

Healthy People 2010 Operational Definition

23-12. Increase the proportion of Tribal, State (including the District of Columbia), and local health agencies that have implemented a health improvement plan and increase the proportion of local health jurisdictions that have a health improvement plan linked with their State plan.

23-12b. State and the District of Columbia health agencies.

National Data Source	Salary Survey of State and Territorial Health Officials, Association of State and Territorial Health Officials (ASTHO).
State Data Source	Salary Survey of State and Territorial Health Officials, Association of State and Territorial Health Officials (ASTHO).
Healthy People 2000 Objective	Not applicable.
Changes since the 2000 Publication	Revised text (see Comments). Revised baseline (see Comments). Revised baseline year (see Comments).
Measure	Percent.
Baseline (Year)	56 (2007)
Target	100
Target-Setting Method	Total coverage. For a discussion of target-setting methods, see Part A, section 4.
Numerator	Number of States, including the District of Columbia, with a health improvement plan.
Denominator	50 States and the District of Columbia.
Population Targeted	State health agencies.
Questions Used To Obtain the National Baseline Data	Not applicable.
Expected Periodicity	Periodic.

Comments

A critical aspect of public health infrastructure assessment is monitoring the status of health improvement plans at the State and local level. A health improvement plan is a long-term, systematic effort to address health problems on the basis of the results of a community needs assessment. 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.

The text of Objective 23-12 was revised to focus on state and local health agencies. The original objective addressed health improvement plans for states and local jurisdictions.

The original baseline was set using the number of states (including the District of Columbia) that had developed objectives for the year 2000 as a proxy for the number of states with health improvement plans. Data on the actual number of states with health improvement plans became available with the 2007 Salary Survey of State and Territorial Health Officials. As a result, the original 1997 baseline of 78 percent has been replaced with the 2007 baseline of 56 percent. The target (100 percent), based on the target-setting method of total coverage, did not change.

See Appendix A for focus area contact information.