

Preventive Health and Health Services Block Grant Assessment

Thank you for participating in the Centers for Disease Control and Prevention’s (CDC’s) assessment of the Preventive Health and Health Services (PHHS) Block Grant. Your participation will help CDC gather important information regarding results and improvements achieved by the PHHS Block Grant from July 1, 2016, through June 30, 2017.

Completing the questionnaire is voluntary and will take approximately 60 minutes.

Instructions

To advance through the questionnaire, please use the Forward (>>) and Back (<<) buttons located in the lower-right corner of each page. Please note that you do not have to complete the questionnaire in one sitting. The data you enter are automatically saved as you progress to each new section, therefore you may stop and return at a later time if needed. **Your response to the questionnaire is due on 10/31/2017.**

Throughout the questionnaire, key terms appear in *underlined, italicized* font. If you hover over a key term with your mouse/pointer, the term’s definition will appear in a text box.

Technical Support

For technical support on completing and submitting the questionnaire, please contact Maggie Carlin (mcarlin@astho.org / 571-318-5410).

For other questions about this questionnaire, please contact Garry Lowry (GLowry@cdc.gov / 404-498-0361) or Karen Mumford (KMumford@cdc.gov / 404-498-0365).

Use of the Findings from the Assessment

The findings from this assessment will be used to inform CDC of the outputs and cross-cutting outcomes of the PHHS Block Grant and refine existing measures and/or inform the development of future measures for assessment purposes. No personally identifiable information will be collected. Responses will be kept secure and results will be reported only in aggregate form. Findings will be shared with various stakeholders, including grantees, and might be included in articles and reports that will be made available publicly.

CDC estimates the average public reporting burden for this collection of information as 60 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).

I. Respondent Information

1. Select your PHHS Block Grant-funded jurisdiction from the drop-down menu. [\[List of 61 grantees\]](#)

II. Public Health Infrastructure

Public health infrastructure includes the organizational capacity (i.e., the systems, workforce, partnerships, and resources) that enables health departments to perform their core functions and provide essential services. Improvements to infrastructure may occur within the grantee health department, either department-wide or within a specific program, or across the grantee jurisdiction's public health system.

This section includes questions related to [measure 1.1](#) and [measure 1.2](#), which are focused on two aspects of public health infrastructure respectively: 1) information systems capacity improvement, and 2) quality improvement.

Information Systems Capacity Improved – Measure 1.1

Please answer the following questions related to information systems that were newly developed, improved, and/or maintained through *PHHS Block Grant-funded support* during the *12-month reporting period*.

2. Have any local organizations or other government agencies in your jurisdiction used PHHS Block Grant funds to support development, improvement, and/or maintenance of one or more information systems?
 - Yes [\[DISPLAY Q2a\]](#)
 - No
 - Not sure
- 2a. How many local organizations or other government agencies used PHHS Block Grant funds to support development, improvement, and/or maintenance of one or more information systems? Number of local organizations: _____ [\[OPTIONAL\]](#)
3. Have any **health departments** in your jurisdiction used PHHS Block Grant funds to support development, improvement, and/or maintenance of one or more information systems?
 - Yes
 - No [\[SKIP to Q6\]](#)
- 3a. What is the **total number** of information systems that were newly developed, improved, and/or maintained? Number: _____
- 3b. What is the name/title of the newly developed, improved, and/or maintained information system? _____
 - 3b.1 What system type was newly developed, improved, and/or maintained?
 - Laboratory data system
 - Surveillance system
 - Vital events database (e.g., birth, death, fetal death)
 - Registry (e.g., cancer registry)
 - Performance management system
 - Financial management system
 - Human capital management system (e.g., human resources, personnel)

- Health information exchange (HIE)
- Electronic health record (EHR) system
- Other information system

3b.2 What **type of health department** developed, improved, and/or maintained this information system? Select all that apply.

- Grantee health department [\[DISPLAY Q3.1.1.2.a\]](#)
- Local health department (LHDs)
- Tribal health department (THDs)

3b.2a How many health departments **used or had access to** this system?

- Number of LHDs: _____
- Number of THDs: _____
- Not sure

3b.3 How were PHHS Block Grant funds used to support information system capacity? Select all that apply.

- Initiated* development of a new system or module
- Maintained* an existing system or module
- Enhanced or expanded* an existing system or module
- Sustained or restored* a system or module

4. How many unique local health departments (LHDs) used PHHS Block Grant funds to support development, improvement, and/or maintenance of one or more information systems? Number of LHDs: _____
5. How many unique tribal health departments (THDs) used PHHS Block Grant funds to support development, improvement, and/or maintenance of one or more information systems? Number of THDs: _____

Quality Improved - Measure 1.2

Please answer the following questions related to improvements in the *efficiency and/or effectiveness* of operations, programs, or services that were achieved through *PHHS Block Grant-funded support* during the *12-month reporting period*.

6. Have any local organizations or other government agencies in your jurisdiction used PHHS Block Grant funds to support a quality improvement effort focused on the efficiency and/or effectiveness of an operation, program or service?
 - Yes [\[DISPLAY Q6a\]](#)
 - No
 - Not sure
- 6a. How many local organizations or other government agencies used PHHS Block Grant funds to support a quality improvement effort focused on the efficiency and/or effectiveness of an operation, program, or service? Number of local organizations: _____ [\[OPTIONAL\]](#)

7. Have any **health departments** in your jurisdiction used PHHS Block Grant funds to support a quality improvement effort focused on the efficiency and/or effectiveness of an operation, program, or service?

- Yes
- No [\[SKIP to Q8\]](#)

7a. What **type of health department** in your jurisdiction used PHHS Block Grant funds to support a quality improvement effort focused on the efficiency and/or effectiveness of an operation, program, or service? Select all that apply.

- Grantee health department [\[DISPLAY Q7b\]](#)
- Local health department [\[DISPLAY Q7d\]](#)
- Tribal health department [\[DISPLAY Q7e\]](#)

7b. What is the **total number** of operations, programs, or services for which an efficiency and/or effectiveness improvement was **achieved** by your (grantee) health department using PHHS Block grant-funded support? Number: _____

7c. What is the **name/title of the operation, program, or service** for which efficiency and/or effectiveness was improved? _____

7c.1 What **type of improvement** was achieved? Select all that apply.

Efficiency improvement:

- Time saved
- Reduced number of steps
- Costs saved
- Costs avoided
- Revenue generated due to billable service
- Other (please specify): _____

Effectiveness improvement:

- Increased staff satisfaction
- Organizational design improvements
- Quality enhancements of operations, programs, or services
- Other (please specify): _____

7c.2 How were PHHS Block Grant funds used to support the improvement(s)? Select all that apply.

- Initiated a new effort to improve efficiency and/or effectiveness
- Maintained an ongoing effort to improve efficiency and/or effectiveness (i.e., efficiency and/or effectiveness effort was ongoing from previous reporting period, but improvement was achieved during this reporting period)
- Enhanced or expanded an existing effort to improve efficiency and/or effectiveness
- Sustained or restored an effort to improve efficiency and/or effectiveness

7d. How many **local** health departments (LHDs) used PHHS Block Grant funds to support a quality improvement effort focused on the efficiency and/or effectiveness of an operation, program, or service? Number of LHDs: _____

7d.1 What is the **total number** of operations, programs, or services for which an efficiency and/or effectiveness improvement was **achieved** by a local health department in your jurisdiction using PHHS Block grant-funded support? Number: _____

7d.2 What is the **name/title of the operation, program, or service** for which efficiency and/or effectiveness was improved? _____

7d.2a What **type of improvement** was achieved? Select all that apply.

Efficiency improvement:

- Time saved
- Reduced number of steps
- Costs saved
- Costs avoided
- Revenue generated due to billable service
- Other (please specify): _____

Effectiveness improvement:

- Increased staff satisfaction
- Organizational design improvements
- Quality enhancements of operations, programs, or services
- Other (please specify): _____

7d.2b How were PHHS Block Grant funds used to support the improvement(s)? Select all that apply.

- Initiated a new effort to improve efficiency and/or effectiveness
- Maintained an ongoing effort to improve efficiency and/or effectiveness (i.e., efficiency and/or effectiveness effort was ongoing from previous reporting period, but improvement was achieved during this reporting period)
- Enhanced or expanded an existing effort to improve efficiency and/or effectiveness
- Sustained or restored an effort to improve efficiency and/or effectiveness

7e. How many **tribal** health departments (THDs) used PHHS Block Grant funds to support a quality improvement effort focused on the efficiency and/or effectiveness of an operation, program, or service? Number THDs: _____

7e.1 What is the **total number** of operations, programs, or services for which an efficiency and/or effectiveness improvement was **achieved** by a tribal health department in your jurisdiction using PHHS Block grant-funded support? Number: _____

7e.2 What is the **name/title of the operation, program, or service** for which efficiency and/or effectiveness was improved? _____

7e.2a What **type of improvement** was achieved? Select all that apply.

Efficiency improvement:

- Time saved
- Reduced number of steps
- Costs saved
- Costs avoided
- Revenue generated due to billable service
- Other (please specify): _____

Effectiveness improvement:

- Increased staff satisfaction
- Organizational design improvements
- Quality enhancements of operations, programs, or services
- Other (please specify): _____

7e.2b How were PHHS Block Grant funds used to support the improvement(s)? Select all that apply.

- Initiated a new effort to improve efficiency and/or effectiveness
- Maintained an ongoing effort to improve efficiency and/or effectiveness (i.e., efficiency and/or effectiveness effort was ongoing from previous reporting period, but improvement was achieved during this reporting period)
- Enhanced or expanded an existing effort to improve efficiency and/or effectiveness
- Sustained or restored an effort to improve efficiency and/or effectiveness

7f. Was an established **quality improvement method** (e.g., Plan-Do-Study-Act, Lean/Six Sigma) used by a **health department** to achieve any of the improvements in the efficiency and/or effectiveness of an operation, program, or service you have reported on?

- Yes [DISPLAY Q7f.1]
- No
- Not sure

Please provide the following information for **one example** of an improvement in the efficiency and/or effectiveness of an operation, program, or service for which a deliberate and defined quality improvement method was used by a **health department**:

7f.1. Name/title of the operation, program, or service: _____

7f.2. Specific issue being addressed through quality improvement: _____

7f.3. Quality improvement method used: _____

7f.4. Brief description of the efficiency and/or effectiveness achieved: _____

To help us learn more about public health infrastructure improvements achieved through PHHS Block Grant-funded support during the 12-month reporting period, please answer the following questions focused on national standards and accreditation.

8. How did **your health department** use PHHS Block Grant funds to address national standards or conduct accreditation-related activities as established by the Public Health Accreditation Board (PHAB)? Select all that apply.
- PHHS Block Grant funds were not used in this way
 - Paid for PHAB fees
 - Hired staff to support accreditation-related activities (e.g., performance improvement manager, accreditation coordinator)
 - Worked to meet and/or maintain performance against the standards (including prerequisites, key plans, and processes described through the standards)
 - Provided support to local health department(s)** to pay for PHAB fees
 - Provided support to local health department(s)** to hire staff to support accreditation-related activities (e.g., performance improvement manager, accreditation coordinator)
 - Provided support to local health department(s)** to meet and/or maintain performance against the standards
 - Provided support to tribal health department(s)** to pay for PHAB fees
 - Provided support to tribal health department(s)** to hire staff to support accreditation-related activities (e.g., performance improvement manager, accreditation coordinator)
 - Provided support to tribal health department(s)** to meet and/or maintain performance against the standards
 - Other (please specify): _____

III. Emerging Needs

Emerging needs are public health issues that are beginning to present themselves as problems within the grantee's jurisdiction. They can affect the jurisdiction as a whole or specific areas within the jurisdiction, such as counties, tribes, and cities.

This section includes questions related to measure 2.1, which is focused on all types of emerging public health needs.

Emerging Public Health Needs Addressed – Measure 2.1

Please answer the following questions related to emerging public health needs that were addressed through PHHS Block Grant-funded support during the 12-month reporting period.

9. Have any local organizations or other government agencies in your jurisdiction used PHHS Block Grant funds to support an effort to address an emerging public health need?
- Yes
 - No
 - Not sure
10. Have any **health departments** in your jurisdiction used PHHS Block Grant funds to support an effort to address an emerging public need?
- Yes
 - No [[SKIP to Q11](#)]

- 10a. What is the **total number** of emerging public health needs that were addressed by **health departments** in your jurisdiction through PHHS Block Grant-funded support? Number of emerging public health needs: _____
- 10b. What is the **name/title** of the **emerging public health need** that was addressed? _____
- 10b.1 How would you characterize this emerging public health need? Select all that apply.
- Newly developing*
 - Newly prioritized*
- 10b.2 How was this emerging public health need identified? Select all that apply.
- Conducted, monitored, or updated a jurisdiction health assessment (e.g., state health assessment)
 - Conducted a topic- or program-specific assessment (e.g., tobacco assessment, environmental health assessment)
 - Identified via surveillance systems or other data sources
 - Prioritized within a strategic plan
 - Declared as an emergency within your jurisdiction
 - Governor (or other political leader) established as a priority
 - Legislature established as a priority
 - Tribal government/elected official established as a priority
 - Other (please specify): _____
- 10b.3 What was the size of the population potentially affected (target population) by this emerging need? Number: _____
- 10b.4 How were PHHS Block Grant funds used to support the effort to address this emerging public health need? Select all that apply.
- Initiated* a new effort to address the emerging public health need
 - Maintained* an existing effort to address the emerging public health need
 - Enhanced or expanded* an existing effort to address the emerging public health need
 - Sustained or restored* an effort to address the emerging public health need

VI. Evidence-Based Public Health

Evidence-based public health practice involves implementing effective interventions. It includes both building and using evidence (i.e., data and information) to define public health needs, describe the effectiveness of interventions, and describe effective implementation of interventions.

This section includes questions related to *measure 3.1*, which is focused on a key aspect of evidence-based public health practice—implementing evidence-based public health interventions.

Evidence-Based Public Health Interventions Implemented - Measure 3.1

Please answer the following questions related to *public health interventions* that were implemented (i.e., delivered for the first time, ongoing, or completed) through *PHHS Block Grant-funded support* during the *12-month reporting period*.

11. Have any *local organizations* or *other government agencies* in your jurisdiction used PHHS Block Grant funds to support implementation of public health interventions?
- Yes [DISPLAY Q11a]
 - No
 - Not sure

11a. How many local organizations or other government agencies used PHHS Block Grant funds to support implementation of public health interventions? Number of local organizations: _____ [OPTIONAL]

12. Have any **health departments** in your jurisdiction used PHHS Block Grant funds to support implementation of public health interventions?

- Yes
- No [SKIP to Q13]

12a. What is the **total number** public health interventions that were implemented by **health departments** in your jurisdiction through PHHS Block Grant-funded support? Number of public health interventions: ____

12b. What is the **name/title** of the **public health intervention** that was implemented? _____

12b.1 What type of health department(s) implemented this public health intervention? Select all that apply.

- Grantee health department
- Local health department
- Tribal health department

12b.2 What level of evidence supports this public health intervention? Select only one.

- Rigorous evidence:** (Rating category 4) – Formal, comprehensive, and systematic review of all relevant literature (i.e., published intervention evaluations or studies that have evidence of effectiveness, feasibility, reach, sustainability, and transferability). Examples of sources of evidence qualifying as **rigorous** include *The Guide to Community Preventive Services*, the US Preventive Services Task Force, and systematic reviews published in peer-reviewed journals.
- Strong evidence:** (Rating category 3) – An informal, non-comprehensive, non-systematic review of some but not all relevant literature (i.e., multiple published evaluations or studies that have evidence of effectiveness, feasibility, reach, sustainability, and transferability). Examples of sources of evidence qualifying as **strong** include non-systematic reviews published by the federal government and non-systematic reviews published in peer-reviewed journals.
- Moderate evidence:** (Rating category 2) – At least one published evaluation or study, with peer review, that has evidence of effectiveness, feasibility, reach, sustainability, and transferability. Examples of sources of evidence qualifying as **moderate** include journal articles of individual studies, published intervention research, and published pilot studies.
- Weak evidence:** (Rating category 1) – At least one unpublished evaluation or study without peer review, that has evidence of effectiveness, feasibility, reach, sustainability, and transferability. Examples of sources of evidence qualifying as **weak** include unpublished intervention research, pilot studies, case studies, and field-based summaries. [DISPLAY Q12b.2a-12b.2b]
- No evidence:** No evaluation or study either peer reviewed or non-peer reviewed, that has evidence of effectiveness, feasibility, reach, sustainability, and transferability. New

and/or innovative interventions would most likely have **no** evidence established.

[DISPLAY Q12b.2a-12b.2b]

Not sure

12b.2a Was the public health intervention untested, new, and/or *innovative*?

- Yes
- No
- Not sure

12b.2b Were data or information collected for the purpose of determining the intervention's effectiveness at achieving intended outcomes?

- Yes
- No
- Not sure

12c What *Healthy People 2020 health topic area(s)* was this public health intervention implemented to address? Select one primary health topic area and, if applicable, one secondary health topic area.

	Primary (Select one)	Secondary [OPTIONAL]
1-Access to health services	<input type="checkbox"/>	<input type="checkbox"/>
2-Adolescent health	<input type="checkbox"/>	<input type="checkbox"/>
3-Arthritis, osteoporosis, and chronic back conditions	<input type="checkbox"/>	<input type="checkbox"/>
4-Blood disorders and blood safety	<input type="checkbox"/>	<input type="checkbox"/>
5-Cancer	<input type="checkbox"/>	<input type="checkbox"/>
6-Chronic kidney disease	<input type="checkbox"/>	<input type="checkbox"/>
7-Dementias, including Alzheimer's disease	<input type="checkbox"/>	<input type="checkbox"/>
8-Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
9-Disability and health	<input type="checkbox"/>	<input type="checkbox"/>
10-Early and middle childhood	<input type="checkbox"/>	<input type="checkbox"/>
11-Educational and community-based programs	<input type="checkbox"/>	<input type="checkbox"/>
12-Environmental health	<input type="checkbox"/>	<input type="checkbox"/>
13-Family planning	<input type="checkbox"/>	<input type="checkbox"/>
14-Food safety	<input type="checkbox"/>	<input type="checkbox"/>
15-Genomics	<input type="checkbox"/>	<input type="checkbox"/>
16-Global health	<input type="checkbox"/>	<input type="checkbox"/>
17-Health communication and health information technology	<input type="checkbox"/>	<input type="checkbox"/>
18-Health-related quality of life and well-being	<input type="checkbox"/>	<input type="checkbox"/>
19-Healthcare-associated infections	<input type="checkbox"/>	<input type="checkbox"/>
20-Hearing and other sensory or communication disorders	<input type="checkbox"/>	<input type="checkbox"/>
21-Heart disease and stroke	<input type="checkbox"/>	<input type="checkbox"/>
22-HIV	<input type="checkbox"/>	<input type="checkbox"/>
23-Immunization and infectious diseases	<input type="checkbox"/>	<input type="checkbox"/>
24-Injury and violence prevention	<input type="checkbox"/>	<input type="checkbox"/>
25-Lesbian, gay, bisexual, and transgender health	<input type="checkbox"/>	<input type="checkbox"/>
26-Maternal, infant, and child health	<input type="checkbox"/>	<input type="checkbox"/>
27-Medical product safety	<input type="checkbox"/>	<input type="checkbox"/>
28-Mental health and mental disorders	<input type="checkbox"/>	<input type="checkbox"/>

29-Nutrition and weight status	<input type="checkbox"/>	<input type="checkbox"/>
30-Occupational safety and health	<input type="checkbox"/>	<input type="checkbox"/>
31-Older adults	<input type="checkbox"/>	<input type="checkbox"/>
32-Oral health	<input type="checkbox"/>	<input type="checkbox"/>
33-Physical activity	<input type="checkbox"/>	<input type="checkbox"/>
34-Preparedness	<input type="checkbox"/>	<input type="checkbox"/>
35-Public health infrastructure	<input type="checkbox"/>	<input type="checkbox"/>
36-Respiratory diseases	<input type="checkbox"/>	<input type="checkbox"/>
37-Sexually transmitted diseases	<input type="checkbox"/>	<input type="checkbox"/>
38-Sleep health	<input type="checkbox"/>	<input type="checkbox"/>
39-Social determinants of health	<input type="checkbox"/>	<input type="checkbox"/>
40-Substance abuse	<input type="checkbox"/>	<input type="checkbox"/>
41-Tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
42-Vision	<input type="checkbox"/>	<input type="checkbox"/>
43-Emergency medical services	<input type="checkbox"/>	<input type="checkbox"/>
44-Rape or attempted rape	<input type="checkbox"/>	<input type="checkbox"/>

12d. How were PHHS Block Grant funds used to support implementation of this public health intervention? Select all that apply.

- Initiated* a new public health intervention
- Maintained* implementation of an existing public health intervention
- Enhanced or expanded* an existing public health intervention
- Sustained or restored* a public health intervention

To help us learn more about evidence-based public health practice implemented through *PHHS Block Grant-funded support* during the *12-month reporting period*, please answer the following questions focused on 1) building the evidence base for public health, and 2) making evidence-based decisions.

13. How did **your health department** use PHHS Block Grant funds to support *building the evidence base for public health*? Select all that apply.

- PHHS Block Grant funds were not used in this way
- Conducted, monitored, or updated a jurisdiction health assessment (e.g., state health assessment)
- Conducted a topic- or program-specific assessment (e.g., tobacco assessment, environmental health assessment)
- Analyzed or monitored surveillance or other types of data
- Provided support to local health department(s)** to conduct, monitor, or update a community health assessment
- Provided support to local health department(s)** to conduct a topic- or program-specific assessment (e.g., tobacco assessment, environmental health assessment)
- Provided support to local health department(s)** to analyze or monitor surveillance or other types of data
- Provided support to tribal health department(s)** to conduct, monitor, or update a tribal health assessment
- Provided support to tribal health department(s)** to conduct, monitor, or update a community health assessment

- Provided support to tribal health department(s)** to conduct a topic- or program-specific assessment (e.g., tobacco assessment, environmental health assessment)
- Provided support to tribal health department(s)** to analyze or monitor surveillance or other types of data
- Other (please specify): _____

14. How did **your health department** use PHHS Block Grant funds to support evidence-based decision making?

Select all that apply.

- PHHS Block Grant funds were not used in this way
- Developed or updated a jurisdiction's health improvement plan (e.g., state health improvement plan) based on a jurisdiction health assessment (e.g., state health assessment)
- Developed or updated a community health improvement plan based on a community health assessment
 - Developed or updated a topic- or program-specific action plan
- Provided support to local health department(s)** for developing or updating a community health improvement plan
- Provided support to local health department(s)** for developing or updating a topic- or program-specific action plan
- Provided support to tribal health department(s)** to develop or update a tribal health improvement plan based on a tribal health assessment
- Provided support to tribal health department(s)** for developing or updating a community health improvement plan
- Provided support to tribal health department(s)** for developing or updating a topic- or program-specific action plan
- Other (please specify): _____

If you are finished reporting your data, please click the SUBMIT button to complete the questionnaire. You will not be able to return to the questionnaire after submitting your responses. To revise a response after submission, please contact Maggie Carlin (mcarlin@astho.org / 571-318-5410)

Thank you!

Thank you for taking the time to participate in this assessment of the PHHS Block Grant. Please feel free to provide any feedback about this survey, the process to collect/report the required information, or the measures in general to phhsblockgranteval@cdc.gov. Please contact Garry Lowry (GLowry@cdc.gov / 404-498-0361) or Karen Mumford (KMumford@cdc.gov / 404-498-0365) if you have any questions.

Definition of key terms by survey section – for use in “hover over” function

Overall survey

- **12-month reporting period:** July 1, 2016, through June 30, 2017.
- **PHHS Block Grant-funded support:** Use of PHHS Block Grant funds, in any amount, to directly fund, provide staff for, or provide technical assistance to support an activity.

- **Local organizations:** Non-governmental entities within a grantee's jurisdiction that receive support from the grantee to implement public health efforts in support of communities within that jurisdiction. Types of local organizations include community-based organizations, schools, faith-based organizations, community health centers, and medical clinics.
- **Other Government Agencies:** All official governmental bodies other than state, local, or tribal health departments within a grantee's jurisdiction that receive support from the grantee to implement public health efforts in support of communities within that jurisdiction. Types of other government agencies include, but are not limited to, the department of education, licensed or certified home care agencies, and criminal justice agencies.
- **Initiate new public health efforts:** Develop and implement new programs, services, and activities that address public health needs that were previously not funded, either due to lack of available funds or an absence of funding allotted to the need.
- **Maintain existing public health efforts:** Support established programs, services, and activities from year to year.
- **Enhance or expand existing public health efforts:** Enhance an effort by refining and improving its quality or expand an effort by adding components or outreach to additional populations.
- **Sustain public health efforts:** Continue an effort without disruptions after original funding for the effort has ended.
- **Restore public health efforts:** Reinstate or rebuild an effort that was significantly disrupted or had ended due to loss of original funding.

Information Systems Capacity Improved

- **Measure 1.1:** Number of state, territorial, tribal, and local health departments whose capacity to collect or enhance data that provide information of public health importance was improved or maintained through the use of PHHS Block Grant funds.
- **Information systems:** Systems that provide the ability to collect, store, protect, process, manage, analyze, use, and communicate information.
- **Information of public health importance:** Any data that provide insight into health, health inequities, contributing factors or causes of health challenges, and/or potential policy, public health, or community solutions. These are data that are needed for the planning, implementation, and evaluation of public health practice.

Quality Improved

- **Measure 1.2:** Number of state, territorial, tribal, and local health departments in which the efficiency or effectiveness of operations, programs, or services was improved through the use of PHHS Block Grant funds.
- **Costs avoided:** Reduction in future costs due to innovations in, or changes to, process or program implementation or service delivery. The difference between the documented costs after implementation of a quality improvement effort and the predicted costs before the effort was implemented.

- **Costs saved:** Reduction in existing costs of completing a process, implementing a program, or delivering a service. The difference between the documented costs after implementation of a quality improvement effort and the costs that occurred before the effort was implemented.
- **Efficiency and/or effectiveness (i.e., quality improvements):** Improvements in programs, operations, or services that result in reductions in the amount of resources required for implementation (i.e., efficiency) or in a greater ability to achieved agency or program goals through improved delivery of programs or services or implementation of organizational processes (i.e., effectiveness).
- **Public Health Accreditation Board (PHAB):** A nonprofit organization dedicated to advancing the continuous quality improvement of tribal, state, local, and territorial public health departments.

Emerging Needs Addressed

- **Measure 2.1:** Number of emerging public health needs that were addressed through the use of PHHS Block Grant funds.
- **Emerging public health needs:** Public health needs within a grantee’s jurisdiction that are newly developing or newly prioritized.
- **Newly developing:** A public health need that is newly arisen; exists, but has developed new characteristics; or re-emerged.
- **Newly prioritized:** A public health need that has been known to the grantee but lacked funding or support; is new to the public health field; or has new expectations for a public health response.

Evidence-Based Public Health Interventions Implemented

- **Measure 3.1:** Number of evidence-based public health interventions implemented through the use of PHHS Block Grant funds.
- **Build the evidence base for public health:** Produce new or strengthen existing data and information that are used to 1) define public health needs and 2) determine the effectiveness of interventions at achieving intended outcomes.
- **Healthy People 2020 health topic area(s):** The 42 health topic areas designated by *Healthy People 2020*. Note: Two additional categories—“emergency medical services” and “rape or attempted rape”—are included in the Block Grant Management Information System as health topic areas that grantees can select to identify the focus of their work.
- **Public health intervention(s):** Any type of planned activity (e.g., program, service, policy) designed to prevent disease or injury or promote health in a group of people.
- **Innovative:** Incorporating novel, creative thinking around new or existing programs or services.
- **Evidence-based decision making:** The use of data and information to prioritize public health needs and approaches for addressing those public health needs.