

Health Department

FY 2015 Adopted 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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Website visits	182,255	221,653	200,000 / 274,850	250,000	250,000
Efficiency					
Ratio of visits to website maintenance hours	125:1	126:1	150:1 / 286:1	150:1	150:1
Service Quality					
Percent of website users satisfied with the information and format	NA	80.0%	80.0% / NA	80.0%	80.0%
Outcome					
Percent of users giving website a rating of Very Helpful or better	NA	NA	80.0% / NA	80.0%	NA

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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 40 percent of the children seen.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
New patients visits	864	1,116	1,000 / 1,547	1,000	1,000
Total visits	2,713	3,335	3,000 / 2,603	2,700	2,700
Patients screened	585	1,120	1,100 / 262	1,100	1,100
Efficiency					
Cost per visit	\$316	\$278	\$312 / \$353	\$357	\$357
Net cost to County	\$215	\$194	\$221 / \$249	\$250	\$250
Service Quality					
Customer satisfaction index	97%	97%	97% / 97%	97%	97%
Outcome					
Percent of treatment completed within a 12 month period	60%	47%	40% / 42%	40%	40%

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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 97.5 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Service Quality					
Percent of foodborne illness risk factor inspections conducted in food service establishments within the prescribed inspection frequency	89.5%	82.0%	95.0% / 76.0%	95.0%	95.0%
Outcome					
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	NA	NA	NA / NA	NA	97.5%

Health Department

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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 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Efficiency					
Onsite Sewage Disposal and Water Well Program Cost Per Capita	\$0.93	\$0.92	\$1.16 / \$0.65	\$0.83	NA
Service Quality					
Percent of Onsite Sewage & Water Program service requests responded to within 3 days	33.6%	38.6%	NA /41.7%	40.0%	40.0%
Outcome					
Percent of out-of-compliance sewage disposal systems and water supply systems corrected within the specified time period	90.3%	87.4%	NA / 91.8%	90.0%	90.0%

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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 and to maintain a target of 90 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Number of Environmental Health community-based activities: inspections, permits, and service requests	37,594	36,305	NA / 29,640	30,000	30,500
Efficiency					
Community Health and Safety Program Cost per Capita	\$0.97	\$1.00	\$1.25 / NA	NA	NA
Service Quality					
Percent of community health and safety complaints responded to within 3 days	58.2%	55.9%	70.0% / 52.8%	60.0%	NA
Percent of environmental complaints responded to within 3 days	NA	NA	NA / 58.7%	60.0%	60.0%
Outcome					
Percent of community health and safety complaints resolved within 60 days	90.8%	86.7%	90.0% / 84.0%	90.0%	NA
Percent of environmental complaints resolved within 60 days	NA	NA	NA / 86.0%	90.0%	90.0%

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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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Mosquito larvicide treatments of storm drains to control West Nile virus	102,754	107,878	110,500 / 101,013	109,500	109,500
Efficiency					
Disease Carrying Insect Program cost per capita	\$1.15	\$1.33	\$1.74 / \$1.10	\$1.74	\$1.72
Service Quality					
Percent of targeted storm drain areas treated with mosquito larvicide within the scheduled timeframe	88.0%	100.0%	100.0% / 90.6%	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	2	1	1 / 8	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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Clients served in tuberculosis (TB) screening, prevention and case management	24,934	24,670	24,500 / 25,882	24,500	24,500
Communicable disease (CD) cases investigated	2,207	2,496	2,200 / 2,150	2,200	2,200
Number of screenings, investigations and treatment for selected communicable diseases	27,141	27,166	NA / 28,032	27,000	27,000
Efficiency					
TB care: Total cost per client	\$91	\$96	\$96 / \$93	\$99	\$99
TB care: County cost per client	\$45	\$55	\$60 / \$56	\$59	\$59
CD investigations: Total cost per client	\$429	\$391	\$442 / \$463	\$459	\$459
CD Investigations: County cost per client	\$265	\$245	\$282 / \$286	\$288	\$288
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%	95%
Percent of individuals at highest risk for CD transmission provided screening, prevention education and training	100%	98%	95% / 100%	95%	95%
Percent of selected reportable communicable disease investigations for which initial public health control measures were initiated within the appropriate timeframe	NA	NA	NA / 85%	87%	89%

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Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Outcome					
Rate of TB Disease/100,000 population	7.8	7.5	8.0 / 8.0	8.0	8.0
Percent of TB cases discharged completing treatment for TB disease	97%	97%	97% / 99%	97%	NA
Percent of completed CD investigations needing no further follow-up	99%	99%	95% / 99%	95%	NA
Percent of clients who report that the services they received at a public health clinic addressed their health need	94%	98%	NA / 91%	90%	90%
Percent of individuals who demonstrate knowledge following health promotion activities	NA	NA	NA / 94%	85%	85%
Percent of individuals exposed to a confirmed norovirus outbreak who did not develop illness after the implementation of Health Department outbreak control measures	NA	NA	NA / 90%	90%	90%

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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Clients served through the Homeless Medical Services Program	1,479	820	800 / 573	800	NA
Efficiency					
Homeless clients evaluated by the Nurse Practitioner	1:370	1:205	1:200 / 1:191	1:200	NA
Service Quality					
Percent of homeless clients who return for a follow-up visit	19%	NA	NA / NA	NA	NA
Percent of unduplicated clients who enroll in the Community Health Care Network (CHCN)	NA	NA	50% / 35%	50%	NA
Outcome					
Percent of homeless clients with improved health outcomes	30%	18%	30% / 15%	30%	NA

Health Department

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Health Laboratory

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 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Tests reported	239,915	234,169	220,000 / 235,289	200,000	200,000
Efficiency					
Average cost/all tests	\$4.75	\$7.01	\$5.74 / \$6.11	\$8.24	\$8.28
Service Quality					
Percent of laboratory clients satisfied with service	96%	95%	95% / 96%	95%	95%
Outcome					
Average score on accuracy tests required for certification	99%	97%	95% / 96%	95%	95%

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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Rabies tests reported	603	545	600 / 564	550	550
Efficiency					
Cost/rabies test	\$86.25	\$87.67	\$80.14 / \$88.39	\$90.73	\$90.83
Service Quality					
Percent of rabies tests involving critical human exposure completed within 24 hours	97%	98%	95% / 99%	95%	95%
Outcome					
Percent of individuals saved from unnecessary rabies post-exposure shots by timely receipt of negative lab results	97%	98%	95% / 99%	95%	95%

Health Department

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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 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Number of primary care visits provided through the Community Health Care Network	56,018	54,336	52,000 / 50,287	53,000	53,000
Number of clients that received primary care through the Community Health Care Network	NA	NA	NA / 15,021	15,000	15,000
Efficiency					
Net cost to County per visit	\$171	\$174	\$184 / \$184	\$177	\$177
Service Quality					
Percent of clients satisfied with their care at health centers	96%	94%	95% / 94%	95%	95%
Percent of clients whose eligibility determination is accurate	99%	99%	98% / 99%	99%	99%
Outcome					
Percent of enrolled women age 40-69 provided a mammogram during two-year treatment period	94%	92%	95% / 91%	95%	NA
Percent of Community Health Care Network clients with stable or improved health outcomes	NA	NA	NA / NA	NA	TBD
Percent of patients with diabetes who have had a total cholesterol and LDL ("bad cholesterol") screen within the last year	96%	91%	95% / 91%	95%	NA

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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 achieve a target of 70 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 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Immunizations: Children seen	25,256	12,277	13,000 / 8,788	13,000	NA
Number of vaccines administered to children	31,152	29,365	30,000 / 27,849	30,000	30,000
Efficiency					
Immunizations: Cost per visit	\$21	\$47	\$54 / \$58	\$40	\$40
Immunizations: Cost per visit to County	\$14	\$33	\$41 / \$41	\$28	\$28
Immunizations: Cost per vaccine administered	\$17	\$20	\$23 / \$18	\$18	\$18
Immunizations: Cost to County per vaccine administered	\$12	\$14	\$18 / \$13	\$12	\$12
Service Quality					
Immunizations: Percent satisfied with service	95%	95%	95% / NA	95%	95%
Outcome					
Percent 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	69%	71%	80% / 61%	70%	70%

Health Department

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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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Maternity: Pregnant women served	2,926	2,687	2,700 / 2,404	2,700	2,700
Efficiency					
Maternity: Cost per client served	\$545	\$586	\$660 / \$575	\$399	\$399
Maternity: Cost per client to the County	\$241	\$281	\$362 / \$271	\$118	\$118
Service Quality					
Maternity: Percent satisfied with service	95%	95%	95% / NA	95%	95%
Outcome					
Percent of pregnant women served who deliver a low birth weight baby	6.4%	6.5%	5.0% / 5.0%	5.0%	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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Speech Language: Client visits	2,970	2,687	2,850 / 2,743	2,800	2,800
Efficiency					
Speech Language: Net cost per visit	\$183	\$182	\$208 / \$200	\$208	\$208
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	85%	78%	75% / 89%	75%	75%

Health Department

FY 2015 Adopted 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.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Students in school (academic year)	175,296	177,435	181,608 / 181,393	184,625	184,625
School sites	194	193	195 / 196	196	196
Students in summer school, community-based recreation/programs/sites	23,864/103	29,317/109	30,000/120 / 27,868/118	30,000/120	NA
Students with new health plans	12,752	13,590	13,800 / 14,821	15,000	NA
Total health plans implemented	48,968	48,608	49,500 / 48,932	49,100	NA
Number of student visits to school health	724,029	765,784	775,000 / 770,744	775,000	775,000
Students with health plans	46,667	47,511	48,400 / 48,781	49,000	49,000
Efficiency					
PHN ratio	3,130:1	2,688:1	2,752:1* / 2,749:1	2,788:1	2,788:1
Health plans/PHN ratio	874:1	736:1	750:1* / 742:1	761:1	761:1
Large group training sessions/number attending	178/3,408	164/3,853	200/4,000 / 1,990/12,378	250/5,000	NA
Students with health plans in place within 5 days of notification	8,840	8,698	9,660 / 8,596	9,575	NA
Service Quality					
Percent of parents satisfied with services	96.0%	96.0%	97.0% / 95.0%	96.0%	96.0%
Percent of students receiving health support from SHAs	95.0%	95.0%	97.0% / 95.0%	97.0%	NA
Outcome					
Percent of students' health care plans established within 5 days	70.0%	64.0%	70.0% / 58.0%	65.0%	70.0%
Percent of school days SHA is on-site	96.0%	97.4%	97.0% / 96.0%	97.0%	NA
Percent of parents and guardians who report that their child was able to attend school as a result of having a health care plan	NA	NA	NA / NA	80%	80%
Percent of students who demonstrate knowledge of health behaviors as a result of health promotion activities	NA	NA	NA / NA	80%	80%

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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 281 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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Average daily attendance of participants	134	123	130 / 105	110	115
ADHC clients per year	343	327	300 / 268	281	294
ADHC operating days	246	249	248 / 246	248	NA
Efficiency					
Cost of ADHC service per client per day	\$95.00	\$107.00	\$115.00 / \$126.00	\$120.00	\$120.00
Net cost per ADHC client to the County	\$53.00	\$65.00	\$70.00 / \$78.00	\$74.00	\$74.00
Service Quality					
Percent of ADHC clients/caregivers satisfied with service	99%	100%	95% / 97%	95%	95%
Outcome					
Percent of caregivers who report that the participant was able to remain at homes as a result of attending ADHC	93%	92%	90% / 90%	90%	90%
Percent of caregivers who report experiencing less stress as a result of ADHC	NA	NA	NA / NA	90%	90%
Percent of caregivers who report that the participant experienced a positive impact on their mood as a result of attending ADHC	NA	NA	NA / 86%	85%	85%
Percent of caregivers who report that the participant has been more involved in meaningful activities since attending ADHC	NA	NA	NA / NA	85%	85%
Percent of caregivers who report that the participant experienced a positive impact on their overall health as a result of attending ADHC	NA	NA	NA / 93%	85%	85%

Health Department

FY 2015 Adopted 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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Medicaid Pre-Admission screenings completed per year	808	866	940 / 912	1,025	NA
Medicaid Pre-Admission Screenings that met criteria (adults only)	592	725	690 / 649	750	NA
Medicaid Pre-Admission Screenings that resulted in the use of community-based services (adults only)	497	617	550 / 560	600	NA
Efficiency					
Medicaid Pre-Admission screenings cost per service unit	\$225	\$286	\$295 / \$272	\$261	NA
Medicaid Pre-Admission screenings net cost to County	\$128	\$188	\$197 / \$172	\$163	NA
Service Quality					
Percent of clients who received a Medicaid Pre-Admission screening who indicated that they were satisfied with the service	99%	97%	95% / 99%	95%	NA
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	84%	85%	80% / 86%	80%	NA

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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 increase the number of residents reached through integrated agency-wide outreach events by 20 percent.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Number of community members served through outreach and health promotion activities	22,661	16,818	12,000 / 16,672	20,000	20,000
Efficiency					
Cost of Community Outreach expenditures divided by the number of residents reached	\$10	\$17	\$35 / \$25	\$22	\$22
Service Quality					
Percent of community members satisfied with health promotion activities	94%	92%	95% / 93%	95%	95%
Outcome					
Percentage increase in the number of residents reached through integrated community outreach	253%	(26%)	20% / (1%)	20%	NA

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	Future Estimate
	FY 2011 Actual	FY 2012 Actual	FY 2013 Estimate/Actual	FY 2014	FY 2015
Output					
Number of staff trained in ICS/NIMS (1)	132	151	200 / 389	300	NA
Efficiency					
ICS/NIMS training cost expended per Health Department staff member (1)	\$21	\$21	\$22 / \$11	\$14	NA
Service Quality					
Percentage of Health Department staff who evaluate their ICS/NIMS training experience as "good" or "excellent" (1)	93%	98%	98% / 100%	100%	NA
Outcome					
Percentage of Health Department staff meeting established ICS/NIMS training requirements (1)	90%	90%	95% / 92%	95%	NA
Percent of staff and volunteers who have completed required training	56%	25%	NA / 34%	50%	50%
Percent of staff and volunteers who report they are better prepared for public health emergencies as a result of preparedness trainings and exercises	NA	NA	NA / NA	90%	90%
Percent of volunteers who reporting feeling a stronger connection to their community through their services	NA	NA	NA / NA	80%	80%

(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.