



OREGON
HEALTH
AUTHORITY

September 4, 2025

Public Health Modernization Accountability Metrics

Prevention and health promotion metrics

PHAB Accountability Metrics Subcommittee focus

- Develop health outcome and process metrics for other foundational programs (start with **prevention and health promotion** and then access to clinical preventive services), including:
 - Equity indicators for health outcome metrics
 - Policy indicators that affect ability to achieve health outcome metrics
- First step is **convening Workgroup of technical experts** to develop recommended set of metrics for PHAB's consideration

Example: Immunizations process measures and health outcome indicators

LPHA process measures

Demonstrated use of data to identify population(s) of focus

Demonstrated actions to improve access to influenza vaccination for residents of long-term care facilities (LTCFs)

Increase in the percentage of health care providers participating in the Immunization Quality Improvement Program (IQIP)

Demonstrated actions with health care providers to improve access to vaccination

Demonstrated outreach and educational activities conducted with community partners to increase vaccine access or demand

OHA process measures

Develop and maintain data for immunization indicators

Implement the IQIP program

Provide data to CCOs to meet immunization incentive measures and partner with CCOs on QI program implementation

Assure vaccine supply and monitor the state's vaccine finance model to ensure it is sustainable, equitable and adequately funds vaccination programs

Process measure implementation leads to increases in the health outcome indicators.

Health outcome indicators

Two-year-old vaccination rate 4:3:1:3:3:1:4 series (core vaccines children need before age two)

Adult influenza vaccination rate in populations 65 and older

Health outcome indicators show progress toward the priority area goal.

Priority area goal:
Protect people from preventable diseases through vaccination

Detailed Approach for Workgroup & Subcommittee

Identify & convene metrics workgroup

Identify OHA, LPHA, and CBO technical experts to participate in monthly workgroup to recommend metrics set to Subcommittee

Compile metrics for consideration

Workgroup members identify metrics for consideration; ideally metrics align with existing plans; metrics include policy indicators

Apply selection criteria to metrics

Workgroup members review metrics and apply selection criteria; based on selection criteria, develop refined list of metrics for PHAB →

Detailed Approach for Workgroup & Subcommittee

Present metrics to PHAB Subcomm

Workgroup members present metrics set to PHAB Subcommittee, including reasons for inclusion/why it is being recommended

Present metrics to full PHAB for approval

PHAB Subcommittee & Workgroup present metrics set to full PHAB; revisions based on PHAB conversation; PHAB votes on adoption

Develop process measures

Update Workgroup membership based on adopted health outcome indicators; Workgroup develops process measures for PHAB



Parallel Conversation in PHAB & Workgroup

Consider equity framework for accountability metrics

Determine how best to embed equity in the metrics set. For example, develop statewide equity benchmarks and/or context-specific equity benchmarks depending on local data and community voice

PHAB



Workgroup



Develop metrics set for PHAB consideration

Gather potential metrics, apply selection criteria, and develop refined metrics set for PHAB consideration. Metrics to include health outcome indicators **and** policy indicators/intermediate measures

Questions for today

- Do you have any questions or comments about this process?
- How can CLHO S&I / full CLHO best engage in this process?
- Do you have staff who would be interested in participating on the Workgroup to develop a recommended metrics set for PHAB's consideration?
- What, if anything, do you need from OHA to make this ask of your staff?

Additional Slides

PHAB accountability metrics framework

State and Local Partners All Have a Role in Improving Health.

Collective responsibility across sectors and partners		OHA and LPHA responsibility	
Health Priorities		Public Health Data, Partnerships and Policy	
Standardized health outcome metrics	Indicators of health outcomes:	Measures of foundational capabilities:	
	What are priority health issues throughout Oregon? Which groups experience disproportionate harm? How are policies contributing to or eliminating root causes of health inequities?	Are public health authorities increasing capacity and expertise needed to address priority health issues? Are public health authorities better able to provide core public health functions within their community?	

PHAB accountability metrics framework

State and Local Partners All Have a Role in Improving Health.

<i>Collective responsibility across sectors and partners</i>		<i>OHA and LPHA responsibility</i>	
Health Priorities		Public Health Data, Partnerships and Policy	
Indicators of health outcomes: What are priority health issues throughout Oregon? Which groups experience disproportionate harm? How are policies contributing to or eliminating root causes of health inequities?		Measures of foundational capabilities: Are public health authorities increasing capacity and expertise needed to address priority health issues? Are public health authorities better able to provide core public health functions within their community?	

Equity benchmarks
(context-specific,
standardized or both?)

PHAB accountability metrics framework

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Indicators of health outcomes: What are priority health issues throughout Oregon? Which groups experience disproportionate harm? How are policies contributing to or eliminating root causes of health inequities?	Measures of foundational capabilities: Are public health authorities increasing capacity and expertise needed to address priority health issues? Are public health authorities better able to provide core public health functions within their community?

Policy indicators (may not be in our control)

PHAB accountability metrics framework

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Context-specific
process measures
(workforce capabilities)

Advancing Public Health Measures of Effectiveness



- Increased reach to target populations
- Dissemination of information, products or evidence-based practices
- Quality enhancement of services or programs
- Quality enhancement of data systems

- Increased preventive behaviors

- Decreased incidence or prevalence of disease/outcome

Reference: McLees, Nawaz, Thomas & Young. Defining and Assessing Quality Improvement Outcomes: A Framework for Public Health. Am J Public Health. 2015 April ; 105(0 2): S167–S173. doi:10.2105/AJPH.2014.302533

Advancing Public Health Measures of Effectiveness



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Accountability metrics selection criteria

Framework	Metrics selection criteria
Advances health equity and an antiracist society (Indicators and process measures)	Measure addresses an area where health inequities exist Measure demonstrates zero acceptance of racism, xenophobia, violence, hate crimes or discrimination Measure is actionable by state and local public health, through policy change and community-level interventions
Community leadership and community-led metrics (Indicators and process measures)	Communities have provided input and have demonstrated support
Provides context for social determinants of health, systemic inequities resulting from systemic racism and oppression (Indicators)	Information is available to provide the community, societal, systemic, and political context that creates and upholds inequities. Opportunity exists to triangulate and integrate data across data sources
Disease outcomes used as indicators of progress . These are secondary to process measures of public health system accountability (Indicators)	Issue has been identified as a population health priority by community members and/or public health professionals Data are reportable at the county level or for similar geographic breakdowns, which may include census tract or Medicare Referral District Updated data are routinely available to ensure that the public health system does not rely on data that are old, outdated or no longer relevant. May include data from other sectors.

Accountability metrics selection criteria

	When applicable, data are reportable by race and ethnicity, gender, sexual orientation, age, disability, income level, insurance status or other relevant risk factor data.
Focus on governmental public health system accountability (Process measures and Indicators) Focus on data and data systems, community partnerships, and policy (Process measures)	State and local public health authorities have control over the measure, which includes influence. Measure successfully communicates what is expected of the governmental public health system, specifically state and local public health authorities. Measure aligns with core system functions in the Public Health Modernization Manual Allows for each public health authority to tailor how work toward achieving the metric is implemented in order to be responsive to local context and priorities. Context provided shows how locally tailored metrics are working toward common goals. Data are already collected, or a mechanism for data collection has been identified, which could include establishing data sharing agreements with other sectors. Updated data available on an annual basis Funding is available or likely to be available Local and state public health expertise exists Changes in public health system performance will be visible in the measure Measure is sensitive enough to capture improved performance or sensitive enough to show difference between years