AGENCY PERFORMANCE PLAN

**FY 2004**

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| **Name of Agency: Public Health** | | | |
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| **Agency Mission: Promoting and protecting the health of Iowans** | | | |
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| **Core Function** | **Outcome Measure(s)** | **Outcome Target(s)** | **Link to Strategic Plan Goal(s)** |
| **Child and Adult Protection** |  |  | **Public Health System**  **Goal II – Implement the essential public health services.**  **Goal III – Improve the capacity of local boards of health and other public health partners to address public health needs and implement the core public health functions.**  **Health Status**  **Goal I – Improve access to services for underserved populations, especially those who remain at increased risk of illness and premature death.** |
| **Desired Outcome(s):** |  |  |  |
| To provide prevention, protection, and support services to families and communities in Iowa in order to ensure strong families and safe communities. | **Infant mortality rate per 1000 live births. (Vital Statistics)**  **Percentage of Iowans rating their own health at good to excellent. (BRFSS)** | **6.5**  **88** |  |
| **Activities, Services, Products** | **Performance Measures** | **Performance Target(s)** | **Strategies/Recommended Actions** |
| **1. Prevention Services #1714, 1718, 1722, 1753** | **Child death rate per 100,000 children aged 1-14 years. (Division of Community Health)**  Adult death rate per 100,000 as reported through the Domestic Abuse Death Review Team. (Division of HPPAB)  **Percentage of children 0-5 enrolled in (Healthy Opportunities for Parents to Experience Success – Healthy Families Iowa) HOPES-HFI with health care coverage. (HOPES-HFI Program)** | **21.6**  **0.5**    **95** | * **Ensure state capacity to evaluate and influence the problem of infant mortality rate disparities among demographic subgroups.** * **Implement the array of child mortality prevention recommendations set forth by the Child Death Review Team.** * **Provide adequate state funding to maintain domestic violence shelters and service programs.** * **Continue to educate local providers regarding hawk-I and Medicaid and promote communication with hawk-I outreach programs.** |
| **2. Policy Development #1755, 0661** | Percentage of prior calendar year child deaths (age 0-17 years) investigated and documented. (Division of Community Health)  **Percentage of prior calendar year adult domestic abuse homicides and suicides investigated and documented. (Division of HPPAB)** | **80**  **75** | * **Maintain current efforts to meet targets.** |

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| **Core Function** | **Outcome Measure(s)** | **Outcome Target(s)** | **Link to Strategic Plan Goal(s)** |
| **Emergency Management, Domestic Security and Public Health Preparedness** |  |  | **Public Health System**  **Goal I – Use existing and evolving technology and standards for the delivery of public health services and information.**  **Goal II – Implement the essential public health services.**  **Goal III – Improve the capacity of local boards of health and other public health partners to address public health needs and implement the core public health functions.**  **Health Status**  **Goal II: Support and enhance programming to optimize effectiveness.** |
| **Desired Outcome(s):** |  |  |  |
| To provide public health disaster preparedness services to all Iowans in order to develop and implement a system of public health and health care services in response to disaster/terrorism incidents or other public health emergencies. | **Percentage of Iowa population covered by health alert network. (CDOR)** | **100** |  |
| **Activities, Services, Products** | **Performance Measures** | **Performance Target(s)** | **`Strategies/Recommended Actions** |
| **1. Public Health Disaster Response Systems Development #1932, 1934, 1920, 1926, 1924** | **Percentage of completed regional public health disaster/terrorism capacity and capability plans. (CDOR)**  **Number of mass vaccination or prophylaxis clinics per county. (CDOR)** | **100**  **1** | * **Continue to provide support for increased capacity to develop appropriate response programs.** * **Evaluate and revise county dispensing plans of NPS assets as needed.** |

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| **Core Function** | **Outcome Measure(s)** | **Outcome Target(s)** | **Link to Strategic Plan Goal(s)** |
| **Health and Support Services** |  |  | **Public Health System**  **Goal II – Implement the essential public health services.**  **Goal III – Improve the capacity of local boards of health and other public health partners to address public health needs and implement the core public health functions.**  **Health Status**  Goal I – Improve access to services for underserved populations, especially those who remain at increased risk of illness and premature death.  **Goal II – Support and enhance programming to optimize effectiveness.**  **Goal III – Eliminate health disparities.**  **Image and Communication**  Goal I – Respond to public health issues and trends and lead in promoting and protecting the health of Iowans.  **Goal II – Understand and respond to the needs and health concerns of all Iowans.** |
| **Desired Outcome(s):** |  |  |  |
| To assure individual, community- and facility-based prevention, intervention, treatment, and support services to all Iowans in order to maintain/improve health status and access to health services. | **Percentage of surveyed customers positively impacted through receipt of public health services or products. (Customer Survey)**  **Percentage of surveyed customers who are positively satisfied with timeliness. (Customer Survey)**  **Percentage of surveyed customers who are positively satisfied with treatment. (Customer Survey)**  **Percentage of surveyed customers who are positively satisfied overall. (Customer Survey)** | **Establish a baseline during FY 04.**  **90**  **90**  **90** |  |
| To provide disease epidemiology services to families and communities in Iowa in order to develop and implement a system of public health services ready to deal with outbreaks of infectious disease, food borne illness, and other public health threats or emergencies. | **Percentage of infectious disease epidemiological follow-up contacts identified within 48 hours of notification. (CADE)** | **97** |  |
| To provide emergency medical and trauma services to Iowans in order to develop and implement a system of health services ready to respond to health emergencies. | **Percentage of patients meeting the criteria of the Iowa trauma protocol transported to a trauma care facility in 30 minutes or less. (Trauma Registry)** | **90** |  |
| To provide risk reduction and prevention services to all Iowans in order to ensure improved health status. | **Death rate due to motor vehicle crashes (seat belt issue) per 100,000 population. (Vital Statistics)**  **Percentage of premature adult deaths due to heart disease using a 3-year national average of years of potential life lost. (Vital Statistics)**  **Percentage of premature adult deaths due to cancer using a 3-year national average of years of potential life lost. (Vital Statistics)** | **15.3**  **12.4**  **16.3** |  |
| **Activities, Services, Products** | **Performance Measures** | **Performance Target(s)** | **`Strategies/Recommended Actions** |
| **1. Public Health Planning/Communications #0202, 2106, 1963, 0458** | **Percentage of overall or composite management ratings that meet or exceed expectations. (Employee Survey)**  **Percentage of strategic plan objectives achieved on schedule. (IDPH Exec. Team)**  **Average monthly number of media contacts. (Division of CPP)** | **75**  **90**  **20** | * **Continue to improve employee/management communications through frequent employee meetings, management accessibility and frequent individual meetings.** * **Continue to refine, track progress, and update strategic plan on an annual basis.** * **Communicate/collaborate with and disseminate information to public and private public health partners to prioritize health as an issue and better serve customers.** |
| **2. Intervention/Treatment # 0222, 0101, 0102, 0103, 0108, 0110, 0112, 0116, 0210, 9210, 8202, 9310, 1521, 1522, 0804, 1564, 1563, 1601, 1602, 1541, 0303, 0304, 1105, 0703, 0705, 0706, 0709** | **Percentage decrease in pre/post treatment substance abuse use. (SARS)**    **Percentage of successfully discharged clients reporting no wagering in last 30 days. (Gambling Treatment Program)**  **Percentage of children aged 19-35 months immunized. (CDC)**  **Percentage of women enrolled in Title V programs who receive prenatal care in the first trimester. (Division of Community Health)**  **Percentage of Iowa seniors with prescription drug coverage. (Insurance Division)**  **Percentage of home care aide clients where services have delayed, reduced, or prevented institutionalization. (Division of Community Health)** | **15**  **80**  **77.5**  **90**  **Establish baseline during FY 04.**  **92** | * **Evaluate the effectiveness of treatment programs in promoting and protecting the health of all Iowans.** * **Develop a plan to provide immunization services to under-served populations.** * **Advocate for improved access to early prenatal care for vulnerable populations, including undocumented (immigrant) women.** * **Support the development of a system for prescription drug coverage for seniors.** * **Maintain and enhance local providers’ ability to prioritize admissions.** |
| **3 Prevention Services #0414, 0408, 9206, 1706, 0151, 0152, 0154, 0156, 0164, 0166, 0420, 0406, 0702, 0416, 1966, 9302, 9342, 9356, 9312, 9352, 5101, 1758, 1752, 0402, 0602, 1351, 1352, 1568, 0302, 0502, 0503. 0505, 0506, 0514, 0516, 0518, 0652, 0654, 0508, 1108, 0552, 0554, 0606, 0610, 0608, 0682, 0712, 1103, 9202, 1802, 0404, 0454, 0688, 0690, 1404, 1574, 1756** | Percentage of Iowa children age 12-71 months that receive a blood lead test. (Lead Program)  **Percentage of Iowa youth who use tobacco products. (Iowa Youth Survey-collected every 3 years)**  **Percentage of Iowa adults who use tobacco products. (BRFSS-collected every other year)**  **Number of project sites that support positive individual behavior change to reduce the prevalence of cardiovascular disease and stroke. (Health Promotion Bureau)**  **Percentage of breastfeeding mothers among Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) population. (WIC Program)**  **Percentage of children served by Title V who report a medical home, excluding children with special health care needs. (Division of Community Health)** | **70**  **29**  **21**  **11**  **75**  **70** | * **Encourage local jurisdictions to adopt lead hazard remediation ordinances.** * **Continue to enhance and produce effective counter marketing campaigns for tobacco use prevention.** * **Establish preventable-disease risk reduction programs for general and identified at-risk populations.** * **Develop a worksite breastfeeding support kit.** * **Continue to promote collaboration between private health clinics and local contract agencies to establish medical homes for children.** |
| **4. Assessment/Surveillance/Epidemiology # 1304, 1306, 1901, 9252, 1402, 1501, 1502, 1506, 1302, 1572, 1566, 1308, 0212, 1312, 1702** | **Average number of days between diagnosis and report to IDPH. (CADE)**  **Average number of days between diagnosis and report of an STD, HIV, or AIDS case to IDPH. (STD Program)**  **Number of direct consultations provided to local boards of health or environmental health practitioners annually. (Division of Environmental Health)** | **7**  **7**  **450** | * **Establish and support state and local communicable-disease data collection systems.** * **Educate physicians, infection control practitioners and laboratories through statewide meetings, conferences, web postings and other program literature.** * **Maintain and enhance local public health agencies to implement the essential public health services.** |
| **5. Policy Development #0207, 1801** | Percentage of policy initiatives analyzed annually. (Division of HPPAB) | **90** | * **Continue to identify and analyze important policy issues that impact the public’s health and the health delivery system.** |
| **6. Systems Development #1941, 1942, 9204, 1711, 1716, 1944, 0662, 0666, 0668, 0670, 0672, 0674, 0678, 0684, 0686, 0901, 0902, 0905, 0912, 0914, 0932, 0957, 0958, 0959, 0960, 1909, 0651, 0708, 0306, 0908, 1726, 1946, 2156** | **Percentage of identified health systems changes that have been implemented. (Multiple Programs)**  **Percentage of local boards of health that have a local health improvement plan linked to Healthy Iowans 2010. (Division of Community Health)** | **75**  **90** | * **Evaluate the availability and distribution of program resources and redirect as needed.** * **Assess and support the development of local agency resources to address public health needs and carry out the core public health functions.** * **Continue to provide technical assistance to local communities in developing health improvement plans that include all community sectors especially special and hard-to-reach populations.** |
| **7. Medical Services #1951** | **Percentage of autopsy reports completed within 90 days from date of death. (Medical Examiner’s Office)** | **95** | * **Enhance the resources of the Medical Examiner’s Office to complete work in a timely manner.** |

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| **Core Function** | **Outcome Measure(s)** | **Outcome Target(s)** | **Link to Strategic Plan Goal(s)** |
| **Regulation and Compliance** |  |  | **Public Health System**  Goal I – Use existing and evolving technology and standards for the delivery of public health services and information.  **Goal II – Implement the essential public health services.** |
| **Desired Outcome(s):** |  |  |  |
| To provide enforcement of the Code of Iowa and Iowa Administrative Code to ensure and protect Iowans' health, safety, and welfare. | **Percentage of complaints about health professionals investigated and resolved according to due process. (Licensing Boards)** | **90** |  |
| **Activities, Services, Products** | **Performance Measures** | **Performance Target(s)** | **`Strategies/Recommended Actions** |
| **1. Program/Professional Licensing #1968, 2051, 2071, 2091, 2093, 2085, 2061-PL, 2063-PL, 2087, 2081** | **Percentage of completed license renewals processed in 2 weeks. (Licensing Boards)**  **Percent of substance abuse treatment facilities completing licensing process. (Division of HPPAB)** | **95**  **Establish a baseline during FY04.** | * **Continue to monitor application processing and remove barriers.** * **Maximize use of online licensing renewal systems (where available.)** |
| **2. Compliance/Enforcement #1904, 1905, 1907, 1908, 1910, 1912, 1914, 1915, 1918, 9308, 2083, 2075, 2095, 1922, 2061-CE, 2063-CE** | **Percentage of retailers in noncompliance with tobacco sales to minors. (SYNAR)**  **Ratio of the number of cases open at the end of the year to the number of cases open at the end of the prior year. (Licensing Boards)** | **20**  **1.00** | * **Continue to educate retailers and employees through the tobacco retailer education program.** * **Review complaints; conduct investigations; and track disciplinary caseload.** * **Monitor compliance with board ordered discipline.** * **Resolve cases through education and corrective measures where appropriate.** |

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| **Core Function** | **Outcome Measure(s)** | **Outcome Target(s)** | **Link to Strategic Plan Goal(s)** |
| **Research, Analysis, and Information Management** |  |  | **Public Health System**  Goal I – Use existing and evolving technology and standards for the delivery of public health services and information.  **Goal II – Implement the essential public health services.**  **Goal III – Improve the capacity of local boards of health and other public health partners to address public health needs and implement the core public health functions.**  **Health Status**  Goal I – Improve access to services for underserved populations, especially those who remain at increased risk of illness and premature death.  Goal II – Support and enhance programming to optimize effectiveness.  **Goal III – Eliminate health disparities.**  **Goal IV. – Monitor progress on *Healthy Iowans 2010* goals and action steps with particular focus on measures of health status.** |
| **Desired Outcome(s):** |  |  |  |
| To provide health information and information assistance to Iowans for health assessment, planning, and decision-making to promote efficient and effective use of resources. | **Percentage of data resources that are coordinated from a single point of contact to meet the demands of the department, executive branch and Governor’s office. (Center for Health Statistics)**  **Percentage of health indicators with a minimum of 5 years data (except new) trended, tracked, and analyzed. (Healthy Iowans)**  **Percentage of data requests completed by mutually agreed deadline. (Center for Health Statistics)** | **Establish a baseline during FY 04.**  **95**  **90** |  |
| **Activities, Services, Products** | **Performance Measures** | **Performance Target(s)** | **`Strategies/Recommended Actions** |
| **1. Data Collection/Research/ Analysis #0106, 0114, 2203, 2204, 0104, 0456** | **Completion of an updated annual health statistics business plan. (Center for Health Statistics)**  **Percentage of data analyses and statistics requests completed by mutually agreed deadline. (Center for Health Statistics)** | **1**  **90** | * **Implement business plan to maintain and improve health statistics system.** * **Assure that all local information and referral services, health departments, and programs have access to up-to-date information on all IDPH programs and initiatives.** * **Identify, collect, analyze, and disseminate appropriate data on disparate populations.** |

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| **Core Function** | **Outcome Measure(s)** | **Outcome Target(s)** | **Link to Strategic Plan Goal(s)** |
| **Resource Management** |  |  | **Public Health System**  Goal I – Use existing and evolving technology and standards for the delivery of public health services and information.  Goal II – Implement the essential public health services.  **Internal Environment**  Goal I – Create an environment within the department where employees 1) are supported in modeling healthy behaviors; 2) have opportunities for training; 3) feel supported by supervisors and peers; 4) are trusted by, and trust, department managers; and 5) have opportunities to influence priority-setting.  Health Status  Goal II – Support and enhance programming to optimize effectiveness. |
| **Desired Outcome(s):** |  |  |  |
| To provide administrative, financial, and support services to IDPH personnel, programs, and contractors to support improved services and results for Iowans. | **Percentage of customers who are positively satisfied with timeliness. (Customer Survey)**  **Percentage of customers who are positively satisfied with treatment. (Customer Survey)**  **Percentage of customers who are positively satisfied overall. (Customer Survey** | **90**  **90**  **90** |  |
| **Activities, Services, Products** | **Performance Measures** | **Performance Target(s)** | **`Strategies/Recommended Actions** |
| **1. Personnel #2211, 2212** | **Percentage of employee evaluations completed within one month of due date. (Personnel Office)** | **75** | * **Ensure that supervisors have proper training to complete employee evaluations.** |
| **2. Education #2214, 2218, 0954** | **Percentage of new employees who receive individual orientation within 3 days of hire. (Personnel Office)**  **Percentage of employees attending 3 trainings per year. (Personnel Office)** | **100**  **60** | * **Provide comprehensive orientation to new department employees within one month of hire.** * **Continue to assess new employee orientation needs and facilitate the development of orientation sessions to meet those needs.** * **Support the completion of an annual minimum of one management track training session for supervisors and three job-related sessions for non-supervisory staff.** |
| **3. Information Management #2207, 2208** | **Percentage of helpdesk requests resolved within 4 hours of initial request. (Information Management Bureau)**  **Percentage of network-wide unscheduled downtime, in accumulated annual hours as a percent of total hours, for the Lucas Building IDPH local area network. (Information Management Bureau)** | **70**  **0.1** | * **Evaluate and improve IM customer service strategies.** * **Implement plans to minimize disaster recovery time.** * **Adopt appropriate technology to support public health activities.** |
| **4. Finance #2201, 2202, 0665, 0801** | Percentage of noncompliance incidents with  **accounting-related state rules and regulations. (Fiscal Bureau)**  **Percentage of financial status reports (FSRs) filed prior to due date. (Fiscal Bureau)**  **Percentage of contracts requiring a corrective amendment. (Fiscal Bureau)** | **2**  **100** 1 | * **Maintain and maximize fiscal responsibility in the management of state, federal, and other revenues and expenditures by continued compliance with accounting- related state and federal regulations.** * **Ensure compliance with FSR filing schedules.** * **Maintain internal review of contract process.** |
| **5. Policy Development #2151, 2152, 2101, 2102** | **Percentage of policy initiatives analyzed. (Director’s Office, Div. Of Administration)** | **100** | * **Continue to identify and analyze important policy issues that impact the public’s health and the health delivery system.** |