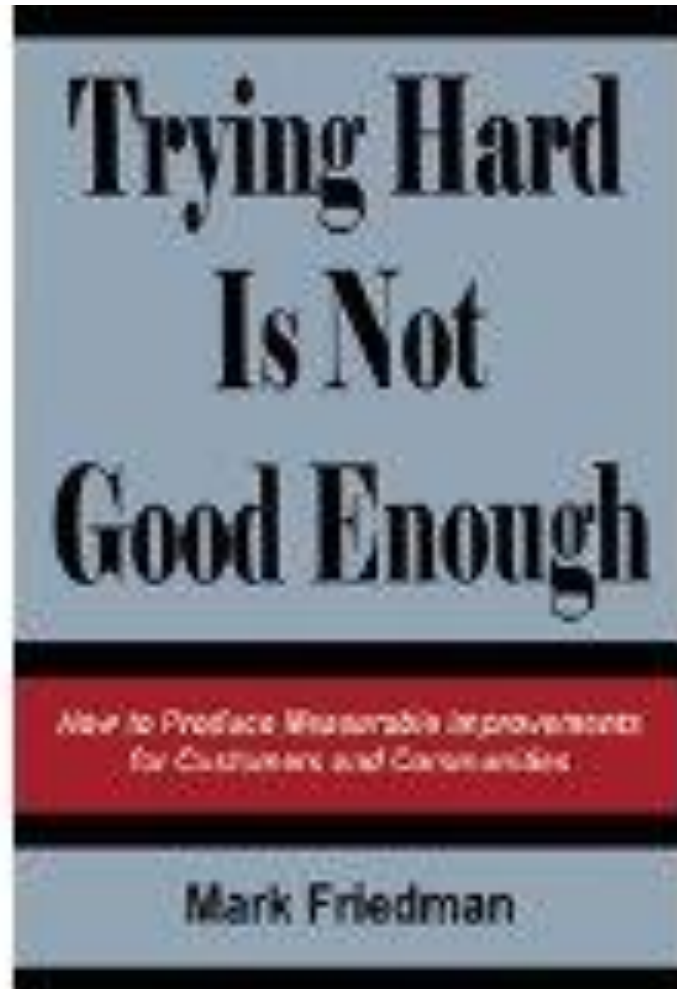
**MEASURES OF
PROGRAM
EFFORT & OUTPUT**

+ Examples of Performance Measures

- Percent of outbreaks investigated within standard timeframe
- Percent knowledge gained following an educational session
- Number of schools offering joint-use agreements to allow the public to use the recreational facilities
- Rate of hospital readmission
- Recidivism rates



+ A model for selecting performance measures



+ Program Performance Measures



- Who are our clients?
- Which services do we provide to our clients?
- What evidence-based strategies will lead to positive change in our clients?
- How can we measure if our clients are better off?
- How can we measure if we are delivering services well?

Based on the *Results Accountability Framework*



Performance Measures



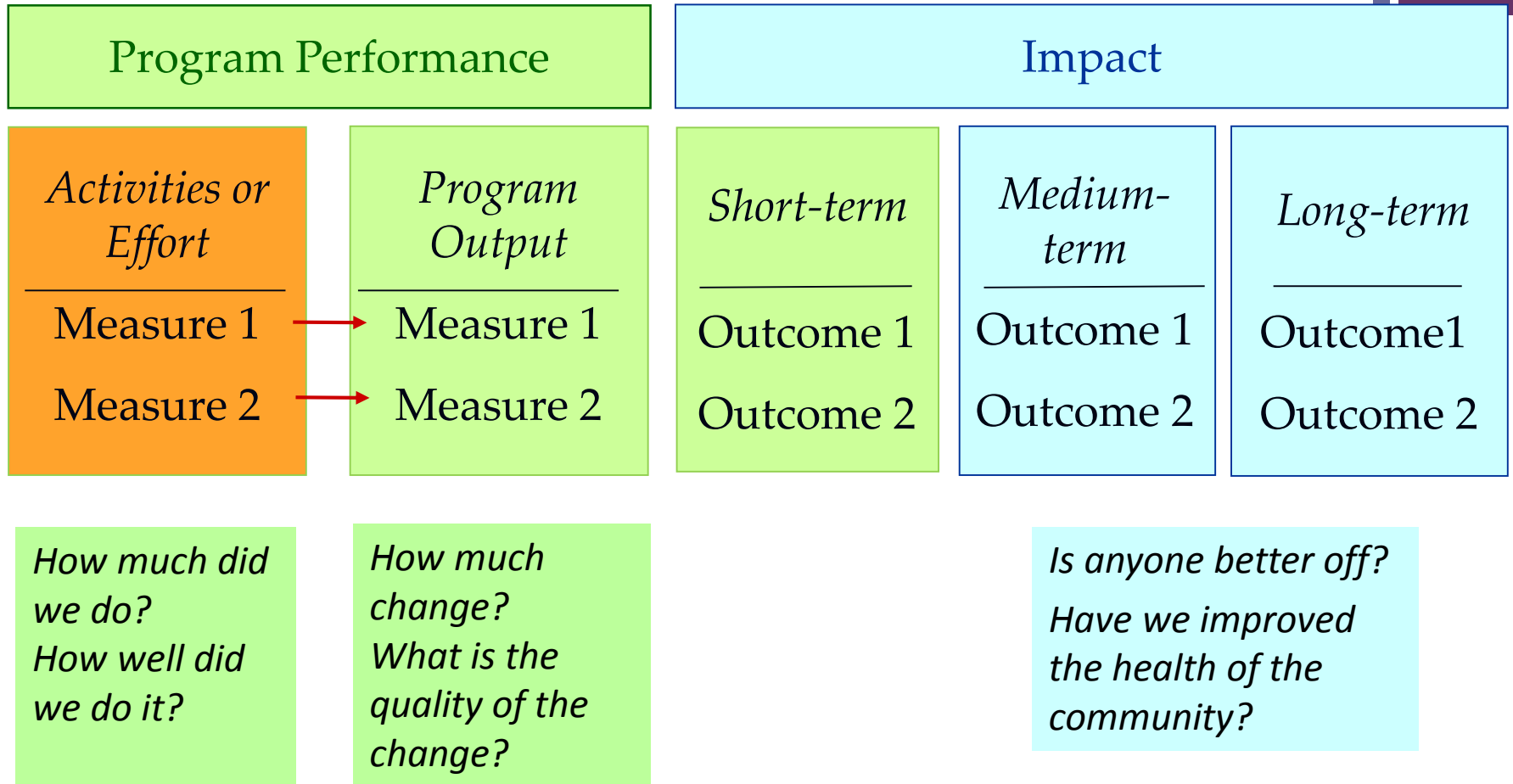
	Quantity	Quality
Input / Effort	How Much Did We Do? (#)	How Well Did We Do It? (%)
Output / Effect	How Much Change? (#)	Quality of Change? (%)

Based on the *Results Accountability Framework*



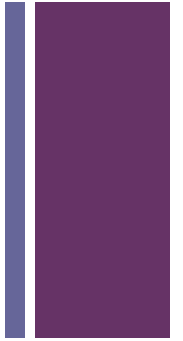
+ Using Logic Models to Link Measures

+ Linking Indicators & Measures: Modifying the logic model



+ Measure Progress – Telling Your Story of Excellence

- Good measures tell you:
 - Are we on track
 - If desired milestones are being achieved
 - How close are we to our goal
- The best measures are relatively easy to collect
 - Gathered from existing data sources when possible
 - Clearly defined to assure accuracy of information over time and location



Collective Action to Community Impact

***Actions We Take Collectively
Across Sectors***

***Results We Seek
or Community Impact***

County Government

Health Providers

Community & Faith-Based
Organizations

Businesses

Schools

Law Enforcement and Courts

Military

Other Local Jurisdictions

**Behavior
Changes in
Population**

**Risk Factor
Changes in
Population**

**Outcome
Changes in
Population**

Collective Action to Community Impact

Actions We Take

HHSA

Process CalFresh applications timely

CalFresh enrollment

Eat healthy food

Parks and Recreations Department

Conduct Park Maintenance

Recreational activities

Increase Physical Activity

CBO

Conduct CalFresh outreach

Nutrition education training

Eat healthy food

Schools

Initiate Farm-to-School Procurement

Student served fresh produce

Eat healthy food

Business

Initiate worksite wellness program

Employee participation

Increase Physical Activity

Other local jurisdictions

Add health element to general plan

Walking & biking safety

Increase Physical Activity

Results We Seek

Population Outcomes

Short Term:
w/in 3 years

Mid-Term:
w/in 7 years

Long Term:
w/in 10 years

Improved Diet and Exercise

Decreased Obesity

Decreased Deaths
3-4-50

+ Example from San Diego



Priority Area 1: Active Living
Goal: Increase physical activity for East Region residents.
Live Well San Diego Strategy: Supporting Positive Choices

Strategies

1.1 Develop public-private partnerships to improve access to physical activity.

Objective(s)	Performance Measures	Source	Baseline	Frequency
1.1.1 Increase the number of joint use agreements by a minimum of 1 to provide access to recreational space, by June 2015.	Number of joint use agreements	County of San Diego, Parks and Recreation, Lemon Grove School District	13	As requested
1.1.2 Increase youth engagement in physical activity by 5%, by 2018.	Percentage of children and teens under the age of 18 who visited a park, playground, or open space in last month	2011-2012 California Health Interview Survey	84%	Every 2 years
	Percentage of children ages 5-11 who engaged in physical activity for at least one hour daily	2011-2012 California Health Interview Survey	22.8%* *statistically unstable	
	Percentage of teens ages 12-18 who engaged in physical activity for at least one hour daily	2011-2012 California Health Interview Survey	16.5%* *statistically unstable	

Goal 4: Improve identification and management of pre-diabetes and diabetes

SMART Objective 4.1: By December 2020, increase the number of individuals identified as pre-diabetic or diabetic every year by X% within affected populations.

Strategy	Activities	Partners	Output Measures	Outcome Measures
4.1.1 Identify and adopt education campaign(s) for outreaching to high risk populations to encourage screening, testing, referral, and prevention	4.1.1.1 Using information from the National Diabetes Prevention Program (NDPP), the Testyourbloodsugar.org website, Ad Council campaign, and/or others identify, adopt, and disseminate messages to promote screening and awareness in high risk communities	Lifetime of Wellness Program Diabetic support groups Certified diabetes education program (KDH) Church? Diabetes Coalition Lindsay Diabetes Project Kaweah Delta, Sierra View, and other hospitals, community/county clinics Family resource centers Tulare Co. Library (+) CSET Proteus FoodLink Schools (all ages)	# of high risk communities selected to receive information	% of community members being referred for diabetes and pre-diabetes programs
			# of pamphlets or brochures distributed	
			# of social media posts/followers	% of community members being screened for diabetes and pre-diabetes
			Creation of county diabetes coalition web presence # of partners promoting campaign # of traditional media "events"	



PRIORITY AREA: Housing

GOAL: Mendocino County will successfully develop additional housing stock for all economic sectors and each geographic area (including North Coast, South Coast, Laytonville/Leggett, Willits, Ukiah area, Anderson Valley, and Round Valley) of the County.

PERFORMANCE MEASURES
How We Will Know We are Making a Difference

Short Term Indicators	Source	Frequency
<i>By X?X?X? find and distribute metrics to substantiate the housing shortage for all sectors and geographic areas of the County</i>		
Long Term Indicators	Source	Frequency
<i>By X?X? decrease the number of homeless individuals and families relying on emergency shelters.</i>		
<i>By XYX develop permanent supportive housing for underserved and homeless individuals and families</i>		
<i>By X?X?X? increase housing stock to support job growth/economic development and development in private and public sectors. Ensuring all areas of the county have opportunity for housing and growth.</i>		



Discussion & Group Work



Thank you!