Data for public health accountability metrics report

<u>Draft/preliminary</u>. For review and discussion by PHAB Accountability Metrics subcommittee

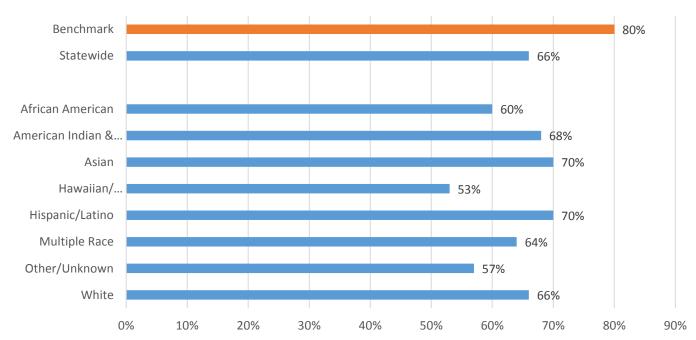
The Public Health Advisory Board adopted the public health accountability metrics and local public health process measures listed below.

	Public Health Accountability Metric	Local public health process measures
Communicable disease control	Two-year-old vaccination rates	 Percent of Vaccines for Children clinics [that serve populations experiencing vaccination disparities] that participate in the Assessment, Feedback, Incentives and eXchange (AFIX) program
	Gonorrhea rates	 Percent of gonorrhea cases that had at least one contact that received treatment Percent of gonorrhea case reports with complete "priority" fields
Prevention and Health Promotion	Adults who smoke cigarettes	 Percent of community members reached by local [tobacco retail/smoke free] policies
	Opioid overdose deaths	 Percent of top prescribers enrolled in the Prescription Drug Monitoring Program (PDMP)
Environmental Health	Active transportation	 Number of active transportation partner governing or leadership boards with LPHA representation
	Drinking water standards	 Number of water systems surveys completed Number of water quality alert responses Number of priority non-compliers (PNCs) resolved
Access to Clinical Preventive Services	Effective contraceptive use	 Do not adopt a local public health process measure at this time. Continue to explore public health roles and functions for assuring access to effective contraceptives.
	Dental visits among children ages 0-5 years	 Do not adopt a local public health process measure at this time. Continue to explore public health roles and functions to assure access to dental visits for 0-5 year olds.

Public Health Accountability Metric – Childhood Immunization

Percentage of children who received recommended vaccines before their second birthday.





Source: ALERT Immunization Information System, 2016; accessed online at http://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/VACCINESIMMUNIZATION/Pages/researchchild.aspx

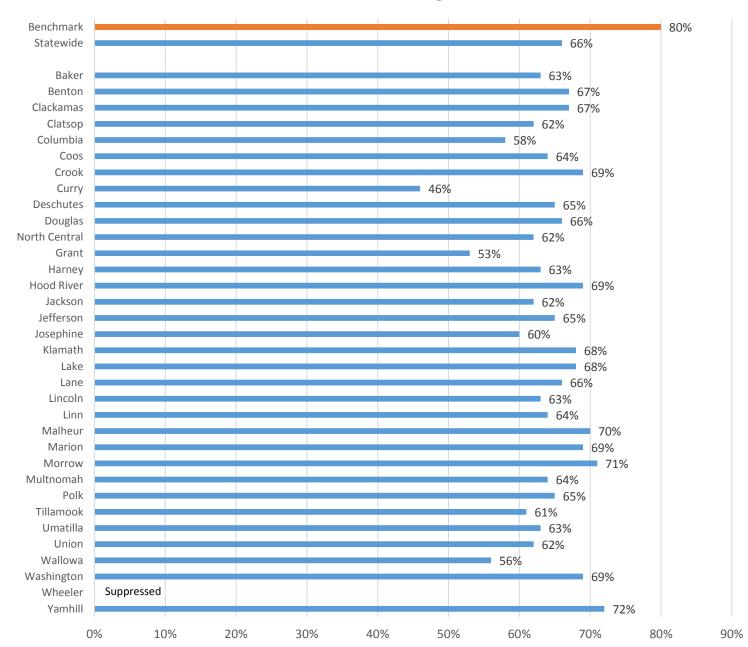
Benchmark: Oregon State Health Improvement Plan (SHIP) 2020 target

- Two year olds are children 24 to 35 months of age residing in the county.
- The official childhood vaccination series for full immunization is 4 doses of DTaP, 3 doses IPV, 1 dose MMR, 3 doses Hib, 3 doses Hep B, 1 dose Varicella, and 4 doses PCV (4:3:1:3:3:1:4 series).
- Rates not displayed for populations of fewer than 50 people in accordance with Oregon Public Health Division confidentiality policy. Immunization rates above 95% are suppressed to prevent the possible identification of individuals in accordance with Oregon Public Health Division confidentiality policy.

Public Health Accountability Metric – Childhood Immunization

Percentage of children who received recommended vaccines before their second birthday.





Source: ALERT Immunization Information System, 2016I; accessed online at http://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/VACCINESIMMUNIZATION/Pages/researchchild.aspx6

Benchmark: Oregon State Health Improvement Plan (SHIP) 2020 target

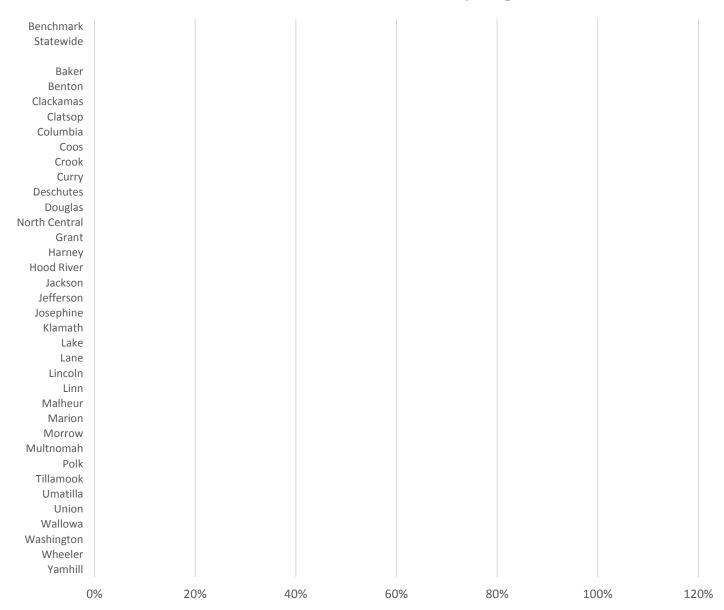
Notes:

• Rates not displayed for populations of fewer than 50 people in accordance with Oregon Public Health Division confidentiality policy. Immunization rates above 95% are suppressed to prevent the possible identification of individuals in accordance with Oregon Public Health Division confidentiality policy.

Local Public Health Process Measure for Childhood Immunization

Percent of Vaccines for Children clinics that participate in AFIX.

Percent of Vaccines for Children Clinics Participating in AFIX, 2017



Source: Assessment, Feedback, Incentives, and eXchange (AFIX) online tool

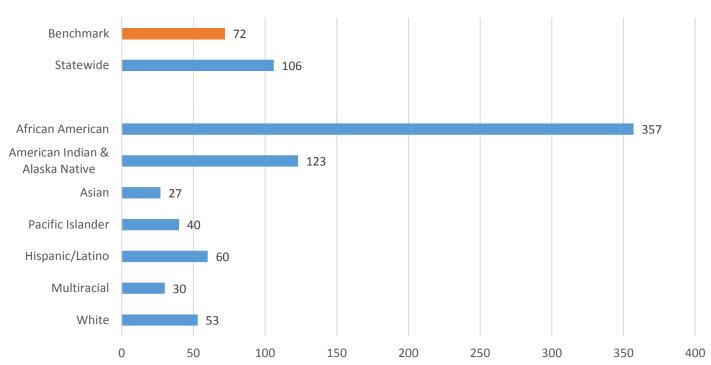
Benchmark: TBD

Notes: Data forthcoming

Public Health Accountability Metric – Gonorrhea Rate

Gonorrhea incidence: rate per 100,000 population.

Gonorrhea Rate, Statewide Oregon 2016 Race/Ethnicity 2012-16



Source: Oregon Public Health Epi User System (Orpheus), 2016

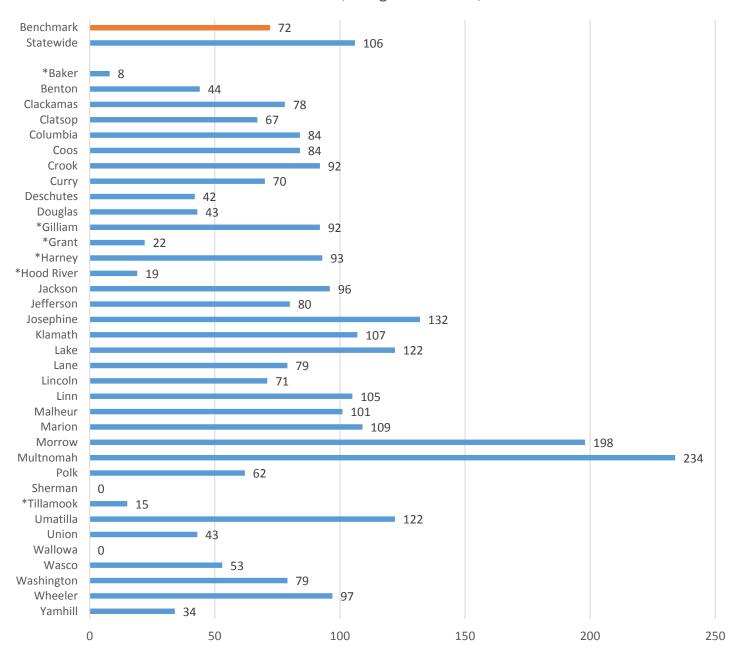
Benchmark: Oregon State Health Improvement Plan (SHIP) 2020 target

- Race/ethnicity data are combined for years 2012-2016
- All statewide rates shown are crude rates (not age adjusted rates)
- Source for sexually transmitted disease case reports: HIV/STD/TB Prevention Program, Center for Public Health Practice, Public Health Division, Oregon Health Authority.

Public Health Accountability Metric – Gonorrhea Rate

Gonorrhea incidence: rate per 100,000 population, age adjusted.

Gonorrhea Rate, Oregon Counties, 2016



Source: Orpheus, 2016

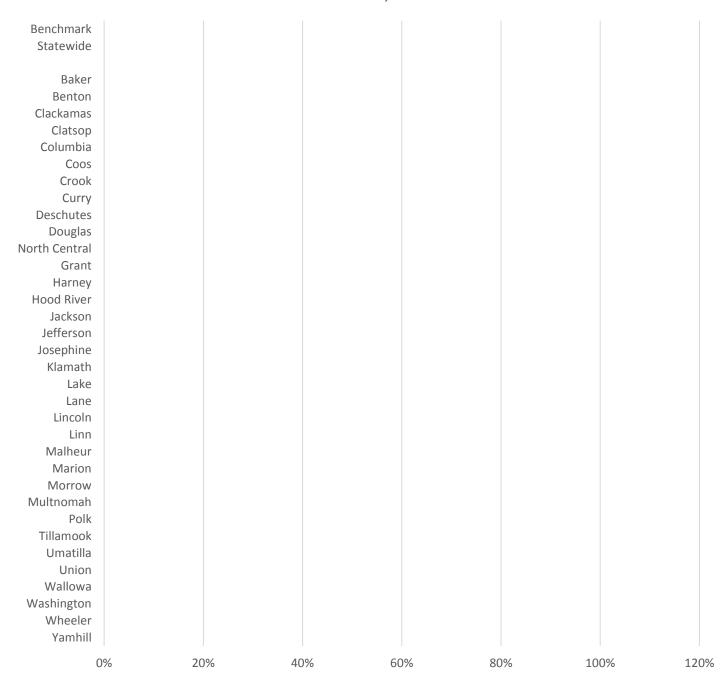
Benchmark: Oregon State Health Improvement Plan (SHIP) 2020 target

- Age adjusted county rates are adjusted to the 2000 Census U.S. population
- Rates and percentages based on 5 or fewer events are unreliable and are indicated with "*".
- Source for sexually transmitted disease case reports: HIV/STD/TB Prevention Program, Center for Public Health Practice, Public Health Division, Oregon Health Authority.

Local Public Health Process Measure for Gonorrhea Rate

Percent of gonorrhea cases that had at least one contact that received treatment.

Percent of Gonorrhea Cases That Had At Least One Contact That Received Treatment, 2016



Source: Orpheus, 2016

Benchmark: TBD

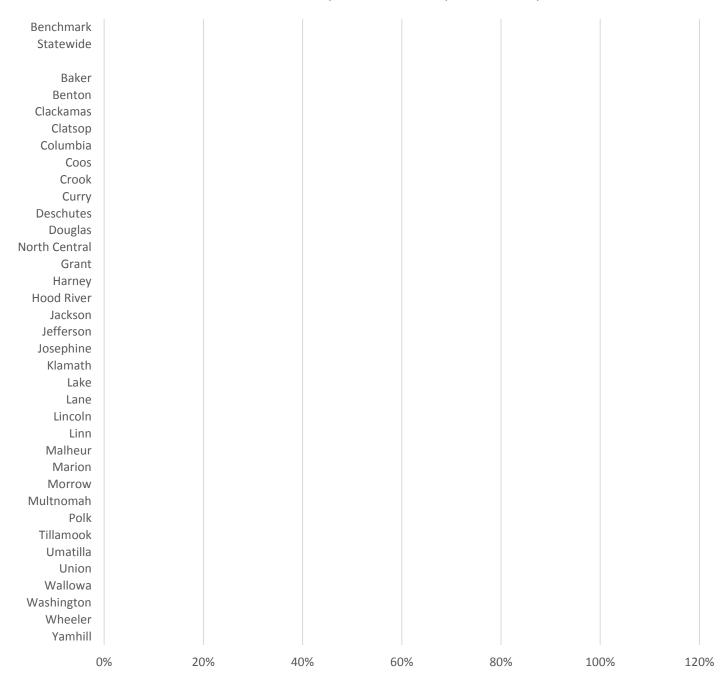
Notes:

Data forthcoming

Local Public Health Process Measure for Gonorrhea Rate

Percent of gonorrhea case reports with complete priority fields.

Percent of Gonorrhea Case Reports with Complete Priority Fields, 2016



Source: Orpheus, 2016

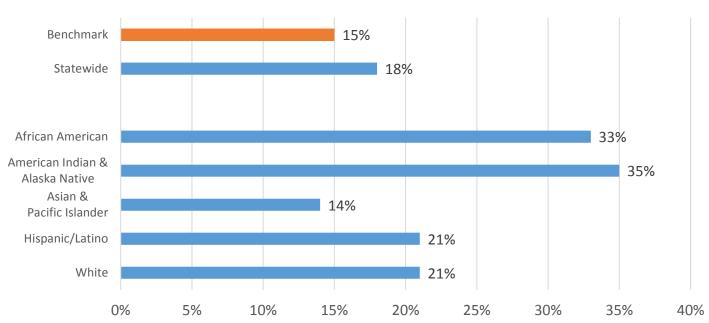
Benchmark: TBD

- Priority fields include: Priority fields include: pregnancy status, HIV status/date of most recent test, gender of sex partners, and proper treatment of gonorrhea.
- Data forhcoming.

Public Health Accountability Metric - Adult Smoking Prevalence

Percentage of adults who smoke cigarettes.

Adult Smoking Prevalence, Age Adjusted, Oregon Statewide 2015 and Race/Ethnicity 2010-11



Source: Oregon Behavioral Risk Factor Surveillance System (BRFSS), 2015

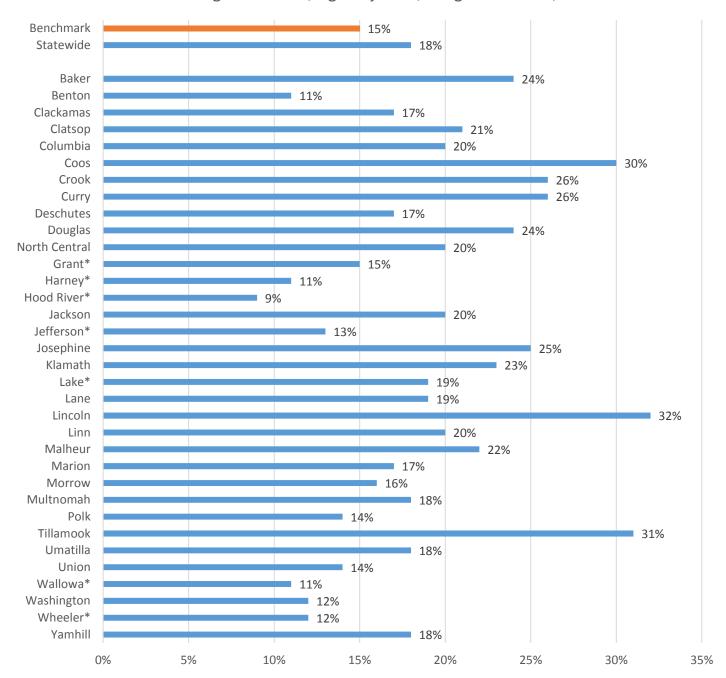
Benchmark: Oregon State Health Improvement Plan (SHIP) 2020 target

- Race/ethnicity data are combined for years 2010-11.
- Statewide rate and rates by race/ethnicity are age adjusted.
- Survey includes only people age 18 and older.
- Weighted percent: Each survey response is weighted by the size of the total demographic group (age, race and gender) in Oregon that they represent.

Public Health Accountability Metric - Adult Smoking Prevalence

Percentage of adults who smoke cigarettes.

Adult Smoking Prevalence, Age Adjusted, Oregon Counties, 2012-15



Source: Oregon Behavioral Risk Factor Surveillance System (BRFSS), 2016

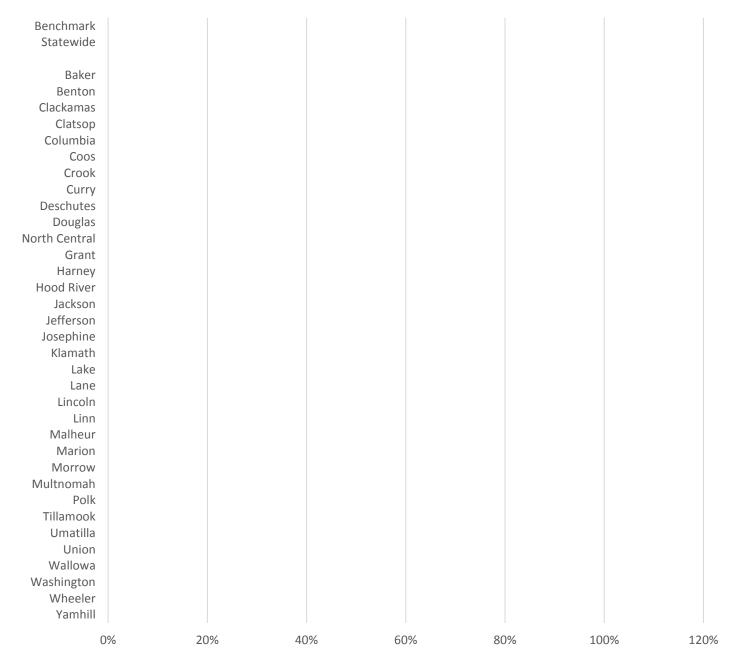
Benchmark: Oregon State Health Improvement Plan (SHIP) 2020 target

- County data are combined for years 2012-2015. North Central is comprised of Gilliam, Sherman, and Wasco counties.
- Statewide rate is not age adjusted. Rates by county are age adjusted
- Counties with * have a relative standard error (RSE) ≥ 30 and estimates are considered unreliable.

Local Public Health Process Measure for Adult Smoking Prevalence

Percent of community members reached by local tobacco retail and smoke free policies.

Percent of Community Members Reached by Tobacco Policies, 2017



Source: Tobacco Policy Database, Health Promotion Chronic Disease Prevention Section, Oregon Public Health Division, Oregon Health Authority), 2017

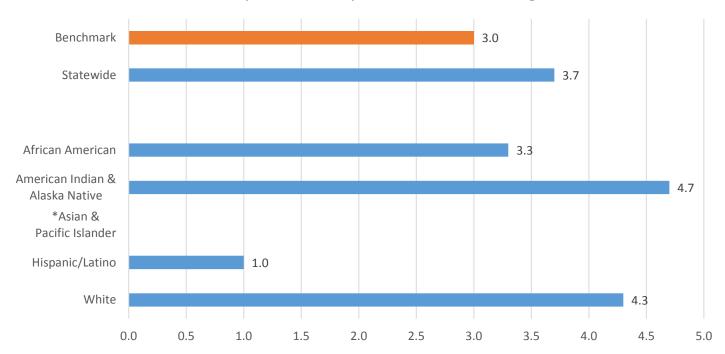
Benchmark: TBD

- Tobacco policies include tobacco-free county properties and tobacco retail licensure.
- Data forthcoming

Public Health Accountability Metric – Prescription Opioid Mortality

Prescription opioid mortality rate (deaths per 100,000 population)

Pharmaceutical Opioid Mortality Rate Per 100,000, Oregon 2012-16



Source: Oregon death certificate and OVDRS, accessed from online Opioid Data Dashboard http://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SUBSTANCEUSE/OPIOIDS/Pages/data.aspx

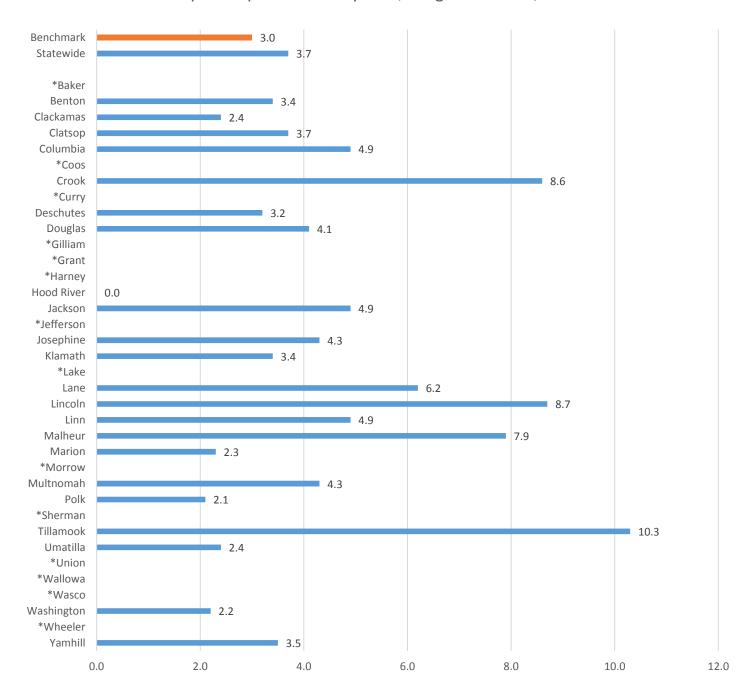
Benchmark: State Health Improvement plan 2020 target: <3/100,000 for prescription opioid mortality.

- All rates are 5-year average crude rates per 100,000 for 2012-2016.
- Population estimates from NCHS bridged-race annual population estimates.
- 2014-2016 data do not include deaths from Oregon residents that occurred out of state.
- * indicates rates not displayed for groups with fewer than 5 deaths

Public Health Accountability Metric – Prescription Opioid Mortality Rate

Mortality rate per 100,000 population, 5-year combined average 2012-16.

Prescription Opioid Mortality Rate, Oregon Counties, 2012-16



Source: Oregon death certificate and OVDRS, accessed from Opioid Data Dashboard http://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SUBSTANCEUSE/OPIOIDS/Pages/data.aspx

Benchmark: SHIP benchmark: <3/100,000

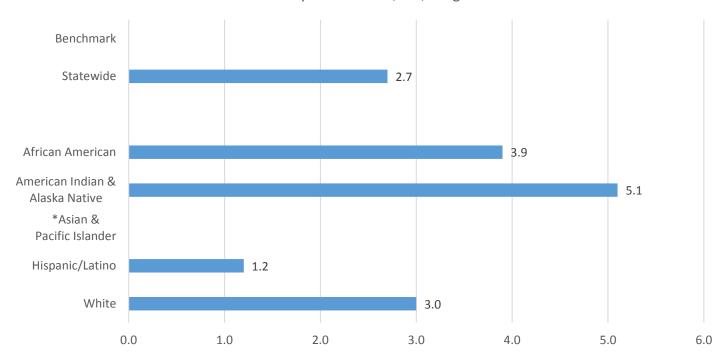
Notes:

* indicates rates not displayed for counties with fewer than 5 deaths

Public Health Accountability Metric – Heroin Mortality

Heroin mortality rate (deaths per 100,000 population)

Heroin Mortality Rate Per 100,000, Oregon 2012-16



Source: Oregon death certificate and OVDRS, accessed from Opioid Data Dashboard, http://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SUBSTANCEUSE/OPIOIDS/Pages/data.aspx

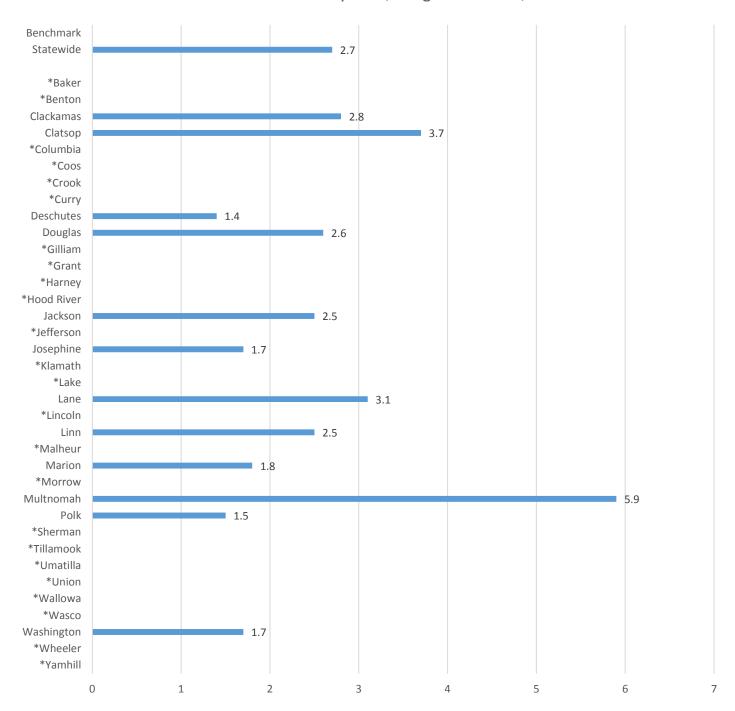
Benchmark: TBD

- Crude rates (deaths/100,000) are 5-year combined averages 2012-2016.
- * indicates rates not displayed for groups with fewer than 5 deaths.

Public Health Accountability Metric - Heroin Mortality Rate

Mortality rate per 100,000 population, 5-year combined average 2012-16.

Heroin Overdose Mortality Rate, Oregon Counties, 2012-16



Source: Oregon death certificate and OVDRS, accessed from Opioid Data Dashboard, http://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SUBSTANCEUSE/OPIOIDS/Pages/data.aspx

Benchmark: TBD

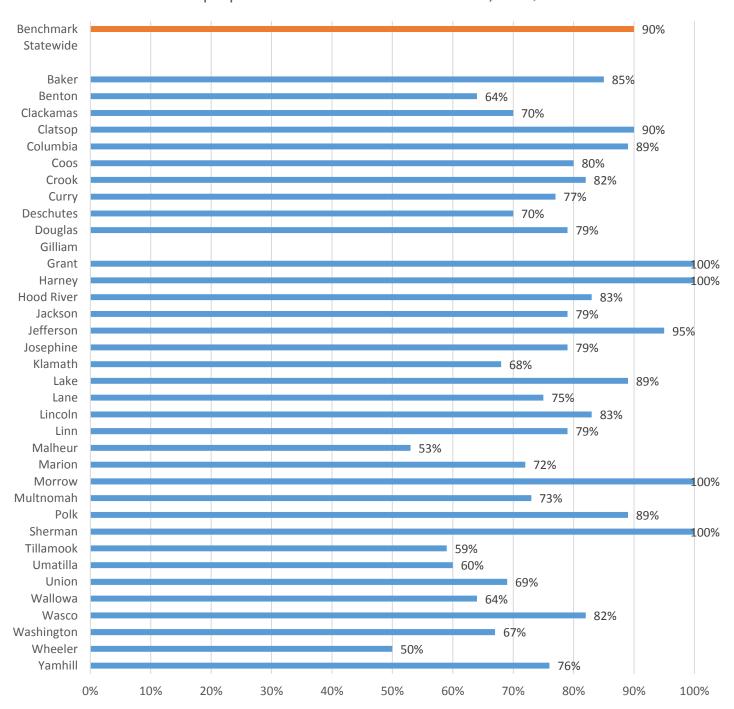
Notes:

* indicates rates not displayed for counties with fewer than 5 death

Local Public Health Process Measure for Prescription Opioid Mortality

Percent of top prescribers enrolled in the Prescription Drug Monitoring Program (PDMP).

Percent of Top Opioid Prescribers Enrolled in PDMP, 4th Quarter 2016



Source: Oregon Prescription Drug Monitoring Program database, 2016. Accessed online at: http://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SUBSTANCEUSE/OPIOIDS/Pages/data.aspx

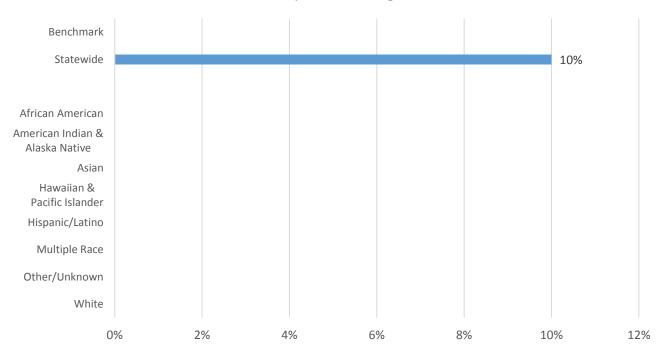
Benchmark: State Health Improvement Plan target for "authorized to use" is 90%; program target is 95%

- Top prescribers are defined as the top 20%
- Data not available online for Gilliam County or Oregon statewide; data provided online are quarterly %

Public Health Accountability Metric – Active Transportation

Percent of commuters who walk, bike, or use public transportation to get to work.

Active Transportation, Oregon 2016



Source: American Community Survey online tool, 2016

Benchmark: none

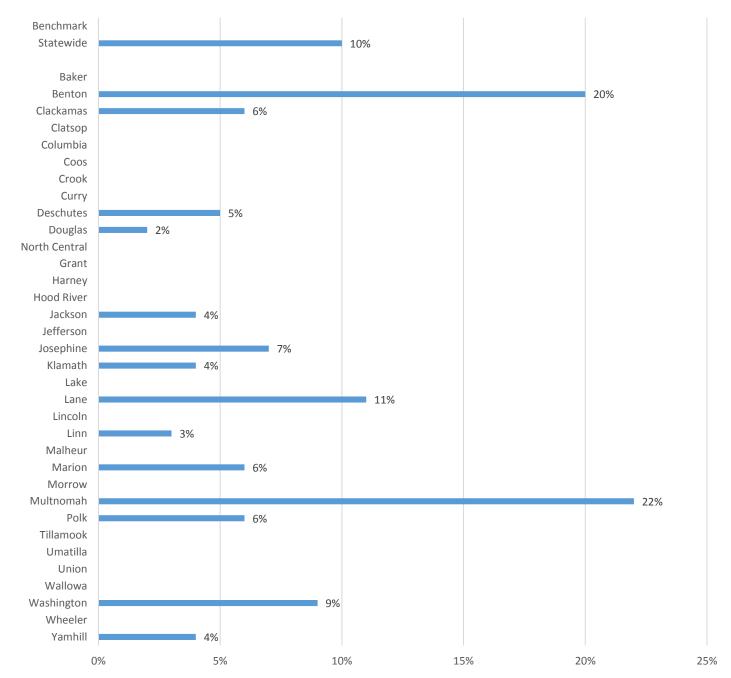
Notes:

Data not available by race/ethnicity

Public Health Accountability Metric – Active Transportation

Percent of commuters who walk, bike, or use public transportation to get to work.

Active Transportation, Selected Oregon Counties 2016



Source: American Community Survey online tool, 2016

Benchmark: none

Notes:

• Data available only for counties shown

Local Public Health Process Measure for Active Transportation

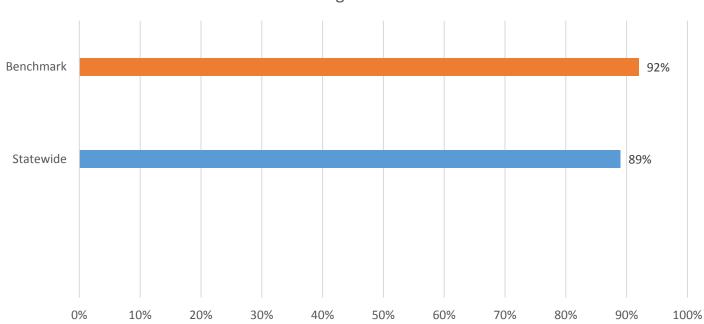
Number of active transportation partner governing or leadership boards with LPHA representation.

In development

Public Health Accountability Metric – Drinking Water

Percent of community water systems meeting all health-based standards during the year.

Percent of Community Water Systems Meeting Health-Based Standards, Oregon 2016



Source: SDWIS/FED is EPA's national regulatory compliance database for the drinking water program.

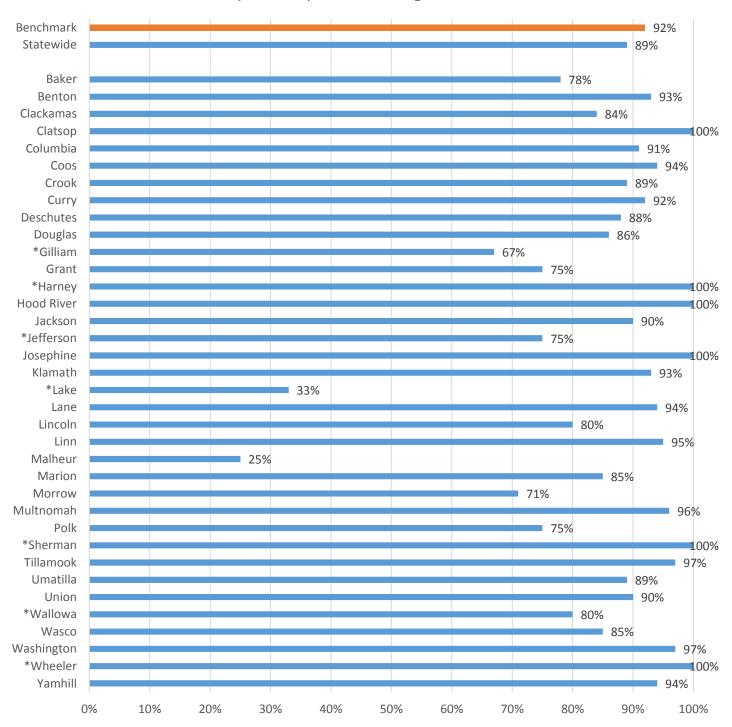
Benchmark: EPA standard 92%

- For 2016, there were 98 out of 887 water systems out of compliance (89%).
- Unit of analysis is water systems; race/ethnicity data do not apply.
- The EPA database includes information on the nation's 160,000 public water systems and violations of drinking water regulations. The database contains aggregated information on water systems; violations reported by violation type and by contaminant/rule, and Government Performance and Results Act (GPRA) data.

Public Health Accountability Metric – Drinking Water

Percent of community water systems meeting all health-based standards during the year.

Percent of Community Water Systems Meeting Health-Based Standards, 2016



Source: EPA GPRA Database, 2016

Benchmark: EPA standard 92%

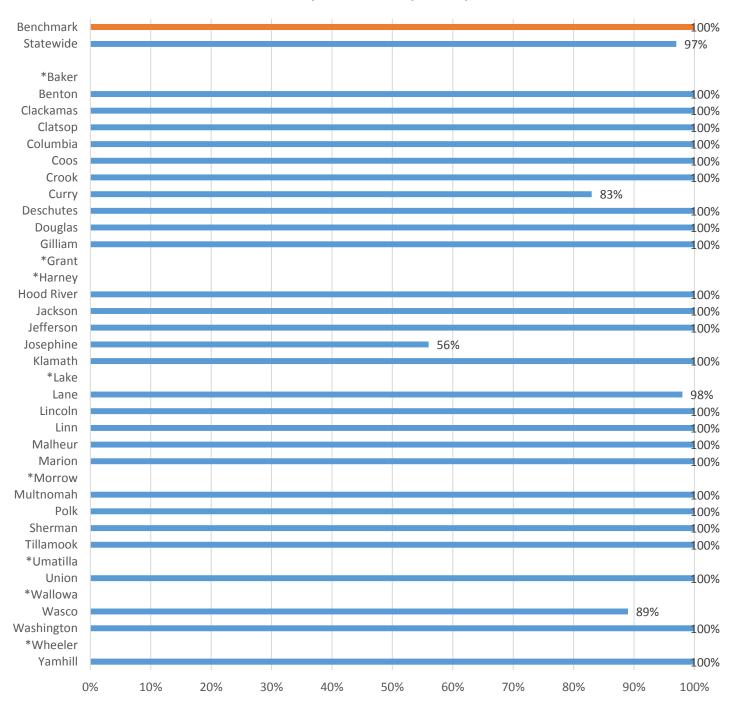
Notes:

• * Indicates counties that have 5 or fewer water systems; percentages to be interpreted with caution.

Local Public Health Process Measure for Drinking Water

Percent of water systems surveys completed.





Source: Oregon Drinking Water Database, 2016. Accessed online at: https://yourwater.oregon.gov/wss.php - Water System Survey Status query)

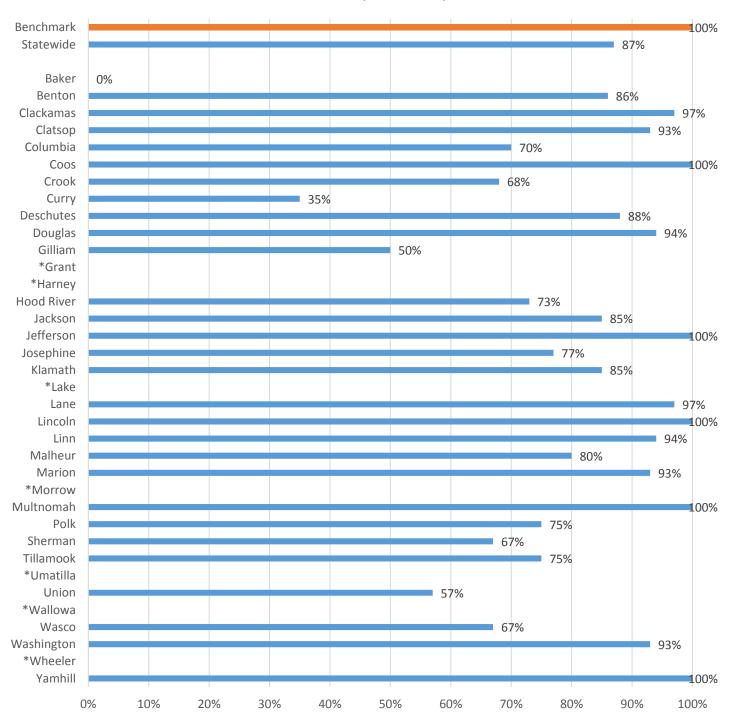
Benchmark: 100%

- * Indicates counties for which no water system surveys were conducted.
- Many counties have 5 or fewer water systems; percentages to be interpreted with caution

Local Public Health Process Measure for Drinking Water

Percent of water quality alert responses.





Source: Oregon Drinking Water Database, 2016. Accessed online at: https://yourwater.oregon.gov/alertscounty.php.

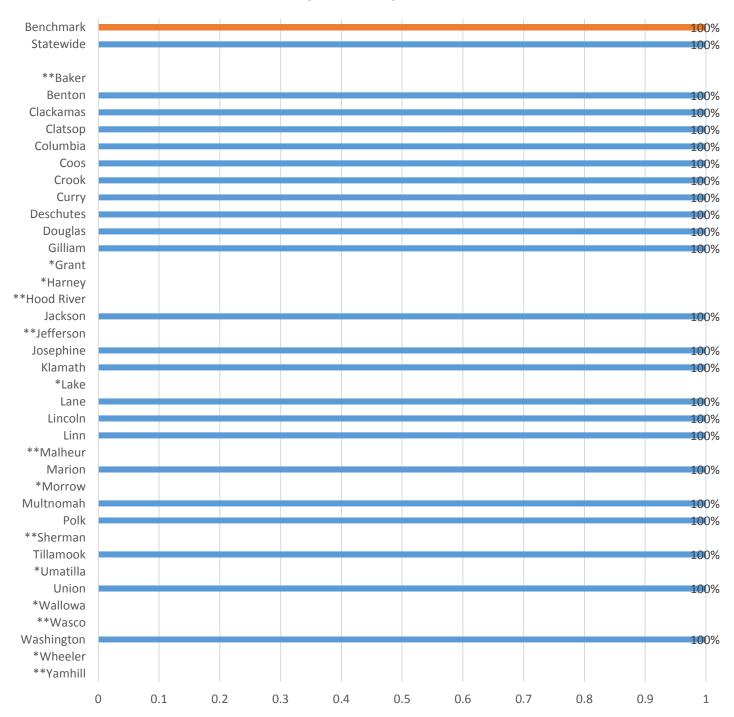
Benchmark: 100%

- * Indicates counties for which water quality alerts are not applicable.
- Many counties have 5 or fewer water systems; percentages to be interpreted with caution

Local Public Health Process Measure for Drinking Water

Percent of priority non-compliers resolved.





Source: Oregon Drinking Water Database, 2016. Accessed online at: https://yourwater.oregon.gov/reports/county-pncs.php.

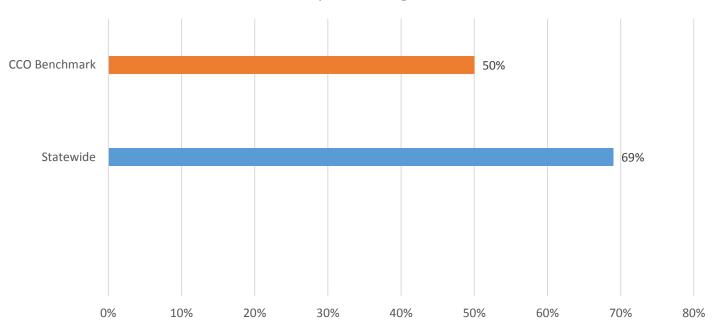
Benchmark: 100%

- * Indicates counties for which water quality alerts are not applicable.
- ** indicates 0 water quality alerts.

Public Health Accountability Metric – Effective Contraceptive Use

Percent of women at risk of unintended pregnancy who use effective methods of contraception.

Percent of Women at Risk of Unintended Pregnancy Who Use Effective Contraceptives, Oregon 2015



Source: Oregon Behavioral Risk Factor Surveillance System (BRFSS), 2015

Benchmark: 2018 CCO benchmark

- Reproductive-age women at risk of unintended pregnancy: 18-49.
- "Effective" as single-category includes most effective and moderately effective. Starting in 2014, respondents were asked about their use of contraception "the last time you had sex."
- Four or five years of combined data, 2014 2017 (2018), for race/ethnicity and county estimates will be examined according to data suppression rules after the 2017 (2018) BRFSS data become available. Data prior to 2014 cannot be combined with later years because of the change to the wording of the BRFSS question.

Local Public Health Process Measure for Effective Contraceptive Use

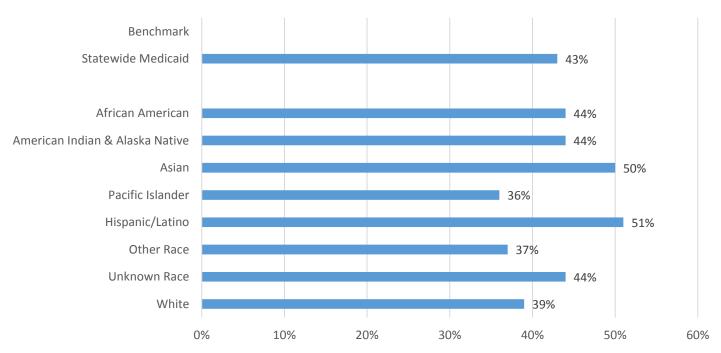
Number of local policy strategies for increasing access to effective contraceptives.

In development

Public Health Accountability Metric - Dental Visits Children Aged 0-5

Percent of children aged 0-5 with any dental visit.

Percent of Children Age 0-5 with Any Dental Visit, Oregon Medicaid, 2016



Source: Oregon MMIS (Medicaid claims data) 2016 calendar year

Benchmark: TBD

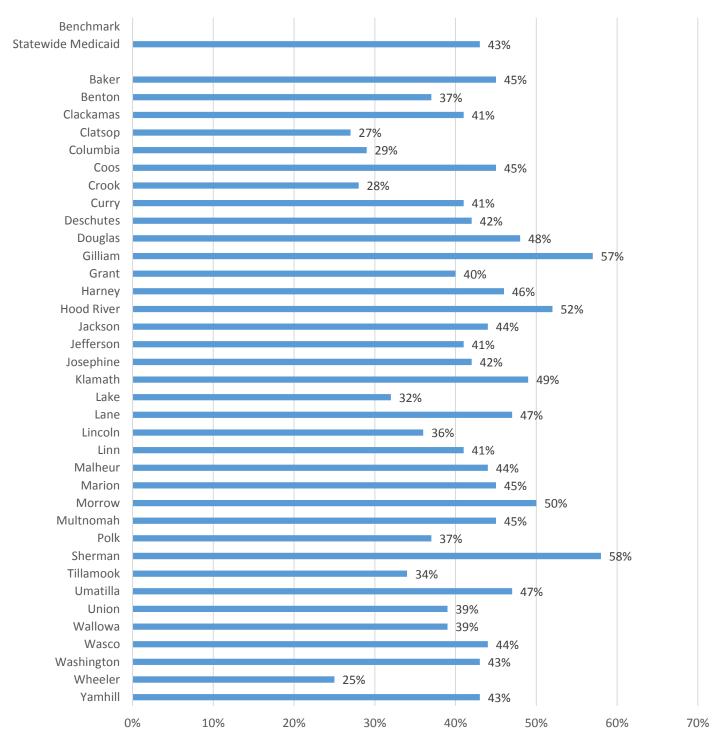
Notes:

TBD

Public Health Accountability Metric - Dental Visits Children Aged 0-5

Percent of children aged 0-5 with any dental visit.

Percent of Children Aged 0-5 with Any Dental Visit, Oregon Medicaid, 2016



Source: Oregon MMIS (Medicaid claims data) 2016 calendar year

Benchmark: TBD

Notes:

TBD

Local Public Health Process Measure for Dental Visits Children Aged 0-5

TBD

In development