

**PUBLIC HEALTH ADVISORY BOARD
Accountability Metrics Subcommittee Meeting Minutes**

**October 27 2016
2:00 – 3:00pm**

PHAB Subcommittee members in attendance: Eva Rippeteau, Eli Schwarz, Teri Thalhofer, Jennifer Vines

PHAB Subcommittee members absent: Muriel DeLaVergne-Brown

OHA staff: Sara Beaudrault, Myde Boles, Rebecca Pawlak, Angela Rowland

Members of the public: Kelly MacDonald

Welcome and introductions

The September 22 draft meeting minutes were unanimously approved by the subcommittee.

Public Health Activities & Services Tracking (PHAST) measures

Betty Beckmeier and Greg Whitman from the University Of Washington School Of Nursing provided an overview of the PHAST measures.

The beginning measure set started with the Multi-network Practice and Outcome Variation Examination (MPROVE) measures. The purpose is to identify high value public health service measures across jurisdictions and collect the evidence based data. They were sorted in three core public health domains: Communicable Disease Control, Environmental Health Protection, and Chronic Disease Prevention. They are working with states to adopt these measures and use them for public health practice.

Eli asked if there are any national groups working with this criteria and Greg stated that a crosswalk is included in the presentation materials.

In May 2015 the MPROVE measures evolved to correct errors, provide clarity, and add responsibility questions.

Jennifer commented that these are process outcomes and inquired if there are any cause and effect outcomes. Betty stated this is activity data and do have some outcome data with behavior changes. She did work on existing data and did some matching of health department data with health outcomes to demonstrate the local public health contribution of services. She found the data was very limited across the states. Jen cautions the cause and effect of these findings and to be explicit with what is known and unknown.

Betty explained the obesity prevention data findings showing that prevalence of obesity is lower and physical activity is higher in all LHD groups with population-based interventions compared to LHDs with no apparent activities. Also, population-based interventions are more strongly linked to positive outcomes in literature when compared to individual-level interventions.

Eli questioned whether there is currently a standardized instrument to collect data at a county level. Betty stated that PHAST has received funding from the Robert Wood Johnson Foundation to provide a standardized instrument to collect these data at a local level.

Betty also presented the cross-jurisdictional sharing and immunization completeness study. Health departments that were sharing services had higher immunization completeness rates for toddlers.

For more information: <http://phastdata.org>

Subcommittee business

The next subcommittee meeting will be a two-hour in-person meeting held on November 15th. The materials will be sent out ahead of time to allow for committee members to review and come back with decisions to put forward. The group will work to prioritize environmental health and communicable disease PHAST measures as well as state health profile indicators.

Eli recommended a crosswalk of the measures be provided.

Public comment

No public testimony.

Adjournment

The meeting was adjourned.