National Profile of Local Health Departments, 2008

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National Association of County and City Health Officials

Codebook
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ICPSR Processing Note

1. ICPSR produced one-way frequencies or descriptive statistics—which are shown in the codebook—for most of the variables in the data. Descriptive statistics are provided for the weight variables and numeric variables with many unique codes, while frequencies are provided for the other numeric variables and two character variables.

2. ICPSR produced the SPSS setup and ASCII versions of the data from the original SPSS data files (public- and restricted-use files) provided by the principal investigator. The record layout file provided with this data collection shows the column locations of the variables in the ASCII data files. The SPSS system missing value (.) is represented as a blank in the ASCII versions of the data.

3. For reasons of confidentiality, ICPSR restricted the following variables from general dissemination:

<table>
<thead>
<tr>
<th>Variable Name</th>
<th>Variable Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>NACCHOid</td>
<td>naccho id</td>
</tr>
<tr>
<td>LHDname</td>
<td>lhd name</td>
</tr>
<tr>
<td>City</td>
<td>city physical (street) address</td>
</tr>
<tr>
<td>State</td>
<td>state_physical (street) address</td>
</tr>
<tr>
<td>Zip</td>
<td>Zip Code Physical Address</td>
</tr>
<tr>
<td>q2</td>
<td>total population</td>
</tr>
<tr>
<td>q12text</td>
<td>other authority text</td>
</tr>
<tr>
<td>q17text</td>
<td>total revenue other text</td>
</tr>
<tr>
<td>q23text</td>
<td>top exec title</td>
</tr>
<tr>
<td>q35text</td>
<td>licensure other text</td>
</tr>
<tr>
<td>q38text</td>
<td>fte number at lhd text</td>
</tr>
<tr>
<td>q145text</td>
<td>respond to emergency other text</td>
</tr>
<tr>
<td>q160text</td>
<td>comm health assess text</td>
</tr>
<tr>
<td>q170text</td>
<td>LHD used framework/approach to quality or performance improvement (past two years)- Text</td>
</tr>
<tr>
<td>q174text</td>
<td>LHD’s awareness of the Operational Definition- Text</td>
</tr>
<tr>
<td>q176text</td>
<td>Organizations LHD has received information about a voluntary national accreditation program- Text</td>
</tr>
<tr>
<td>q177text</td>
<td>Groups/Organizations with which LHD has discussed a voluntary national accreditation program- Text</td>
</tr>
<tr>
<td>q188text</td>
<td>Reasons LHD/LPHA has not used logo-Specify</td>
</tr>
<tr>
<td>q202text</td>
<td>responsible for recruiting staff for lhd - text</td>
</tr>
</tbody>
</table>
ICPSR blanked or recoded to missing all of the restricted variables in the Public-Use Version of the Data.

In addition, ICPSR sorted in random order the cases in the Public-Use Version of the Data and added a random identification variable named ICPSR_ID to the file. ICPSR_ID equals the ordinal position of each case in the Public-Use Version of the Data. Thus, ICPSR_ID = 1 for the first case, ICPSR_ID = 2 for the second case, and so on. The Restricted-Use Version of the Data also contains ICPSR_ID, but is sorted in the original sort order provided by the principal investigator.

4. Variable PopCat is a recode of variable q2 (total population) which shows the total population grouped into six categories:

<table>
<thead>
<tr>
<th>PopCat Code</th>
<th>Code Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Population &lt; 25,000</td>
</tr>
<tr>
<td>2</td>
<td>Population 25,000-49,999</td>
</tr>
<tr>
<td>3</td>
<td>Population 50,000-99,999</td>
</tr>
<tr>
<td>4</td>
<td>Population 100,000-249,999</td>
</tr>
<tr>
<td>5</td>
<td>Population 250,000-499,999</td>
</tr>
<tr>
<td>6</td>
<td>Population 500,000+</td>
</tr>
</tbody>
</table>

The original version of PopCat provided by the principal investigator was identical to variable q1 (geographic jurisdiction served). ICPSR recoded this variable as described above.

5. Many variables do not have value labels.

6. ICPSR did not receive variables q1 and q5.
7. ICPSR did not receive a description for code “-1” in variables q19a, q19b, and q19c. Variable q19a has 3 cases coded -1, q19b has 3 cases coded -1, and q19c has 4 cases coded -1.

8. Variables q68d and q69d have incorrect variable labels.

9. The codebook indicates that variables q171 and q185 are coded 1 or 2. However, these variables are actually coded 0 or 1 in the data.
The 2008 National Profile of Local Health Departments Study Questionnaire

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Questionnaire Completion (Part of Core) .................................. 53

Note: Core questionnaire was sent to all local health departments (LHDs); one of the three modules was also included for some randomly selected LHDs.
Definitions of Additional Variables (not included in questionnaire)

NACCHOID – unique identifier of Local Health Departments

LHDName – name of Local Health Department

City – city where Local Health Department main office is located

State – state where Local Health Department main office is located

Zip – zip code where Local Health Department main office is located

weight1core_proportional – proportional weights for core questionnaire variables (to compensate for varying non-response rates among population categories – frequencies represent respondent count)

weight2core_scale – scale weights for core questionnaire variable (to make statistics to be representative of all LHD’s as well as to compensate for varying non-response among population categories)

weightmodule1 – sampling weight for Module 1 variables (to compensate for both sampling and varying non-response among population categories)

weightmodule2 - sampling weight for Module 2 variables (to compensate for both sampling and varying non-response among population categories)

weightmodule3 - sampling weight for Module 3 variables (to compensate for both sampling and varying non-response among population categories)

Q17ab - Total of City and County sources revenue components

Q17cd - Total of State Direct and Federal Pass Through revenue components

RUCA_Cat – 3-category variable based Rural Urban Commuting Area codes
   1=RUCA Codes 1-3.99
   2=RUCA Codes 4-6.99
   3=RUCA Codes 7 -10.99

Govcat – LHD governance classification
   1=unit of state health agency
   2=unit of local government
Jurisdictional Information

Geographic jurisdiction served: (q1)
(select only one)

- City [1]
- County [2]
- City/County [3]
- Town/Township [4]
- Multi-county, district, region [5]
- State [6]
- Other (specify) [7] ______________________ [q1gtext]

If multi-county, district, or region, provide the names of all jurisdictions (county, city, town) served by your LHD (e.g., X County, Y County and Z County) (q1text)
Jurisdictional Information

**Total Population of your jurisdiction (q2)**

____________________

(Note: PopCat is q2 grouped into six population size categories)

**Racial composition of your jurisdiction (%)**

<table>
<thead>
<tr>
<th>[q3a]</th>
<th>White</th>
</tr>
</thead>
<tbody>
<tr>
<td>[q3b]</td>
<td>Black or African American</td>
</tr>
<tr>
<td>[q3c]</td>
<td>American Indian/Alaska Native</td>
</tr>
<tr>
<td>[q3d]</td>
<td>Asian</td>
</tr>
<tr>
<td>[q3e]</td>
<td>Native Hawaiian or Other Pacific Islander</td>
</tr>
<tr>
<td>[q3f]</td>
<td>Some Other Race</td>
</tr>
<tr>
<td>[q3g]</td>
<td>Two or More Races</td>
</tr>
</tbody>
</table>

**Ethnic composition of your jurisdiction.**

**Hispanic or Latino (q4)**

_______________________ %

Please provide any additional information on the population of your jurisdiction, including year of any estimate given above.  **(q5text)**

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________
Governance

Who has the authority to do each of the following in your jurisdiction? (select all that apply)

<table>
<thead>
<tr>
<th>Variable values: unchecked=0, checked=1</th>
</tr>
</thead>
<tbody>
<tr>
<td>local board of health</td>
</tr>
<tr>
<td>county government</td>
</tr>
<tr>
<td>city/town government</td>
</tr>
<tr>
<td>state health agency</td>
</tr>
<tr>
<td>other</td>
</tr>
<tr>
<td>hire or fire agency head</td>
</tr>
<tr>
<td>approve the lhd budget</td>
</tr>
<tr>
<td>adopt public health regulations</td>
</tr>
<tr>
<td>set and impose fees</td>
</tr>
<tr>
<td>impose taxes for public health</td>
</tr>
<tr>
<td>request a public health levy</td>
</tr>
</tbody>
</table>

If you specified "other" for any of the above, please indicate who has the authority. (q12text)

Describe your local board of health, if any.
(select all that apply)

Variable values: unchecked=0, checked=1

- [ ] No local board of health [q13a]
- [ ] Members appointed specifically to serve on the local board of health [q13b])
- [ ] Members elected specifically to serve on the local board of health [q13c]
- [ ] Members designated by statute to serve on the local board of health based on an elected position (e.g., county commissioner, mayor, township trustee, etc.) [q13d]
- [ ] Members designated by statute to serve on the local board of health based on a non-elected position (e.g., school superintendent, municipal administrator, etc.) [q13e]
2008 Profile of LHDs

Funding

(a) (b) (c)

Ending date of the LHD’s most recently completed Fiscal Year: (Mo/Day/Year)

______________________ (q14)

For your most recently completed fiscal year, what were the LHD’s total expenditures?
Amount (Enter whole number):

______________________ (q15)

For your most recently completed year, what were the LHD’s total revenues?
Amount (Enter whole number):

______________________ (q16)

For your most recently completed fiscal year, what were the total revenues (enter whole number in dollars) from:

(Your responses should total the amount from the revenue item above.)

$ ______ q17a City/township/town sources
$ ______ q17b County sources
$ ______ q17c State sources (EXCLUDING pass-through from Federal)
$ ______ q17d Federal sources (passed through by State)
$ ______ q17e Federal sources (direct)
$ ______ q17f Medicaid
$ ______ q17g Medicare
$ ______ q17h Private foundations
$ ______ q17i Private health insurance
$ ______ q17j Patient personal fees
$ ______ q17k Regulatory fees
$ ______ q17l Tribal sources
$ ______ q17m Other (specify below)

If you answered, "other," above, please provide an explanation: (q17text)

________________________________________________________________________________

* Please note: q17ab = Total of City and County sources
    q17cd = Total of State Direct and Federal Pass Through”
Does your financial system allow you to distinguish between funds that originate from your state and funds that originate from a federal source and are distributed by a state agency? (q18) (select only one)

- Yes [1]
- No, but we could make reasonably accurate estimates [2]
- No, and it is difficult to make accurate estimates [3]
- Unknown [4]
Emergency Preparedness Funding

What amount of funds did you receive from your state health agency through the CDC public health emergency preparedness cooperative agreement?

- Report funds received during the most recently completed cooperative agreement year (August 31, 2006 to August 30, 2007).
- Include only funds received by your LHD DIRECTLY, not funds spent or retained by your state health agency for the benefit of LHDs.
- Enter “0” if your LHD did not receive funds from one of these categories.

<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>q19a</td>
<td>Base - CDC emergency preparedness funding (August 31, 2006 to August 30, 2007) -- amount</td>
</tr>
<tr>
<td>q19b</td>
<td>Pandemic Flu - CDC emergency preparedness funding (August 31, 2006 to August 30, 2007) -- amount</td>
</tr>
<tr>
<td>q19c</td>
<td>Cities Readiness Initiative (CRI) - CDC emergency preparedness funding (August 31, 2006 to August 30, 2007) amount</td>
</tr>
</tbody>
</table>

Currently, are any LHD staff salaries (regular or contract staff) supported using funds your LHD receives from your state health agency through any of the CDC public health emergency preparedness cooperative agreement? (q20) (select only one)

- No staff time supported by this funding source [0]
- Yes, FTE staff supported by this funding source [1]

If yes, how many FTE staff (regular or contract staff) are supported by this funding source?
- To calculate FTEs, count a full-time employee as 1 FTE, a half-time employee as a 0.5 FTE, etc.

_________________________ (q21)
2008 Profile of LHDs

Workforce – Top Executive

Title of your LHD's top executive: ______________________________________________ (q23text)

What date did the top executive assume this position?

q24a Month (MM)

q24b Year (YYYY)

Is this his/her first position as the top executive of an LHD? (q25)
(select only one)

☐ Yes [1]
☐ No [2]
☐ Unknown [3]

What is the work status for this position? (q26)
(select only one)

☐ Full-time [1]
☐ Part-time [2]

What is the race of the person in this position? (q27)
(select all that apply)

☐ White (q27a)
☐ Black or African American (q27b)
☐ American Indian or Alaska Native (q27c)
☐ Asian (q27d)
☐ Native Hawaiian or Other Pacific Islander (q27e)
☐ Some other race (q27f)

What is the ethnicity of the person in this position? (q28)
(Select only one)

☐ Hispanic or Latino [1]
☐ Not Hispanic or Latino [2]

What is the gender of the person in this position? (q29)

☐ Male [1]
☐ Female [2]

What is the age of this person? (enter whole number) ______________ (q30)
2008 Profile of LHDs

Workforce – Top Executive Education and Licensure

Indicate all degrees that your top executive holds:
(Select all that apply)

Associate Degree
☐ AD/ASN (q31)

Bachelors Degree
☐ BA (q32a)
☐ BS (q32b)
☐ BSN (q32c)

Masters Degree
☐ MPH (q33a)
☐ MSN (q33b)
☐ MBA (q33c)
☐ Other (specify) (q33d) ______________________ (q33dtext)

Doctoral Degree
☐ MD (q34a)
☐ DO (q34b)
☐ DNS (q34c)
☐ DrPH (q34d)
☐ DDS (q34e)
☐ DVM (q34f)
☐ JD (q34g)
☐ PhD (specify field) (q34h) ______________________ (q34htext)
☐ Other (specify) (q34i) ______________________ (q34itext)

Indicate all licensures that your top executive holds:
(Select all that apply)

☐ LPN/LVN (q35a)
☐ RN (q35b)
☐ MD (q35c)
☐ RD (q35d)
☐ REHS/RS (q35e)
☐ None (q35f)
☐ Other (specify) (q35g) ______________________ (q35text)
Workforce

How many individuals currently work for your LHD? Please include ALL regular full-time, part-time, and contractual employees.

______________________ (q36)

What is the total Full-time Equivalents (FTEs) workforce at your LHD?
- Please include ALL regular full-time, part-time, and contractual employees
- To calculate FTEs, count a full-time employee as 1 FTE, a half-time employee as a 0.5 FTE, etc.

______________________ (q37)

What does the FTE number at your LHD include? (q38) (select only one)
- [ ] Currently filled positions only [1]
- [ ] Currently funded positions (whether or not filled) [2]
- [ ] Currently authorized positions (whether or not filled) [3]
- [ ] Other [4] Specify ____________________________ (q38text)
- [ ] Unknown [5]

What percentage of staff working at your LHD is in each racial category?
- Include regular full-time, part-time, and contractual employees.
- Round to the nearest whole percentage point.

(Your responses should total 100%)

q39a % White
q39b % Black or African American
q39c % American Indian/Alaska Native
q39d % Asian
q39e % Native Hawaiian or Other Pacific Islander
q39f % Some Other Race
q39g % Two or More Races
q39h % Missing data on race
What percentage of staff working at your LHD is in each ethnic category?

- Include regular full-time, part-time, and contractual employees.
- Round to the nearest whole percentage point.

(Your responses should total 100%)

q40a % Hispanic or Latino
q40b % Not Hispanic or Latino
q40c % Missing data on Hispanic/Latino ethnicity

What percentage of staff working at your LHD is in each gender category?

- Include regular full-time, part-time and contractual employees.
- Round to the nearest whole percentage point.

(Your responses should total 100%)

q41a % Female
q41b % Male
q41c % Missing data on gender
2008 Profile of LHDs

Occupations Employed
- Indicate which of the following categories of public health workers are currently employed by your LHD.
- Indicate the FTE of staff in each classification if data are available.
- If you cannot determine the FTE of staff in a category, check the “Data on FTEs Not Available” box.
- Categorize staff according to their primary job responsibilities.
- Note that this is not intended to be an exhaustive list of occupational categories.

- Please indicate FTEs for all regular full-time, part-time and contractual employees.
- To calculate FTEs, count a full-time employee as 1 FTE, a half-time employee as a 0.5 FTE, etc.

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th>Does your LHD currently employ staff in this classification?</th>
<th>Yes [1]</th>
<th>Number of FTEs currently employed</th>
<th>Data on FTEs not available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health service managers, administrators, health directors</td>
<td>q42a</td>
<td>q42b</td>
<td>q42c</td>
</tr>
<tr>
<td>Registered Nurse (e.g., public health nurse, school nurse, community health nurse, nurse practitioner)</td>
<td>q43a</td>
<td>q43b</td>
<td>q43c</td>
</tr>
<tr>
<td>Physician</td>
<td>q44a</td>
<td>q44b</td>
<td>q44c</td>
</tr>
<tr>
<td>Environmental health specialist (sanitarian)</td>
<td>q45a</td>
<td>q45b</td>
<td>q45c</td>
</tr>
<tr>
<td>Other environmental scientists or technicians</td>
<td>q46a</td>
<td>q46b</td>
<td>q46c</td>
</tr>
<tr>
<td>Epidemiologist</td>
<td>q47a</td>
<td>q47b</td>
<td>q47c</td>
</tr>
<tr>
<td>Health educator</td>
<td>q48a</td>
<td>q48b</td>
<td>q48c</td>
</tr>
<tr>
<td>Nutritionist</td>
<td>q49a</td>
<td>q49b</td>
<td>q49c</td>
</tr>
<tr>
<td>Information systems specialist</td>
<td>q50a</td>
<td>q50b</td>
<td>q50c</td>
</tr>
<tr>
<td>Public information specialist</td>
<td>g51a</td>
<td>q51b</td>
<td>q51c</td>
</tr>
<tr>
<td>Behavioral health professional (e.g. counselor, public health social worker)</td>
<td>g52a</td>
<td>q52b</td>
<td>q52c</td>
</tr>
<tr>
<td>Emergency preparedness coordinator</td>
<td>g53a</td>
<td>q53b</td>
<td>q53c</td>
</tr>
<tr>
<td>Administrative or clerical personnel</td>
<td>q54a</td>
<td>q54b</td>
<td>q54c</td>
</tr>
</tbody>
</table>
Activities

For each activity in the charts below and on the following pages, check all that apply, to include EVERYONE who has conducted the activity in your jurisdiction *during the past year*.

- Indicate whether your LHD performs the activity, contracts out for it, or both.
- Check all of the other agencies that perform any aspect of that activity in your jurisdiction, even for activities that your LHD also performs.
- If a service or activity is not available in your jurisdiction, check that option.

The category “done by someone else” includes non-profit organizations, private physicians, and other non-governmental entities.

### Immunization

**Check all that apply** (Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th></th>
<th>Performed by LHD directly</th>
<th>Contracted out by LHD</th>
<th>Done by state government agency</th>
<th>Done by another local government agency</th>
<th>Done by someone else</th>
<th>Not available in jurisdiction</th>
<th>Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Immunizations</td>
<td>q55a</td>
<td>q55b</td>
<td>q55c</td>
<td>q55d</td>
<td>q55e</td>
<td>q55f</td>
<td>q55g</td>
</tr>
<tr>
<td>Childhood Immunizations</td>
<td>q56a</td>
<td>q56b</td>
<td>q56c</td>
<td>q56d</td>
<td>q56e</td>
<td>q56f</td>
<td>q56g</td>
</tr>
</tbody>
</table>
Screening for diseases/conditions

Check all that apply (Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th></th>
<th>Performed by LHD directly</th>
<th>Contracted out by LHD</th>
<th>Done by state government agency</th>
<th>Done by another local government agency</th>
<th>Done by someone else</th>
<th>Not available in jurisdiction</th>
<th>Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV/AIDS</td>
<td>q57a</td>
<td>q57b</td>
<td>q57c</td>
<td>q57d</td>
<td>q57e</td>
<td>q57f</td>
<td>q57g</td>
</tr>
<tr>
<td>Other STDs</td>
<td>q58a</td>
<td>q58b</td>
<td>q58c</td>
<td>q58d</td>
<td>q58e</td>
<td>q58f</td>
<td>q58g</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>q59a</td>
<td>q59b</td>
<td>q59c</td>
<td>q59d</td>
<td>q59e</td>
<td>q59f</td>
<td>q59g</td>
</tr>
<tr>
<td>Cancer</td>
<td>q60a</td>
<td>q60b</td>
<td>q60c</td>
<td>q60d</td>
<td>q60e</td>
<td>q60f</td>
<td>q60g</td>
</tr>
<tr>
<td>Cardiovascular disease</td>
<td>q61a</td>
<td>q61b</td>
<td>q61c</td>
<td>q61d</td>
<td>q61e</td>
<td>q61f</td>
<td>q61g</td>
</tr>
<tr>
<td>Diabetes</td>
<td>q62a</td>
<td>q62b</td>
<td>q62c</td>
<td>q62d</td>
<td>q62e</td>
<td>q62f</td>
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<td>High blood pressure</td>
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Treatment for communicable diseases

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<td>Other STDs</td>
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## 2008 Profile of LHDs

### Maternal and Child Health

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<td>WIC</td>
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<td>MCH home visits</td>
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### Other Health Services

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<tr>
<td>Behavioral/mental health services</td>
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<td>Substance abuse services</td>
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## 2008 Profile of LHDs

### Epidemiology and Surveillance Activities

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### Population-based Primary Prevention Activities

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## 2008 Profile of LHDs

### Regulation, Inspection and/or Licensing Activities

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<td>Solid waste haulers</td>
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<td>Schools/daycare</td>
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2008 Profile of LHDs

Other Environmental Health Activities

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### Other Activities

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<td>q132c</td>
<td>q132d</td>
<td>q132e</td>
<td>q132f</td>
<td>q132g</td>
</tr>
<tr>
<td>Veterinarian public health activities</td>
<td>q133a</td>
<td>q133b</td>
<td>q133c</td>
<td>q133d</td>
<td>q133e</td>
<td>q133f</td>
<td>q133g</td>
</tr>
<tr>
<td>Laboratory services</td>
<td>q134a</td>
<td>q134b</td>
<td>q134c</td>
<td>q134d</td>
<td>q134e</td>
<td>q134f</td>
<td>q134g</td>
</tr>
<tr>
<td>Outreach and enrollment for medical insurance (include Medicaid)</td>
<td>q135a</td>
<td>q135b</td>
<td>q135c</td>
<td>q135d</td>
<td>q135e</td>
<td>q135f</td>
<td>q135g</td>
</tr>
<tr>
<td>School-based clinics</td>
<td>q136a</td>
<td>q136b</td>
<td>q136c</td>
<td>q136d</td>
<td>q136e</td>
<td>q136f</td>
<td>q136g</td>
</tr>
<tr>
<td>School health</td>
<td>q137a</td>
<td>q137b</td>
<td>q137c</td>
<td>q137d</td>
<td>q137e</td>
<td>q137f</td>
<td>q137g</td>
</tr>
<tr>
<td>Asthma prevention and/or management</td>
<td>q138a</td>
<td>q138b</td>
<td>q138c</td>
<td>q138d</td>
<td>q138e</td>
<td>q38f</td>
<td>q138g</td>
</tr>
<tr>
<td>Correctional health</td>
<td>q139a</td>
<td>q139b</td>
<td>q139c</td>
<td>q139d</td>
<td>q139e</td>
<td>q139f</td>
<td>q139g</td>
</tr>
<tr>
<td>Vital records</td>
<td>q140a</td>
<td>q140b</td>
<td>q140c</td>
<td>q140d</td>
<td>q140e</td>
<td>q140f</td>
<td>q140g</td>
</tr>
<tr>
<td>Medical examiner’s office</td>
<td>q141a</td>
<td>q141b</td>
<td>q141c</td>
<td>q141d</td>
<td>q141e</td>
<td>q141f</td>
<td>q141g</td>
</tr>
</tbody>
</table>
## Emergency Preparedness

A **Tabletop Exercise** is a scenario-based discussion that permits evaluation of all or portions of the Emergency Operations Plan, through oral interaction and application of plan guidance. This is accomplished using minimal or no physical activity, with discussion often taking place around a table or tables.

A **Full-Scale Exercise** is a scenario-based exercise that includes all or most of the functions and complex activities of the Emergency Operations Plan. It includes actual movement of people and resources to replicate real world response situations. It is typically conducted under very real-time constraints of an actual incident.

A **Functional Exercise** is a scenario-based execution of selected tasks or activities within a functional area of the Emergency Operations Plan. It also includes actual movement of people and resources, but includes fewer functions than a full-scale exercise and interaction with outside personnel and functions are simulated.

To be **NIMS compliant** is to follow the directives of the most recent version of the National Incident Management System and to have such directives formally adopted by the agency.

### EMERGENCY PREPAREDNESS: CORE COMPETENCIES FOR ALL PUBLIC HEALTH WORKERS

1. **Describe** the public health role in emergency response in a range of emergencies that might arise.
2. **Describe** the chain of command in emergency response.
3. **Identify** and **locate** the agency emergency response plan (or the pertinent portion of the plan).
4. **Describe** his/her functional role(s) in emergency response and **demonstrate** his/her role(s) in regular drills.
5. **Demonstrate** correct use of all communication equipment used for emergency communication (phone, fax, etc.)
6. **Describe** communication role(s) in emergency response.
7. **Identify** limits to own knowledge/skill/authority and **identify** key system resources for referring matters that exceed these limits.
8. **Recognize** unusual events that might indicate an emergency and **describe** appropriate action.
9. **Apply** creative problem solving and flexible thinking to unusual challenges within his/her functional responsibilities and **evaluate** effectiveness of all actions taken.

### Which of the following emergency preparedness activities has your LHD conducted in the past year? (select all that apply)

Variable values: unchecked= 0, checked= 1

- Updated a written emergency response plan based on recommendations from an exercise After Action Report (AAR) *(q142a)*
- Developed or updated pandemic flu preparedness plans *(q142b)*
- Reviewed relevant legal authorities to isolate and/or quarantine individuals, groups, facilities, animals, and food products *(q142c)*
- Participated in drills or exercises: tabletop *(q142d)*
- Participated in drills or exercises: functional *(q142e)*
- Participated in drills or exercises: full-scale *(q142f)*
- Assessed emergency preparedness competencies of staff based on the nine core Emergency Preparedness Competencies and the agency’s all-hazards response plan *(q142g)*
- Provided emergency preparedness training to staff on NIMS compliance *(q142h)*
- None of the above *(q142i)*
Which of the following emergency preparedness activities has your LHD conducted? (select all that apply)

Variable values: unchecked= 0, checked= 1

- Developed or enhanced a local Medical Reserve Corps (MRC) (q143a)
- Developed written mutual aid agreements with neighboring or regional LHDs (q143b)
- Selected a method or methods for providing mass prophylaxis to the public. (q143c)
- None of the above (q143d)

Did your LHD participate in any events in the past year that resulted in the activation of a jurisdictional or local health department Emergency Operations Center (EOC)? (select all that apply)

Variable values: unchecked= 0, checked= 1

- No (q144a)
- Yes, for drills and/or exercises (q144b)
- Yes, for non-emergency, pre-planned event (e.g., flu clinic) (q144c)
- Yes, in response to emergency (q144d)

If your LHD responded to any emergencies in the past year that resulted in the activation of a jurisdictional or local health department Emergency Operations Center (EOC), please indicate the type of precipitating event. (select all that apply)

- Do NOT include activation of an EOC for the purpose of an exercise or drill, or a non emergency, pre-planned event.

Variable values: unchecked= 0, checked= 1

- Chemical spills or releases (q145a)
- Water-borne outbreaks (q145b)
- Infectious disease (e.g., Hepatitis outbreak, TB outbreak) (q145c)
- Food-borne outbreaks (q145d)
- Natural disasters & severe weather (q145e)
- Radioactive material spill or leak (q145f)
- Exposure to biological agent (e.g., anthrax, plague) (q145g)
- Other (specify) (q145h) ________________________ (q145text)
Health Disparities

Health disparities can be defined as differences in health status that occur among population groups.

Check each activity that your LHD has done in the past two years to address health disparities.
(select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Describing health disparities in your jurisdiction using data (q146a)
- Conducting original research that links health disparities to differences in social or environmental conditions (q146b)
- Educating elected or appointed officials about health disparities and their causes (q146c)
- Training your workforce on health disparities and their causes (q146d)
- Recruiting workforce from communities adversely impacted by health disparities (q146e)
- Prioritizing resources and programs specifically for the reduction in health disparities (q146f)
- Taking public policy positions on health disparities (through testimony, written statements, media, etc) (q146g)
- Supporting community efforts to change the causes of health disparities (q146h)
- None of the above (q146i)
Community Health Assessment and Planning

Community health assessment can be defined as regularly and systematically collecting, analyzing, and making available information on the health of a community, including statistics on health status, community health needs, epidemiologic and other studies of health problems, and an analysis of community strengths and resources.

Has a community health assessment been completed within the last three years? (q147) (select only one)

- Yes, developed primarily by LHD [1]
- Yes, developed by coalition with LHD as lead organization [2]
- Yes, developed by coalition with LHD as equal partner [3]
- Yes, developed by coalition with some LHD involvement [4]
- Yes, without involvement by LHD [5]
- No [6]

Do you plan to complete a community health assessment within the next three years? (q148) (select only one)

- Yes [1]
- No [0]

A community health improvement plan can be defined as a long-term, systematic effort to address health problems. This plan is used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources.

Did your LHD participate in developing a health improvement plan for your community within the last three years? (q149)

- Yes [1]
- No (If no, skip to the next page) [0]

If your LHD participated in developing a health improvement plan for your community, was the plan developed using the results of a community health assessment? (q150)

- Yes [1]
- No [0]

If your LHD participated in developing a health improvement plan for your community, is the plan linked to the state health improvement plan? (q151)

- Yes [1]
- No [0]
Please indicate whether and how you have used any of the following tools in a community health assessment or health improvement plan in the past three years. (select only one)

Abbreviation Key for the following items:
- MAPP = Mobilizing for Action through Planning and Partnerships
- APEX PH = Assessment Protocol for Excellence in Public Health
- PACE EH = Protocol for Assessing Community Excellence in Environmental Health
- NPHPSP = National Public Health Performance Standards Program
- PATCH = Planned Approach to Community Health

<table>
<thead>
<tr>
<th>Tool Description</th>
<th>Have not used</th>
<th>Used as a reference</th>
<th>Implemented in collaboration with other tools</th>
<th>Implemented independent of other tools</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAPP (q152)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>APEX PH (q153)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>PACE EH (q154)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>NPHPSP (q155)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>PATCH (q156)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>State-specific tool (q157)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Operational Definition of LHD (q158)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Healthy People 2010 (q159)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Other (q160)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

If other, please describe________________________________________________________ (q160text)
Performance and/or Quality Improvement

**Performance Improvement** (often referred to as quality improvement or performance management) is a deliberate, defined process that seeks to achieve measurable improvements in capacity, programs or services with the goal of impacting the health of the community.

Has your LHD undertaken any formal quality improvement or performance improvement efforts in the past two years? *(q161)* (select only one)

- [ ] Yes [1]
- [ ] No [0] *(If no, please skip the next two pages, and continue with the Operational Definition section.)*
The chart below shows performance improvement components and seven areas in which these components might be applied. For each area, go down the column and check each component that is included in your LHD’s performance improvement efforts for that area. (select all that apply)

**Performance Standards** are generally accepted, objective forms of measurement that serve as a rule or guideline against which an organization’s level of performance can be compared.

**Performance Measures** are any quantitative measures or indicators of capacities, processes, or outcomes relevant to the assessment of an established performance goal or standard.

**Reporting of progress** means documentation and reporting of progress in meeting standards and targets and sharing of such information through feedback.

**Quality improvement process** is the systematic examination of specific processes in order to improve them. Guiding principles of quality improvement include teamwork, attention to systems and processes, client focus, and measurement.

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
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<tr>
<td>Performance Standards</td>
<td>q162a</td>
<td>q163a</td>
<td>q164a</td>
<td>q165a</td>
<td>q166a</td>
<td>q167a</td>
</tr>
<tr>
<td>Performance Measures</td>
<td>q162b</td>
<td>q163b</td>
<td>q164b</td>
<td>q165b</td>
<td>q166b</td>
<td>q167b</td>
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<tr>
<td>Reporting of Progress</td>
<td>q162c</td>
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<td>q164c</td>
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<td>q167c</td>
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<tr>
<td>Quality Improvement Process</td>
<td>q162d</td>
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<td>q164d</td>
<td>q165d</td>
<td>q166d</td>
<td>q167d</td>
</tr>
<tr>
<td>None of the above</td>
<td>q162e</td>
<td>q163e</td>
<td>q164e</td>
<td>q165e</td>
<td>q166e</td>
<td>q167e</td>
</tr>
</tbody>
</table>

Indicate the extent to which the following tools and techniques have been used in your LHD’s quality improvement efforts in the past year. (select only one)

<table>
<thead>
<tr>
<th>Tool</th>
<th>Never</th>
<th>Once or twice</th>
<th>Three or four times</th>
<th>Five times or more</th>
<th>Do not know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Process map (q169a)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Fishbone or equivalent diagram to identify root causes (q169b)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Control chart (q169c)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Plan-do-study-act cycle (q169d)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
There are many different frameworks or approaches to quality or performance improvement. Check each framework or approach to quality improvement that your LHD has used over the past two years. (select all that apply) (Variable values: unchecked= 0, checked= 1)

- Baldrige Performance Excellence Criteria (or state version) (q170a)
- Balanced Scorecard (q170b)
- ISO 9000 (q170c)
- Lean (q170d)
- Six Sigma (q170e)
- TQM (Total Quality Management) (q170f)
- Turning Point Performance Management Framework (q170g)
- No specific framework or approach (q170h)
- Other (specify) (q170i) ________________________ (q170text)

Has your LHD designated a quality improvement officer? (q171) (select only one)

- Yes [1]
- No [2]

Has your LHD applied for or received any awards for its quality improvement efforts? (q172) (select only one)

- Applied for award [1]
- Received award [2]
- Neither [3]
- Do not know [4]

How many managers in your LHD have received formal training in quality improvement methods? (q173a) (select only one)

- None [1]
- Some [2]
- All [3]
- Do not know [4]

How many managers in your LHD have provided quality improvement training to their staff members? (q173b) (select only one)

- None [1]
- Some [2]
- All [3]
- Do not know [4]
Operational Definition & Accreditation Preparation

NACCHO published the Operational Definition of a Functional Local Health Department (Operational Definition) in 2005. It is cited as the framework for accreditation standards for local health departments.

Indicate your LHD’s awareness of the Operational Definition. (select all that apply) (Variable values: unchecked= 0, checked= 1)

- Not aware of the Operational Definition (q174a)
- Aware of the Operational Definition but have not reviewed it (q174b)
- One or more staff members have reviewed the Operational Definition (q174c)
- Operational Definition has been used to educate staff (q174d)
- Operational Definition has been used in a strategic planning process (q174e)
- Operational Definition has been used to conduct an agency self-assessment (q174f)
- Operational Definition has been discussed with Board of Health or other governing body (q174g)
- Other (specify) (q174h) ___________________________ (q174text)

Development of a voluntary national accreditation program (VNAP) for state and local health departments is underway. The Public Health Accreditation Board and its workgroups are currently developing the program, which will be available in 2011.

<table>
<thead>
<tr>
<th>Not at all Familiar</th>
<th>Very Familiar</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

Indicate your LHD’s familiarity with a voluntary national accreditation program (VNAP) for state and local health departments.  (q175)

(If not at all familiar (1), please skip the next page and continue with the Promoting Public Health and Local Health Departments section.)
From which of the following organizations have you received information about a voluntary national accreditation program? (select all that apply)

(Variable values: unchecked= 0, checked= 1)

☐ No information received (q176a)
☐ American Public Health Association (APHA) (q176b)
☐ Association of State and Territorial Health Officials (ASTHO) (q176c)
☐ Centers for Disease Control and Prevention (CDC) (q176d)
☐ National Association of County and City Health Officials (NACCHO) (q176e)
☐ Public Health Accreditation Board (PHAB) (q176f)
☐ State association of local health departments (q176g)
☐ State health agency (q176h)
☐ Other organization (specify) (q176i) ________________________ (q176text)

With which of the following groups or organizations has your LHD discussed a voluntary national accreditation program? (select all that apply)

(Variable values: unchecked= 0, checked= 1)

☐ Your LHD’s staff (q177a)
☐ Staff in other LHDs (q177b)
☐ Local Board of Health (q177c)
☐ Elected Officials (other than Local Board of Health) (q177d)
☐ State Health Agency staff (q177e)
☐ Other organization/group (specify) (q177f) ________________________ (q177text)
☐ None (q177g)

Rate your level of agreement with the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Our LHD would seek accreditation under a voluntary national accreditation program. (q178)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Our LHD would seek accreditation under a voluntary national accreditation program within the first two years of the program (2011-2012). (q179)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
## Promoting Public Health and Local Health Departments

Indicate how frequently your LHD has engaged in any of the activities listed below during the past year.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never</th>
<th>Less than once a month</th>
<th>At least once a month</th>
<th>At least once a week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ran print advertisements (q180)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Ran radio advertisements (q181)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Ran television advertisements (q182)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Worked with reporters proactively to gain media coverage for your LHD (q183)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Responded to unsolicited press inquiries (q184)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Are you familiar with the logo and tagline that NACCHO developed for local governmental public health? (q185)

- Yes [1]
- No [2]
Has your LHD used the logo and tagline for local governmental public health? (q186) (select only one)

- Yes [1]
- No (If no, skip the next question.) [0]

In what ways has your LHD used the logo? (select all that apply) (Variable values: unchecked= 0, checked= 1)

- As the primary organizational logo (q187a)
- As a collateral or secondary logo (using the public health logo in addition to your LHD’s existing logo) (q187b)
- In email signatures (q187c)
- On communication materials (press releases, brochures, posters, presentations, cable broadcasts and other) (q187d)
- On agency letterhead or business cards (q187e)
- On the agency website (q187f)
- On staff apparel (shirts, hats, buttons or patches, jackets, vests) (q187g)
- On departmental vehicles (q187h)
- Other (specify) (q187i) ____________________________ (q187text)

(Please skip the next two questions and continue with the LHD Web site section on the next page.)

What are the reasons that your LHD has not used the logo? (select all that apply) (Variable values: unchecked= 0, checked= 1)

- My LHD did not know the logo existed and was available for use (q188a)
- My LHD is uncertain how to use this logo for public health promotion (q188b)
- My LHD already has a logo and does not wish to add the national logo (q188c)
- Using this logo requires my LHD to get approval from the county and/or state (q188d)
- My LHD doesn’t feel strongly about a universal identity for local public health (q188e)
- My LHD doesn’t understand the purpose of the logo or what it represents (q188f)
- My LHD doesn’t like the appearance of the logo (q188g)
- Adopting the logo is cost-prohibitive (q188h)
- Other (specify) (q188i) ____________________________ (q188text)
Which of the following would encourage your LHD to begin using the logo?
(select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Technical assistance in using the logo (q189a)
- More documentation and examples of LHDs that are currently using the logo (q189b)
- More communication from NACCHO explaining the purpose of the logo (q189c)
- A national campaign to promote the visibility of public health (q189d)
- None of the above (q189e)
LHD Web site

Describe your local LHD Web site or Web page:
(select all that apply)

(Variable values: unchecked=0, checked=1)

- My LHD does not have a local Web site or Web page (q190a)
- Provides telephone and/or e-mail contact information for the various services LHD provides (q190b)
- Provides information about the various services LHD provides (q190c)
- Includes links or contact information for other public health partners in the community (q190d)
- Offers resource information (Resource directories: health services, child care) (q190e)
- Includes a number of links to other sources of consumer health information for the public (e.g., Medline Plus, CDC information) (q190f)
- Provides community health information (e.g., data, reports, and plans) (q190g)
- Reports results of local restaurant inspections (q190h)
- Offers ability to conduct surveys online (q190i)
- Regulated entities can download commonly used forms from our LHD web site (q190j)
- Regulated entities can submit forms or other information electronically via our LHD web site (q190k)

How often is your local Web site or Web page updated? (q191)
(select only one)

1. ☐ No local Web site or Web page [1]
2. ☐ Daily [2]
3. ☐ Weekly [3]
5. ☐ Other (specify) [5] ____________________________ (q191text)
Use of Profile

Check each statement that describes how your LHD’s staff members have used reports or presentations from the 2005 Profile study. (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- No staff members have seen any reports or presentations from the 2005 Profile study. (q192a)
- One or more LHD staff have reviewed reports or presentations from the 2005 Profile results. (q192b)
- LHD staff members have discussed reports or presentations from the 2005 Profile study. (q192c)
- LHD staff members have used reports or presentations from the 2005 Profile study to compare our LHD to others. (q192d)
- LHD staff members have used information from the 2005 Profile study in a report or presentation. (q192e)
- Other (specify) (q192f) ___________________________ (q192text)
Has your LHD determined the percentage of your workforce that will be eligible for retirement within five years? (q193) (select only one)

- Yes [1]
- No [0]

If yes, what percentage of your LHD’s workforce will be eligible for retirement within five years? 

______________________% (q194)

If no, please estimate the percentage of your LHD’s workforce that will be eligible for retirement within five years. (If you cannot estimate, leave this item blank.)

______________________% (q195)

How many LHD employees retired in the last year?

______________________ (q196)

Has your LHD tabulated data on the age of LHD employees? (q197) (select only one)

- Yes [1]
- No [0]

In the past year, has your LHD experienced any hiring freezes? (q198) (select only one)

- Yes [1]
- No [0]

Currently, how many funded full-time equivalent positions for RNs in your LHD are vacant? List as FTEs.

______________________ (q199)
2008 Profile of LHDs

Does your LHD have a specific line item in its budget for training of agency staff? (q200) (select only one)

- Yes [1]
- No [2]

Does your LHD have a designated staff person responsible for coordination of training of LHD staff? (q201) (select only one)

- Yes [1]
- No [0]

Who is responsible for recruiting staff for your LHD? (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Human resources professional at your LHD (q202a)
- Someone else at your LHD (q202b)
- City or county government human resources department (q202c)
- State health agency (q202d)
- Other (specify) (q202e) ________________________ (q202text)

Immediately prior to assuming the top executive position, what position did the LHD’s current top executive hold? (q203) (select only one)

- Top executive at another LHD [1]
- Another position at current LHD [2]
- Position other than top executive at another LHD [3]
- Position in a state health agency [4]
- Position at a government agency other than public health [5]
- Some other position [6]
- Do not know [7]
Core Competencies

A number of sets of competencies related to public health practice have been developed. Indicate:

1. **ALL** of the sets of competencies with which you are familiar and,
2. If and how your LHD has used each set.

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th>Are you familiar with these competencies?</th>
<th>Has your LHD used these competencies? (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes [1] No [0]</td>
<td></td>
</tr>
<tr>
<td>Core competencies for public health workers (Council on Linkages) <a href="http://www.phf.org/Link.htm">http://www.phf.org/Link.htm</a></td>
<td>q204a q204b q204c q204d q204e q204f</td>
</tr>
<tr>
<td>Emergency preparedness competencies for all public health workers (Columbia University) <a href="http://www.cumc.columbia.edu/dept/nursing/chphsr/pdf/btcomps.pdf">http://www.cumc.columbia.edu/dept/nursing/chphsr/pdf/btcomps.pdf</a></td>
<td>q205a q205b q205c q205d q205e q205f</td>
</tr>
<tr>
<td>Public health informatics competencies (Northwest Center for Public Health Practice) <a href="http://www.nwphp.org/resources/phicompstomps.v1">http://www.nwphp.org/resources/phicompstomps.v1</a></td>
<td>q206a q206b q206c q206d q206e q206f</td>
</tr>
</tbody>
</table>
LHD Interaction with Academic Institutions

Some LHDs may partner or interact with accredited schools of public health or other academic institutions (such as universities, colleges, or community colleges) in many different ways. Check each activity in which your LHD has been engaged in the past year with either a school of public health or other type of academic institution. (select all that apply)

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Accredited Schools or Programs of Public Health</th>
<th>Other Four Year Academic Institutions</th>
<th>Two-Year Colleges</th>
</tr>
</thead>
<tbody>
<tr>
<td>LHD staff have taken public health-related classes or workshops offered by institution (include online classes)</td>
<td>q207a</td>
<td>q207b</td>
<td>q207c</td>
</tr>
<tr>
<td>LHD staff serve as faculty (regular, adjunct, or guest)</td>
<td>q208a</td>
<td>q208b</td>
<td>q208c</td>
</tr>
<tr>
<td>LHD accepts students from institution as trainees, interns, or volunteers</td>
<td>q209a</td>
<td>q209b</td>
<td>q209c</td>
</tr>
<tr>
<td>LHD offers student practicum’s through the institution</td>
<td>q210a</td>
<td>q210b</td>
<td>q210c</td>
</tr>
<tr>
<td>LHD actively recruits graduates from programs with which you have a training relationship</td>
<td>q211a</td>
<td>q211b</td>
<td>q211c</td>
</tr>
<tr>
<td>Faculty/staff from institution have conducted program evaluation with LHD</td>
<td>q212a</td>
<td>q212b</td>
<td>q212c</td>
</tr>
<tr>
<td>Faculty/staff from institution have served in a consulting role for LHD other than in program evaluation</td>
<td>q213a</td>
<td>q213b</td>
<td>q213c</td>
</tr>
<tr>
<td>LHD has participated in a research project with the institution</td>
<td>q214a</td>
<td>q214b</td>
<td>q214c</td>
</tr>
<tr>
<td>Academic institution staff serve on LHD advisory group</td>
<td>q215a</td>
<td>q215b</td>
<td>q215c</td>
</tr>
<tr>
<td>LHD staff serve on an academic institution advisory board</td>
<td>q216a</td>
<td>q216b</td>
<td>q216c</td>
</tr>
</tbody>
</table>
Internal Agency Strategic Planning

Did your LHD engage in comprehensive, agency-wide internal strategic planning in the past three years? (q217) (select only one)

- Yes [1]
- No [0]

Describe your LHD's comprehensive, agency-wide internal strategic planning efforts in the past three years. (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- LHD did not conduct any comprehensive, agency-wide internal strategic planning efforts in the past three years (q218a)
- LHD conducted an organizational capacity self-assessment (q218b)
- LHD developed an organizational strategic plan (q218c)
- LHD developed a mission and/or guiding principles (q218d)
- LHD set specific measurable goals related to agency performance (q218e)
- LHD set specific measurable goals related to community health status (q218f)
- LHD made changes in resource allocation to support priorities identified in strategic plan (q218g)
- LHD acquired new resources to support priorities identified in strategic plan (q218h)
- Other (specify) (q218i) __________________________ (q218text)
Regionalization

Currently, does your LHD share resources (such as funding, staff, or equipment) with one or more other LHDs on a continuous, recurring (non-emergency) basis? (q219) (select only one)

- [ ] Yes [1]
- [x] No [0] (If no, skip to the next page and continue with the Information Technology section.)

For which services or functions does your LHD share resources with one or more other LHDs? (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- [ ] Emergency preparedness (q220a)
- [ ] Epidemiology or surveillance (q220b)
- [ ] Inspections (q220c)
- [ ] Clinical services (q220d)
- [ ] Administrative services (q220e)
- [ ] Other (specify) (q220f) __________________________ (q220text)

Which of the following best describes the nature of the agreements to share services or functions with other LHDs? (q221) (select only one)

- [x] Formal written agreements [1]
- [ ] Informal agreements [2]
- [ ] Some formal and some informal [3]
Information Technology

Who controls the following aspects of information management for your local health department? (If control is shared, check all that apply.)

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th>Aspect</th>
<th>Your LHD</th>
<th>City/County IT Department</th>
<th>State Health Agency</th>
<th>Other Organization (Specify)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardware allocation and acquisition</td>
<td>q222a</td>
<td>q222b</td>
<td>q222c</td>
<td>q222d</td>
</tr>
<tr>
<td>Software selection</td>
<td>q223a</td>
<td>q223b</td>
<td>q223c</td>
<td>q223d</td>
</tr>
<tr>
<td>Data management</td>
<td>q224a</td>
<td>q224b</td>
<td>q224c</td>
<td>q224d</td>
</tr>
<tr>
<td>IT system security</td>
<td>q225a</td>
<td>q225b</td>
<td>q225c</td>
<td>q225d</td>
</tr>
</tbody>
</table>

Data standards are the common language that allows information to be shared electronically across information systems.

IT related disaster recovery is the process, policies and procedures critical to the resumption of business, including regaining access to data (records, hardware, software, etc.)

Indicate your LHD’s level of awareness or activity for each of the following information technology areas. (For each row, select only one.)

<table>
<thead>
<tr>
<th>Area</th>
<th>Not aware</th>
<th>Aware</th>
<th>Investigating or have investigated</th>
<th>Planning to implement</th>
<th>Have implemented</th>
</tr>
</thead>
<tbody>
<tr>
<td>Electronic health records (q226)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>(Regional) Health Information Exchanges (HIEs or RHIOs) (q227)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Use of IT in the field (e.g., handhelds, laptops, tablet notebooks) (q228)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Wireless access to LHD network (q229)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>IT disaster recovery planning (q230)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>National Health IT data standards initiatives (q231)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
For each activity, indicate whether the program activity or service is conducted in your LHD and, if yes, how the records are kept.

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th>Conducted at LHD?</th>
<th>If yes, how are records kept?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes [1]</td>
<td>Paper</td>
</tr>
<tr>
<td>No [0]</td>
<td></td>
</tr>
<tr>
<td>Childhood immunization</td>
<td>q232a</td>
</tr>
<tr>
<td>Reportable diseases</td>
<td>q233a</td>
</tr>
<tr>
<td>Vital records</td>
<td>q234a</td>
</tr>
<tr>
<td>Laboratory reporting</td>
<td>q235a</td>
</tr>
<tr>
<td>Outbreak management</td>
<td>q236a</td>
</tr>
<tr>
<td>Restaurant inspections</td>
<td>q237a</td>
</tr>
<tr>
<td>Water wells (licensing and/or testing)</td>
<td>q238a</td>
</tr>
</tbody>
</table>
2008 Profile of LHDs

Community Health Assessment and Health Improvement Planning

Which of the following types of data were included in your most recent community health assessment? (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Jurisdiction has not done a community health assessment (q239a)
- Demographic characteristics (e.g., age, gender, race, ethnicity) (q239b)
- Socioeconomic characteristics (e.g., education, employment, income) (q239c)
- Health resource availability (e.g., health insurance, access to healthcare services) (q239d)
- Quality of life (q239e)
- Behavioral risk factors (q239f)
- Environmental health indicators (q239g)
- Social and mental health (q239h)
- Maternal and child health (q239i)
- Death, illness and injury (q239j)
- Infectious disease (q239k)
- Other (q239l)

Have you taken any of the following actions in the past three years to implement your community health improvement plan? (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- My community has not developed a community health improvement plan (q240a)
- Established priorities for your LHD (q240b)
- Set goals for LHD performance (q240c)
- Set goals for community health outcomes (q240d)
- Reallocated resources within existing budget to support priorities (q240e)
- Sought additional resources to support priorities (q240f)
- Increased LHD funding for one or more priorities (q240g)
- Participated in a coalition(s) to address one or more priorities (q240h)
- Developed or strengthened relationships with community partners (q240i)
- Advocated for other community partners to establish or increase activities to support priorities (q240j)
- Developed performance measures to monitor implementation of the plan (q204k)
- Measured progress to Healthy People 2010 goals (q240l)
- Other (q240m)
- No action taken (q240n)
For each source of data on health status, please indicate any types of data that are available for your jurisdiction, and whether available data are analyzed by the characteristics in the top row of the table.

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th>Available for your jurisdiction?</th>
<th>Vital statistics: deaths</th>
<th>Vital statistics: birth outcomes</th>
<th>Hospital discharges</th>
<th>Behavioral risk factors</th>
<th>Health department clinical data</th>
<th>Disease outbreak investigation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes [1]</td>
<td>q241a</td>
<td>q242a</td>
<td>q243a</td>
<td>q244a</td>
<td>q245a</td>
<td>q246a</td>
</tr>
<tr>
<td>NO [0]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If yes, indicate whether the data have been analyzed by the characteristics below.

Check all that apply.

<table>
<thead>
<tr>
<th>Age</th>
<th>Sex</th>
<th>Income and/or Education</th>
<th>Race and/or Ethnicity</th>
<th>Contextual (e.g., neighborhood analysis)</th>
<th>Primary language spoken</th>
</tr>
</thead>
<tbody>
<tr>
<td>q241b</td>
<td>q241c</td>
<td>q241d</td>
<td>q241e</td>
<td>q241f</td>
<td>q241g</td>
</tr>
<tr>
<td>q241b</td>
<td>q242c</td>
<td>q242d</td>
<td>q242e</td>
<td>q242f</td>
<td>q242g</td>
</tr>
<tr>
<td>q243b</td>
<td>q243c</td>
<td>q243d</td>
<td>q243e</td>
<td>q243f</td>
<td>q243g</td>
</tr>
<tr>
<td>q244b</td>
<td>q244c</td>
<td>q244d</td>
<td>q244e</td>
<td>q244f</td>
<td>q244g</td>
</tr>
<tr>
<td>q245b</td>
<td>q245c</td>
<td>q245d</td>
<td>q245e</td>
<td>q245f</td>
<td>q245g</td>
</tr>
<tr>
<td>q246b</td>
<td>q246c</td>
<td>q246d</td>
<td>q246e</td>
<td>q246f</td>
<td>q246g</td>
</tr>
</tbody>
</table>
Essential Services and Activities

The chart below shows the ten essential public health services and six public health program areas in which these services might be applied. For each program area, go down the column and check each service which your LHD has employed in support of that program area during the past year.

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th></th>
<th>Tobacco Prevention &amp; Control</th>
<th>Emergency Preparedness &amp; Response</th>
<th>Influenza</th>
<th>Obesity</th>
<th>Indoor Air Quality</th>
<th>Land Use Planning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community health assessment</td>
<td>q247a</td>
<td>q248a</td>
<td>q249a</td>
<td>q250a</td>
<td>q251a</td>
<td>q252a</td>
</tr>
<tr>
<td>Diagnose and investigate health problems in the community</td>
<td>q247b</td>
<td>q248b</td>
<td>q249b</td>
<td>q250b</td>
<td>q251b</td>
<td>q252b</td>
</tr>
<tr>
<td>Health education/risk reduction</td>
<td>q247c</td>
<td>q248c</td>
<td>q249c</td>
<td>q250c</td>
<td>q251c</td>
<td>q252c</td>
</tr>
<tr>
<td>Community engagement</td>
<td>q247d</td>
<td>q248d</td>
<td>q249d</td>
<td>q250d</td>
<td>q251d</td>
<td>q252d</td>
</tr>
<tr>
<td>Planning &amp; policy development</td>
<td>q247e</td>
<td>q248e</td>
<td>q249e</td>
<td>q250e</td>
<td>q251e</td>
<td>q252e</td>
</tr>
<tr>
<td>Enforcing laws and regulations</td>
<td>q247f</td>
<td>q248f</td>
<td>q249f</td>
<td>q250f</td>
<td>q251f</td>
<td>q252f</td>
</tr>
<tr>
<td>Outreach, referral or services</td>
<td>q247g</td>
<td>q248g</td>
<td>q249g</td>
<td>q250g</td>
<td>q251g</td>
<td>q252g</td>
</tr>
<tr>
<td>Workforce training &amp; development</td>
<td>q247h</td>
<td>q248h</td>
<td>q249h</td>
<td>q250h</td>
<td>q251h</td>
<td>q252h</td>
</tr>
<tr>
<td>Evaluation &amp; quality improvement</td>
<td>q247i</td>
<td>q248i</td>
<td>q294i</td>
<td>q250i</td>
<td>q251i</td>
<td>q252i</td>
</tr>
<tr>
<td>Research</td>
<td>q247j</td>
<td>q248j</td>
<td>q249j</td>
<td>q250j</td>
<td>q251j</td>
<td>q252j</td>
</tr>
<tr>
<td>No LHD activity in this program area</td>
<td>q247k</td>
<td>q248k</td>
<td>q249k</td>
<td>q250k</td>
<td>q251k</td>
<td>q252k</td>
</tr>
</tbody>
</table>
Indicate any areas of LHD activity or involvement in the past year. (select all that apply) (Variable values: unchecked= 0, checked= 1)

- Access to healthy food resources (q253a)
- Discourage the location of alcohol sales within neighborhoods (q253b)
- Access to trails (q253c)
- Access to or protection of parks and recreation (q253d)
- Access to or protection of nature or open space (q53e)
- Protection of productive agricultural land (q253f)
- Safe, convenient walking or biking access to community resources (e.g., park, recreation, natural, open space, grocery, library or health care resources) and employment (q253g)
- Connecting safe walking and biking routes with mass transit options (q253h)
- Neighborhoods that meet life needs without car use (q253i)
- Road designs that support and encourage walking and biking (q253j)
- Safe routes to school (q253k)
- School locations encourage walking and biking (neighborhood schools) (q253l)
- Use of school grounds for other community activities (q253m)
- Balanced availability of local jobs, retail and housing (q253n)
- Green Building / Ecological sustainability (non-toxic, energy efficient, environmentally regenerative development) (q253o)
- Ecological Sanitation (non-emissions/reuse-based, ecologically regenerative water and sanitation management) (q253p)
- Ecological waste management (e.g., composting or zero waste programs) (q253q)
- Urban remediation (q253r)
- Other (q253s)
- None of the above (q253t)

Does your LHD have a designated staff person(s) focused on public health and land use policy? (q254) (select only one)

- Yes [1]
- No [0]
Policy-making and Advocacy

Indicate whether your LHD has participated in any of the policy-related activities listed below during the past two years. If yes, check each level of government (local, state, or federal) at which these activities were directed. Participation may be by your LHD’s top executive or by other staff. (select all that apply)

(Variable values: unchecked= 0, checked= 1)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Local level</th>
<th>State level</th>
<th>Federal level</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prepared issue briefs for policy makers</td>
<td>q255a</td>
<td>q255b</td>
<td>q255c</td>
<td>q255d</td>
</tr>
<tr>
<td>Gave public testimony to policy makers</td>
<td>q256a</td>
<td>q256b</td>
<td>q256c</td>
<td>q256d</td>
</tr>
<tr>
<td>Participated on a board or advisory panel responsible for public health policy</td>
<td>q257a</td>
<td>q257b</td>
<td>q257c</td>
<td>q257d</td>
</tr>
<tr>
<td>Communicated with legislators, regulatory officials, or other policymakers regarding proposed legislation, regulations, or ordinances</td>
<td>q258a</td>
<td>q258b</td>
<td>q258c</td>
<td>q258d</td>
</tr>
<tr>
<td>Provided technical assistance to legislative, regulatory or advocacy group for drafting proposed legislation, regulations, or ordinances</td>
<td>q259a</td>
<td>q259b</td>
<td>q259c</td>
<td>q259d</td>
</tr>
</tbody>
</table>
Indicate areas where your LHD has been actively involved in policy or advocacy activities in the past two years: (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Affordable housing (q260a)
- Criminal justice system (q260b)
- Education (q260c)
- Environment (q260d)
- Funding for access to healthcare (q260e)
- Land use (q260f)
- Labor (e.g., employment, living wage) (q260g)
- Occupational health and safety (q260h)
- Tobacco (q260i)
- Other (specify) (q60j) ____________________________ (q260text)
- None (q260k)

Has a new local public heath ordinance or regulation been adopted in your jurisdiction in the past two years? (q261) (select only one)

- Yes [1]
- No [0]

Indicate each area in which a new local public health ordinance or regulation was adopted in the past two years: (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Tobacco prevention and control (q262a)
- Emergency preparedness and response (q262b)
- Nutrition or physical activity (q262c)
- Indoor air quality (q262d)
- Land use planning (q262e)
- Some other area (specify) (q262f) ____________________________ (q262text)
- None (q262g)
2008 Profile of LHDs

Partnership and Collaboration

We are interested in knowing about your LHD’s collaborations with other organizations. Check each way that your LHD has worked with each organization in the past year. For each organization, check all that apply. If the organization does not exist within your community service area, check N/A. (select all that apply) (Variable values: unchecked= 0, checked= 1)

| Organization                              | q263 | q264 | q265 | q266 | q267 | q268 | q269 | q270 | q271 | q272 | q273 | q274 | q275 | q276 | q277 | q278 | q279 | q280 | q281 | q282 | q283 | q284 | q285 | q286 |
|-------------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| Hospitals                                  | q263 | q264 | q265 | q266 | q267 | q268 | q269 | q270 | q271 | q272 | q273 | q274 | q275 | q276 | q277 | q278 | q279 | q280 | q281 | q282 | q283 | q284 | q285 | q286 |
| Physician Practices /Medical Groups        |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Community Health Centers                   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Other health care providers                |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Health insurers                            |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Emergency responders                       |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Local planning agency                      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Economic and community development agencies|      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Housing agencies                           |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Utility companies/agencies                 |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Environmental and conservation organizations|      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Cooperative extensions                     |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Schools                                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Parks and recreations                      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Transportation                             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Faith communities                          |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Libraries                                  |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Colleges or universities                   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Business                                   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Media                                      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Tribal gov’t agencies                      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Criminal justice system                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Health voluntaries                         |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Community-based Nonprofits                  |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
Working with Community Partners

For the purpose of this question, "partners" includes both governmental and non-governmental organizations as well as individuals in your community.

We are interested in how your LHD is working with community partners. Check each activity that your LHD staff has done in the past year. (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Developed or updated list of healthcare providers and contact information (q287a)
- Developed or updated list of other organizations providing public health-related services and contact information (q287b)
- Provided data to partners on the community’s health (q287c)
- Sought information relevant to the community’s health from partners (q287d)
- Used information provided by community partners in community health assessment (q287e)
- Collaborated with a partner to implement a health education or health promotion effort (q287f)
- Discussed public health issues and policy with partners (q287g)
- Exchanged information on violations of public health-related laws, regulations, or ordinances (q287h)
- Provided training on effective public health practices to partners (q287i)
- Reviewed the effectiveness of public health interventions provided by partners (q287j)
- Served on a committee or other group at request of community partner (q287k)
- None of the above (q287l)
Access to Health Care Services

Check each activity below in which your LHD has participated in the past year to assure access to health care services in your jurisdiction. (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Assessed the availability of personal health care services in your jurisdiction (q288a)
- Identified barriers to personal health care services in your jurisdiction (q288b)
- Engaged the community to discuss unmet personal health care service needs (q288c)
- Collaborated with community partners to fill gaps or reduce barriers (q288d)
- Implemented strategies to increase accessibility of existing services (q288e)
- Routinely made referrals to healthcare providers (q288f)
- Implemented strategies to target healthcare needs have underserved populations (q288g)
- Provided clinical services (q288h)
- None of the above (q288i)
Completing the Profile Questionnaire

Approximately how many individuals in your LHD contributed responses to your LHD’s Profile questionnaire?

Number of contributors: ___________ (q289)

Check all of the types of individuals who contributed responses to your LHD’s Profile questionnaire. (select all that apply)

(Variable values: unchecked= 0, checked= 1)

- Top executive (q290a)
- Other management staff (q290b)
- Human resources staff (q290c)
- Accounting staff (q290d)
- Staff from LHD programmatic areas (q290e)
- Administrative/clerical staff (q290f)

How did your staff members complete the Profile questionnaire? (q291)
(select only one)

- Staff members used the Web link to access the questionnaire and completed their assigned questions on-line. [1]
- Staff members completed their assigned sections on a hard copy questionnaire or in Word and someone else entered this information on-line using the Web link. [2]
- Some staff members used each of these methods. [3]
- Did not use Web-based questionnaire. [4]
- Not sure. [5]
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q8a lboh adopt ph regulations

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108
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| Missing | System | 71 | 3.0 |
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q101c hotels state govt

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Perform by LHD
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The missing system is 63 with a percentage of 2.7.
The total system is 2332 with a percentage of 100.0.

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The missing system is 59 with a percentage of 2.5.
The total system is 2332 with a percentage of 100.0.
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q145b respond to emergency waterborne outbreaks

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q147 comm health assess in last three years

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q155 nphpsp

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### q161 Has LHD undertaken any formal quality improvement or performance improvement efforts (past two years)

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**q162a performance improvement efforts-human resources - performance standards**

| ______ | ______ | ______ | ______ | ______ |
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|          | 1       | 104     | 4.5   | 59.4   | 100.0  |
|          | Total   | 175     | 7.5   | 100.0  |         |

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| Total   | 2332   | 100.0  |       |         |         |

**q162b performance improvement efforts-human resources - performance measures**

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|          | 1       | 102     | 4.4   | 58.3   | 100.0  |
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q164a performance improvement efforts-customer focus and satisfaction - performance standards

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q165b performance improvement efforts - financial systems - performance measures

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q166a performance improvement efforts-management practices - performance standards

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q169a Extent LHD used tool/technique in quality improvement efforts (past year) - Process Map

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**q169b Extent LHD used tool/technique in quality improvement efforts (past year)- Fishbone/equivalent diagram to identify root causes**

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**q169c Extent LHD used tool/technique in quality improvement efforts (past year)- Control Chart**

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### q170a LHD used framework/approach to quality or performance improvement (past two years)- Baldrige Performance Excellence Criteria (or state version)

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q170b LHD used framework/approach to quality or performance improvement (past two years)-Balanced Scorecard

q170c LHD used framework/approach to quality or performance improvement (past two years)-ISO 9000
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q170e LHD used framework/approach to quality or performance improvement (past two years) - Six Sigma

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q170f LHD used framework/approach to quality or performance improvement (past two years) - TQM (Total Quality Management)

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q170g LHD used framework/approach to quality or performance improvement (past two years) - Turning Point Performance Management Framework

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q170i LHD used framework/approach to quality or performance improvement (past two years)- Other

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q171 LHD has designated a quality improvement officer

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q172 LHD has applied for or received any awards for its quality improvement efforts

q173a How many managers in LHD have received formal training in quality improvement methods
### q173b How many managers in LHD have provided quality improvement training to their staff members

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### q174a LHD's awareness of the Operational Definition - Not aware of the Operational Definition

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q174b LHD's awareness of the Operational Definition-Aware of the Operational Definition but have not reviewed it

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q174c LHD's awareness of the Operational Definition-One or more staff members have reviewed the Operational Definition

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q174d LHD's awareness of the Operational Definition-Operational Definition has been used to educate staff

q174e LHD's awareness of the Operational Definition-Operational Definition has been used in a strategic planning process
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q174f LHD's awareness of the Operational Definition- Operational Definition has been used to conduct an agency self-assessment

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q174g LHD's awareness of the Operational Definition- Operational Definition has been discussed with Board of Health or other governing body

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### q175 LHDs familiarity with a voluntary national accreditation program -vnap-for state

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q176a Organizations LHD has received information about a voluntary national accreditation program-No information received

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q176f Organizations LHD has received information about a voluntary national accreditation program—Public Health Accreditation Board (PHAB)

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q176g Organizations LHD has received information about a voluntary national accreditation program—State association of local health departments

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q176h Organizations LHD has received information about a voluntary national accreditation program-State health agency

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q176i Organizations LHD has received information about a voluntary national accreditation program-Other organization

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### q177b Groups/Organizations with which LHD has discussed a voluntary national accreditation program - Staff in other LHDs

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q177c Groups/Organizations with which LHD has discussed a voluntary national accreditation program—Local Board of Health

q177d Groups/Organizations with which LHD has discussed a voluntary national accreditation program—Elected Officials (other than Local Board of Health)
q177e Groups/Organizations with which LHD has discussed a voluntary national accreditation program - State Health Agency staff

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q177f Groups/Organizations with which LHD has discussed a voluntary national accreditation program - Other organization/group

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q177g Groups/Organizations with which LHD has discussed a voluntary national accreditation program - None

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q178 LHD would seek accreditation under a voluntary national accreditation program

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q179 LHD would seek accreditation under a voluntary national accreditation program within first two years of the program (2011-2012)

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q180 Frequency of LHD/LPHA engaging in activities (past year)-Ran print advertisements

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### q182 Frequency of LHD/LPHA engaging in activities (past year) - Ran television advertisements

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### q184 Frequency of LHD/LPHA engaging in activities (past year)-Responded to unsolicited press inquiries

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q187a Ways LHD/LPHA used logo—As the primary organizational logo

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q187b Ways LHD/LPHA used logo—As a collateral or secondary logo (using the public health logo in addition to LHD/LPHA’s existing logo)

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q187c Ways LHD/LPHA used logo-In email signatures

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q187d Ways LHD/LPHA used logo-On communication materials (press releases, brochures, posters, presentations, cable broadcasts, other)

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q187e Ways LHD/LPHA used logo-On agency letterhead or business cards

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q187f Ways LHD/LPHA used logo-On the agency website

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q187g Ways LHD/LPHA used logo-On staff apparel (shirts, hats, buttons, patches, jackets, vests)

|      |          |          |               |                    |                    |

383
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q187h Ways LHD/LPHA used logo-On departmental vehicles

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q187i Ways LHD/LPHA used logo-Other

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q188a Reasons LHD/LPHA has not used logo-LHD/LPHA did not know the logo existed and was available for use

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q188b Reasons LHD/LPHA has not used logo-LHD/LPHA is uncertain how to use this logo for public health promotion
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q188c Reasons LHD/LPHA has not used logo-LHD/LPHA already has a logo and does not wish to add the national logo

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q188e Reasons LHD/LPHA has not used logo-LHD/LPHA doesn't feel strongly about a universal identity for local public health

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q188f Reasons LHD/LPHA has not used logo-LHD/LPHA doesn't understand the purpose of the logo or what it represents

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q188g Reasons LHD/LPHA has not used logo-LHD/LPHA does not like the appearance of the logo

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### q188i Reasons LHD/LPHA has not used logo-Other

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### q189b Would encourage LHD/LPHA to begin using logo-More documentation and examples of LHD/LPHAs that are currently using the logo

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q189c Would encourage LHD/LPHA to begin using logo-More communication from NACCHO explaining the purpose of the logo

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q189d Would encourage LHD/LPHA to begin using logo-A national campaign to promote the visibility of public health

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q189e Would encourage LHD/LPHA to begin using logo-None of the above
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### q190b LHD/LPHA Website or Webpage - Provides telephone and/or e-mail contact information for the various services LHD/LPHA provides

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q190c LHD/LPHA Website or Webpage- Provides information about the various services LHD/LPHA provides

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q190d LHD/LPHA Website or Webpage- Includes links or contact information for other public health partners in the community

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Total 2332 100.0

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q190g LHD/LPHA Website or Webpage - Provides community health information (data, reports, and plans)

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q190h LHD/LPHA Website or Webpage - Reports results of local restaurant inspections

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q190i LHD/LPHA Website or Webpage - Offers ability to conduct surveys online
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q190j LHD/LPHA Website or Webpage- Regulated entities can download commonly used forms from our LHD/LPHA web site

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q190k LHD/LPHA Website or Webpage- Regulated entities can submit forms or other information electronically via LHD/LPHA website
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q191 How often local Web site or Webpage updated

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q192a Way LHD staff members have used reports or presentations from 2005 Profile Study- No staff members have seen any reports or presentations from the 2005 Profile Study
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One or more LHD staff have reviewed reports or presentations from the 2005 Profile results

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### q192c Way LHD staff members have used reports or presentations from 2005 Profile Study
LHD staff members have discussed reports or presentations from the 2005 Profile Study

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q192d Way LHD staff members have used reports or presentations from 2005 Profile Study - LHD staff members have used reports or presentations from the 2005 Profile Study to compare our LHD to others

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q192e Way LHD staff members have used reports or presentations from 2005 Profile Study - LHD staff members have used information from the 2005 Profile Study in a report or presentation

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398
q192f Way LHD staff members have used reports or presentations from 2005 Profile Study- Other

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q193 Has LHD determined percentage of workforce that will be eligible for retirement in next five years

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q197 has lhd tabulated data on the age of lhd employees?

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q198 in the past year, has lhd experienced any hiring freezes?

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q200 does lhd have a specific line item in its budget for training of agency staff?
q201 does lhd have a designated staff person responsible for coordination of training

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q202a responsible for recruiting staff for lhd - human resources professional at lhd

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401
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q202b responsible for recruiting staff for lhd - someone else at lhd

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q202c responsible for recruiting staff for lhd - city or county government human resou
| Total | 2332 | 100.0 |

**q202d responsible for recruiting staff for lhd - state health agency**

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| Missing System | 1879 | 80.6 |
| Total          | 2332 | 100.0 |

**q202e responsible for recruiting staff for lhd - other**

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| Missing System | 1879 | 80.6 |
| Total          | 2332 | 100.0 |
q203 Immediately prior to assuming top executive position—what position did top executive of LHD hold

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q204a Core competencies for public health (Council on Linkages)—LHD familiar with competency

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### q204b Core competencies for public health (Council on Linkages) - Use of competency - Have not used

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### q204c Core competencies for public health (Council on Linkages) - Use of competency - Assessing staff competencies

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q204d Core competencies for public health (Council on Linkages)- Use of competency-Developing training plans

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q204e Core competencies for public health (Council on Linkages)- Use of competency-Preparing job descriptions

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q204f Core competencies for public health (Council on Linkages)- Use of competency-Other use

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q205a Emergency preparedness competencies for all public health workers (Columbia University)- LHD familiar with competency

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q205e Emergency preparedness competencies for all public health workers (Columbia University) - Use of competency - Preparing job descriptions

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q205f Emergency preparedness competencies for all public health workers (Columbia University) - Use of competency - Other use

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### q207a LHD staff have taken public health-related classes or workshops offered by institution (including online classes)- Accredited Schools or Programs of Public Health (past year)

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q207b LHD staff have taken public health-related classes or workshops offered by institution (including online classes) - Other Four Year Academic Institutions (past year)

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q207c LHD staff have taken public health-related classes or workshops offered by institution (including online classes) - Two-Year Colleges (past year)
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**q208a** LHD staff serves as faculty (regular, adjunct, or guest)- Accredited Schools or Programs of Public Health (past year)

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### q209a LHD accepts students from institution as trainees, interns, or volunteers- Accredited Schools or Programs of Public Health (past year)

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q209b LHD accepts students from institution as trainees, interns, or volunteers- Other Four Year Academic Institutions (past year)

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q209c LHD accepts students from institution as trainees, interns, or volunteers- Two-Year Colleges (past year)

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q210a LHD offers student practicum's through the institution- Accredited Schools or Programs of Public Health (past year)
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**q211c LHD actively recruits graduates from programs with which LHD has a training relationship- Two-Year Colleges (past year)**

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**q212a Faculty/staff from institution have conducted program evaluation with LHD- Accredited Schools or Programs of Public Health (past year)**

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### q212b Faculty/staff from institution have conducted program evaluation with LHD- Other Four Year Academic Institutions (past year)

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### q213c Faculty/staff from institution have served in a consulting role for LHD other than in program evaluation—Two-Year Colleges (past year)
## q214a

LHD has participated in a research project with the institution - Accredited Schools or Programs of Public Health (past year)

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LHD has participated in a research project with the institution - Other Four Year Academic Institutions (past year)

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q214c LHD has participated in a research project with the institution- Two-Year Colleges (past year)

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q215a Academic institution staff serve on LHD advisory group- Accredited Schools or Programs of Public Health (past year)

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q216a LHD staff serve on an academic institution advisory board - Accredited Schools or Programs of Public Health (past year)

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q216c LHD staff serve on an academic institution advisory board - two-year colleges
### q217 Did LHD engage in comprehensive, agency-wide internal strategic planning (past three years)

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### q218a LHDs comprehensive, agency-wide internal strategic planning efforts (past three years) - LHD did not conduct any comprehensive, agency-wide internal strategic planning efforts (past three years)

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### q218b LHDs comprehensive, agency-wide internal strategic planning efforts (past three years)- LHD conducted an organizational capacity self-assessment

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### q218c LHDs comprehensive, agency-wide internal strategic planning efforts (past three years)- LHD developed an organizational strategic plan

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427
### q218d LHDs comprehensive, agency-wide internal strategic planning efforts (past three years) - LHD developed a mission and/or guiding principles

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### q218e LHDs comprehensive, agency-wide internal strategic planning efforts (past three years) - LHD set specific measurable goals related to agency performance

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q218f LHDs comprehensive, agency-wide internal strategic planning efforts (past three years)- LHD set specific measurable goals related to community health status

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q218g LHDs comprehensive, agency-wide internal strategic planning efforts (past three years)- LHD made changes in resource allocation to support priorities identified in strategic plan

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q218h LHDs comprehensive, agency-wide internal strategic planning efforts (past three years)- LHD acquired new resources to support priorities identified in strategic plan

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q218i LHDs comprehensive, agency-wide internal strategic planning efforts (past three years)- Other

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q219 Does LHD share resources (funding, staff, equipment) with one or more other LHDs on a continuous, recurring (non-emergency) basis

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q220a Services/function LHD share resources with one or more other LHDs - Emergency preparedness

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q220b Services/function LHD share resources with one or more other LHDs - Epidemiology or surveillance

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**q220d Services/function LHD share resources with one or more other LHDs - Clinical services**

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**q220e** Services/function LHD share resources with one or more other LHDs - Administrative services

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**q220f** Services/function LHD share resources with one or more other LHDs - Other

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### q221 Description of the nature of the agreements to share services/functions with other LHDs

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### q222a Controls Hardware allocation and acquisition for LHD/LPHA- Own LHD/LPHA

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### q222b Controls Hardware allocation and acquisition for LHD/LPHA - City/County IT Department

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### q222c Controls Hardware allocation and acquisition for LHD/LPHA - State Health Agency

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### q222d Controls Hardware allocation and acquisition for LHD/LPHA - Other Organization

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**q223a controls it aspect for lhd-software selection - your lhd**

**q223b controls it aspect for lhd-software selection - city/county it department**
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Missing System 1859 79.7

Total 2332 100.0

q223d controls it aspect for lhd-software selection - other organization

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q224a controls it aspect for lhd-data management - your lhd

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q224b controls it aspect for lhd-data management - city/county it department

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q224c controls it aspect for lhd-data management - state health agency

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q225d controls it aspect for lhd-it system security - other organization

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q228 level of awareness-use of it in the field (e.g., handhelds, laptops, tablet notebooks)

q229 level of awareness-wireless access to lhd network
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q230 level of awareness-it disaster recovery planning

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q231 level of awareness-national health it data standards initiatives

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q196 how many employees retired in the last year?

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| 5.00 | 15 | .6 | 3.4| 94.6 |
| 6.00 | 6  | .3 | 1.4| 95.9 |
| 7.00 | 3  | .1 | .7 | 96.6 |
| 7.17 | 1  | .0 | .2 | 96.8 |
| 7.90 | 1  | .0 | .2 | 97.1 |
| 8.00 | 2  | .1 | .5 | 97.5 |
| 10.00| 4  | .2 | .9 | 98.4 |
| 12.00| 2  | .1 | .5 | 98.9 |
| 14.00| 1  | .0 | .2 | 99.1 |
| 28.00| 1  | .0 | .2 | 99.3 |
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q232b childhood immunization - paper

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q232d childhood immunization - local relational database (e.g. ms access)

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q232e childhood immunization - shared database (e.g., web based or special server)

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q233c reportable diseases - spreadsheet (e.g., ms excel)

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q233d reportable diseases - local relational database (e.g. ms access)

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q233e reportable diseases - shared database (e.g., web based or special server)

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q234a vital records - conducted at lhd?

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q234e vital records - shared database (e.g., web based or special server)

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q235a laboratory reporting - conducted at lhd?

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q236b outbreak management - paper

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q236c outbreak management - spreadsheet (e.g., ms excel)

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q238b water wells (licensing and/or testing) - paper

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### q238e water wells (licensing and/or testing) - shared database (e.g., web based or special server)

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q239a Types of data included in most recent community health assessment- Jurisdiction has not done a community health assessment

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q239b Types of data included in most recent community health assessment- Demographic characteristics (age, race, gender, ethnicity)
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q239c Types of data included in most recent community health assessment- Socioeconomic characteristics (education, employment, income)

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q239d Types of data included in most recent community health assessment- Health resource availability (health insurance, access to healthcare services)

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Types of data included in most recent community health assessment - Quality of life

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Types of data included in most recent community health assessment - Behavioral risk factors

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### q239k Types of data included in most recent community health assessment- Infectious disease

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**q2391 Types of data included in most recent community health assessment- Other**

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**q240a Actions to implement community health improvement plan (past three years)- Community has not developed a community health improvement plan**

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### q240b Actions to implement community health improvement plan (past three years)- Established priorities for LHD/LPHA

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### q240c Actions to implement community health improvement plan (past three years)- Set goals for LHD/LPHA performance

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### q240e Actions to implement community health improvement plan (past three years)- Reallocated resources to support priorities

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### q240f Actions to implement community health improvement plan (past three years)- Sought additional resources to support priorities

470
### q240g Actions to implement community health improvement plan (past three years)- Increased LHD/LPHA funding for one or more priorities

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### q240h Actions to implement community health improvement plan (past three years)- Participated in a coalition(s) to address one or more priorities

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q240i Actions to implement community health improvement plan (past three years)- Developed or strengthened relationships with community partners

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q240j Actions to implement community health improvement plan (past three years)- Advocated for other community partners to establish or increase activities to support priorities

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472
### q2400 Actions to Implement Community Health Improvement Plan (past three years)

- Developed performance measures to monitor implementation of the plan

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### q2401 Actions to Implement Community Health Improvement Plan (past three years)

- Measured progress to Health People 2010 goals

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q240m Actions to implement community health improvement plan (past three years) - Other

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q240n Actions to implement community health improvement plan (past three years) - No action taken

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q241b vital statistics: deaths - age analyzed

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q241c vital statistics: deaths - sex analyzed

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### q241d vital statistics: deaths - income and/or education analyzed

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### q241e vital statistics: deaths - race and/or ethnicity analyzed

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### q241f vital statistics: deaths - contextual (e.g., neighborhood analysis) analyzed

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**q242g vital statistics: birth outcomes - primary language spoken analyzed**

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q244f behavioral risk factors - contextual (e.g. neighborhood analysis) analyzed

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q244g behavioral risk factors - primary language spoken analyzed

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q245d health department clinical data - income and/or education analyzed

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q245e health department clinical data - race and/or ethnicity analyzed

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Total: 2332 (100.0)

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q245f health department clinical data - contextual (e.g. neighborhood analysis) analyzed

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Total: 2332 (100.0)

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q245g health department clinical data - primary language spoken analyzed

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### q246e Disease Outbreak Investigation - Race and/or Ethnicity Analyzed

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### q246f Disease Outbreak Investigation - Contextual (e.g. Neighborhood Analysis) Analyzed

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### q247b Tobacco prevention & control - diagnose and investigate health problems in the community

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**q247c tobacco prevention & control - health education/risk reduction**

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| Total  | 2332 | 100.0 |             |                    |

**q247d tobacco prevention & control - community engagement**

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**q247h tobacco prevention & control - workforce training & development**

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q252a land use planning - community health assessment

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q252b land use planning - diagnose and investigate health problems in the community

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q252k land use planning - no lhd activity in this program area

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Missing System  | 2036 | 87.3 |
### q253a Land use planning activity/involvement (past year)- Access to health food resources

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### q253b Land use planning activity/involvement (past year)- Discourage the location of alcohol sales within neighborhoods

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### q253c Land use planning activity/involvement (past year) - Access to trails

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### q253d Land use planning activity/involvement (past year) - Access to or protection of parks and recreation

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### q253e Land use planning activity/involvement (past year) - Access to or protection of nature or open space

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q253f Land use planning activity/involvement (past year)- Protection of productive agricultural land

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q253g Land use planning activity/involvement (past year)- Safe, convenient walking or biking access to community resources (park, recreation, natural, open spaces, grocery, library, health care resources) and employment

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### q253i Land use planning activity/involvement (past year)- Neighborhoods that meet life needs without car use

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q253j Land use planning activity/involvement (past year)- Road designs that support and encourage walking and biking

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| Missing System | 1899 | 81.4   |
| Total          | 2332 | 100.0  |

q253k Land use planning activity/involvement (past year)- Safe routes to school

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| Missing System | 1899 | 81.4   |
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Land use planning activity/involvement (past year)- School locations encourage walking and biking (neighborhood schools)

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Land use planning activity/involvement (past year)- Use of school grounds for other community activities

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Land use planning activity/involvement (past year)- Balanced availability of local jobs, retail and housing

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### q253o Land use planning activity/involvement (past year)- Green Building/ Ecological sustainability (non-toxic, energy efficient, environmentally regenerative development)

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q253q Land use planning activity/involvement (past year)- Ecological waste management (composting or zero waste programs)

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q253r Land use planning activity/involvement (past year)- Urban remediation

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q254 Does LHD have a designated staff person focused on public health and land use policy

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q255a prepared issue briefs for policy makers - yes, at the local level

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q255b prepared issue briefs for policy makers - yes, at the state level

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q255c prepared issue briefs for policy makers - yes, at the federal level

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q256a gave public testimony to policy makers - yes, at the local level

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q256c gave public testimony to policy makers - yes, at the federal level

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q256d gave public testimony to policy makers - no

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q257a LHD/LPHA activity (past two years)- Participated on a board or advisory panel responsible for public health policy-Yes, at the Local level
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q257b LHD/LPHA activity (past two years)- Participated on a board or advisory panel responsible for public health policy-Yes, at the State level

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q257c LHD/LPHA activity (past two years)- Participated on a board or advisory panel responsible for public health policy-Yes, at the Federal level

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q257d LHD/LPHA activity (past two years) - Participated on a board or advisory panel responsible for public health policy - No

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q258a LHD/LPHA activity (past two years) - Communicated with legislators, regulatory officials, or other policymakers regarding proposed legislation, regulations, or ordinances - Yes, at the Local level

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q258c LHD/LPHA activity (past two years)- Communicated with legislators, regulatory officials, or other policymakers regarding proposed legislation, regulations, or ordinances-Yes, at the Federal level
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|---------------|------|------|-------------------------|
| Total         | 2332 | 100.0| |  |  |

q258d LHD/LPHA activity (past two years)- Communicated with legislators, regulatory officials, or other policymakers regarding proposed legislation, regulations, or ordinances-No

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q259a LHD/LPHA activity (past two years)- Provided technical assistance to legislative, regulatory or advocacy group for drafting proposed legislation, regulations, or ordinances-Yes, at the Local level

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| Missing System | 1905 | 81.7 | |  |  |  |

538
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Policy activities_affordable housing

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Policy activities_criminal justice system

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q260e policy activities_funding for access to healthcare

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q260g policy activities_labor

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q260h policy activities_occupational health and safety

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q260i policy activities_tobacco

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**q261** Has a new local public health ordinance or regulation been adopted in jurisdiction (past two years)

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**q262a** Area in which a new local public health ordinance/regulation was adopted (past two years)- Tobacco prevention and control

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### q262b Area in which a new local public health ordinance/regulation was adopted (past two years)-Emergency preparedness and response

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### q262c Area in which a new local public health ordinance/regulation was adopted (past two years)- Nutrition or physical activity

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**q263a Way LHD/LPHA worked with hospitals (past year)- Shared personnel/resources**

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q264a  Way LHD/LPHA worked with physician practices/medical groups (past year)- Shared personnel/resources

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**q265a** Way LHD/LPHA worked with community health centers (past year) - Shared personnel/resources

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q266a Way LHD/LPHA worked with other health care providers (past year)- Shared personnel/resources

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Way LHD/LPHA worked with other health care providers (past year) - Exchange information

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Way LHD/LPHA worked with other health care providers (past year) - No relationship

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**q269c** Way LHD/LPHA worked with local planning agency (past year)- Regularly scheduled meetings

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q273a Way LHD/LPHA worked with environmental and conservation organizations (past year)- Shared personnel/resources

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q274c Way LHD/LPHA worked with cooperative extensions (past year)- Regularly scheduled meetings

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q275c Way LHD/LPHA worked with schools (past year)- Regularly scheduled meetings

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| Total          | 2332 | 100.0 |

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q276a Way LHD/LPHA worked with parks and recreations (past year)- Shared personnel/resources

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q277e Way LHD/LPHA worked with transportation (past year)- No relationship

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q279c Way LHD/LPHA worked with libraries (past year)- Regularly scheduled meetings
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q280a Way LHD/LPHA worked with colleges/universities (past year): Shared personnel/resources

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q280b Way LHD/LPHA worked with colleges/universities (past year): Written agreement

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q281a Way LHD/LPHA worked with business (past year)- Shared personnel/resources
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q282a Way LHD/LPHA worked with media (past year) - Shared personnel/resources

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q282e Way LHD/LPHA worked with media (past year) - No relationship

q282f Way LHD/LPHA worked with media (past year) - N/A
### q283a  Way LHD/LPHA worked with tribal government agencies (past year)- Shared personnel/resources

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### Notes
- 81.9% of respondents reported working with tribal government agencies (past year)
- 82.0% of respondents reported written agreements for working with tribal government agencies (past year)
Way LHD/LPHA worked with tribal government agencies (past year) - Regularly scheduled meetings

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Way LHD/LPHA worked with tribal government agencies (past year) - Exchange information

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Way LHD/LPHA worked with tribal government agencies (past year) - No relationship

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q283f Way LHD/LPHA worked with tribal government agencies (past year)- N/A

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q284a Way LHD/LPHA worked with criminal justice systems (past year)- Shared personnel/resources

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- **Q284b** Way LHD/LPHA worked with criminal justice systems (past year)- Written agreement

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- **Q284c** Way LHD/LPHA worked with criminal justice systems (past year)- Regularly scheduled meetings
### q284d Way LHD/LPHA worked with criminal justice systems (past year)- Exchange information

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q285d Way LHD/LPHA worked with health volunteers (past year)- Exchange information

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### q286a Way LHD/LPHA worked with community-based nonprofits (past year)- Shared personnel/resources

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### q286c Way LHD/LPHA worked with community-based nonprofits (past year)- Regularly scheduled meetings

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609
### q286d Way LHD/LPHA worked with community-based nonprofits (past year) - Exchange information

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### q286e Way LHD/LPHA worked with community-based nonprofits (past year) - No relationship

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q286f Way LHD/LPHA worked with community-based nonprofits (past year)- N/A

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q287a LHD/LPHA working with community partners (past year)- Developed/updated list of healthcare providers and contact information

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### q287b LHD/LPHA working with community partners (past year)- Developed/updated list of other organizations providing public health-related services and contact information

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### q287c LHD/LPHA working with community partners (past year)- Provided data to partners on community's health

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q287d LHD/LPHA working with community partners (past year)- Sought information relevant to the community’s health from partners

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q287e LHD/LPHA working with community partners (past year)- Used information provided by community partners in community health assessment

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q287f LHD/LPHA working with community partners (past year)- Collaborated with a partner to implement a health education or health promotion effort
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q287g LHD/LPHA working with community partners (past year)- Discussed public health issues and policy with partners

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q287h LHD/LPHA working with community partners (past year)- Exchanged information on violations of public health-related laws, regulations, or ordinances

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q287i LHD/LPHA working with community partners (past year)- Provided training on effective public health practices to partners

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q287j LHD/LPHA working with community partners (past year)- Reviewed the effectiveness of public health interventions provided by partners

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q287L HD/LPHA working with community partners (past year)- None of the above

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q288a LHD activity to assure access to health care services in jurisdiction (past year)- Assessed the availability of personal health care services in jurisdiction

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q288b LHD activity to assure access to health care services in jurisdiction (past year)- Identified barriers to personal health care services in jurisdiction

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q288c LHD activity to assure access to health care services in jurisdiction (past year)- Engaged the community to discuss unmet personal health care service needs

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q288d LHD activity to assure access to health care services in jurisdiction (past year)- Collaborated with community partners to fill gaps or reduce barriers

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q288e LHD activity to assure access to health care services in jurisdiction (past year)- Implemented strategies to increase accessibility of existing services
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q288f LHD activity to assure access to health care services in jurisdiction (past year)- Routinely made referrals to healthcare providers

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q288g LHD activity to assure access to health care services in jurisdiction (past year)- Implemented strategies to target healthcare needs have underserved populations
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q288h LHD activity to assure access to health care services in jurisdiction (past year)- Provided clinical services

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q288i LHD activity to assure access to health care services in jurisdiction (past year)- None of the above

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q289 How many individuals in LHD contributed responses to LHD's Profile questionnaire
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### q290b Individuals who contributed responses to LHD's Profile questionnaire- Other management staff

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q290c Individuals who contributed responses to LHD's Profile questionnaire- Human resources staff

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q290d Individuals who contributed responses to LHD's Profile questionnaire- Accounting staff

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Individuals who contributed responses to LHD's Profile questionnaire - Staff from LHD programmatic area

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Individuals who contributed responses to LHD's Profile questionnaire - Administrative/clerical staff

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RUCA_CAT 3-category rural urban commuting area classification

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GovCat 2-category governance classification

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