

Health Department

FY 2014 Advertised Budget Plan: Performance Measures

Program Management

Goal

To enhance the health and medical knowledge of County residents and medical partners through maximizing the use of information technology.

Objective

To achieve a website rating of Very Helpful or better from 80 percent of Web site users.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Website visits	550,101	182,255	200,000 / 221,653	200,000
Efficiency				
Ratio of visits to website maintenance hours	378:1	125:1	125:1 / 126:1	150:1
Service Quality				
Percent of website users satisfied with the information and format	N/A	NA	80.0 / 80.0	80.0%
Outcome				
Percent of users giving website a rating of Very Helpful or better	NA	NA	80.0% / 80.0%	80.0%

Health Department

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Dental Health Services

Goal

To improve the health of low-income children through prevention and/or control of dental disease and to improve the oral health of maternity clients of the Fairfax County Health Department.

Objective

To complete preventative and restorative dental treatment within a 12 month period for at least 35 percent of the children seen.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
New patients visits(1)	707	864	800 / 1,116	1,000
Total visits	2,427	2,713	2,700 / 3,335	3,000
Patients screened	3,116	585	2,800 / 1,120	1,100
Efficiency				
Cost per visit	\$198	\$316	\$332 / \$278	\$312
Net cost to County	\$88	\$215	\$227 / \$194	\$221
Service Quality				
Customer satisfaction index	97%	97%	97% / 97%	97%
Outcome				
Percent of treatment completed within a 12 month period	40%	60%	35% / 47%	40%

(1) In previous years, the definition for new patient visits was the first visit of the fiscal year -- a definition consistent with Virginia Department of Health's reporting system. The definition and data collection have changed for FY 2009 Actual, FY 2010 Estimate and FY 2011 Projected, to reflect an unduplicated count of new clients accessing the Health Department's dental clinics.

Health Department

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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 number of establishments that are closed, due to major violations of the Food Code, at a target of 1.7 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Regulated food establishments	3,223	3,186	3,190 / 3,195	3,215
Efficiency				
Food Safety Program Cost per Capita	\$2.30	\$1.53	\$2.73 / \$2.31	\$2.83
Service Quality				
Percent of regulated food establishments risk-based inspections conducted on time	94.7%	89.5%	95.0% / 82.0%	95.0%
Outcome				
Percent of food establishments closed due to major violations	3.0%	2.5%	2.5% / 2.5%	1.7%

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Objective

To maintain the percentage of improperly installed or malfunctioning water well supplies that pose the potential for water borne diseases that are corrected within 60-days at 75 percent with a future target of 85 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Total number of water well system permits issued	319	296	320 / 342	320
Efficiency				
Onsite Sewage Disposal and Water Well Program Cost Per Capita	\$1.09	\$0.93	\$1.13 / \$0.92	\$1.16
Service Quality				
Percent of water well system service requested responded to within 3 days	32.9%	34.0%	35.0% / 40.9%	40.0%
Outcome				
Percent of out-of-compliance water well systems corrected within 60 days	71.4%	68.0%	75.0% / 76.1%	75.0%

Objective

To maintain the percentage of improperly installed or malfunctioning sewage disposal systems that pose a potential for sewage-borne diseases that pose a potential for sewage borne diseases that are corrected within 30-days at 87 percent with a future target of 90 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Total number of sewage disposal system permits issued	858	933	900 / 905	900
Service Quality				
Percent of sewage disposal system service requests responded to within 3 days	32.8%	33.7%	30.0% / 37.8%	35.0%
Outcome				
Percent of out-of-compliance sewage disposal systems corrected within 30 days	87.1%	91.0%	90.0% / 87.7%	90.0%

Health Department

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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 80 percent and to maintain a target of 80 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Community health and safety complaints investigated	967	937	950 / 892	950
Efficiency				
Community Health and Safety Program Cost per Capita	\$1.12	\$0.97	\$1.20 / \$1.00	\$1.25
Service Quality				
Percent of community health and safety complaints responded to within 3 days	55.9%	58.2%	70.0% / 55.9%	70.0%
Outcome				
Percent of community health and safety complaints resolved within 60 days	77.6%	90.8%	90.0% / 86.7%	90.0%

Health Department

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Objective

To suppress the transmission of West Nile virus, known to be carried by infected mosquitoes, in the human population and hold the number of human cases as reported to the Virginia Department of Health to no more than one case.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Mosquito larvicide treatments of catch basins to control West Nile virus	109,898	102,754	109,500 / 107,878	110,500
Efficiency				
West Nile virus cost per capita	\$1.20	\$1.15	\$1.75 / \$1.33	\$1.74
Service Quality				
Percent of targeted catch basin areas treated with mosquito larvicide within the scheduled timeframe	100.0%	88.0%	100.0% / 100.0%	100.0%
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	1	2	1 / 1	1

Health Department

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Communicable Disease Control

Goal

To ensure that adults in the community experience a minimum of preventable illness, disability and premature death, and that health service utilization and costs attributable to chronic diseases and conditions are reduced.

Objective

For the Communicable Disease (CD) Program, to ensure that 95 percent of completed communicable disease investigations need no further follow-up; and to maintain the incidence of tuberculosis (TB) at no greater than 10.0/100,000 and to move toward the Healthy People 2020 national objective of 1.0/100,000 population, assuring that 97 percent of all TB cases will complete treatment.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Clients served in tuberculosis (TB) screening, prevention and case management	24,589	24,934	24,500 / 24,670	24,500
Communicable disease (CD) cases investigated	2,079	2,207	2,000 / 2,496	2,200
Efficiency				
TB care: Total cost per client	\$90	\$91	\$92 / \$96	\$96
TB care: County cost per client	\$46	\$45	\$54 / \$55	\$60
CD investigations: Total cost per client	\$446	\$429	\$482 / \$391	\$442
CD Investigations: County cost per client	\$246	\$265	\$302 / \$245	\$282
Service Quality				
Percent of community medical providers treating TB patients that are satisfied with the Health Department's TB Program	100%	100%	95% / 100%	95%
Percent of individuals at highest risk for CD transmission provided screening, prevention education and training	100%	100%	95% / 98%	95%
Outcome				
Rate of TB Disease/100,000 population	8.0	7.8	8.0 / 7.5	8.0
Percent of TB cases discharged completing treatment for TB disease	98%	97%	97% / 97%	97%
Percent of completed CD investigations needing no further follow-up	95%	99%	95% / 99%	95%

Health Department

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Objective

To ensure that 30 percent of clients served in the Homeless Medical Services Program experience improved health outcomes.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Clients served through the Homeless Medical Services Program	1,420	1,479	1,500 / 820	800
Efficiency				
Homeless clients evaluated by the Nurse Practitioner	1:355	1:370	1:375 / 1:205	1:200
Service Quality				
Percent of homeless clients who return for a follow-up visit	35%	19%	25% / NA	NA
Percent of unduplicated clients who enroll in the Community Health Care Network (CHCN)	NA	NA	NA	50%
Outcome				
Percent of homeless clients with improved health outcomes	30%	30%	30% / 18%	30%

Health Department

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Community Health Development and Preparedness

Objective

To sustain at least 70 percent of the relevant community stakeholder involvement throughout the Mobilizing for Action through Planning and Partnership (MAPP) community wide health assessment phase.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Number of stakeholders represented in Partnership for a Healthier Fairfax Coalition	85	110	90 / NA	NA
Efficiency				
Cost per stakeholder participant in Partnership for a Healthier Fairfax	\$712	\$551	\$710 / NA	NA
Service Quality				
Percent of Partnership for a Healthier Fairfax Coalition stakeholders that rate partnership as "good" or "excellent"	NA	79%	80% / NA	NA
Outcome				
Percent of stakeholders engaged in the Partnership for a Healthier Fairfax Coalition	75%	70%	80% / NA	NA

Health Department

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Objective

To increase the number of residents reached through integrated agency-wide outreach events by 3 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Number of residents reached through integrated outreach and education programs	9,063	22,661	10,000 / 16,818	12,000
Efficiency				
Cost of Community Outreach expenditures divided by the number of residents reached	\$8	\$10	\$34 / \$17	\$35
Service Quality				
Percentage of residents who evaluate their educational experience as "good" or "excellent"	95%	94%	95% / 92%	95%
Outcome				
Percentage increase in the number of residents reached through integrated community outreach	30%	253%	(56%) / (26%)	20%

Health Department

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Objective

To ensure that at least 95 percent of all Health Department personnel achieve and maintain compliance with Incident Command Systems (ICS) training requirements of the National Incident Management System (NIMS) as promulgated and updated annually by the Department of Homeland Security.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Number of staff trained in ICS/NIMS (1)	68	132	100 / 151	200
Efficiency				
ICS/NIMS training cost expended per Health Department staff member (1)	\$40	\$21	\$29 / \$21	\$22
Service Quality				
Percentage of Health Department staff who evaluate their ICS/NIMS training experience as "good" or "excellent" (1)	98%	93%	98% / 98%	98%
Outcome				
Percentage of Health Department staff meeting established ICS/NIMS training requirements (1)	90%	90%	95% / 90%	95%

(1) These Performance Measures were established with the Office of Emergency Preparedness in FY 2009, which is now a part of the Division of Community Health Development and Preparedness.

Health Department

FY 2014 Advertised Budget Plan: Performance Measures

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 51,000 patient visits, and to ensure that 95 percent of female patients age 40-69 treated over a two-year period receive a mammogram, and 95 percent of patients with diabetes receive a total cholesterol and LDL screen during the year.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Primary care visits	51,447	56,018	51,000 / 54,336	52,000
Efficiency				
Net cost to County per visit	\$179	\$171	\$187 / \$174	\$184
Service Quality				
Percent of clients satisfied with their care at health centers	97%	96%	95% / 94%	95%
Percent of clients whose eligibility determination is accurate	99%	99%	98% / 99%	98%
Outcome				
Percent of enrolled women age 40-69 provided a mammogram during two-year treatment period	96%	94%	95% / 92%	95%
Percent of patients with diabetes who have had a total cholesterol and LDL ("bad cholesterol") screen within the last year	96%	96%	95% / 91%	95%

Health Department

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Maternal and Child Health Services

Goal

To provide maternity, infant and child health care emphasizing preventative services to achieve optimum health and well-being.

Objective

To maintain the immunization compliance rate of children who are between the ages of 19-35 months, served by the Health Department, at 80 percent, working toward a target of 90 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Immunizations: Children seen	63,408	25,256	26,000 / 12,277	13,000
Immunizations: Vaccines given	65,725	31,152	32,000 / 29,365	30,000
Efficiency				
Immunizations: Cost per visit	\$18	\$21	\$20 / \$47	\$54
Immunizations: Cost per visit to County	\$12	\$14	\$13 / \$33	\$41
Immunizations: Cost per vaccine administered	\$17	\$17	\$16 / \$20	\$23
Immunizations: Cost to County per vaccine administered	\$12	\$12	\$11 / \$14	\$18
Service Quality				
Immunizations: Percent satisfied with service	98%	95%	97% / 95%	95%
Outcome				
Immunizations: 2 year old completion rate	70%	69%	80% / 71%	80%

Health Department FY 2014 Advertised Budget Plan: Performance Measures

Objective

To maintain the low birth weight rate for all Health Department clients at 5.0 percent or below.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Maternity: Pregnant women served	2,807	2,926	3,000 / 2,687	2,700
Efficiency				
Maternity: Cost per client served	\$495	\$545	\$596 / \$586	\$660
Maternity: Cost per client to the County	\$218	\$241	\$300 / \$281	\$362
Service Quality				
Maternity: Percent satisfied with service	98%	95%	97% / 95%	95%
Outcome				
Maternity: Overall low birth weight rate	5.6%	6.4%	5.0% / 6.5%	5.0%

Objective

To ensure that 75 percent of Speech Language Pathology clients will be discharged as corrected with no further follow-up required.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Speech Language: Client visits	2,804	2,970	2,850 / 2,687	2,850
Efficiency				
Speech Language: Net cost per visit	\$192	\$183	\$188 / \$182	\$208
Service Quality				
Speech Language: Percent of survey families who rate their therapy service as good or excellent	100%	100%	100% / 100%	100%
Outcome				
Speech Language: Percent of students discharged as corrected; no follow-up needed	80%	85%	75% / 78%	75%

Health Department

FY 2014 Advertised Budget Plan: Performance Measures

Health Laboratory

Goal

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

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
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Tests reported	239,072	239,915	220,000 / 234,169	220,000
Efficiency				
Average cost/all tests	\$5.75	\$4.75	\$5.36 / \$7.01	\$5.74
Service Quality				
Percent of laboratory clients satisfied with service	97%	96%	95% / 95%	95%
Outcome				
Average score on accuracy tests required for certification	99%	99%	95% / 97%	95%
Certifications maintained	Yes	Yes	NA / Yes	NA

Health Department

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Objective

To make it possible for 95 percent of residents to avoid needless rabies post-exposure shots by the timely receipt of negative lab results by maintaining the percentage of rabies tests involving critical human exposure that are completed within 24 hours (potentially saving residents the expense of needless shots) at 95 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Rabies tests reported	643	603	600 / 545	600
Efficiency				
Cost/rabies test	\$85.24	\$86.25	\$82.74 / \$87.67	\$80.14
Service Quality				
Percent of rabies tests involving critical human exposure completed within 24 hours	96%	97%	95% / 98%	95%
Outcome				
Percent citizens saved from needless rabies post-exposure shots by timely receipt of negative lab results	98%	97%	95% / 98%	95%

Health Department

FY 2014 Advertised Budget Plan: Performance Measures

School Health

Objective

To implement health plans for at least 70 percent of students with identified needs within five school days of the notification of the need, toward a target of 95 percent, and to maintain the on-site availability of a School Health Aide (SHA) on 97 percent of school days.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Students in school (academic year)	171,610	175,296	177,416 / 177,435	181,608
School sites	194	194	193 / 193	195
Students in summer school, community-based recreation/programs/sites	14,937/102	23,864/103	25,000/110 / 29,317/109	30,000/120
Students with new health plans	17,772	12,752	13,000 / 13,590	13,800
Total health plans implemented	49,501	48,968	49,000 / 48,608	49,500
Visits to clinic of sick/injured and for medicine	731,947	724,029	730,000 / 765,784	775,000
Students with health plans	46,866	46,667	47,000 / 47,511	48,400
Efficiency				
Students/PHN ratio	3,120:1	3,130:1	2,688:1* / 2,688:1	2,752:1*
Health plans/PHN ratio	900:1	874:1	742:1* / 736:1	750:1*
Large group training sessions/number attending	148/2,693	178/3,408	200/4,000 / 164/3853	200/4,000
Students with health plans in place within 5 days of notification	9,976	8,840	9,100 / 8,698	9,660
Service Quality				
Percent of parents satisfied with services	98.0%	96.0%	97.0% / 96.0%	97.0%
Percent of students receiving health support from SHAs	96.0%	95.0%	97.0% / 95.0%	97.0%
Outcome				
Percent of students with health plans in place within 5 days of notification	56.0%	70.0%	70.0% / 64.0%	70.0%
Percent of school days SHA is on-site	97.0%	96.0%	97.0% / 97.4%	97.0%

Health Department

FY 2014 Advertised Budget Plan: Performance Measures

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 370 frail elderly and adults with disabilities, so that 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
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
ADHC clients served per day	138	134	130 / 123	130
ADHC clients per year	366	343	342 / 327	300
ADHC operating days	245	246	249 / 249	248
Efficiency				
Cost of ADHC service per client per day	\$94.00	\$95.00	\$109.00 / \$107.00	\$115.00
Net cost per ADHC client to the County	\$50.00	\$53.00	\$65.00 / \$65.00	\$70.00
Service Quality				
Percent of ADHC clients/caregivers satisfied with service	100%	99%	95% / 100%	95%
Outcome				
Percent of family caregivers who state that ADHC enables them to keep their loved one at home, in the community	90%	93%	90% / 92%	90%

Health Department

FY 2014 Advertised Budget Plan: Performance Measures

Objective

To provide Medicaid Nursing Home Pre-Admission Screening so that 80 percent of low income frail elderly and adults with disabilities who meet the criteria for Medicaid waiver services will have access to Medicaid community-based services, thereby reducing the need for more restrictive and/or costly long term care.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate
	FY 2010 Actual	FY 2011 Actual	FY 2012 Estimate/Actual	FY 2013
Output				
Medicaid Pre-Admission screenings completed per year	697	808	860 / 866	940
Medicaid Pre-Admission Screenings that met criteria (adults only)	436	592	630 / 725	690
Medicaid Pre-Admission Screenings that resulted in the use of community-based services (adults only)	359	497	505 / 617	550
Efficiency				
Medicaid Pre-Admission screenings cost per service unit	\$194	\$225	\$234 / \$286	\$295
Medicaid Pre-Admission screenings net cost to County	\$96	\$128	\$135 / \$188	\$197
Service Quality				
Percent of clients who received a Medicaid Pre-Admission screening who indicated that they were satisfied with the service	98%	99%	95% / 97%	95%
Outcome				
Percent of low income frail elderly and adults with disabilities who meet criteria for Medicaid waiver services and have access to Medicaid community-based services	82%	84%	80% / 85%	80%