



Washington MPROVE & DACS

WA Public Health PBRN

Betty Bekemeier, Justin Marlowe, & Greg Whitman

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WA MPROVE

- 12 new (MPROVE) items asked of LHDs in 2013
 - Largely Chronic Disease (tobacco prevention, obesity prevention, oral health)
 - Additional items for STI & food protection staffing
- Other MPROVE items obtained from
 - Activities & Services Inventory,
 - other DOH web information systems, or
 - directly from DOH personnel

Summary of Data Completeness

- Two types of missing data
 - non-respondents
 - item non-responses
- 6 non-respondents
 - Tend to be smaller (4 of 6 are <75,000 pop.)
 - Less responsiveness than with A&S Inventory
- CD Control was most complete

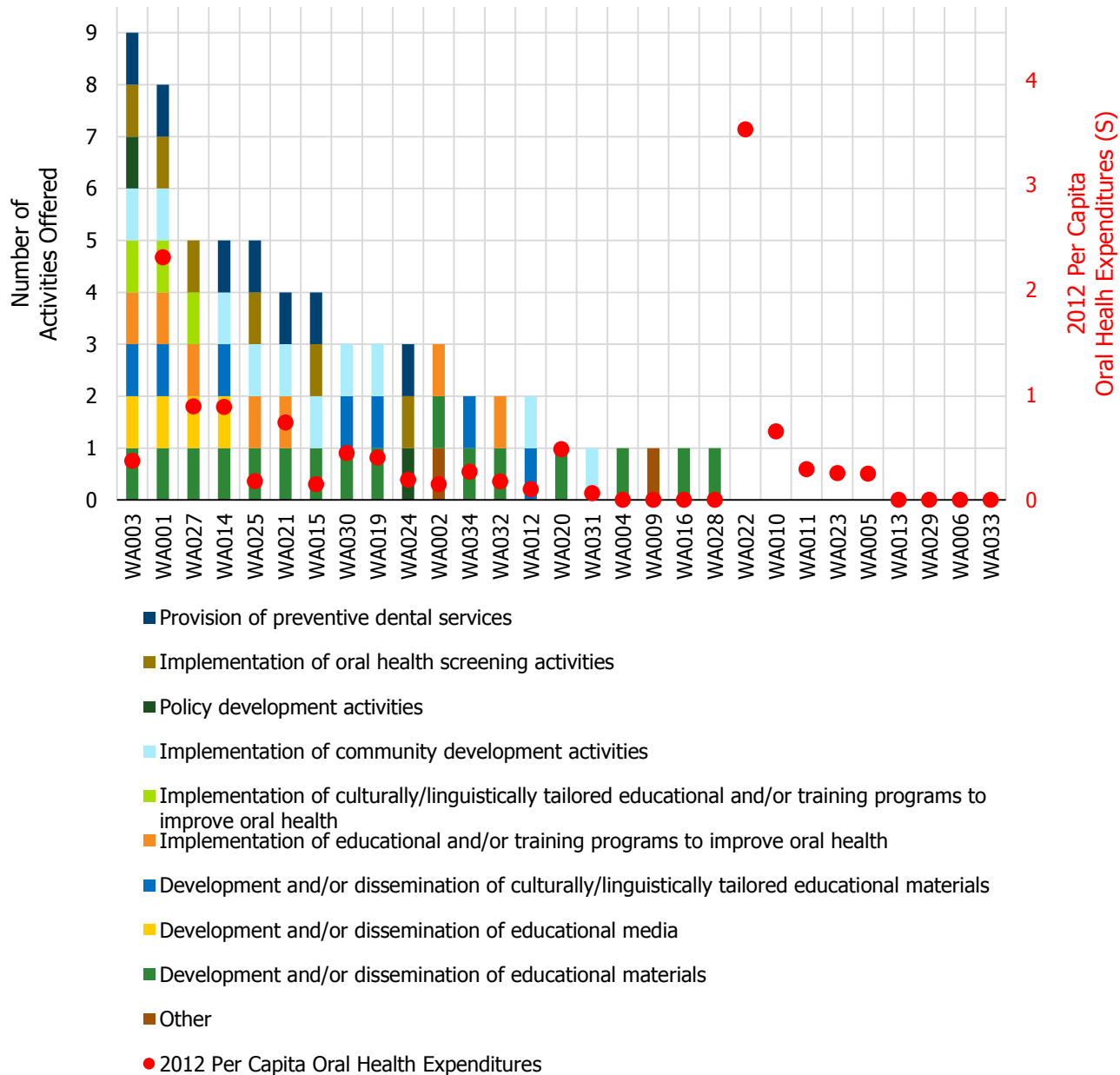
Distribution of Cumulative Count of Item Response for MPROVE Domains

cumulative count of item non-response	Domain					
	CD Control		Chronic Disease		Environmental Health	
	<i>Count</i>	<i>Percent</i>	<i>Count</i>	<i>Percent</i>	<i>Count</i>	<i>Percent</i>
Responded to ALL items	0	0	0	0	0	0
1 item unanswered	29	100	23	79	0	0
2 items unanswered	0	0	5	17	0	0
3 items unanswered	0	0	1	4	0	0
4 items unanswered	0	0	0	0	0	0
5 items unanswered	0	0	0	0	28	96
6 items unanswered	0	0	0	0	1	4

Data Exploration

- Data quality
 - Flagged suspicious values (e.g. out of range, inconsistent, “overly round” #'s)
 - Open-ended questions not always useful (e.g “Other”)
 - Validate/verify with other data, visual inspection
- Comparisons
 - Need to bring in additional data for context (e.g., population for per capita calculations, or for disease rates)
 - Need more years of data

2012 Oral Health Activities Offered and Per Capita Expenditures as Reported by WA LHDs



Issues

- Missing Data
 - 6/35 LHDs did not respond; some “skipped”
- Some data definitions inadequately clear
- Data less clear for jointly-delivered programs
- Specificity vs aggregate values
- Why do some items work better than others?
- The devil is in the (data mgmt) details

Next Steps

- Further refinement of MPROVE measures
 - E.g. ask for aggregate, as well as specific, values; Further data validation
- Making the whole set of data useful
- Identify causes of & reasons for variation
- Respond to State Leg. interests in:
 1. What is Public Health doing now? (*A&S Inventory, 2013 MPROVE, & future*)
 2. What is needed? (*related to DACS*)
 3. What is the gap between this activity and the need? (*DACS, DIRECTIVE, & future research*)

BIG PICTURE

PHAST 1.0

PHAST 2.0

existing data

prospective data

harmonization

standardization

compare few states

compare many states

compare few
measures

compare many
measures

**FACILITATING
STANDARDIZED MEASURES
EMBEDDED WITHIN ONGOING
REPORTING SYSTEMS
*(DISTANCE UNKNOWN)***



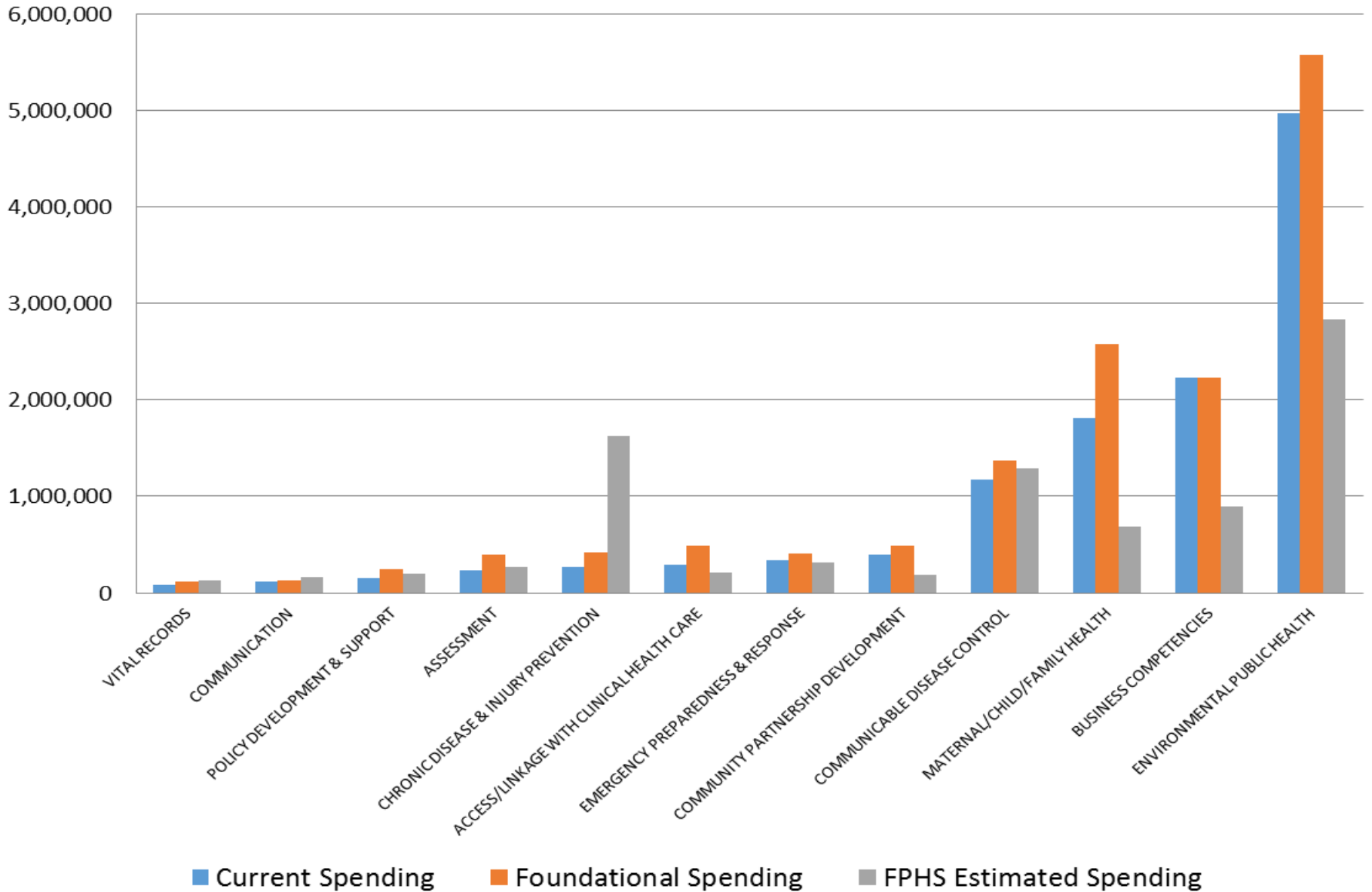
Public Health Activities and Services Tracking



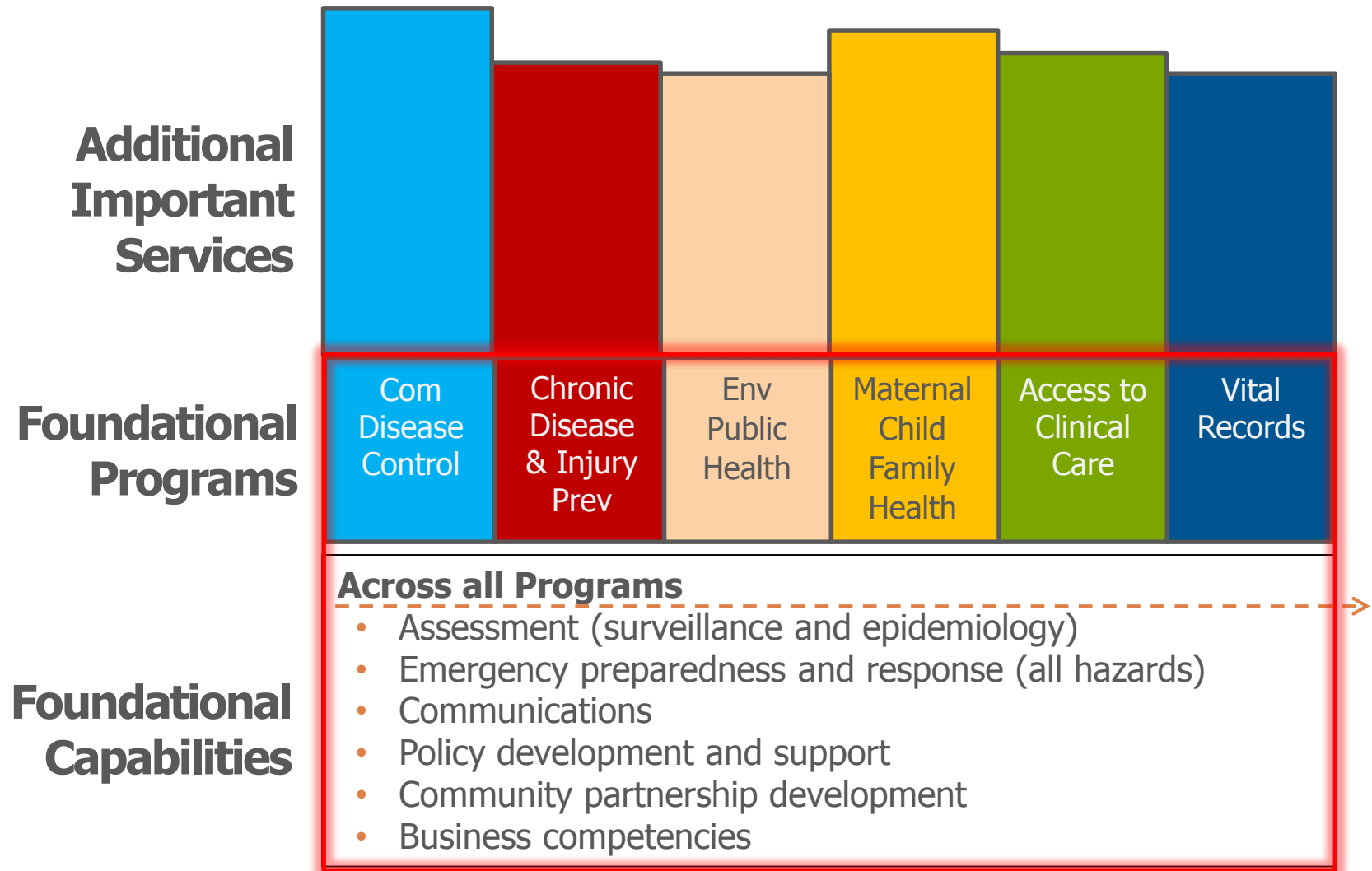
Washington DACS



Foundational Public Health Services Reported Costs and Cost Estimates, Kitsap County, WA FY2013



FRAMEWORK FOR THE FOUNDATIONAL SERVICES



FOUNDATIONAL PUBLIC HEALTH SERVICES

Some LHJs prepare their budgets according to definitions similar to the FPHS

Data from these jurisdictions offer an unprecedented opportunity to observe over time changes in FPHS unit costs, economies of scale, and economies of scope. The figure below shows the “harmonization” process required to synch this jurisdiction’s budget line items and cost centers to the FPHS definitions.

FPHS	Cost Center	CC Code
Environmental Public Health	Built Environment (BE)	590
	Drinking Water (SHW)	520
	Solid & Harardous Waste (SHW)	530
	Onsite Sewage Permitting (OSSP)	540
	Onsite Sewage Complaints (OSSC)	550
	Food & Living Environment	560
	Pollution Identification & Control (PIC)	600

Maternal/Child / Family Health	Parent/Child Health (PCH)	220
	Nurse Family Partnership (NFP)	221
	Child Care Consultation (CCC)	230
	Children with Special Health Care Needs (CSHCN)	250
	Family Planning (FP)	270
	Juvenile Detention	700
	New Parent Support (NPS), was Newborn Home	280

FPHS	Cost Center	CC Code
Business Competencies	Administration	110
	Accounting	120
	Human Resources	130
	Community Health Administration	210
	Information Technology	450
	Environmental Health Administration	510

Unit costs for selected FPHS units are measurable, and vary substantially across LHJs

	<u>Kitsap County LHJ</u>	<u>Cowlitz County LHJ</u>
FPHS Element II.A.4 Costs (CD - STI)	119058	15703
STI Contacts Followed, 2012	663	29
Cost/Case Followed	\$179.57	\$541.48

THANK YOU!

**The Robert Wood Johnson
Foundation**

**...and PBRN
Colleagues!!**

**Great teams have the
"right people on the bus."**

(Jim Collins,
Good to Great, 2001)



Public Health Activities and Services Tracking