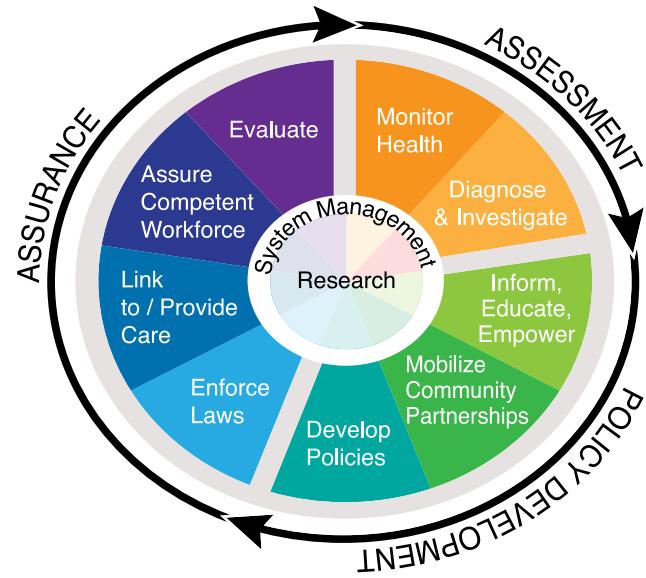


OKLAHOMA CITY-COUNTY LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT

Purpose: The purpose of the Local Public Health System Assessment (LPHSA) is to bring together traditional and non-traditional providers of services that impact our health outcomes to assess our local public health system's capacity to meet the health needs of our community. This self-assessment is organized around the Model Standards for each of the 10 Essential Public Health Services. The 10 Essential Services Diagram shows the framework that structured the LPHSA.



Optimal Activity (76-100%)	The public health system is doing absolutely everything possible for this activity, and there is no room for improvement.
Significant Activity (51-75%)	The public health system participates a great deal in this activity, but there remain opportunities for minor improvement.
Moderate Activity (26-50%)	The public health system somewhat participates in this activity, and there is opportunity for greater improvement.
Minimal Activity (1-25%)	The public health system provides only limited activity, and there is opportunity for substantial improvement.
No Activity (0%)	The public health system does not participate in this activity at all.

Overview: The assessment was completed utilizing the National Public Health Performance Standards Program (NPHPSP) on November 10, 2016 at the Northeast Regional Health and Wellness Campus. More than 50 individuals attended, representing more than 30 agencies and communities. The participants were assigned to groups based off of their local public health system role and agency; each group scored three to four essential public health services based off of the categories to the left.

The Centers for Disease Control and Prevention (CDC) calculates the assessment results and generates a profile report, enabling the local public health system to identify gaps in capacity and strengths of the system.

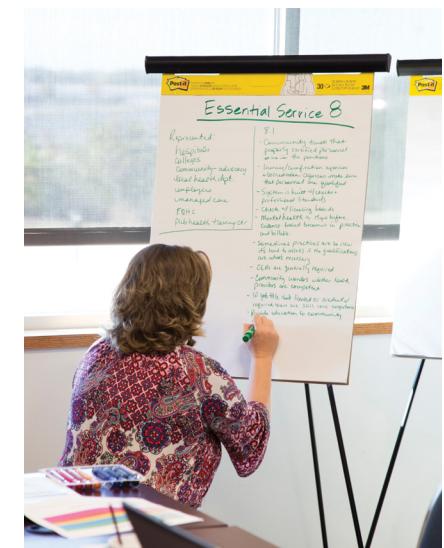
Results: Overall, the Local Public Health System generated an average overall Essential Public Health Service Performance Score of 60.7, a score demonstrating significant activity of our local public health system. The summary of average essential service performance scores are presented below. The full report is available by e-mailing wellnessscore@occhd.org.

Comparison to the 2013 LPHSA:

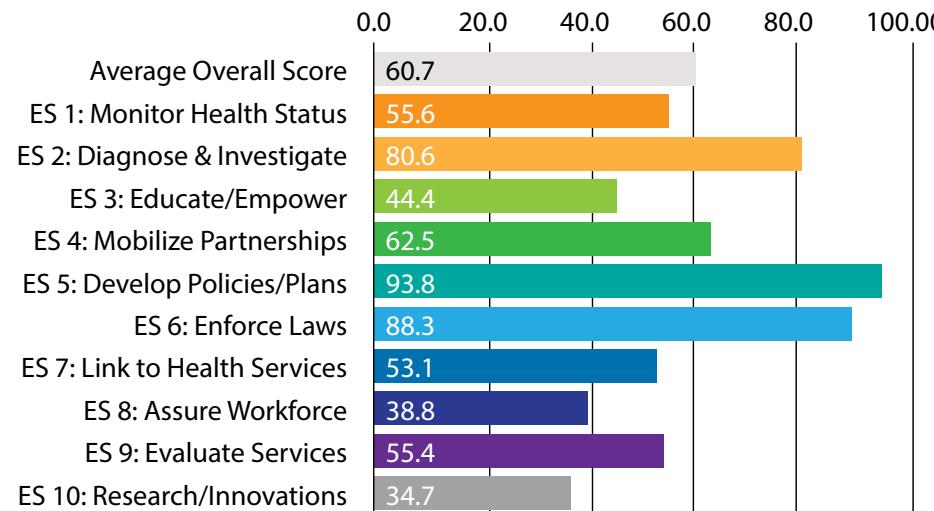
A qualitative comparison is described in this section. The 2013 LPHSA required extensive discussion towards educating the participants about the roles and activities of the local public health system in Oklahoma City and Oklahoma County. Only after this discussion, did the participants feel somewhat comfortable with moving forward into the assessment. This created a limited amount of time for detailed discussion during the scoring consensus process. Contrary to 2013, the participants in attendance at the 2016 local public health system assessment had a more extensive knowledge base of the system, and the majority of the participants were able to dive right in to each essential service plus begin the discussion without spending a lengthy period learning about it. This allowed for more detailed discussion during the consensus process.

In 2013, the highest scores were ES 2: Diagnose and Investigate (91.7%), ES 5: Develop Policies/Plans (79.2%) and ES 6: Enforce Laws (73.3%); and the lowest scores were ES 7: Link to Health Services (40.6%), ES 10: Research/Innovations (42.4%) and ES 8: Assure Workforce (47.2%).

In 2016, the highest scores were ES 5: Develop Policies/Plans (93.8%), ES 6: Enforce Laws (88.3%) and ES 2: Diagnose and Investigate (80.6%); and the lowest scores were ES 10: Research/Innovations (34.7%), ES 8: Assure Workforce (38.8%) and ES 3: Educate/Empower (44.4%).



Summary of Average Essential Public Health Service Performance Scores



Limitations: There are multiple data limitations with the LPHSA, including self-report, variations in participant knowledge and experience, variation within the three-group settings and differences in assessment question interpretations. The scores produced for each of these essential services reflects the understanding of the system as it relates to the knowledge of the participants that attended the Nov. 2016 event.

