

Health Department

FY 2025 Adopted Budget Plan: Performance Measures

Public Health Administration and Operations

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 65 percent of FCHD performance measurement estimates.

Performance Indicators

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of performance measures evaluated*	20	51	55	55	55	55
Service Quality						
Percent of quality and efficiency estimates met*	75%	55%	60%	55%	65%	65%
Outcome						
Percent of performance measurement estimates met*	69%	67%	65%	62%	67%	64%

*Data for a significant number of performance measures could not be reported in FY 2020, FY 2021, and FY 2022 due to the impact of COVID-19 and FCHD emergency response activities.

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Community Health Development

Goal

To strengthen the capacity of the local public health system to address emerging public health issues through community engagement, health planning initiatives, and partnership development.

Objective

To achieve at least 80 percent of community members served reporting intention to practice healthy behaviors.

Performance Indicators

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of community members served through outreach and health promotion activities*	217,045	228,573	100,000	143,411	200,000	225,000
Number of partner organizations collaborating on community health initiatives	2	180	3	341	400	425
Efficiency						
Cost of Community Outreach expenditures divided by the number of residents reached**	\$5	\$6	\$19	\$15	\$10	\$10
Service Quality						
Percent of community members satisfied with health promotion activities*	NA	NA	95%	98%	95%	95%
Outcome						
Percent of community members served who report intent to practice healthy behaviors*	NA	NA	95%	98%	90%	90%

*Reflects impact of COVID-19 activities or data could not be reported due to the impact of COVID-19 activities.

**Actual measures reflect the impact of positions that were unfilled for part of the year.

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Emergency Preparedness

Goal

To ensure the department can anticipate, prepare for, effectively respond to, and recover from public health threats and emergencies, and meet community health preparedness needs.

Objective

To maintain at least 92 percent in FY 2023 and FY 2024 of staff and volunteers reporting that they are better prepared for public health emergencies as a result of preparedness trainings and exercises.

Performance Indicators

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of staff and volunteers who have completed required training	25	2,601	2,650	2,540	2,650	2,750
Efficiency						
Ratio of training hours invested to volunteer hours contributed*	1:268	1:2,132	1:100	1:102	1:150	1:150
Service Quality						
Percent of staff and volunteers who have completed required training	54%	60%	65%	85%	88%	90%
Outcome						
Percent of staff and volunteers who report they are better prepared for public health emergencies as a result of preparedness trainings and exercises	97%	94%	92%	95%	95%	95%
Percent of volunteers who reporting experiencing a stronger connection to their community through their services	96%	94%	93%	90%	94%	95%

*FY 2022 Actual measure reflects the impact of the significantly increased volunteer hours for COVID-19 and Monkeypox response activities, and utilization of external training resources

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Environmental Health

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 percent of food service establishments demonstrating Food and Drug Administration (FDA) risk factor control measures to reduce the occurrence of foodborne illness at 95 percent.

Performance Indicators

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of food service establishment inspections*	6,727	9,978	8,800	9,688	9,000	9,000
Service Quality						
Percent of foodborne illness risk factor inspections conducted in food service establishments within the prescribed inspection frequency**	NA	NA	NA	NA	NA	NA
Outcome						
Percent of food service establishments demonstrating FDA risk factor control measures to reduce foodborne illness**	NA	NA	NA	NA	NA	NA

* In FY 2022, CPP transitioned from virtual inspections due to COVID-19 back to in-person inspections. An increased number of food service establishment inspections were performed in FY 2022 compared to FY 2021 to ensure food establishments are equipped to address risk factors that could lead to disease in regulated establishments. A normal level of inspections is expected to be performed in FY 2023 and FY 2024.

** This data is not available for FY 2020 and FY 2021 because the measure could not be accurately reported due to the process in place during the COVID-19 pandemic. Additionally, the data is not available for FY 2022 because there was a change in the food establishment inspection reporting system with the launch of the new Planning and Land Use (PLUS) system.

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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 93 percent.

Performance Indicators

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of onsite sewage disposal and water supply systems inspections	2,609	2,906	3,200	2,864	3,000	3,000
Service Quality						
Percent of Onsite Sewage & Water Program service requests responded to within 3 days	44%	33%	45%	38%	40%	40%
Outcome						
Percent of out-of-compliance onsite sewage disposal and water supply systems corrected within the specified time period	94%	90%	93%	95%	93%	93%

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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	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of Environmental Health community-protection activities: inspections, permits, and service requests	30,640	37,117	38,000	42,882	39,000	39,000
Efficiency						
Environmental Health Cost Per Capita	\$3.83	\$4.87	\$6.31	\$4.57	\$6.02	\$6.55
Service Quality						
Percent of environmental complaints responded to within 3 days	57%	51%	55%	66%	55%	55%
Outcome						
Percent of environmental complaints resolved within 60 days	95%	96%	90%	99%	95%	95%

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Epidemiology and Population Health

Goal

To detect, prevent, prepare for, and respond to ongoing and emerging communicable and chronic 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	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of screenings, investigations and treatment for selected communicable diseases*	NA	NA	NA	NA	NA	NA
Number of reportable communicable disease investigations	71,625	147,340	46,400	58,941	45,000	45,000
Efficiency						
Epidemiology and population health cost per capita	\$1.51	\$3.80	\$3.47	\$3.80	\$3.80	\$3.80
Service Quality						
Percent of communicable disease investigations conducted within the appropriate timeframe	65%	76%	90%	73%	90%	90%
Outcome						
Percent of individuals exposed to a confirmed norovirus outbreak who did not develop illness after the implementation of Health Department outbreak control measures	70%	66%	90%	91%	90%	90%
Percent of communicable disease contacts who received prophylactic treatment to prevent the spread of disease**	87%	91%	90%	86%	90%	90%

*Data for this measure are significantly skewed due to the COVID-19 pandemic making previous FY comparisons invalid and preventing reliable estimates for FY 2023 and FY 2024.

** This measure was added in FY 2023 to better reflect the work of the division and cost center and was reported as "NA". Historical data is now available and has been added.

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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	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Tests reported	104,178	125,611	200,000	112,994	125,000	130,000
Efficiency						
Average cost/all tests	\$10.76	\$24.75	\$11.12	\$14.26	\$23.10	\$22.08
Service Quality						
Percent of laboratory clients satisfied with service	98%	99%	95%	99%	95%	95%
Outcome						
Average score on accuracy tests required for certification	97%	99%	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	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Rabies tests reported	323	287	300	248	250	250
Efficiency						
Cost/rabies test	\$315.51	\$339.22	\$329.23	\$417.31	\$396.46	\$405.73
Service Quality						
Percent of rabies tests involving critical human exposure completed within 24 hours	100%	100%	95%	99%	95%	95%
Outcome						
Percent of individuals prevented from unnecessary rabies post-exposure shots by timely receipt of negative lab results	100%	100%	95%	99%	95%	95%

Health Department

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Health Services

Goal

To provide access to public health services that promote optimal health and wellbeing across the lifespan.

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	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of pregnant women provided a public health assessment visit	1,798	2,070	2,400	1,679	2,000	2,000
Service Quality						
Percent of Nurse Family Partnership pregnant women retained through their entire pregnancy	83%	78%	82%	61%	75%	80%
Outcome						
Percent of pregnant women served who deliver a low birth weight baby	8.3%	7.8%	7.8%	8.6%	7.8%	7.8%

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Objective

To achieve a target of at least 80 percent in FY 2023 and FY 2024, 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	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of vaccines administered to children*	11,317	29,397	27,000	31,955	30,000	30,000
Service Quality						
Immunizations: Percent satisfied with service	99%	99%	95%	94%	95%	95%
Outcome						
Percent of children served by the Health Department who are up-to-date on immunizations at 24 months of age	64%	77%	80%	54%	75%	75%

* The number of vaccines administered in FY 2021 declined significantly as a result of COVID-19, but rebounded in FY 2022 as a result of efforts to bring children up-to-date on recommended and required vaccines missed in FY 2021.

Health Department

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Objective

To ensure that clients have access to public health clinical services they need.

Performance Indicators

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of clients served in public health clinics	12,137	18,324	20,565	22,007	23,849	25,691
Number of client visits to public health clinics	198	32,632	36,468	32,906	33,454	34,002
Efficiency						
Percent of clients receiving clinic services as scheduled	88%	86%	90%	88%	90%	91%
Service Quality						
Percent of clients served in public health clinics who were satisfied with services	98%	100%	98%	99%	98%	99%
Outcome						
Rate of TB Disease/100,000 population**	4.2	4.6	5.2	4.6	4.6	4.8
Percent of clients who report that the services they received at a public health clinic addressed their health need	96%	100%	98%	100%	98%	99%

* Reflects the impact of COVID-19 activities or data could not be reported due to the impact of COVID-19 activities.

** The rate of TB Disease/100,000 is reported on a calendar year basis. In the table above, FY 2020 data is CY 2019, FY 2021 data is CY 2020, and FY 2022 data is CY 2021.

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Objective

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

Performance Indicators

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of student visits to school health rooms	49,236	625,126	780,000	878,158	875,000	900,000
Students with health plans or identified health conditions	8,571	77,872	105,000	84,800	105,000	105,000
Efficiency						
Ratio of PHN training hours to number of Fairfax County Public School staff trained to implement health care plans*	1:4	1:18	1:30	1:19	1:25	1:30
Service Quality						
Percent of parents/guardians who report their child's health condition was managed effectively in the school setting**	NA	NA	85%	NA	85%	90%
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**	NA	NA	85%	NA	85%	90%

*Training capacity is anticipated to increase as we move toward placing one public health nurse at each site.

**Due to COVID-19 related school closures, the annual satisfaction survey was not conducted SY 2019 - 2020 and SY 2020 - 2021. In SY 2021 – 2022, an error in communication to parents and staff did not send the electronic survey as scheduled

Health Department

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Objective

To provide adult day health care services to frail elderly adults and adults with disabilities, so that at least 95 percent of participants are able to remain at home, in the community, preventing the need for more costly and often less desirable long-term care options.

Performance Indicators

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual	FY 2024 Estimate	FY 2025 Estimate
Output						
Average daily attendance of participants*	NA	NA	60	41	NA	NA
ADHC clients per year*	NA	NA	120	114	NA	NA
Medicaid Pre-Admission Screenings Completed per year	NA	1,323	1,389	1,679	NA	NA
Efficiency						
Net cost per ADHC client per day to the County**	NA	NA	\$160	\$371	NA	NA
Service Quality						
Percent of ADHC clients/caregivers satisfied with service**	NA	NA	NA	95%	NA	NA
Average # of calendar days between request for Medicaid Pre- Admission Screening and submission to Department of Medical Assistance Services for processing	NA	16	NA	19	NA	NA
Outcome						
Percent of participants who met the criteria for institutional level of care who were able to remain in the community**	NA	NA	NA	100%	NA	NA
Percent of caregivers who report experiencing less stress as a result of ADHC**	NA	NA	NA	93%	NA	NA

* Adult Day Health Care centers were closed during FY 2021 due to the COVID-19 pandemic. FY 2022 Estimate and Actual measures reflect lower Average Daily Attendance (ADA) resulting from social distancing requirements to ensure safety of frail elderly participants. In FY 2023, Long-Term Care services, including Adult Day Health Care, transferred to either Agency 79, Department of Neighborhood and Community Services or Agency 67, Department of Family Services, leading to the lack of data for FY 2023, FY 2024, and FY2025 estimates.

** Reflects impact of COVID-19 activities or data could not be reported due to the impact of COVID-19 activities.

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Health and Human Services Safety Net Services

Goal

To provide equitable access to comprehensive health care.

Objective

To increase access to quality comprehensive health care regardless of income or insurance.

Performance Indicators*

Indicator	FY 2021 Actual	FY 2022 Actual	FY 2023 Estimate	FY 2023 Actual**	FY 2024 Estimate	FY 2025 Estimate
Output						
Number of patients who received care through the Community Health Centers	30,833	25,532	25,500	27,587	27,750	28,000
Percent of patients at or below 200% of Federal Poverty Guideline	98%	98%	98%	98%	98%	98%
Percent of racial and/or ethnic minority patients served at the Community Health Centers	89%	91%	88%	92%	92%	92%
Percent of patients best served in a language other than English at the Community Health Centers	65%	48%	50%	67%	67%	67%
Efficiency						
Cost per patient	\$885	\$920	\$1,000	\$987	\$1,025	\$1,050
Service Quality						
Percent of Community Health Center clinical quality rankings for preventative health and chronic disease management that are in the top 50% nationally.	69%	62%	65%	72%	72%	75%
Outcome						
Percent of Community Health Center patients with hypertension whose blood pressure is controlled	55%	54%	57%	59%	60%	62%

* The average cost per patient at the Community Health Centers increased during the COVID-19 pandemic due to a surge in funding and services to the broader community for testing and vaccination. At the same time, patients were seeking care virtually so routine in-person screenings for cancer or chronic disease management decreased, negatively impacting the service quality and outcome measures.

** Federally Qualified Health Center measures and outcomes are compiled and reported on the calendar year. The most current outcomes for FY 2022 are for Calendar Year 2021.