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Additional Variables (not included in questionnaire)

nacchoid	Unique identifier of Local Health Departments
c0population	Size of population served (2014 Census estimate)
c0govcat	2016 LHD governance classification 1=unit of state government 2=unit of local government 3=unit governed by both state and local authorities
c0jurisdiction	2016 LHD jurisdiction classification
c0module	Module received 0= did not receive module 1= received module 1 questions 2= received module 2 questions
c0state	State
c0coreweight_s	Scale weights for core questionnaire variables (to make statistics representative of all LHDs as well as to compensate for varying-non response among population categories)
c0coreweight_p	Proportional weight for core questionnaire variables (to compensate for varying-non response among population categories-frequencies represent respondent count)
c0modweight1	Weight for module 1 variables (to compensate for sampling and varying-non response among population categories)
c0modweight2	Weight for module 2 variables (to compensate for sampling and varying-non response among population categories)

Contact Information

These fields are pre-filled in the Web-based version of your questionnaire. Please update any information that is no longer correct. If your LHD has a website, a Twitter account, and/or a Facebook account, please provide the information below.

LHD Name	(c1q1)
Address	(c1q6)
Address 2	(c1q6a)
City	(c1q7)
Zip	(c1q9)

Jurisdiction and Governance

1. Is your LHD currently part of a combined health and human services agency? (c2q501)
 - ☐ [1] Yes → *(If checked, answer question 2)*
 - ☐ [0] No → *(If checked, answer question 3)*
2. For respondents who selected “Yes” for question 1, answer question 2.
Has your LHD been part of a combined health and human services agency for all of the past three years? (c2q502)
 - ☐ [1] Yes
 - ☐ [0] No
3. For respondents who selected “No” for question 1, answer question 3.
Was your LHD part of a combined health and human services agency for any part of the past three years? (c2q503)
 - ☐ [1] Yes
 - ☐ [0] No
4. Does your LHD have one or more local boards of health? (c2q301)
 - ☐ [1] Yes
 - ☐ [0] No → *(If checked, skip question 5)*
5. Check each action that your local board of health has *final* authority to do.
(Select all that apply) (Variable values: unchecked= 0, checked= 1)
 - ☐ Hire or fire agency head (c2q6a)
 - ☐ Approve the LHD budget (c2q7a)
 - ☐ Adopt public health regulations (c2q8a)
 - ☐ Set and impose fees (c2q9a)
 - ☐ Impose taxes for public health (c2q10a)
 - ☐ Request a public health levy (c2q11a)
 - ☐ Advise LHD or elected officials on policies, programs, and budgets (c2q14a)
 - ☐ Set policies, goals, and priorities that guide the LHD (c2q15a)
 - ☐ Impose or enforce quarantine or isolation orders (c2q17a)
 - ☐ Other (please specify): (c2q16a) _____ (c2q16atext) _____

Activities

Instructions
<p>For each activity in the charts on the following pages, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction <u>during the past year</u>.</p> <ul style="list-style-type: none"> • Indicate whether your LHD performed the activity and/or contracted out for it. • “Contracted out” is defined as "Pay another organization to perform this activity or service on behalf of your LHD". • Select "Performed by LHD directly" AND "Contacted out by LHD" if your LHD both performed the activity directly <u>and</u> contracted out for it. • “Provided by others in community independent of LHD funding” means that other organizations provide these services and do not receive funding from the LHD to provide them. <ul style="list-style-type: none"> ○ Other organizations include but are not limited to other state and local government agencies, other healthcare providers (e.g., private physicians, non-LHD clinics, hospitals), schools, and community organizations. • If a service is provided by the LHD <u>and</u> others in the community, select how the service is provided by the LHD (directly, contracted out, or both) AND select "Provided by others in community independent of LHD funding." • Do not leave any rows blank.

Immunization

- 6. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year.** (For each row, select all that apply)
(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
Adult immunizations	c6q55a	c6q55b	c6q55i	c6q55f	c6q55g
Childhood immunizations	c6q56a	c6q56b	c6q56i	c6q56f	c6q56g

Screening for Diseases/Conditions

7. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)
(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
HIV/AIDS	c6q57a	c6q57b	c6q57i	c6q57f	c6q57g
Other STDs	c6q58a	c6q58b	c6q58i	c6q58f	c6q58g
Tuberculosis	c6q59a	c6q59b	c6q59i	c6q59f	c6q59g
Cancer	c6q60a	c6q60b	c6q60i	c6q60f	c6q60g
Cardiovascular disease	c6q61a	c6q61b	c6q61i	c6q61f	c6q61g
Diabetes	c6q62a	c6q62b	c6q62i	c6q62f	c6q62g
High blood pressure	c6q63a	c6q63b	c6q63i	c6q63f	c6q63g
Blood lead	c6q64a	c6q64b	c6q64i	c6q64f	c6q64g
BMI (Body Mass Index)	c6q142a	c6q142b	c6q142i	c6q142f	c6q142g

Treatment for Communicable Diseases

8. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)
(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
HIV/AIDS	c6q65a	c6q65b	c6q65i	c6q65f	c6q65g
Other STDs	c6q66a	c6q66b	c6q66i	c6q66f	c6q66g
Tuberculosis	c6q67a	c6q67b	c6q67i	c6q67f	c6q67g

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Maternal and Child Health

9. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
Family planning	c6q68a	c6q68b	c6q68i	c6q68f	c6q68g
Prenatal care	c6q69a	c6q69b	c6q69i	c6q69f	c6q69g
Obstetrical care	c6q70a	c6q70b	c6q70i	c6q70f	c6q70g
WIC	c6q71a	c6q71b	c6q71i	c6q71f	c6q71g
MCH home visits	c6q72a	c6q72b	c6q72i	c6q72f	c6q72g
EPSDT	c6q73a	c6q73b	c6q73i	c6q73f	c6q73g
Well child clinic	c6q74a	c6q74b	c6q74i	c6q74f	c6q74g

Other Health Services

10. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
Comprehensive primary care	c6q75a	c6q75b	c6q75i	c6q75f	c6q75g
Home health care	c6q76a	c6q76b	c6q76i	c6q76f	c6q76g
Oral health	c6q77a	c6q77b	c6q77i	c6q77f	c6q77g
Behavioral/mental health services	c6q78a	c6q78b	c6q78i	c6q78f	c6q78g
Substance abuse services	c6q79a	c6q79b	c6q79i	c6q79f	c6q79g

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Epidemiology and Surveillance Activities

11. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
Communicable/infectious disease	c6q80a	c6q80b	c6q80i	c6q80f	c6q80g
Chronic disease	c6q81a	c6q81b	c6q81i	c6q81f	c6q81g
Injury	c6q82a	c6q82b	c6q82i	c6q82f	c6q82g
Behavioral risk factors	c6q83a	c6q83b	c6q83i	c6q83f	c6q83g
Environmental health	c6q84a	c6q84b	c6q84i	c6q84f	c6q84g
Syndromic surveillance	c6q85a	c6q85b	c6q85i	c6q85f	c6q85g
Maternal and child health	c6q86a	c6q86b	c6q86i	c6q86f	c6q86g

Population-based Primary Prevention Activities

12. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
Injury	c6q87a	c6q87b	c6q87i	c6q87f	c6q87g
Violence	c6q92a	c6q92b	c6q92i	c6q92f	c6q92g
Unintended pregnancy	c6q88a	c6q88b	c6q88i	c6q88f	c6q88g
Chronic disease programs	c6q89a	c6q89b	c6q89i	c6q89f	c6q89g
Nutrition	c6q90a	c6q90b	c6q90i	c6q90f	c6q90g
Physical activity	c6q91a	c6q91b	c6q91i	c6q91f	c6q91g
Tobacco	c6q93a	c6q93b	c6q93i	c6q93f	c6q93g
Substance abuse	c6q94a	c6q94b	c6q94i	c6q94f	c6q94g
Mental illness	c6q95a	c6q95b	c6q95i	c6q95f	c6q95g

Regulation, Inspection and/or Licensing Activities

13. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)

(Variable values: unchecked= 0, checked= 1)

If the activity does not exist in your jurisdiction, please select “Not available in the community”.

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
Mobile homes	c6q96a	c6q96b	c6q96i	c6q96f	c6q96g
Campgrounds & RVs	c6q97a	c6q97b	c6q97i	c6q97f	c6q97g
Solid waste disposal sites	c6q98a	c6q98b	c6q98i	c6q98f	c6q98g
Solid waste haulers	c6q99a	c6q99b	c6q99i	c6q99f	c6q99g
Septic systems	c6q100a	c6q100b	c6q100i	c6q100f	c6q100g
Hotels/motels	c6q101a	c6q101b	c6q101i	c6q101f	c6q101g
Schools/daycare	c6q102a	c6q102b	c6q102i	c6q102f	c6q102g
Children's camps	c6q103a	c6q103b	c6q103i	c6q103f	c6q103g
Body art (tattoos, piercings)	c6q105a	c6q105b	c6q105i	c6q105f	c6q105g
Recreational water (e.g., pools, lakes, beaches)	c6q143a	c6q143b	c6q143i	c6q143f	c6q143g
Tobacco retailers	c6q107a	c6q107b	c6q107i	c6q107f	c6q107g
Smoke-free ordinances	c6q108a	c6q108b	c6q108i	c6q108f	c6q108g
Lead inspection	c6q109a	c6q109b	c6q109i	c6q109f	c6q109g
Food processing	c6q110a	c6q110b	c6q110i	c6q110f	c6q110g
Milk processing	c6q111a	c6q111b	c6q111i	c6q111f	c6q111g
Public drinking water	c6q112a	c6q112b	c6q112i	c6q112f	c6q112g
Private drinking water	c6q113a	c6q113b	c6q113i	c6q113f	c6q113g
Food service establishments	c6q114a	c6q114b	c6q114i	c6q114f	c6q114g
Health-related facilities	c6q115a	c6q115b	c6q115i	c6q115f	c6q115g
Housing (inspections)	c6q116a	c6q116b	c6q116i	c6q116f	c6q116g

Other Environmental Health Activities

14. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
Indoor air quality	c6q117a	c6q117b	c6q117i	c6q117f	c6q117g
Food safety education	c6q118a	c6q118b	c6q118i	c6q118f	c6q118g
Radiation control	c6q119a	c6q119b	c6q119i	c6q119f	c6q119g
Vector control	c6q120a	c6q120b	c6q120i	c6q120f	c6q120g
Land use planning	c6q121a	c6q121b	c6q121i	c6q121f	c6q121g
Groundwater protection	c6q122a	c6q122b	c6q122i	c6q122f	c6q122g
Surface water protection	c6q123a	c6q123b	c6q123i	c6q123f	c6q123g
Hazmat response	c6q124a	c6q124b	c6q124i	c6q124f	c6q124g
Hazardous waste disposal	c6q125a	c6q125b	c6q125i	c6q125f	c6q125g
Air pollution	c6q127a	c6q127b	c6q127i	c6q127f	c6q127g
Noise pollution	c6q128a	c6q128b	c6q128i	c6q128f	c6q128g
Public health nuisance abatement	c6q144a	c6q144b	c6q144i	c6q144f	c6q144g

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Other Activities

15. For each activity, check whether and how your LHD and other organizations provided that activity or service in your jurisdiction during the past year. (For each row, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	Performed by LHD directly	Contracted out by LHD	Provided by others in community independent of LHD funding	Not available in community	Don't Know
Collection of unused pharmaceuticals	c6q129a	c6q129b	c6q129i	c6q129f	c6q129g
Emergency medical services	c6q130a	c6q130b	c6q130i	c6q130f	c6q130g
Animal control	c6q131a	c6q131b	c6q131i	c6q131f	c6q131g
Occupational safety and health	c6q132a	c6q132b	c6q132i	c6q132f	c6q132g
Laboratory services	c6q134a	c6q134b	c6q134i	c6q134f	c6q134g
Outreach and enrollment for medical insurance (include Medicaid)	c6q135a	c6q135b	c6q135i	c6q135f	c6q135g
School-based clinics	c6q136a	c6q136b	c6q136i	c6q136f	c6q136g
School health	c6q137a	c6q137b	c6q137i	c6q137f	c6q137g
Asthma prevention and/or management	c6q138a	c6q138b	c6q138i	c6q138f	c6q138g
Correctional health	c6q139a	c6q139b	c6q139i	c6q139f	c6q139g
Vital records	c6q140a	c6q140b	c6q140i	c6q140f	c6q140g

Changes in Services

Instructions
<p>The following question asks about changes in level of service delivery in a number of program areas.</p> <p>We realize that not all services and functions may fall clearly into a particular service category. Please use your best judgment to classify your services and functions into the general categories.</p>

Glossary	
Immunization	Adult and childhood immunizations
Epidemiology and surveillance	Epidemiology/surveillance of infectious diseases, chronic diseases, injury, behavioral risk factors, environmental health, and/or maternal and child health, and/or Syndromic surveillance
Communicable disease screening/treatment	Screening/treatment of HIV/AIDS, other STDs, and/or tuberculosis
Blood lead screening	Testing the amount of lead in blood
High blood pressure screening	Screening for high blood pressure
Diabetes screening	Screening for diabetes
Maternal and child health services	Family planning, prenatal care, obstetrical care, WIC, home visits, EPSDT, and/or well-child clinics
Obesity prevention	Efforts intended to encourage healthy eating and active living
Tobacco, alcohol, or other drug prevention	Efforts to reduce or prevent tobacco, alcohol, or other drug use
Emergency preparedness	Emergency preparedness activities
Environmental health, including food safety	Monitoring indoor air quality, radiation control, vector control, land use planning, ground/surface water protection, hazmat response, hazardous waste disposal, collection of unused pharmaceuticals, air and noise pollution prevention, and/or other regulation, inspection, or licensing activities; food processing, milk processing, regulation of food service establishments, and/or food safety education

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16. For each of the following service categories, please indicate if your LHD provided services or functions at any time between January 1 and December 31, 2015.

Then, for each programmatic area in which your LHD provided services during calendar year 2015, indicate how the level of service delivery changed during 2015 in terms of budget or number of staff allocated to work in this area. (For each row, select only one)

We realize that some LHDs provide many different services within these programmatic areas and not all of them may have changed in the same way. Please indicate the overall direction of change: reduced, expanded, or little/no change.

Between January 1, 2015 and December 31, 2015, my LHD...						
	Provided services at any time		Reduced services [1]	Little or no change in service delivery [2]	Expanded services [3]	Don't know [4]
	Yes [1]	No [0]				
Immunization	c10q404a		c10q404f			
Epidemiology and surveillance	c10q405a		c10q405f			
Communicable disease screening or treatment	c10q406a		c10q406f			
Blood lead screening	c10q415a		c10q415f			
High blood pressure screening	c10q416a		c10q416f			
Diabetes screening	c10q417a		c10q417f			
Maternal and child health services	c10q408a		c10q408f			
Obesity prevention	c10q418a		c10q418f			
Tobacco, alcohol, or other drug prevention	c10q419a		c10q419f			
Emergency preparedness	c10q411a		c10q411f			
Environmental health, including food safety	c10q420a		c10q420f			

Funding

*****Select LHDs in Oklahoma, South Dakota, and Vermont will not receive questions 17–19 online*****

Instructions
The purpose of this section is to collect fiscal data from LHDs.
NACCHO is requesting total expenditures, total revenues, and selected source-specific revenue figures for the most recently completed fiscal year. While reporting on revenues and expenditures, please provide actual revenues and expenditures from your most recently completed fiscal year..

17. Ending date of the LHD's most recently completed fiscal year. (MM/DD/YY)

 (c3q14)

18. What were the LHD's total expenditures and total revenues for the most recently completed fiscal year? (Please enter whole number; no commas, decimals or spaces)

	Total expenditures	Total revenues
Most recently completed fiscal year	(c3q15)	(c3q16)

Reporting Funding by Source

Instructions
This section asks you to report the amount of revenue that your LHD receives from select revenue sources. LHD revenues from any other sources can be reported as a single number in the “Other revenue sources” box at the bottom of the chart.

Sources of Revenue	Definition
Local sources	All income originating from local government, including allocations from county, city, or town government; School Boards; taxing districts; property tax millage, etc.
State sources (EXCLUDING pass-through from Federal)	All income received from state agencies that originates from state revenue sources.
Federal sources (passed through by State)	All income passed through to LHDs by state department of health or other state agencies. Some examples include federal emergency preparedness grants, section 317 immunization grants, and preventative health block grants. Do NOT include Medicaid/Medicare reimbursements, which are reported in separate boxes.
Federal sources (direct)	All income received by your LHD directly from the federal government excluding Medicaid/Medicare reimbursements. Some examples include direct funds from CDC, HRSA, DHHS, and Dept. of Homeland Security, etc.
Medicaid	All income received from Medicaid including Medicaid HMO capitation and any “bill-aboves” paid by a Medicaid HMO.
Medicare	All income received from Medicare, including Medicare HMO payments.
Private health insurance	All income received from private health insurers.
Patient personal fees	Fees for provision of health care services paid directly by the patient.
Non-clinical fees and fines	All fees or fines NOT related to provision of health care services, including vital records fees and regulatory fees and fines. Revenues from permits and licenses should also be included in this category.
Private foundations	All income received from private foundations.
Other	Any sources of revenue not included in the categories above (e.g., donations, interest income). DO NOT include revenues from categories above in the other revenue sources category, even if you are unable to provide amounts for some of categories above. DO NOT include transfers from reserve or contingency funds.

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19. For each of the sources of revenue below, indicate whether your LHD receives any revenue from that source.

- If you are not sure if your LHD receives that revenue source, please select "Not Sure".

Then, for each of the sources of revenue your LHD receives, indicate the dollar amount of your LHD received from that source for the most recently completed fiscal year.

- If you are not sure, please select "Not Sure".

Source of Revenue	Does your LHD receive any revenue from this source?			Dollar amount of revenue received from <u>most recently completed fiscal year</u>
	Yes [1]	No [0]	Not sure [2]	Amount of Revenue
Local sources	c3q417p			c3q17p
State sources (EXCLUDING pass-through from Federal)	c3q417c			c3q17c
Federal sources (passed through by State)	c3q417d			c3q17d
Federal sources (direct)	c3q417e			c3q17e
Medicaid	c3q417f			c3q17r*
Medicare	c3q417g			
Private health insurance	c3q417i			c3q17i
Patient personal fees	c3q417j			c3q17j
Non-clinical fees and fines	c3q417v			c3q17v
Private foundations	c3q417h			c3q17h
Other, (please specify):	c3q17mtext			c3q17m

**Respondents provided combined amount of revenue received from Medicare and Medicaid.*

Budget Cuts

24. My LHD's current fiscal year budget is ... (Select only one) (c10q301)

- ☐ [1] Less than the previous year's budget
- ☐ [2] Approximately the same (within plus or minus one percent) as the previous year's budget
→ *(If checked, skip question 25)*
- ☐ [3] Greater than the previous year's budget → *(If checked, skip question 25)*
- ☐ [4] Do not know → *(If checked, skip question 25)*

25. By approximately how much has this year's budget decreased, compared to the previous year?
(Select only one) (c10q301b)

- ☐ [1] 1 – 2.9%
- ☐ [2] 3 – 4.9%
- ☐ [3] 5 – 9.9%
- ☐ [4] 10% or more

26. I expect my LHD's budget in the next fiscal year will be... (Select only one) (c10q303)

- ☐ [1] Less than the current year's budget
- ☐ [2] Approximately the same (within plus or minus one percent) as the current year's budget
- ☐ [3] Greater than the current year's budget
- ☐ [4] Do not know

LHD Top Executive

Instructions

The following set of questions is about your LHD's top executive.

The top executive is defined as the highest ranking employee with administrative and managerial authority at the level of your LHD. In certain cases, this might be the director of a regional or district office. The head of your state health agency should NOT be reported as your LHD's top executive.

If your LHD employs a physician to serve as health officer or medical director in a separate position from the top executive, you will provide information on this position in a separate set of questions at the end of this section.

27. Is the top executive position currently vacant, with another staff member or an interim top executive assuming the job duties? (c4q501)

- ☐ [1] Yes → *(If checked, skip question 33)*
☐ [0] No

****For respondents who selected “Yes” for question 27, please answer questions 28–32, and questions 34–38 regarding the person who is in the acting or interim position of top executive.****

29. Title of your LHD’s top executive: _____ (c4q23text)

30. What date did the top executive assume this position? (MM/DD/YYYY)

_____ (c4q24)

31. What is the work status for the top executive? (c4q26)

- ☐ [1] Full-time
☐ [2] Part-time

32. Is this his/her first position as the top executive of an LHD? (c4q25)

- ☐ [1] Yes
☐ [0] No
☐ [2] Unknown

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33. For respondents who selected “No” for question 27, answer question 33.

Immediately prior to assuming the top executive position, what position did the LHD’s current top executive hold? (Select only one) (c4q203)

- ☐ [1] Top executive at another LHD
- ☐ [2] Another position at current LHD
- ☐ [3] Position other than top executive at another LHD
- ☐ [4] Position in a state health agency
- ☐ [5] Position at governmental agency other than public health
- ☐ [6] Some other position related to public health
- ☐ [7] Some other position NOT related to public health
- ☐ [8] Do not know

34. What is the race of the person in the top executive position? (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ White (c4q27a)
- ☐ Black or African American (c4q27b)
- ☐ American Indian or Alaska Native (c4q27c)
- ☐ Asian (c4q27d)
- ☐ Native Hawaiian or Other Pacific Islander (c4q27e)
- ☐ Some other race (c4q27f)

35. What is the ethnicity of the person in the top executive position? (c4q28)

- ☐ [1] Hispanic or Latino
- ☐ [0] Not Hispanic or Latino

36. What is the gender of the person in the top executive position? (c4q29)

- ☐ [1] Male
- ☐ [2] Female

37. What is the age of the person in the top executive position? (Please enter whole number)

(c4q30)

LHD Top Executive - Education

38. Indicate *all* degrees that your top executive holds (not just the highest degree).

(Select all that apply)

(Variable values: unchecked= 0, checked= 1)

Associate Degree

- ☐ AD/ASN (c4q31a)
- ☐ AA(c4q31b)
- ☐ Other (please specify) (c4q31c) (c4q31ctext)

Bachelors Degree

- ☐ BA (c4q32a)
- ☐ BS (c4q32b)
- ☐ BSN or BAN (c4q32c)
- ☐ Bachelors degree – type unknown or other (please specify) (c4q32d) (c4q32dtext)

Masters Degree

- ☐ MA (c4q33e)
- ☐ MS (c4q33f)
- ☐ MPH (c4q33a)
- ☐ MSN or MN (c4q33b)
- ☐ MBA (c4q33c)
- ☐ Other (please specify) (c4q33d) (c4q33dtext)

Doctoral Degree

- ☐ MD (c4q34a)
- ☐ DO (c4q34b)
- ☐ DNP (c4q34c)
- ☐ DrPH (c4q34d)
- ☐ DDS (c4q34e)
- ☐ DVM (c4q34f)
- ☐ JD (c4q34g)
- ☐ PhD (please specify) (c4q34h) (c4q34htext)
- ☐ Other (please specify) (c4q34i) (c4q34itext)

LHD Top Executive - Health Officer

39. Does your LHD have a health officer or medical director position that is separate from the top executive? (c4q301)

- ☐ [1] Yes
- ☐ [0] No → *(If checked, skip question 40)*

40. Is the work status of health officer/medical director full-time or part-time? (c4q302)

- ☐ [1] Full-time
- ☐ [2] Part-time

Workforce

41. How many individuals currently work for your LHD?

- Please include all regular full-time, part-time, and contractual employees.

(c5q36)

42. What is the total Full-time Equivalents (FTEs) workforce at your LHD?

- Please include all regular full-time, part-time, and contractual employees.
- To calculate FTEs, count a full-time employee as 1 FTE, a half-time employee as a 0.5 FTE, etc.

(c5q37)

43. What does the FTE number at your LHD include? (Select only one) (c5q38)

- ☐ [1] Currently filled positions only
- ☐ [2] Currently funded positions (whether or not filled)
- ☐ [3] Other (please specify): (c5q38text)
- ☐ [4] Unknown

Occupation Definitions

Occupation Name	Definition
Agency leadership	Oversees the operations of the overall agency or a major subdivision of public health services. Include all top agency executives regardless of education or licensing. (e.g., health commissioner, health officer, public health administrator, deputy director, bureau chief, division director)
Registered nurse	Registered nurse conducting public health or clinical nursing. (e.g., school nurse, community health nurse, nurse practitioner)
Licensed practical or vocational nurse	Licensed nurse (other than registered nurse) who provides routine care for patients, often under supervision. (e.g. LPN, LVN, care nurse, home health nurse)
Nursing and home health aide	Unlicensed personnel who provide basic patient care and assistance with activities of daily living in a health care facility or the patient's home. (e.g., nursing assistant, patient care assistant/ technician, home health aide or assistant, personal care aide)
Public health physician	Licensed physician who identifies persons or groups at risk of illness/disability and develops, implements and evaluates program/interventions designed to prevent, treat or improve reduce such risks. May also provide direct medical services to clients. (e.g. public health physician, preventative medicine physician)
Oral health care professional	Diagnoses and treats problems with teeth, gums, and the mouth. May also educate individuals or groups on proper oral health activities, such as diet choices impacting oral health. (e.g. public health dentist, dental hygienist, dental assistants)

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Occupation Name (cont.)	Definition (cont.)
Environmental health worker	Investigates, monitor, and identify problems or risks that may affect the environment (e.g. food safety, air and water quality, and solid waste) and, consequently, the health of an individual or group. (e.g. environmentalist, environmental health specialist, scientist, engineer, occupational health worker or technician, sanitarian, inspector)
Laboratory worker	Plans, designs, and implements laboratory testing procedures, and performs analyses that provide data to diagnose, treat, and monitor disease and environmental hazards. (e.g. laboratorian, laboratory scientist, laboratory technician, laboratory aides or assistants, medical technologists)
Epidemiologist/Statistician	Conducts on-going surveillance, field investigations, analytic studies and evaluation of disease occurrence and disease potential to make recommendations on appropriate interventions. May also collect data and report vital statistics. (e.g. epidemiologist, biostatistician, public health scientist or researcher)
Health educator	Develops and implements educational programs and strategies to support and modify health-related behaviors of individuals and communities, and promotes the effective use of health programs and services. (e.g., health educator, health education coordinator/specialist)
Community health worker	Facilitates access to culturally appropriate social support, informal counseling, and resources for programs promoting individual and community health. (e.g., peer health promoter, lay health advocate, community health representative) Exclude health educators.
Nutritionist	Develops and implements interventions related to nutrition, the nutrition environment, and food and nutrition policy. May also provide nutritional counseling and evaluate the effectiveness of current interventions. (e.g. dietician, nutritionist, WIC lactation staff, WIC nutrition staff)

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Occupation Name (cont.)	Definition (cont.)
Information systems specialist	Analyzes business and data processing problems to implement and improve computer systems. Provides technical assistance to maintain computer systems and hardware/software issues. (e.g. computer system analyst, network and database administrator/analyst/manager, software engineer, computer support specialist)
Public information professional	Serves as communications coordinator or spokesperson for the agency to provide information about public health issues to the media and public. (e.g., public information officer, public information specialist)
Behavioral health staff	Develops and implements strategies to improve community mental health status. May also provide direct behavioral health services to clients regarding mental, social, and behavioral issues. (e.g. public health social worker, HIV/AIDS counselor, behavioral counselor, social services counselor, mental health and substance abuse counselor, psychologist, psychiatrist)
Preparedness staff	Manages or develops the plans, procedures, and training programs involving the public health response to all-hazards events. (e.g. emergency preparedness coordinator, incident manager, emergency preparedness manager, emergency preparedness specialist)
Animal control worker	Handles animals for the purpose of investigating or controlling mistreated, abandoned, dangerous, or unattended animals. (e.g., animal control officer, animal warden, humane officer)
Business and financial operations staff	Performs specialized work in areas of business, finance, accounting, human resources and legal issues. (e.g., financial analyst, human resources specialist, grant and contracts manager, legal personnel)
Office and administrative support staff	Performs administrative tasks and clerical duties. (e.g., administrative assistant, secretary, receptionist, office clerk, maintenance staff, operator)

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Occupations Employed

44. Indicate which of the following categories of public health workers are currently employed by your LHD.

- Categorize staff according to their primary job responsibilities or function, **not** by their degree or education.
 - For example, if a registered nurse is serving as a top executive, please count this individual as “agency leadership” in the chart.
- Please indicate FTEs for **all** regular full-time, part-time and contractual employees.
 - To calculate FTEs, count a full-time employee as 1 FTE, a half-time employee as a 0.5 FTE, etc.
- Note that this is not intended to be an exhaustive list of occupational categories.

(Variable values: unchecked= 0, checked= 1; for variables c5q##c)

Occupation (Definitions for each occupation provided on prior pages)	Does your LHD currently employ staff in this classification?		Number of FTEs currently Employed	Data on FTEs not available
	Yes [1]	No [0]		
Agency leadership	c5q63a		c5q63b	c5q63c
Registered nurse	c5q43a		c5q43b	c5q43c
Licensed practical or vocational nurse	c5q57a		c5q57b	c5q57c
Nursing aide and home health aide	c5q58a		c5q58b	c5q58c
Public health physician	c5q44a		c5q44b	c5q44c
Oral health care professional	c5q59a		c5q59b	c5q59c
Environmental health worker	c5q55a		c5q55b	c5q55c
Laboratory worker	c5q60a		c5q60b	c5q60c
Epidemiologist/Statistician	c5q47a		c5q47b	c5q47c
Health educator	c5q48a		c5q48b	c5q48c
Community health worker	c5q61a		c5q61b	c5q61c
Nutritionist	c5q49a		c5q49b	c5q49c
Information systems specialist	c5q50a		c5q50b	c5q50c
Public information professional	c5q51a		c5q51b	c5q51c
Behavioral health staff	c5q52a		c5q52b	c5q52c
Preparedness staff	c5q56a		c5q56b	c5q56c
Animal control worker	c5q62a		c5q62b	c5q62c
Business and financial operations staff	c5q64a		c5q64b	c5q64c
Office and administrative support staff	c5q65a		c5q65b	c5q65c

45. Does your LHD have a designated Emergency Preparedness coordinator? (c5q53a)

- ☐ [1] Yes
☐ [0] No

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Staffing Cuts

Instructions

The following questions ask about changes to your LHD workforce between January 1 and December 31, 2015.

Please provide your response in terms of number of employees - whether full- or part-time - rather than (FTEs).

46. How many employees were affected by each of the following *workforce reductions* between January 1 and December 31, 2015? Enter "0" if no employees were affected. (Please enter whole number; no commas, decimals or spaces.)

Enter "0" if no employees were affected or if your LHD did not experience the select workforce reduction.

a) Number of employees <i>laid off</i>	c10q306
b) Number of employees <i>lost through attrition and not replaced</i> because of hiring freezes or budget cuts	c10q307
c) Number of employees who had their <i>working hours reduced</i> for budgetary reasons (DO NOT include employees placed on mandatory furlough)	c10q308
d) Number of employees placed on <i>mandatory furlough</i> for budgetary reasons	c10q309

47. How many employees did your LHD *hire* for each of the following reasons between January 1 and December 31, 2015? Enter "0" if no employees were hired. (Please enter whole number; no commas, decimals or spaces.)

Enter "0" if no employees were affected or if your LHD did not have the select hiring reason occur.

a) Number of <i>new positions</i> filled	c10q401
b) Number of <i>vacancies</i> filled due to <i>lift of previous hiring freeze</i>	c10q402
c) Number of <i>vacancies</i> filled due to <i>employee turnover</i>	c10q403

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Human Resources Issues

*****Questions 47a, 47b, and 47c were sent to a statistical sample *****

47a.How many LHD employees retired in the last year? (m6q196)

47b.For which purposes does your agency engage the following types of volunteers?
(For each purpose column, select all that apply) (Variable values: unchecked= 0, checked= 1)

Volunteer Type	Day-to-Day LHD Functions	Emergency Preparedness and Response
Community Emergency Response Team (CERT)	m6q501a	m6q502a
Medical Reserve Corps (MRC)	m6q501b	m6q502b
American Red Cross	m6q501c	m6q502c
Other organized groups	m6q501d	m6q502d
Individuals recruited independently by your LHD	m6q501e	m6q502e
N/A - No volunteers engaged	m6q501f	m6q502f

47c.Does your LHD use core competencies for public health workers developed by the Council on Linkages (<http://www.phf.org/link/corecompetencies.htm>) in any of the following ways?
(Select all that apply) (Variable values: unchecked= 0, checked= 1)

- ☐ Writing position descriptions (m6q204e)
- ☐ Conducting staff performance evaluations (m6q204g)
- ☐ Assessing staff training needs (m6q204c)
- ☐ Developing staff training plans (m6q204d)
- ☐ Other use (please specify): (m6q204f) (m6q204ftext)
- ☐ Have not used (m6q204b)

Guide to Community Preventive Services

48. Which of the following best describes the extent to which the *Guide to Community Preventive Services* (*Community Guide* or <http://www.thecommunityguide.org>) has been used to support or enhance decision making in your LHD over the past 12 months? (Select only one) (c11q301)

- ☐ [1] LHD staff have not used the Community Guide
- ☐ [2] LHD staff in some programmatic areas have used the Community Guide
- ☐ [3] LHD staff consistently use the Community Guide in all relevant programmatic areas
- ☐ [4] Do not know the extent of use of Community Guide within LHD

Policy-making and Advocacy

49. Indicate areas where your LHD has been actively involved in policy or advocacy activities in the past two years. (Select all that apply) (Variable values: unchecked= 0, checked= 1)

- ☐ Affordable housing (c12q260a)
- ☐ Animal control or rabies (c12q260l)
- ☐ Body art (c12q260m)
- ☐ Criminal justice system (c12q260b)
- ☐ Education (c12q260c)
- ☐ Emergency preparedness and response (c12q260n)
- ☐ Food safety (c12q260o)
- ☐ Funding for access to healthcare (c12q260e)
- ☐ Infectious disease (e.g., vaccination) (c12q260w)
- ☐ Injury or violence prevention (c12q260p)
- ☐ Labor (c12q260g)
- ☐ Land use (c12q260f)
- ☐ Mental health (c12q260q)
- ☐ Obesity/chronic disease (c12q260r) → *(If checked, answer question 51)*
- ☐ Occupational health and safety (c12q260h)
- ☐ Oral health (c12q260s)
- ☐ Safe and healthy housing (c12q260t)
- ☐ Tobacco, alcohol, or other drugs (c12q260u) → *(If checked, answer question 50)*
- ☐ Waste, water, or sanitation (c12q260v)
- ☐ Other (please specify): (c12q260j) (c12q260text)
- ☐ None (c12q260k)

50. For respondents who selected “Tobacco, alcohol, or other drugs” in question 49, answer question 50.

Indicate areas where your LHD has been actively involved in policy or advocacy activities focused on tobacco, alcohol, or other drugs in the past two years. (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Smoke-free indoor air (e.g., workplace, multi-unit residential) (c12q401a)
- ☐ Smoke-free outdoor air (e.g., parks, beaches, playgrounds, sporting events) (c12q401b)
- ☐ Reducing sale of tobacco to minors (c12q401c)
- ☐ Raising cigarette taxes (c12q401d)
- ☐ Raising alcohol taxes (c12q401e)
- ☐ Diverting certain drug offenders into treatment rather than incarceration (c12q401f)
- ☐ Reducing alcohol or drug impaired driving (c12q401g)
- ☐ Reducing exposure to alcohol or tobacco advertising (c12q401h)
- ☐ Regulating e-cigarettes or other electronic smoking devices (c12q401j)
- ☐ Increasing use of medications to prevent drug overdose (e.g., Naloxone) (c12q401k)
- ☐ Increasing access to clean syringes (c12q401l)
- ☐ Other (please specify): (c12q401i) (c12q401itext)

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51. For respondents who selected “Obesity/chronic disease” in question 49, answer question 51.

Indicate areas where your LHD has been actively involved in policy or advocacy activities focused on obesity or chronic disease in the past two years. (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Community level urban design and land use policies to encourage physical activity (c12q402a)
- ☐ Active transportation options (c12q402b)
- ☐ School or child care policies that encourage physical activity (c12q402c)
- ☐ School or child care policies that reduce availability of unhealthy foods (c12q402d)
- ☐ Expanding access to recreational facilities (c12q402e)
- ☐ Nutritional labeling (c12q402f)
- ☐ Increasing retail availability of fruits and vegetables (c12q402g)
- ☐ Limiting fast food outlets (c12q402h)
- ☐ Fiscal policies to decrease consumption of unhealthy foods or beverages (c12q402j)
- ☐ Policies to promote breastfeeding (c12q402k)
- ☐ Other (please specify): (c12q402i) _____ (c12q402itext)

52. Has a new local public health ordinance or regulation been adopted in your jurisdiction in the past two years? (c12q261)

- ☐ [1] Yes → *(If checked, answer question 54)*
- ☐ [0] No

53. Has there been a substantive revision to an existing public health ordinance or regulation in your jurisdiction in the past two years? (c12q501)

- ☐ Yes → *(If checked, answer question 54)*
- ☐ No

54. For respondents who selected “Yes” for question 52 OR selected “Yes” for question 53, answer question 54.

Indicate each area in which a new local public health ordinance or regulation was adopted or substantively revised in the past two years. (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Environment (c12q502h)
- ☐ Funding for access to healthcare (c12q502i)
- ☐ Occupational health and safety (c12q502j)
- ☐ Tobacco, alcohol, or other drugs (c12q502k)
- ☐ Obesity/chronic disease (c12q502l)
- ☐ Injury prevention (c12q502m)
- ☐ Violence prevention (c12q502n)
- ☐ Safe and healthy housing (c12q502o)
- ☐ Infectious disease (e.g., vaccination) (c12q502r)
- ☐ Oral health (c12q502p)
- ☐ Mental health (c12q502q)
- ☐ Emergency preparedness and response (c12q502b)
- ☐ Some other area (please specify): (c12q502f) _____ (c12q502ftext)
- ☐ None (c12q502g)

Community Health Assessment and Planning

Definition
Community health assessment can be defined as regularly and systematically collecting, analyzing, and making available information on the health of a community, including statistics on health status, community health needs, epidemiologic and other studies of health problems, and an analysis of community strengths and resources.

55. Has a community health assessment been completed for your LHD's jurisdiction?

(Select only one) (c7q147)

- ☐ [1] Yes, within the last three years
- ☐ [2] Yes, more than three but less than five years ago
- ☐ [3] Yes, five or more years ago → *(If checked, skip questions 55a and 55b)*
- ☐ [4] No, but plan to in the next year → *(If checked, skip questions 55a and 55b)*
- ☐ [5] No → *(If checked, skip questions 55a and 55b)*

*****Questions 55a and 55b are sent to a statistical sample *****

55a. Which of the following types of data or information were included in your most recent community health assessment? (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Socioeconomic characteristics (e.g., age, gender, race, ethnicity) (m9q239m)
- ☐ Environmental health indicators (m9q239g)
- ☐ Social and mental health (m9q239h)
- ☐ Quality of life (m9q239e)
- ☐ Community perceptions of health (m9q239n)
- ☐ Community attitudes about health promotion/improvement (m9q239o)
- ☐ Built environment factors that impact health (m9q239p)
- ☐ Policies that impact health (e.g., zoning, taxation, education, transportation) (m9q239q)
- ☐ None of the above (m9q239r)

55b. Which of the following are true for your LHD's most recent community health assessment (CHA)?

(Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Representatives from a variety of sectors of the local community (e.g., government, healthcare, businesses, education, non-profits) participated in the CHA (m9q501a)
- ☐ Local community was given opportunity to review and contribute to the assessment (m9q501b)
- ☐ CHA report includes specific descriptions of health issues for populations with health inequities (m9q501c)
- ☐ CHA report includes information on community assets to address health issues (e.g., healthcare providers, schools, parks and recreation, businesses) (m9q501d)
- ☐ CHA report is readily available to the public (e.g., on LHD web site, available in public libraries) (m9q501e)
- ☐ None of the above (m9q501f)

Definition

A **community health improvement plan** can be defined as a long-term, systematic effort to address health problems. This plan is used by health and other government education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources.

56. Has your LHD participated in developing a health improvement plan for your community? (Select only one) (c7q149)

- ☐ [1] Yes, within the last three years
- ☐ [2] Yes, more than three but less than five years ago
- ☐ [3] Yes, five or more years ago → *(If checked, skip question 58a)*
- ☐ [4] No, but plan to in the next year → *(If checked, skip questions 57–58 and question 58a)*
- ☐ [5] No → *(If checked, skip questions 57–58 and question 58a)*

57. Was the community health improvement plan developed using the results of a community health assessment? (c7q150)

- ☐ [1] Yes
- ☐ [0] No

58. Is the community health improvement plan linked to the state health improvement plan? (c7q151)

- ☐ [1] Yes
- ☐ [0] No

*****Question 58a is sent to a statistical sample *****

58a. Have you taken any of the following actions in the past three years to implement or sustain your community health improvement plan? (Select all that apply)
(Variable values: unchecked= 0, checked= 1)

- ☐ Established or reaffirmed priorities for your LHD (m9q240b)
- ☐ Set or revisited goals for LHD performance (m9q240c)
- ☐ Set or revisited goals for community health outcomes (m9q240d)
- ☐ Increased LHD funding for one or more priorities (via new funding or reallocating existing funding) (m9q240g)
- ☐ Participated in a coalition(s) to address one or more priorities (m9q240h)
- ☐ Developed or strengthened relationships with community partners (m9q240i)
- ☐ Advocated for other community partners to establish or increase activities to support priorities (m9q240j)
- ☐ Worked with community partners to advance policy changes related to priorities (m9q240o)
- ☐ Developed performance measures to monitor implementation of the plan (m9q240k)
- ☐ Reported on progress toward implementation of the plan (m9q240p)
- ☐ Measured progress to Healthy People 2020 goals (m9q240l)
- ☐ None of the above (m9q240q)

Definition
The Patient Protection and Affordable Care Act (ACA) includes a requirement that non-profit hospitals must conduct a community health needs assessment (CHNA) least once every three years. The CHNA must take into account input from persons who represent the broad interests of the community served by the hospital, including those with special knowledge of or expertise in public health.

59. Is there at least one non-profit hospital serving residents of your LHD jurisdiction? (c7q501)

Include hospitals outside your LHD's geographical jurisdiction if they serve a substantial number of residents within your jurisdiction.

- ☐ [1] Yes
- ☐ [0] No → *(If checked, skip questions 60 and 60a)*
- ☐ [2] Do not know → *(If checked, skip questions 60 and 60a)*

60. Which of the following describes the extent of your LHD's engagement with non-profit hospitals on the most recent community health assessment (CHNA) developed by the hospital? (Select only one) (c7q502)

- ☐ [1] My LHD has collaborated or is currently collaborating with one or more non-profit hospitals on a CHNA
- ☐ [2] My LHD is currently discussing with one or more non-profit hospitals potential future collaboration on a CHNA → *(If checked, skip question 60a)*
- ☐ [3] My LHD has not engaged in discussion or collaboration with a non-profit hospital on CHNA → *(If checked, skip question 60a)*
- ☐ [4] I do not know my LHD's extent of engagement with non-profit hospitals on CHNA → *(If checked, skip question 60a)*

*****Question 60a is sent to a statistical sample *****

60a. Which of the following describe how your LHD is collaborating with a non-profit hospital on its CHNA? (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ LHD and non-profit hospital jointly conducted an assessment that serves as both the LHD's CHA and the hospital's CHNA **(m9q503a)**
- ☐ LHD coordinated joint efforts by multiple hospitals to pool resources and information for a CHNA **(m9q503b)**
- ☐ LHD assisted in engaging community organizations and residents in CHNA process **(m9q503c)**
- ☐ LHD served as a neutral facilitator to ensure a collaborative CHNA process **(m9q503d)**
- ☐ LHD provided technical assistance to hospital on how to design and implement a CHNA **(m9q503e)**
- ☐ LHD shared local data resources on health status and/or social determinants of health **(m9q503f)**
- ☐ LHD provided technical assistance on data collection, analysis, synthesis, or interpretation **(m9q503g)**
- ☐ LHD provided input on strategies to improve community health **(m9q503h)**
- ☐ None of the above **(m9q503i)**
- ☐ Not sure **(m9q503j)**

61. Has your LHD developed a comprehensive, agency-wide strategic plan?

(Select only one) (c7q217)

- ☐ [1] Yes, within the last three years
- ☐ [2] Yes, more than three but less than five years ago
- ☐ [3] Yes, five or more years ago
- ☐ [4] No, but plan to in the next year
- ☐ [5] No

Accreditation

*****For questions 62, answer choices denoted with (**) are displayed ONLY to LHDs that are classified as units of the state health agency or LHDs with shared governance*****

62. Which of the following best describes your LHD's participation in the Public Health Accreditation Board's (PHAB's) national accreditation program for LHDs? (Select only one) (c13q401)

Please report on PHAB accreditation only; do NOT report on state-based accreditation programs or accreditation for specific programs (e.g., Joint Commission or JCAHO).

- ☐ [1] My LHD has been accredited by PHAB
- ☐ [7] My LHD is part of a PHAB-accredited centralized state integrated local public health department system **
- ☐ [2] My LHD has submitted an application for PHAB accreditation
- ☐ [3] My LHD has registered in e-PHAB in order to pursue accreditation
- ☐ [8] The state health agency has registered in e-PHAB in order to pursue accreditation as an integrated system that includes my LHD**
- ☐ [4] My LHD plans to apply for PHAB accreditation, but has not yet registered in e-PHAB → *(If checked, answer question 63a)*
- ☐ [9] The state health agency plans to apply for PHAB accreditation as an integrated system that includes my LHD, but has not yet registered in e-PHAB** → *(If checked, answer question 63b)*
- ☐ [5] My LHD has not decided whether to apply for PHAB accreditation
- ☐ [6] My LHD has decided NOT to apply for PHAB accreditation → *(If checked, answer question 64)*
- ☐ [10] Do not know**

In what calendar year does your LHD anticipate registering in e-PHAB to pursue PHAB accreditation? (Select only one) (c13q402l)

- In what calendar year do you anticipate that your state health agency will register in e-PHAB to pursue accreditation as an integrated system that includes your LHD? (Select only one) (c13q402s)**

- Why has your LHD decided NOT to apply for PHAB accreditation?**
(Select all that apply)

☐ Accreditation standards are not appropriate for my LHD (**c13q403a**)

☐ Fees for accreditation are too high (**c13q403b**)

☐ Accreditation standards exceed the capacity of my LHD (**c13q403c**)

☐ Time and effort required for accreditation application exceeds benefits of accreditation (**c13q403d**)

☐ Local board of health or other governing body has directed us NOT to pursue accreditation (**c13q403e**)

☐ Other (please specify): (**c13q403f**) (c13q403ftext)

Module 1

sent to a statistical sample

Quality Improvement

Definition
Quality Improvement refers to a <i>formal, systematic approach</i> (such as plan-do-check-act) applied to the processes underlying public health programs and services in order to achieve <i>measurable</i> improvements.

65. Which of the following statements best characterizes your LHD's current quality improvement activities? (Select only one) (m1q301)

- ☐ [1] LHD has implemented a formal quality improvement program agency-wide
- ☐ [2] Formal quality improvement activities are being implemented in specific programmatic or functional areas of the LHD, but not on an agency-wide basis
- ☐ [3] LHD's quality improvement activities are informal or ad hoc in nature
- ☐ [4] LHD is not currently involved in quality improvement activities. → (If checked, skip questions 66–68)

66. In the past 12 months, how many formal projects has your LHD implemented to improve the quality of a service, process or outcome? (Select only one) (m1q302)

[For the purposes of this question, a "project" is defined as a systematic quality improvement initiative that includes an aim statement; a work plan with tasks, responsibilities and timelines; intervention strategy (ies); and measures for tracking change.]

- ☐ [1] None
- ☐ [2] 1-3
- ☐ [3] 4-6
- ☐ [4] 7-10
- ☐ [5] 11-20
- ☐ [6] More than 20 (please specify number): (m1q302text)

67. Which of the following elements have been used in your LHD's quality improvement efforts in the past year? (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Mapping a process (m1q303a)
- ☐ Identifying root causes (m1q303b)
- ☐ Obtaining baseline data (m1q303c)
- ☐ Setting measurable objectives (m1q303d)
- ☐ Testing the effects of an intervention (m1q303e)
- ☐ Analyzing the results of the test (m1q303f)
- ☐ Formally adopting a tested intervention (m1q303g)
- ☐ None of the above (m1q303h)

68. Which of the following elements of a formal agency-wide QI program are currently in place at your LHD? (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Agency QI Council or other committee that coordinates QI efforts **(m1q401a)**
- ☐ Staff member with dedicated time as part of their job description to monitor QI work throughout the agency **(m1q401b)**
- ☐ Agency-wide QI plan **(m1q401c)**
- ☐ Agency performance data is used on an ongoing basis to drive improvement efforts **(m1q401d)**
- ☐ Leadership dedicates resources (e.g., time, funding) to QI **(m1q401e)**
- ☐ QI is incorporated in employee job descriptions **(m1q401f)**
- ☐ QI is incorporated in employee performance appraisals **(m1q401g)**
- ☐ QI resources and training opportunities are offered to staff on an ongoing basis **(m1q401h)**
- ☐ None of the above **(m1q401i)**

Health Impact Assessments

Definition
For the purposes of this question, a Health Impact Assessment is defined as “a combination of procedures, methods, and tools by which a policy, program, or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population”. (1999 Gothenburg consensus statement)

69. How many health impact assessments has your agency conducted or been part of during the past two years?

(If your LHD was not involved in any health impact assessments, please enter 0.)

 (m17q308)

Land Use Planning

70. Indicate any areas of LHD activity or involvement in the past year.

(Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Access to healthy food resources (m11q253a)
- ☐ Discourage the location of alcohol sales within neighborhoods (m11q253b)
- ☐ Access to or protection of recreation areas (e.g., parks, open space) (m11q253u)
- ☐ Protection of productive agricultural land (m11q253f)
- ☐ Safe, convenient walking or biking access to community resources (e.g., park, recreation, natural, open space, grocery, library or health care resources) and employment (m11q253g)
- ☐ Connecting safe walking and biking routes with mass transit options (m11q253h)
- ☐ Neighborhoods that meet life needs without car use (m11q253i)
- ☐ Road designs that support and encourage walking and biking (m11q253j)
- ☐ Safe routes to school (m11q253k)
- ☐ School locations encourage walking and biking (neighborhood schools) (m11q253l)
- ☐ Use of school grounds for other community activities (m11q253m)
- ☐ Green Building / Ecological sustainability (non-toxic, energy efficient, environmentally regenerative development) (m11q253o)
- ☐ Ecological waste management (e.g., composting or zero waste programs) (m11q253q)
- ☐ Urban remediation (m11q253r)
- ☐ Other (m11q253s)
- ☐ None of the above (m11q253t)

Cross-jurisdictional Sharing of Services

Instructions
<p>This section explores the extent to which your LHD shares resources (such as funding, staff, or equipment) with other LHDs on a continuous, recurring, non-emergency basis.</p> <p>The resources could be shared to support specific public health programs or organizational functions (such as human resources or information technology). We are interested in both formal arrangements (e.g., contracting, memoranda of understanding) and informal arrangements.</p> <p>This set of questions does NOT address agreements to assist neighboring LHDs in the event of a public health emergency.</p>

71. Currently, does your LHD share resources (such as funding, staff, or equipment) with one or more other LHDs on a continuous, recurring (non-emergency) basis? (m8q219)

☐ [1] Yes

☐ [0] No → *(If checked, skip question 72)*

72. Use the table below to describe how your LHD shares resources with other LHDs.

(For each row across, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	No	Yes	
		Under a formal written agreement	Without a formal written agreement
Our LHD provides certain functions or services for another LHD's jurisdiction	m8q401a	m8q401b	m8q401c
Another LHD provides certain functions or services for our LHD's jurisdiction	m8q402a	m8q402b	m8q402c
Our LHD shares a staff member with another LHD (e.g., staff member works part-time at each LHD)	m8q403a	m8q403b	m8q403c
Our LHD shares equipment with another LHD	m8q404a	m8q404b	m8q404c

2016 Profile of Local Health Departments

Partnerships and Collaboration

We are interested in knowing about your LHD's collaborations with other organizations.

73. Check each way that your LHD has worked with each organization in the past year.

If the organization does not exist within your community service area, check N/A.

(For each row across, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	Shared Personnel/ Resources	Written agreement	Regularly scheduled meetings	Exchange information	No relationship	N/A
Hospitals	m13q263a	m13q263b	m13q263c	m13q263d	m13q263e	m13q263f
Physician Practices/Medical Groups	m13q264a	m13q264b	m13q264c	m13q264d	m13q264e	m13q264f
Community Health Centers	m13q265a	m13q265b	m13q265c	m13q265d	m13q265e	m13q265f
Mental health/substance abuse providers	m13q288a	m13q288b	m13q288c	m13q288d	m13q288e	m13q288f
Health insurers	m13q267a	m13q267b	m13q267c	m13q267d	m13q267e	m13q267f
Veterinarians	m13q289a	m13q289b	m13q289c	m13q289d	m13q289e	m13q289f
Economic and community development agencies	m13q270a	m13q270b	m13q270c	m13q270d	m13q270e	m13q270f
Local planning agency	m13q269a	m13q269b	m13q269c	m13q269d	m13q269e	m13q269f
Housing agencies	m13q271a	m13q271b	m13q271c	m13q271d	m13q271e	m13q271f
Tribal gov't agencies	m13q283a	m13q283b	m13q283c	m13q283d	m13q283e	m13q283f
Criminal justice system	m13q284a	m13q284b	m13q284c	m13q284d	m13q284e	m13q284f
Transportation	m13q277a	m13q277b	m13q277c	m13q277d	m13q277e	m13q277f

2016 Profile of Local Health Departments

73. (Continued from previous page.)

Check each way that your LHD has worked with each organization in the past year.

If the organization does not exist within your community service area, check N/A.

(For each row across, select all that apply)

(Variable values: unchecked= 0, checked= 1)

	Shared Personnel/ Resources	Written agreement	Regularly scheduled meetings	Exchange information	No relationship	N/A
Emergency responders	m13q268a	m13q268b	m13q268c	m13q268d	m13q268e	m13q268f
Parks and recreations	m13q276a	m13q276b	m13q276c	m13q276d	m13q276e	m13q276f
Cooperative extensions	m13q274a	m13q274b	m13q274c	m13q274d	m13q274e	m13q274f
Community-based Nonprofits	m13q286a	m13q286b	m13q286c	m13q286d	m13q286e	m13q286f
Faith communities	m13q278a	m13q278b	m13q278c	m13q278d	m13q278e	m13q278f
Libraries	m13q279a	m13q279b	m13q279c	m13q279d	m13q279e	m13q279f
K–12 schools	m13q275a	m13q275b	m13q275c	m13q275d	m13q275e	m13q275f
Colleges or universities	m13q280a	m13q280b	m13q280c	m13q280d	m13q280e	m13q280f
Business	m13q281a	m13q281b	m13q281c	m13q281d	m13q281e	m13q281f
Media	m13q282a	m13q282b	m13q282c	m13q282d	m13q282e	m13q282f

LHD Interaction with Academic Institutions

Instructions
Some LHDs may partner or interact in many different ways with accredited schools or program of public health or other academic institutions, such as schools of nursing, universities, colleges, or community colleges.

74. Indicate whether your LHD has been engaged the following activities in the past year with any academic institutions. Then for each activity, indicate which types of institutions with which your LHD has been engaged with for that activity in the past year.

	Did LHD engage in activity with academic institution?		Types of institutions with which your LHD engaged in that activity <u>in the past year</u> . (For each row across, select all that apply) (Variable values: unchecked= 0, checked= 1)			
	Yes [1]	No [0]	Accredited Schools or Programs of Public Health	Schools of Nursing	Four Year Colleges or Universities*	Community Colleges (2-Year)*
LHD has formal relationship with institution to provide training or professional development for LHD staff (include online classes)	m7q217		m7q217a	m7q217d	m7q217e	m7q217f
LHD staff serve as faculty (regular, adjunct, or guest)	m7q208		m7q208a	m7q208d	m7q208e	m7q208f
LHD accepts students from institution as trainees, interns, or volunteers (e.g., for student practicums or rotations)	m7q209		m7q209a	m7q209d	m7q209e	m7q209f
LHD actively recruits graduates from institution	m7q211		m7q211a	m7q211d	m7q211e	m7q211f
Faculty/staff from institution have served in a consulting role for LHD	m7q218		m7q218a	m7q218d	m7q218e	m7q218f
LHD staff serve on academic institution advisory group	m7q216		m7q216a	m7q216d	m7q216e	m7q216f
Academic institution has agreement or policy on providing LHD with access to scientific and professional journals	m7q219		m7q219a	m7q219d	m7q219e	m7q219f

**In schools or programs other than nursing or public health*

75. With which kinds of institutions does your LHD have a formal Memorandum of Understanding or similar written agreement that outlines the relationship between the organizations?

(Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Accredited Schools or Programs of Public Health (**m7q501a**)
- ☐ Schools of Nursing (**m7q501b**)
- ☐ Four-Year Colleges or Universities (schools or programs other than public health or nursing) (**m7q501c**)
- ☐ Community Colleges (schools or programs other than public health or nursing) (**m7q501d**)
- ☐ None of the above (**m7q501e**)
- ☐ Not sure (**m7q501f**)

Module 2

sent to a statistical sample

Access to Healthcare Services

65. Check each activity below in which your LHD has participated in the past year to assure access to healthcare services in your jurisdiction.

(For each row across, select all that apply) (Variable values: unchecked= 0, checked= 1)

	Medical	Dental	Behavioral (including psychological, substance abuse, mental health)	None of these
Assessed the gaps in access to services in this healthcare category	m14q301a	m14q301b	m14q301c	m14q301d
Addressed gaps through direct provision of clinical services in this healthcare category	m14q302a	m14q302b	m14q302c	m14q302d
Implemented strategies to increase accessibility of existing services (e.g. referrals) in this healthcare category	m14q303a	m14q303b	m14q303c	m14q303d
Implemented strategies to target healthcare needs of <i>underserved populations</i> in this healthcare category	m14q304a	m14q304b	m14q304c	m14q304d
Evaluated strategies to target healthcare needs of underserved populations in this healthcare category	m14q401a	m14q401b	m14q401c	m14q401d

Health Disparities

Definition
Health disparities can be defined as differences in health status that occur among population groups.

66. Check each activity that your LHD has done in the past two years to address health disparities.
(Select all that apply) (Variable values: unchecked= 0, checked= 1)

- ☐ Describing health disparities in your jurisdiction using data (m18q146a)
- ☐ Conducting original research that links health disparities to differences in social or environmental conditions (m18q146b)
- ☐ Educating elected or appointed officials about health disparities and their causes (m18q146c)
- ☐ Training your workforce on health disparities and their causes (m18q146d)
- ☐ Offering staff training in cultural/linguistic competency (m18q146j)
- ☐ Recruiting workforce from communities adversely impacted by health disparities (m18q146e)
- ☐ Prioritizing resources and programs specifically for the reduction in health disparities (m18q146f)
- ☐ Taking public policy positions on health disparities (through testimony, written statements, media, etc.) (m18q146g)
- ☐ Supporting community efforts to change the causes of health disparities (m18q146h)
- ☐ None of the above (m18q146i)

Emergency Preparedness

Definitions
A Tabletop Exercise is a scenario-based discussion that permits evaluation of all or portions of the Emergency Operations Plan, through <i>oral interaction</i> and application of plan guidance. This is accomplished using minimal or no physical activity, with discussion often taking place around a table or tables.
A Functional Exercise is a scenario-based execution of selected tasks or activities within a functional area of the Emergency Operations Plan. It also includes <i>actual movement of people and resources</i> , but includes fewer functions than a full-scale exercise and interaction with outside personnel and functions are simulated.
A Full-Scale Exercise is a scenario-based exercise that includes <i>all or most</i> of the functions and complex activities of the Emergency Operations Plan. It includes <i>actual movement of people and resources</i> to replicate real world response situations. It is typically conducted under very real-time constraints of an actual incident.

67. Which of the following emergency preparedness activities has your LHD conducted in the past year?
(Select all that apply) (Variable values: unchecked= 0, checked= 1)

- ☐ Developed or updated a written emergency plan (m15q142b)
- ☐ Developed or updated a written recovery plan (m15q142k)
- ☐ Developed or updated plans to ensure the inclusion of vulnerable populations (m15q142l)
- ☐ Developed or updated expedited administrative processes (e.g., government funding, procurement, contracting, and hiring) for use during emergencies (m15q142m)
- ☐ Reviewed relevant legal authorities (m15q142c)
- ☐ Participated in tabletop exercises (m15q142n) → (If checked, answer question 68)
- ☐ Participated in functional exercises (m15q142o) → (If checked, answer question 68)
- ☐ Participated in full-scale exercises (m15q142p) → (If checked, answer question 68)
- ☐ Assessed emergency preparedness competencies of staff (m15q142g)
- ☐ Provided emergency preparedness training to staff (m15q142h)
- ☐ Educated community members on emergency preparedness (m15q142q)
- ☐ Planned for emergencies through participation in a healthcare coalition (m15q142r)
- ☐ None of the above (m15q142i)
- ☐ Other (please specify): (m15q142j) (m15q142jtext)

68. For respondents who selected “Participated in tabletop exercises” OR “Participated in functional exercises” OR “Participated in full-scale exercises” in question 67, answer question 68.

In the past year, did volunteers participate in any exercises (including full scale, functional and tabletop exercises)? (m15q501)

- ☐ [1] Yes
- ☐ [0] No

69. In the past year, did your LHD respond to any actual all-hazards events (e.g., winter storm, food-borne outbreak, or chemical spill)? (m15q303)

- ☐ [1] Yes
- ☐ [0] No → *(If checked, skip question 70)*

70. In the past year, did your LHD use volunteers to respond to any actual all-hazards events? (m15q502)

- ☐ [1] Yes
- ☐ [0] No

71. Your LHD's budget for preparedness activities during the current fiscal year is...

(Select only one) (m15q503)

- ☐ [1] Less than the previous year's budget
- ☐ [2] Approximately the same (within plus or minus one percent) as the previous year's budget
- ☐ [3] Greater than the previous year's budget
- ☐ [4] Do not know

Public Health Informatics

72. Indicate your LHD's level of activity for each of the following information technology areas.
(For each row across, select only one)

	No activity	In process of implementation	Have implemented	Do not know
Electronic Health Records (m4q301)	[0]	[4]	[3]	[5]
Health Information Exchange (m4q302)	[0]	[4]	[3]	[5]
Immunization Registry (m4q304)	[0]	[4]	[3]	[5]
Electronic Disease Reporting System (m4q401)	[0]	[4]	[3]	[5]
Electronic Lab Reporting (m4q402)	[0]	[4]	[3]	[5]

2016 Profile of Local Health Departments

73. Indicate whether LHD used any of the following communication channels to communicate with the public. Then, for each communication channel your LHD uses, indicate how your LHD uses the channel.

	Has your LHD use this communication channel?		Indicate how your LHD uses the communication channel. (Select all that apply) (Variable values: unchecked= 0, checked= 1)	
	Yes [1]	No [0]	Communicate for routine activities	Communicate to the public for an emergency response
Automated phone calling (e.g., reverse 911, robocalls)	m4q308l		m4q501l	m4q502l
Hotline or call center	m4q308o		m4q501o	m4q502o
Fax broadcast/fax blast	m4q308n		m4q501n	m4q502n
Broadcast media (e.g., TV, radio)	m4q308p		m4q501p	m4q502p
Print media (e.g., newspaper, poster, sign)	m4q308q		m4q501q	m4q502q
Text messaging	m4q308k		m4q501k	m4q502k
Email	m4q308r		m4q501r	m4q502r
Blogs	m4q308a		m4q501a	m4q502a
Facebook	m4q308b		m4q501b	m4q502b
Twitter	m4q308e		m4q501e	m4q502e
LinkedIn	m4q308c		m4q501c	m4q502c
Photo sharing sites (e.g., Instagram, Flickr)	m4q308s		m4q501s	m4q502s
Video sharing sites (e.g., YouTube, Vimeo, Vine)	m4q308t		m4q501t	m4q502t
LHD Web site	m4q308u		m4q501u	m4q502u
None	m4q308i			
Don't know	m4q308j			

County Health Statistics

County Health Rankings Report

County Health Rankings, developed by the Robert Wood Johnson Foundation (RWJF) and the University of Wisconsin Population Health Institute (UWPHI), identify the healthiest and least healthy counties within each state. Published annually since 2010, the County Health Rankings are available online. More information is available at www.countyhealthrankings.org.

74. How did your agency use County Health Rankings and Roadmaps during the past year?

(Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Increase awareness of the multiple factors that influence health (m17q401l)
- ☐ Increase awareness of the role of public health (m17q401m)
- ☐ Develop or leverage partnerships across multiple sectors to improve community health (m17q401n)
- ☐ Leverage additional funding for your agency (m17q401h)
- ☐ Other (please specify) (m17q401i) _____ (m17q401itext)
- ☐ My LHD did not use County Health Rankings and Roadmaps (m17q401j)
- ☐ My LHD has never heard of County Health Rankings and Roadmaps (m17q401k)
- ☐ Don't know (m17q401a)

Community Health Status Indicators 2015

Community Health Status Indicators 2015 is an interactive web application from CDC that produces county-level profiles on key indicators of health outcomes for all 3,143 counties in the United States, and provides comparisons with other counties. It was launched in March 2015 and is available online at www.cdc.gov/chsi.

75. How did your agency use Community Health Status Indicators 2015 during the past year?

(Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Assist with assessing the health status of a population within a county (m17q501a)
- ☐ Assist with assessing identifying vulnerable populations and potential health disparities (m17q501b)
- ☐ Increase awareness of the multiple factors that influence health (m17q501c)
- ☐ Increase awareness of the role of public health (m17q501d)
- ☐ Develop or leverage partnerships across multiple sectors to improve community health (m17q501e)
- ☐ Leverage additional funding for your agency (m17q501f)
- ☐ My LHD did not use Community Health Status Indicators 2015 (m17q501g)
- ☐ My LHD has never heard of Community Health Status Indicators 2015 (m17q501h)
- ☐ Other (please specify) (m17q501i) _____ (m17q501itext)
- ☐ Don't know (m17q501j)

Evaluation of Profile

76. Check each statement that describes how your LHD's staff members have used reports or presentations from the 2013 Profile study. (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ No staff members have seen any reports, presentations, web sites, or other products from the 2013 Profile study (m5q192a)→ *(If checked, skip question 77)*
- ☐ One or more LHD staff have reviewed reports, presentations, web sites or other products from the 2013 Profile results (m5q192b)
- ☐ LHD staff members have discussed information from the 2013 Profile study (m5q192c)
- ☐ LHD staff members have used information from the 2013 Profile study to compare our LHD to others (m5q192d)
- ☐ LHD staff members have used information from the 2013 Profile study in a report or presentation (m5q192e)
- ☐ Other (please specify) (m5q192f) (m5q192ftext)

77. How have your LHD's staff members accessed information from the 2013 Profile study?

(Select only one) (m5q501)

- ☐ [1] Reviewed printed copy of report only
- ☐ [2] Accessed the Profile web site only
- ☐ [3] Used both printed report and Profile web site
- ☐ [4] No staff members reviewed printed report or accessed Profile web site
- ☐ [5] Do not know

78. How did your staff members complete the 2016 Profile questionnaire? (Select only one) (m5q291)

- ☐ [1] Staff members used the Web link to access the questionnaire and completed their assigned questions on-line.
- ☐ [2] Staff members completed their assigned sections on a paper version of the questionnaire and someone else entered this information on-line using the Web link.
- ☐ [3] Some staff members used each of these methods.
- ☐ [4] Did not use Web-based questionnaire
- ☐ [5] Not sure

79. Check all of the types of individuals who contributed responses to your LHD's 2016 Profile questionnaire. (Select all that apply)

(Variable values: unchecked= 0, checked= 1)

- ☐ Top executive (m5q290a)
- ☐ Other management staff (m5q290b)
- ☐ Human resources staff (m5q290c)
- ☐ Accounting staff (m5q290d)
- ☐ Staff from LHD programmatic areas (m5q290e)
- ☐ Administrative/clerical staff (m5q290f)

80. Please provide an estimate of the total amount of staff time that your LHD devoted to completing the 2016 Profile questionnaire

(m5q305) hours

81. In the past six months, how many surveys (including this one) has your LHD been asked to complete? Include all surveys your LHD has received, including surveys from NACCHO and other associations, surveys from your state health agency or other government agencies, and surveys from academic researchers. (Select only one) (m5q401)

- ☐ [1] 1
- ☐ [2] 2-5
- ☐ [3] 6-10
- ☐ [4] 11-20
- ☐ [5] More than 20
- ☐ [6] Cannot estimate