

Health Department

FY 2018 Adopted Budget Plan: Performance Measures

Program Management

Goal

To provide oversight and leadership of FCHD in order to ensure the provision of quality and timely services to FCHD clients.

Objective

To meet at least 60% of FCHD performance measurement estimates.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of performance measures evaluated	68	75	75/78	73	73
Service Quality					
Percent of quality and efficiency estimates met	67%	66%	65%/64%	60%	60%
Outcome					
Percent of performance measurement estimates met	56%	63%	65%/56%	60%	60%

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Dental Health Services

Goal

To improve the oral health of low-income children and maternity clients of the FCHD through prevention and/or control of dental disease.

Objective

To complete preventative and restorative dental treatment within a 12 month period for at least 40 percent of the children seen.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
New patients visits	714	864	1,000/590	800	800
Total Patient visits	3,640	2,721	3,400/2,580	2,800	2,800
Patients screened	746	114	1,100/114	1,000	1,000
Efficiency					
Cost per visit	\$357	\$269	\$283/\$378	\$285	\$285
Net cost to County	\$179	\$179	\$195/\$281	\$207	\$198
Service Quality					
Customer satisfaction index	97%	97%	97%/97%	97%	97%
Outcome					
Percent of treatment completed within a 12 month period	44%	43%	40%/32%	40%	30%

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Environmental Health Services

Goal

To protect and improve the health and welfare of all persons in Fairfax County by preventing, minimizing or eliminating their exposure to biological, chemical or physical hazards in their present or future environments.

Objective

To maintain the percentage of regulated food establishments that are inspected on a frequency that is based on the food borne risk potential of the establishment (high risk establishments will be inspected three times a year, moderate risk twice a year, and low risk once a year) and to maintain the percent of food service establishments found to be in compliance, at the completion of the inspection cycle, with control measures that reduce the occurrence of foodborne illness at 95 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2013 Actual	FY 2014 Actual	FY 2015 Estimate/Actual	FY 2016	FY 2017
Output					
Number of food service establishment inspections	7,759	7,706	6,000/8,431	7,900	7,900
Service Quality					
Percent of foodborne illness risk factor inspections conducted in food service establishments within the prescribed inspection frequency	95%	95%	95%/95%	95%	95%
Outcome					
Percent of food service establishments demonstrating FDA risk factor control measures to reduce foodborne illness	NA	90%	95%/93%	95%	95%

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Objective

To maintain the percentage of out of compliance onsite sewage disposal and water supply systems corrected within the specified time period at 90.0 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of onsite sewage disposal and water supply systems inspections	3,737	3,361	3,500/3,257	3,200	3,200
Efficiency					
Onsite Sewage Disposal and Water Well Program Cost Per Capita	\$0.53	\$1.01	\$1.61/\$1.59	\$1.32	\$1.39
Service Quality					
Percent of Onsite Sewage & Water Program service requests responded to within 3 days	34%	35%	40%/41%	40%	40%
Outcome					
Percent of out-of-compliance onsite sewage disposal and water supply systems corrected within the specified time period	89%	90%	90%/92%	90%	90%

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Objective

To maintain the percentage of complaints dealing with rats, cockroaches, and other pest infestations; trash and garbage control; and a variety of other general environmental public health and safety issues that are resolved within 60 days at 90 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of Environmental Health community-based activities: inspections, permits, and service requests	30,983	29,543	30,000/29,885	30,000	30,000
Service Quality					
Percent of environmental complaints responded to within 3 days	55%	58%	60%/60%	60%	60%
Outcome					
Percent of environmental complaints resolved within 60 days	91%	88%	90%/89%	90%	90%

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Objective

To suppress the transmission of West Nile virus, known to be carried by infected mosquitoes, in the human population.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Mosquito larvicide treatments of storm drains to control West Nile virus	103,661	76,377	105,000/74,248	105,000	105,000
Efficiency					
Disease Carrying Insect Program cost per capita	\$1.02	\$1.07	\$1.79/\$1.43	\$1.84	\$1.82
Service Quality					
Percent of targeted storm drain areas treated with mosquito larvicide within the scheduled timeframe	94%	70%	90%/71%	80%	90%
Outcome					
Confirmed human cases of West Nile virus in Fairfax County, Fairfax City, and Falls Church City as reported by the Virginia Department of Health	3	1	1/8	1	1

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Communicable Disease Control

Goal

To detect, prevent, prepare for, and respond to ongoing and emerging communicable diseases of public health significance.

Objective

To ensure that 90 percent of public health measures required for the control of a communicable disease outbreak are initiated within the appropriate timeframe.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of screenings, investigations and treatment for selected communicable diseases	34,550	32,485	27,000/30,949	29,000	29,000
Efficiency					
CD program cost per capita	\$5	\$6	\$7/\$6	\$8	\$8
Service Quality					
Percent of selected reportable communicable disease investigations for which initial public health control measures were initiated within the appropriate timeframe	90%	85%	90%/83%	90%	90%
Outcome					
Rate of TB Disease/100,000 population	5.1	5.3	5.9/5.4	5.9	5.9
Percent of clients who report that the services they received at a public health clinic addressed their health need	93%	91%	90%/98%	94%	94%
Percent of individuals who demonstrate knowledge following health promotion activities ¹	N/A	95%	90%/N/A	N/A	N/A
Percent of individuals exposed to a confirmed norovirus outbreak who did not develop illness after the implementation of Health Department outbreak control measures	63%	88%	85%/95%	85%	90%

¹ FY 14 data is not available due to change in health promotion curriculum. This measure is being discontinued due to a small sample size of participants.

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Health Laboratory

Goal

To provide timely, quality-assured medical and environmental public health laboratory testing services to the Health Department and other County agencies to assist them in carrying out their programs in the prevention of disease and the enforcement of local ordinances, state laws, and federal regulations.

Objective

To maintain certification with federal agencies and to ensure a high level of testing quality by maintaining a 95 percent scoring average on accuracy tests required for certification.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Tests reported	213,696	218,403	200,000/220,823	215,000	215,000
Efficiency					
Average cost/all tests	\$8.00	\$7.61	\$7.77/\$7.25	\$9.93	\$9.95
Service Quality					
Percent of laboratory clients satisfied with service	97%	97%	95%/99%	95%	95%
Outcome					
Average score on accuracy tests required for certification	99%	97%	95%/99%	95%	95%

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Objective

To avoid unnecessary rabies post-exposure shots being given to potentially exposed residents by maintaining the percentage of rabies tests involving critical human exposure that are completed within 24 hours at 95 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Rabies tests reported	624	557	550/474	500	500
Efficiency					
Cost/rabies test	\$84.00	\$99	\$91/\$123	\$116	\$116
Service Quality					
Percent of rabies tests involving critical human exposure completed within 24 hours	99%	99%	95%/99%	95%	95%
Outcome					
Percent of individuals saved from unnecessary rabies post-exposure shots by timely receipt of negative lab results	99%	99%	95%/99%	95%	95%

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Community Health Care Network

Goal

To provide timely and appropriate access to medical care for low-income, uninsured residents of Fairfax County and the cities of Fairfax and Falls Church.

Objective

To provide Community Health Care Network clients with stable or improved health outcomes.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of primary care visits provided through the Community Health Care Network	50,174	48,100	50,250/37,365	33,533	50,250
Number of clients who received primary care through the Community Health Care Network	14,678	13,795	15,000/12,208	10,950	15,000
Efficiency					
Net cost to County per visit	\$169	\$173	\$177/\$217	\$333	\$236
Service Quality					
Percent of clients satisfied with their care at health centers	98%	96%	95%/98%	95%	95%
Percent of clients whose eligibility determination is accurate ²	99%	99%	99%/99%	N/A	N/A
Outcome					
Percent of Community Health Care Network clients with stable or improved health outcomes	63%	52%	64%/72%	64%	64%

² This measure is being discontinued as this data is no longer being collected.

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Maternal and Child Health Services

Goal

To promote optimal health and wellbeing of the medically indigent through the provision of preventative maternity, infant, and child health care services.

Objective

To achieve a target of at least 60 percent, with a long-term target of 80 percent, for the number of children served by the Health Department who are protected against vaccine preventable diseases as a result of completing the recommended vaccination series by 24 months of age.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of vaccines administered to children	30,590	34,417	34,000/31,559	32,000	32,000
Service Quality					
Immunizations: Percent satisfied with service	93%	91%	90%/89%	90%	90%
Outcome					
Percent of children served by the Health Department who are up-to-date on immunizations at 24 months of age	61%	62%	61%/57%	60%	60%

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Objective

To maintain the low birth weight rate for all Health Department clients and achieve the Healthy People 2020 target of 7.8 percent or below.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of pregnant women provided a public health assessment visit	2,984	3,240	3,300/3,036	3,100	3,100
Efficiency					
Percent of pregnant women served who receive home visiting services ³	52%	47%	52%/54%	N/A	N/A
Service Quality					
Percent of Nurse Family Partnership pregnant women retained through their entire pregnancy ⁴	83%	86%	N/A/84%	83%	83%
Outcome					
Percent of pregnant women served who deliver a low birth weight baby	5.5%	8.4%	7.8%/7.5%	7.8%	7.8%

³ This measure is being discontinued.

⁴ This is a new measure beginning in FY 2018, therefore an estimate for FY 2016 is not available.

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Objective

To ensure that 75 percent of Speech Language Pathology clients are discharged without the need for further follow up for presenting problems.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Speech Language: Client visits	3,116	2,616	2,800/2,749	2,800	2,800
Efficiency					
Speech Language: Net cost per visit	\$197	\$275	\$259/\$250	\$262	\$263
Service Quality					
Speech Language: Percent of survey families who rate their therapy service as good or excellent	100%	100%	100%/100%	100%	100%
Outcome					
Speech Language: Percent of students discharged as corrected; no follow-up needed	74%	83%	75%/80%	75%	75%

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School Health

Goal

To maximize the health potential of school-age children by providing health support services in the school setting.

Objective

To maintain 85% of children who are able to attend school as a result of having a health care plan.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of student visits to school health rooms	731,306	793,252	800,000/768,676	770,000	770,000
Students with health plans	48,647	50,188	50,500/58,800	60,000	60,000
Efficiency					
Percent of students' health care plans established within 5 days	57%	55%	60%/63%	60%	60%
Ratio of PHN training hours to number of Fairfax County Public School staff trained to implement health care plans	NA	NA	1:30/1:20	1:25	1:25
Service Quality					
Percent of parents/guardians who report their child's health condition was managed effectively in the school setting	87%	85%	85%/77%	80%	80%
Outcome					
Percent of parents and guardians who report that their child was able to attend school as a result of having a health care plan	79%	82%	85%/85%	85%	85%

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Long Term Care Development and Services

Goal

To promote the health and independence of frail elderly and adults with disabilities, while offering them an alternative to more restrictive and costly long term care options; and to provide respite for family caregivers.

Objective

To provide adult day health care services to frail elderly and adults with disabilities, so that at least 90 percent of their family caregivers are able to keep them at home, in the community, preventing the need for more costly and often less desirable long-term care options.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Average daily attendance of participants	96	95	97/91	95	95
ADHC clients per year	260	249	250/236	250	250
Medicaid Pre-Admission Screenings Completed per year	1,055	1,224	1,359/1,378	1,529	1,697
Efficiency					
Net cost per ADHC client per day to the County	\$93	\$89	\$84/\$93	\$79	\$80
Service Quality					
Percent of ADHC clients/caregivers satisfied with service	99%	99%	95%/97%	95%	95%
Average # of calendar days between request for Medicaid Pre-Admission Screening and submission to Department of Medical Assistance Services for processing	36	18	18/18	18	19

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Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Outcome					
Percent of participants who met the criteria for institutional level of care who were able to remain in the community	93%	92%	90%/96%	92%	92%
Percent of caregivers who report experiencing less stress as a result of ADHC	91%	93%	90%/96%	93%	93%
Percent of caregivers who report that the participant experienced a positive impact on their mood as a result of attending ADHC ⁵	91%	93%	85%/90%	N/A	N/A
Percent of caregivers who report that the participant has been more involved in meaningful activities since attending ADHC ⁵	74%	78%	85%/81%	N/A	N/A
Percent of caregivers who report that the participant experienced a positive impact on their physical health as a result of attending ADHC ⁵	83%	86%	85%/89%	N/A	N/A

⁵ This measure is being discontinued.

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Community Health Development and Preparedness

Goal

To promote community resiliency and capacity to address emerging public health issues and optimize public health emergency response and recovery efforts.

Objective

To achieve at least 75 percent of community members served reporting intention to practice healthy behaviors.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of community members served through outreach and health promotion activities	23,423	42,477	20,000/86,882	40,000	40,000
Efficiency					
Cost of Community Outreach expenditures divided by the number of residents reached	\$19	\$11	\$25/\$5	\$13	\$13
Service Quality					
Percent of community members satisfied with health promotion activities	93%	94%	95%/98%	95%	95%
Outcome					
Percentage increase in the number of residents reached through integrated community outreach ⁶	41%	81%	5%/105%	N/A	N/A
Percent of community members served who report intent to practice healthy behaviors ⁷	N/A	N/A	N/A/78%	75%	75%

⁶This measure is being discontinued.

⁷This is a new measure beginning in FY 2018 in order to better reflect customer outcomes.

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Objective

To maintain 90 percent of staff and volunteers reporting that they are better prepared for public health emergencies as a result of preparedness trainings and exercises with a long-term target of 95%.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate/Actual	FY 2017	FY 2018
Output					
Number of staff and volunteers who have completed required training	1,170	1,164	1,200/1,163	1,200	1,262
Efficiency					
Training cost expended per staff or volunteer ⁸	\$49	\$35	\$28/\$32	N/A	N/A
Ratio of training hours invested to volunteer hours leveraged	NA	1:22	1:25/1:29	1:25	1:25
Service Quality					
Percent of staff and volunteers who have completed required training	93%	77%	90%/78%	85%	85%
Outcome					
Percent of staff and volunteers who report they are better prepared for public health emergencies as a result of preparedness trainings and exercises	88%	91%	90%/94%	90%	90%
Percent of volunteers who reporting feeling a stronger connection to their community through their services	83%	89%	90%/88%	85%	90%

⁸ This measure is being discontinued and replaced in order to better capture return on investment.