

# STANDARDS & Measures

## Acronyms & Glossary of Terms

ADAPTED FOR  
ARMY INSTALLATION DEPARTMENTS OF PUBLIC HEALTH

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## Terms

<b>AAFES</b>	Army and Air Force Exchange Service
<b>AAR</b>	After Action Report or After Action Review
<b>AC</b>	Accreditation Coordinator
<b>ACO</b>	Accountable Care Organization
<b>ACS</b>	Army Community Service
<b>ADA</b>	Americans with Disabilities Act
<b>AFAP</b>	Army Family Action Plan
<b>AHP</b>	Army Hearing Program
<b>AHLTA</b>	Armed Forces Health Longitudinal Technology Application
<b>AMH</b>	Army Medical Home
<b>APEXPH</b>	Assessment Protocol for Excellence in Public Health
<b>APHC</b>	Army Public Health Center
<b>APHN</b>	Army Public Health Nurse
<b>AR</b>	Army Regulation
<b>ATAAPS</b>	Automated Time Attendance & Production System
<b>AWC</b>	Army Wellness Center
<b>BoD</b>	Commander's Ready and Resilient Council Board of Directors
<b>C2</b>	Command and Control
<b>CBPR</b>	Community-based Participatory Research
<b>CCO</b>	Coordinated Care Organization
<b>CDR</b>	Commander
<b>CEO</b>	Chief Executive Officer
<b>CG</b>	Commanding General
<b>CHA</b>	Community Health Assessment

<b>CHNA</b>	Community Health Needs Assessment
<b>CHIP</b>	Community Health Improvement Plan
<b>CHR</b>	Community Health Representative
<b>CHS</b>	Contract Health Services
<b>CLAS</b>	Culturally and Linguistically Appropriate Services
<b>CLCPA</b>	Cultural and Linguistic Competence Policy Assessment
<b>CLIA</b>	Clinical Laboratory Improvement Amendments
<b>CPHE</b>	Clinical Public Health & Epidemiology
<b>CPI</b>	Continuous Process Improvement
<b>CR2C</b>	Commander's Ready and Resilient Council
<b>CYSS</b>	Child, Youth, and School Services
<b>DA</b>	Department of the Army
<b>DCG</b>	Deputy Commanding General
<b>DCP</b>	Disease Containment Plan
<b>DoDD</b>	Department of Defense Directive
<b>DoDI</b>	Department of Defense Instruction
<b>DOEHRS-EH</b>	Defense Occupational and Environmental Health Readiness System-Environmental Health
<b>DOEHRS-IH</b>	Defense Occupational and Environmental Health Readiness System-Industrial Hygiene
<b>DMHRSi</b>	Defense Medical Human Resource System internet
<b>DMLSS</b>	Defense Medical Logistics Standard Support
<b>DPW</b>	Department of Public Works
<b>DRSi</b>	Disease Reporting System-internet
<b>EH</b>	Environmental Health
<b>EMR</b>	Electronic Medical Record

<b>EMS</b>	Emergency Medical Services
<b>EO</b>	Educational Opportunities or Equal Opportunity
<b>EOC</b>	Emergency Operations Center
<b>EOP</b>	Emergency Operations Plan
<b>EPR</b>	Emergency Preparedness Response
<b>EQCC</b>	Environmental Quality Control Committee
<b>ERP</b>	Emergency Response Plan
<b>ERS</b>	Evaluation Reporting System
<b>ESSENCE</b>	Electronic Surveillance System for the Early Notification of Community-based Epidemics
<b>EXSUM</b>	Executive Summary
<b>FAQ</b>	Frequently Asked Questions
<b>FRG</b>	Family Readiness Group
<b>FOUO</b>	For Official Use Only
<b>GAT</b>	Global Assessment Tool
<b>GFEBS</b>	General Fund Enterprise Business System
<b>GIS</b>	Geographic Information System
<b>HAN</b>	Health Alert Network
<b>HEDIS</b>	Healthcare Effectiveness Data and Information Set
<b>HD</b>	Health Department
<b>HIE</b>	Health Information Exchange
<b>HIPAA</b>	Health Insurance Portability and Accountability Act
<b>HIV</b>	Human Immunodeficiency Virus
<b>HoF</b>	Health of the Force
<b>HPT</b>	Health Promotion Team
<b>HQ</b>	Headquarters
<b>HR</b>	Human Resources
<b>HRO</b>	High Reliability Organization

<b>ICE</b>	Interactive Customer Evaluation
<b>ICS</b>	Incident Command System
<b>IDP</b>	Individual Development Plan
<b>IH</b>	Industrial Hygiene
<b>IMD</b>	Information Management Division
<b>IP</b>	Information Paper
<b>IPR</b>	Interim Progress Report
<b>IRB</b>	Institutional Review Board
<b>IRIS</b>	Integrated Resourcing & Incentive System
<b>IT</b>	Information Technology
<b>JIC</b>	Joint Information Center
<b>JOES</b>	Joint Outpatient Experience Survey
<b>MAPP</b>	Mobilizing for Action through Planning and Partnerships
<b>MCH</b>	Maternal and Child Health
<b>MEDPROS</b>	Medical Protection System
<b>MFR</b>	Memorandum for Record
<b>MHS</b>	Military Health System
<b>MOA</b>	Memorandum of Agreement
<b>MOU</b>	Memorandum of Understanding
<b>MEPRS</b>	Medical Expense & Performance Reporting System
<b>MSEC</b>	Medical Status Executive Committee
<b>MTF</b>	Military or Medical Treatment Facility
<b>MWR</b>	Morale, Welfare, and Recreation
<b>NCO</b>	Noncommissioned Officer
<b>NPHPS</b>	National Public Health Performance Standards
<b>OASD</b>	Office of the Assistant Secretary of Defense
<b>OER</b>	Officer Evaluation Report
<b>OIP</b>	Organizational Inspection Program

<b>OH</b>	Occupational Health
<b>OM</b>	Occupational Medicine
<b>OPM</b>	U.S. Office of Personnel Management
<b>OPORD</b>	Operations Order
<b>PACE-EH</b>	Protocol for Assessing Community Excellence in Environmental Health
<b>PAM</b>	Department of the Army Pamphlet
<b>PAO</b>	Public Affairs Officer or Public Affairs Office
<b>PCMH</b>	Patient-Centered Medical Home
<b>PH</b>	Public Health
<b>PHEM</b>	Public Health Emergency Management
<b>PHEO</b>	Public Health Emergency Officer
<b>PHMS</b>	Public Health Management System
<b>PIP</b>	Performance Improvement Plan
<b>PM</b>	Preventive Medicine
<b>PM/PH</b>	Preventive Medicine/Public Health
<b>POM</b>	Program Objective Memorandum
<b>PPE</b>	Personal Protective Equipment
<b>PPHR</b>	Project Public Health Ready
<b>PSA</b>	Personal Service Agreement
<b>PSR</b>	Program Status Report
<b>QI</b>	Quality Improvement
<b>QIC</b>	Quality Improvement Committee
<b>QMD</b>	Quality Management Division or Quality Management Department
<b>R2C or R2</b>	Ready and Resilient Campaign; may be referred to also as R2, Ready and Resilient, or Ready and Resilient Program
<b>RFI</b>	Request for Information
<b>RMD</b>	Resource Management Division
<b>ROTC</b>	Reserve Officer Training Corps

<b>SAV</b>	Staff Assistance Visit
<b>SDO</b>	Staff Duty Officer
<b>SfH</b>	System for Health
<b>SITREP</b>	Situation Report
<b>SME</b>	Subject Matter Expertise or Subject Matter Expert
<b>SMS</b>	Strategic Management System
<b>SOI</b>	Statement of Intent
<b>SOP</b>	Standard Operating Procedure
<b>STD</b>	Sexually Transmitted Disease
<b>STI</b>	Sexually Transmitted Infection
<b>TA</b>	Technical Assistance
<b>TB</b>	Tuberculosis
<b>TDY</b>	Temporary Duty
<b>UFR</b>	Unfunded Requirement
<b>USC</b>	United States Code
<b>VTC</b>	Video Teleconference
<b>WG</b>	Working Group
<b>WIC</b>	Women, Infants and Children Program

## Organizations

<b>AFHSC</b>	Armed Forces Health Surveillance Center
<b>AMEDD</b>	Army Medical Department
<b>AMEDDC&amp;S</b>	U.S. Army Medical Department Center and School
<b>AMPHE</b>	Army Medicine Public Health Enterprise
<b>APHA</b>	American Public Health Association
<b>APHC</b>	U.S. Army Public Health Center
<b>ASTHO</b>	Association of State and Territorial Health Officials
<b>CDC</b>	Centers for Disease Control and Prevention

<b>DA</b>	Department of the Army
<b>DHA</b>	Defense Health Agency
<b>DHHS</b>	U.S. Department of Health and Human Services
<b>DHS</b>	U.S. Department of Homeland Security
<b>DoD/DOD</b>	Department of Defense
<b>EPA</b>	U.S. Environmental Protection Agency
<b>FDA</b>	U.S. Food and Drug Administration
<b>IHS</b>	Indian Health Service

<b>MEDCOM</b>	U.S. Army Medical Command
<b>NACCHO</b>	National Association of County and City Health Officials
<b>NNPHI</b>	National Network of Public Health Institutes
<b>OSHA</b>	Occupational Safety and Health Administration
<b>PHF</b>	Public Health Foundation
<b>RHC</b>	Regional Health Commands
<b>RHPC</b>	Regional Public Health Commands
<b>RWJF</b>	Robert Wood Johnson Foundation

# A

## **Access**

Access is the potential for or actual entry of a population into the health system. Entry is dependent upon the wants, resources, and needs that individuals bring to the care-seeking process. The ability to obtain wanted or needed services may be influenced by many factors, including travel, distance, waiting time, available financial resources, and availability of a regular source of care. Access also refers to the extent to which a public health service is readily available to the community's individuals in need. Accessibility also refers to the capacity of the agency to provide service in such a way as to reflect and honor the social and cultural characteristics of the community and focuses on agency efforts to reduce barriers to service utilization. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

## **Accountable Care Organizations (ACO)**

Accountable Care Organizations are groups of doctors, hospitals, and other health care providers who come together voluntarily to give coordinated, high quality care to their Medicare patients. The goal of coordinated care is to ensure that patients, especially the chronically ill, get the right care at the right time, while avoiding unnecessary duplication of services and preventing medical errors. (<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ACO/index.html>)

## **Accreditation**

Accreditation for public health departments is defined as:

1. The development and acceptance of a set of national public health department accreditation standards;
2. The development and acceptance of a standardized process to measure health department performance against those standards;
3. The periodic issuance of recognition for health departments that meet a specified set of national accreditation standards; and
4. The periodic review, refining, and updating of the national public health department accreditation standards and the process for measuring and awarding accreditation recognition.

(Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Accreditation Committee**

The Accreditation Committee is the official body of the national public health department accreditation program which is responsible for reviewing and determining the accreditation status of health departments pursuant to Board-adopted policies and procedures. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Accreditation Coordinator (AC)**

The Accreditation Coordinator is the person responsible for coordinating the application and accreditation process within the health department. The Accreditation Coordinator is the primary point of communication with the national public health department accreditation program staff during the accreditation process. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Accreditation Decision**

The accreditation decision is the final status determination of the national public health department accreditation program's Accreditation Committee after review of the health department's site visit report. Accreditation decisions are based on the site visit report, including the site visit team's scores and descriptive information. Accreditation decision categories are either accredited or not accredited. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

### **Administrative Areas**

Administrative areas are activities that relate to management of a company, school, or other organization. (<http://www.merriam-webster.com/dictionary/administrative>). For national public health department accreditation program purposes, administrative areas are distinguished from program areas, which provide public health programs or interventions.

### **After Action Report (AAR)**

An after action report is a narrative report which captures observations of an exercise (for example: tabletop, functional exercise, or full scale exercise) and makes recommendations for post-exercise improvements; this is supplemented by an Improvement Plan, which identifies specific corrective actions, assigns them to responsible parties, and establishes targets for their completion. (Adapted from: U.S. Department of Homeland Security. *Exercise and Evaluation Program (HSEEP) Volume 1: HSEEP Overview and Exercise Program Management*. Washington, DC: DHS; 2007)

### **Alignment**

Alignment is the consistency of plans, processes, information, resource decisions, actions, results and analysis to support key organization-wide goals. (Baldrige National Quality Program. Washington, DC: The Baldrige Foundation; 2005)

### **All Hazards Plan**

An all hazards plan is an action plan for the jurisdiction developed to mitigate, respond to, and recover from a natural disaster, terrorist event, or other emergency that threatens people, property, business, or the community. The plan identifies persons, equipment, and resources for activation in an emergency and includes steps to coordinate and guide the response and recovery efforts of the jurisdiction. (Adapted from: U.S. Federal Emergency Management Agency. *Principles of Emergency Management* [online]. 2007 [cited 2012 Nov 6]. <http://training.fema.gov/EMIWeb/IS/is100blst.asp>)

### **Annual Report**

Annual reports are those reports that are required to be submitted to the national public health department accreditation program by accredited health departments. Annual reports must include a statement that the health department continues to be in conformity with all the standards and measures of the version under which accreditation was received; include leadership changes and other changes that may affect the health department's ability to be in conformity with the standards and measures; describe how the health department has addressed areas of improvement noted in the site visit report; describe how the health department will continue to address areas of improvement identified in the site visit report and/or by the health department in its accreditation action plan; and describe work on emerging public health issues and innovations. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

### **Army Community Service (ACS)**

Army Community Service is a program that provides comprehensive, coordinated, and responsive advocacy and prevention, information and referral, outreach, financial, employment, Soldier and Family Readiness, Exceptional Family Member and relocation assistance services that support the readiness and well-being of Soldiers and their Families, civilian employees, and Military and DA Civilian Retirees. (<http://www.armymwr.com/mwrglossary.aspx>)

### **Army Evaluation Reporting System (ERS)**

The Army Evaluation Reporting System encompasses the means and method for developing individuals and leaders. The completion of evaluation reports and associated support forms for officers and noncommissioned officers is the basis for the Army ERS, focusing on performance and developmental counseling, the assessment of performance and potential as well as leadership and professional development. The ERS is used to identify Soldiers who are best qualified for promotion and assignments to position of greater responsibility and also for the identification of Soldiers who will be kept on active duty, retained in grade, or eliminated from military service. The Army routinely reviews the ERS to ensure that it remains relevant and in support of its goals. (Army Regulation (AR) 623-3, *Evaluation Reporting System*, 4 November 2015)



**Army Family Action Plan (AFAP)**

Army Family Action Plan is the Army's grassroots process to identify and elevate the most significant quality of life issues impacting Soldiers, Retirees, DA Civilians, and Families to senior leaders for action. The AFAP is a year-round process that begins at the installation or unit level. (<http://www.armymwr.com/mwrglossary.aspx>)

**Army Hearing Program (AHP)**

Represents the leadership policies, strategies and process to prevent noise-induced hearing loss among military and DA Civilian personnel. The AHP consists of four major components: hearing readiness, clinical hearing services, operational hearing services, and hearing conservation. (Department of the Army Pamphlet (DA PAM) 40-501, *Army Hearing Program*, 8 January 2015)

**Army Medical Department (AMEDD)**

The AMEDD is composed of six Corps which are separate and unique; the six Corps cannot effectively function apart from one another due to the commonality created by the mission. The mission of the AMEDD is to provide health services for the Army and, as directed, for other agencies, organizations, and the other Services. (DA PAM 600-4, *Army Medical Department Officer Development and Career Management*, 27 June 2007)

**Army Medical Home**

See: Patient Centered Medical Home

**Army Wellness Center (AWC)**

Army Wellness Centers provide standardized primary prevention programs designed to promote and sustain healthy lifestyles and improve the overall well-being of Soldiers, Family Members, Retirees, and DA Civilians. (<https://phc.amedd.army.mil/organization/hpw/Pages/ArmyWellnessCenters.aspx>)

**Army Public Health Center**

The U.S. Army Public Health Center's mission is to Enhance Army readiness by identifying and assessing current and emerging health threats, developing and communicating public health solutions, and assuring the quality and effectiveness of the Army's Public Health Enterprise. APHC provides consulting services to senior military leaders, commanders, both deployed and in garrison; and military medical and health professionals. (<https://phc.amedd.army.mil/organization/Pages/default.aspx>)

**Assessment**

Assessment is defined as:

1. Collecting, analyzing, and using data to educate and mobilize communities, develop priorities, garner resources, and plan actions to improve public health.
2. One of the three core functions of public health, involving the systematic collection and analysis of data in order to provide a basis for decision-making. This may include collecting statistics on community health status, health needs, community assets and/or other public health issues.
3. The process of regularly and systematically collecting, assembling, analyzing, and making available information on the health needs of the community, including statistics on health status, community health needs, and epidemiologic and other studies of health problems.

(Adapted from Public Health Accreditation Board. *Acronyms & Glossary of Terms Version 1.5*. Alexandria, VA: PHAB; December 2013)

**Assets**

Assets are resources available to achieve a specific end, such as community resources that can contribute to community-health improvement efforts or emergency-response resources, including human, to respond to a public health emergency. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

### **Asset-Based Community Development**

Asset-Based Community Development (ABCD) is a way to identify and mobilize the assets in a community to facilitate positive change from the inside out. Individual capacities and community assets are harnessed to build neighborhoods and communities. ABCD is a process that gives a community the tools to address issues by utilizing the individual and community assets. People begin to connect by their capacities rather than their deficits. As a result, positive initiatives are realized based on the gifts, talents, and skills within the community. Guiding principles to Asset Based Community Development are:

1. Everyone has gifts to contribute to the betterment of the community.
2. Relationships build a community. ABCD is an intentional way to build relationships.
3. People in leadership roles in the community are at the core of the community initiatives.
4. Leaders in the community engage others in the community to become involved in the effort to build capacity.
5. It is a way to motivate people to act on behalf of their community.
6. ABCD creates motivation to act.

(<http://midmichabcd.org/>)

An asset-based community development strategy starts with what is present in the community: the capacities of its residents and workers, the association and institutional base of the area—not with what is absent, or with what is problematic, or with what the community needs. This strong internal focus is intended to stress the primacy of local definition, investment, creativity, hope and control. (Kretzmann, J.P., and J.L. McKnight. *Building Communities from the Inside Out*. Skokie, IL: ACTA Publications; 1993)

### **Asset Mapping**

Asset mapping is derived from an “asset-based” approach to community development and refers to a range of approaches that work from the principle that a community can be built only by focusing on the strengths and capacities of the citizens and associations that call a neighborhood, community or county “home.” As described by Kretzmann and McKnight(1993), there are three levels of assets to be considered. The first is the “gifts, skills and capacities” of the individuals living in the community. The second level of assets includes "citizen associations" through which local people come together to pursue common goals. The third level of assets is those institutions present in community, such as local government, hospitals, education, and human service agencies. Asset mapping is an extension of the basic notion of identifying and mobilizing the available resources needed to design and implement extension educational programs. Asset mapping emphasizes the idea of starting with the positive, i.e., *what is* available from within the community (county) to address the issue or concern rather than starting with a list of what isn't available. (Adapted from: University Outreach and Extension, University of Missouri System and Lincoln University [online] No date [cited 1999 Jan 21]<http://extension.missouri.edu/about/fy00-03/assetmapping.htm>)

### **Assurance**

Assurance is the process of determining that “services necessary to achieve agreed upon goals are provided, either by encouraging actions by other entities (public or private sector), by requiring such action through regulation, or by providing services directly.” (Institute of Medicine. *The Future of Public Health*. Washington, DC: The National Academies Press; 1988)

### **Audit**

An audit is a formal examination of an organization's or individual's accounts or financial situation. ([www.merriam-webster.com/dictionary/audit](http://www.merriam-webster.com/dictionary/audit))

# B

## ***Barriers to Care***

Barriers to receiving needed health care can include cost, language or knowledge barriers, and structural or logistical factors, such as long waiting times and not having transportation. Barriers to care contribute to socioeconomic, racial and ethnic, and geographic differences in health care utilization and health status. (<http://mchb.hrsa.gov/whusa11/hsu/downloads/pdf/303bcunc.pdf>)

## ***Best Practices***

Best practices are the best clinical or administrative practice or approach at the moment, given the situation, the consumer or community needs and desires, the evidence about what works for a particular situation and the resources available. Organizations often also use the term “promising practices” which may be defined as clinical or administrative practices for which there is considerable practice-based evidence or expert consensus which indicates promise in improving outcomes but which have not yet been proven by strong scientific evidence. (National Public Health Performance Standards Program, *Acronyms, Glossary, and Reference Terms*. CDC, 2007. [www.cdc.gov/nphpsp/PDF/Glossary.pdf](http://www.cdc.gov/nphpsp/PDF/Glossary.pdf))

## ***Biologics***

Biologics are biological products (such as a globulin, serum, vaccine, antitoxin, or antigen) used in the prevention or treatment of disease. (<http://www.merriam-webster.com/medical/biologic>)

## ***Branding***

Branding is the marketing practice of creating a name, symbol or design that identifies a product and differentiates it from other products. (<http://www.entrepreneur.com/encyclopedia/branding>)

# C

## **Capacity**

Capacity consists of the resources and relationships necessary to carry out the core functions and essential services of public health; these include human resources, information resources, fiscal and physical resources, and appropriate relationships among the system components. (Turnock, B.J. *Public Health: What It Is and How It Works*, 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

## **Chart of Accounts (Public Health)**

The chart of accounts is a listing of all accounts used in the general ledger of an organization. (<http://www.accountingtools.com/chart-of-accounts-overview>)

In April 2012, the Institute of Medicine recommended creation of a chart of accounts to provide a common framework and system for tracking the flow of funds across the U.S. Governmental public health system, similar to the systems that have been developed for other health and social service sectors. (Institute of Medicine. *For the Public's Health: Investing in a Healthier Future*. Washington, DC: The National Academies Press; 2012)

The equivalent current system used in the Army is GFEBS.

## **Chronic Disease**

A chronic disease is a disease that has one or more of the following characteristics: it is permanent, leaves residual disability, is caused by a nonreversible pathological alteration, requires special training of the patient for rehabilitation, or may be expected to require long periods of supervision, observation, or care. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

Examples of chronic disease include heart disease, stroke, cancer, chronic respiratory diseases and diabetes. (World Health Organization (Switzerland). Health Topics: Chronic Diseases [online]. 2012 [cited 2012 Nov 7]. Available from URL [http://www.who.int/topics/chronic\\_diseases/en/](http://www.who.int/topics/chronic_diseases/en/))

## **Cluster**

Aggregations of relatively uncommon events or diseases in space and/or time in amounts that are believed or perceived to be greater than could be expected by chance. (Porta, M., editor. *Dictionary of Epidemiology*. 5<sup>th</sup> ed. New York: Oxford University Press; 2008)

## **Cluster Evaluation/Analysis**

A cluster evaluation or analysis is a set of statistical methods used to group variables or observations into strongly inter-related subgroups. In epidemiology, it may be used to analyze a closely grouped series of events or cases of disease or other health-related phenomenon with well-defined distribution patterns in relation to time or place or both. ([www.lib.uchicago.edu/e/su/med/healthstat/statglossary.htm](http://www.lib.uchicago.edu/e/su/med/healthstat/statglossary.htm))

## **Coalition**

A coalition is a union of people and organizations working to influence outcomes on a specific problem. It involves multiple sectors of the community that come together to address community needs and solve community problems. (Scutchfield, F.D., and C.W. Keck. *Principles of Public Health Practice*. Clifton Park, NY: Delmar Cengage Learning; 2009)

## **Collaboration**

Collaboration is a mutually beneficial and well-defined relationship entered into by two or more organizations to achieve common goals. The relationship includes a commitment to mutual relationships and goals; a jointly developed structure and shared responsibility; mutual authority and accountability for success; and sharing of resources and rewards. (Mattessich, P.W. *Collaboration: What Makes It Work*. 2<sup>nd</sup> ed. Nashville, TN: Fieldstone Alliance; 2001)

**Commander**

A commander is a commissioned or warrant officer who, by virtue of grade and assignment, exercises primary command authority over a military organization or prescribed territorial area that under pertinent official directives is recognized as a “command.” (AR 600–20, *Army Command Policy*, 6 November 2014)

**Commander’s Ready and Resilient Council (CR2C)**

Bodies within the Army chaired at the community or installation level by the senior commander to provide a comprehensive approach to health promotion. The CR2C is the platform to elevate and prioritize the health of the force; identify gaps and overlaps in programs and services to ensure resources are aligned to identified and locally agreed upon goals. (AR 600–63, *Army Health Promotion*, 14 April 2015; Fragmentary Order 4 to Headquarters, Department of the Army Operation Order (FRAGO 4 to HQDA OPOD) Enduring Personal Readiness and Resilience, Ready and Resilient Campaign Plan, March 26, 2013; and Army Public Health Center Technical Guide No. 362, Implementation of The Commander’s Ready and Resilient Council)

**Commander’s Ready and Resilient Council Working Groups**

Cross-discipline teams of Army subject matter experts to address the holistic components of community health (spiritual, physical, social/environmental, behavioral/emotional), assess and analyze community health data, develop targeted interventions, and monitor outcomes of activities to support the objectives of the CR2C. The working groups are the action-oriented teams of the CR2C to ensure CR2C strategic goals are met. (AR 600–63; and Army Public Health Center Technical Guide No. 362)

**Communicable Disease**

Communicable disease means an illness caused by an infectious agent or its toxins that occurs through the direct or indirect transmission of the infectious agent or its products from an infected individual or via an animal, vector or the inanimate environment to a susceptible animal or human host. (<http://www.cdc.gov/tb/programs/laws/menu/definitions.htm>)

**Communicable Disease Data**

Communicable disease data includes information about diseases that are usually transmitted through person-to-person contact or shared use of contaminated instruments or materials. Many of these diseases can be prevented through the use of protected measures, such as high level of vaccine coverage of vulnerable populations. (Gostin, L.O. and J. G. Hodges. *The Model State Emergency Health Powers Act*. Washington, DC: Center for Law and the Public’s Health, Georgetown University Law Center; 2001)

**Communication**

Communication is defined as a process by which information is exchanged between individuals through a common system of symbols, signs, or behavior. ([www.merriam-webster.com/dictionary/communication](http://www.merriam-webster.com/dictionary/communication))

**Communications Strategies**

Communications strategies are statements or plans that describe a situation, audience, behavioral change objectives, strategic approach, key message points, media of communication, management and evaluation. Health departments may develop communications strategies to address a variety of situations for health communications, emergency response, or health education. (Adapted from O’Sullivan, G.A., Yonkler, J.A., Morgan, W., and A.P. Merritt. *A Field Guide to Designing a Communications Strategy*. Baltimore, MD: Johns Hopkins Bloomberg School of Public Health Center for Communications Programs; 2003)

**Community**

Community is a group of people who have common characteristics; communities can be defined by location, race, ethnicity, age, occupation, interest in particular problems or outcomes, or other similar common bonds. Ideally, there would be available assets and resources, as well as collective discussion, decision-making and action. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

### **Community Assets**

Community assets are contributions made by individuals, citizen associations, and local institutions that individually and/or collectively build the community's capacity to ensure the health, well-being, and quality of life for the community and all of its members. (National Association of County and City Health Officials. *Mobilizing for Action through Planning and Partnerships (MAPP): Achieving Healthier Communities through MAPP, A User's Handbook* [online]. 2001 [cited 2012 Nov 7]. [http://www.naccho.org/topics/infrastructure/mapp/upload/MAPP\\_Handbook\\_fnl.pdf](http://www.naccho.org/topics/infrastructure/mapp/upload/MAPP_Handbook_fnl.pdf))

### **Community-based**

Community-based activity is an activity that involves members of the affected community in the planning, development, implementation, and evaluation of programs and strategies. (Institute of Medicine. *An Integrated Framework for Assessing the Value of Community-based Prevention*. Washington, DC: The National Academies Press; 2012)

### **Community-based Participatory Research (CBPR)**

Community-based Participatory Research is a collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community; it has the aim of combining knowledge with action and achieving social change to improve health outcomes and eliminate health disparities. (Minkler M., and N. Wallerstein, editors. *Community-Based Participatory Research for Health*. San Francisco, CA: Jossey-Bass Inc.; 2003)

### **Community Engagement**

"Community engagement is the process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or similar situations to address issues affecting the well-being of those people." (Centers for Disease Control and Prevention (CDC), 1997, p 9). The goals of community engagement are to build trust, enlist new resources and allies, create better communication, and improve overall health outcomes as successful projects evolve into lasting collaborations (Centers for Disease Control and Prevention (CDC). *Principles of community engagement*. Second edition. CDC/ATSDR Committee on Community Engagement, 2011)

### **Community Guide**

The *Community Guide* (short name for *The Guide to Community Preventive Services*) is a resource to help in the selection of interventions to improve health and prevent disease in states, communities, community organizations, businesses, healthcare organizations, or schools. The *Community Guide* is also a resource for researchers and research funders to identify important gaps in what is known and to determine how to allocate scarce research funds. (Task Force on Community Preventive Services. *The Guide to Community Preventive Services*. Oxford, UK: Oxford University Press; 2005)

### **Community Health**

Community health is a field within public health concerned with the study and improvement of the health of biological communities. Community health tends to focus on geographic areas rather than people with shared characteristics. (<http://dictionary.reference.com/browse/community+health>)

The term "community health" refers to the health status of a defined group of people, or community, and the actions and conditions that protect and improve the health of the community. Those individuals who make up a community live in a somewhat localized area under the same general regulations, norms, values, and organizations. For example, the health status of the people living in a particular town, and the actions taken to protect and improve the health of these residents, would constitute community health. ([http://www.encyclopedia.com/topic/Community\\_Health.aspx](http://www.encyclopedia.com/topic/Community_Health.aspx))

### **Community's Health**

The community's health is the perspective on public health that regards "community" as an essential determinant of health and an indispensable ingredient for effective public health practice. It takes into account the tangible and intangible characteristics of the community, its formal and informal networks and support systems, its norms and cultural nuances, and its institutions, politics, and belief systems.



(National Public Health Performance Standards Program. Acronyms, Glossary, and Reference Terms. CDC; 2007. [www.cdc.gov/nphpsp/PDF/Glossary.pdf](http://www.cdc.gov/nphpsp/PDF/Glossary.pdf))

### **Community Health Assessment (CHA)**

Community health assessment is a systematic examination of the health status indicators for a given population that is used to identify key problems and assets in a community. The ultimate goal of a community health assessment is to develop strategies to address the community's health needs and identified issues. A variety of tools and processes may be used to conduct a community health assessment; the essential ingredients are community engagement and collaborative participation. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009) This definition of community health assessment also refers to a Tribal, state, Army or territorial community health assessment.

### **Community Health Improvement Plan (CHIP)**

A community health improvement plan is a long-term, systematic effort to address public health problems on the basis of the results of community health assessment activities and the community health improvement process. A plan is typically updated every three to five years. (<http://www.cdc.gov/stltpublichealth/cha/plan.html>)

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. A community health improvement plan is critical for developing policies and defining actions to target efforts that promote health. It should define the vision for the health of the community through a collaborative process and should address the gamut of strengths, weaknesses, challenges, and opportunities that exist in the community to improve the health status of that community. (Adapted from: U.S. Department of Health and Human Services. *Healthy People 2010*. Washington, DC: DHHS; 2010.)

This definition of community health improvement plan also refers to a Tribal, state, Army or territorial community health improvement plan.

### **Community Health Improvement Process**

Community health improvement is not limited to issues clarified within traditional public health or health services categories but may include environmental, business, economic, housing, land use, and other community issues indirectly affecting the public's health. A community health improvement process involves an ongoing collaborative, community-wide effort to identify, analyze, and address health problems; assess applicable data; develop measurable health objectives and indicators; inventory community assets and resources; identify community perceptions; develop and implement coordinated strategies; identify accountable entities; and cultivate community ownership of the process. (National Public Health Performance Standards Program. Acronyms, Glossary, and Reference Terms. CDC; 2007. [www.cdc.gov/nphpsp/PDF/Glossary.pdf](http://www.cdc.gov/nphpsp/PDF/Glossary.pdf))

### **Community Health Needs Assessment (CHNA) – Internal Revenue Service**

A community health needs assessment is an assessment required under the Internal Revenue Code (IRS) by the Patient Protection and Affordable Care Act of 2010. The IRS requires hospital organizations to document compliance with CHNA requirements for each of their facilities in a written report. (Adapted from: Patient Protection and Affordable Care Act, Public Law 111-148 (124 Stat. 119 (2010); Internal Revenue Code of 1986, 26 U.S.C. § 501(r))

The IRS requires the written report to include:

- A description of the community served,
- A description of the process and methods used to conduct the assessment,
- A description of methods used to include input from people representing the broad interests of the community served,
- A prioritized description of all community health needs identified in the CHNA, as well as a description of the process and criteria used in prioritizing such needs, and

- A description of existing health care facilities and other resources in the community available to meet the needs identified in the CHNA.

([www.irs.gov/pub/irs-drop/n-10-39.pdf](http://www.irs.gov/pub/irs-drop/n-10-39.pdf))

### **Community Mobilization**

Community mobilization is a dynamic process that involves planned actions to reach, influence, enable, and involve key segments of the community in order to collectively create an environment that will effect positive behavior and bring about desired social change. Segments include influential groups or individuals as well as formal and informal leaders among those who will directly benefit from the desired social change. The process therefore is grounded in local concerns and energy, and both empowers and ensures local ownership, leading to greater sustainability and impact. (Center for Global Health Communication and Marketing,

[http://www.globalhealthcommunication.org/strategies/community\\_mobilization](http://www.globalhealthcommunication.org/strategies/community_mobilization))

### **Community Partnerships**

Community partnerships are a continuum of relationships between and among the Local Public Health System (LPHS) and its constituents that foster the sharing of resources, responsibility, and accountability in community health improvement and undertaking advocacy for capacity development and the delivery of community health services and improving community health. Partnerships are formed to assure the comprehensive, broad-based improvement of health status in the community.

(<http://www.cdc.gov/nphpsp/documents/glossary.pdf>)

### **Community Resilience**

Community resilience is a measure of the sustained ability of a community to utilize available resources to respond to, withstand, and recover from adverse situations. (<http://www.rand.org/topics/community-resilience.html>)

### **Compliance**

Compliance is defined as conformity in fulfilling official requirements.

([www.merriam-webster.com/dictionary/compliance](http://www.merriam-webster.com/dictionary/compliance))

Meeting applicable statutory, Executive Order, and regulatory standards, including standards for protection of human health and the environment for Department of Defense (DoD) operations in foreign countries, applicable international agreement requirements, and the requirements of DoD policy.

(Department of Defense Directive (DoDD) 4715.1E, *Environment, Safety, and Occupational Health*, March 19, 2005)

### **Continuing**

For the purposes of national public health department accreditation, continuing is defined as activities that have existed for some time, are currently in existence, and will remain in the future. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA: PHAB; May 2011)

### **Continuous Process Improvement (CPI)**

Continuous process improvement provides a mechanism for continuously improving processes and performance to support current business processes. It is a focused, sustained effort that builds on the underlying foundation of efficient and effective Agency processes.

(<http://www.dla.mil/issuances/Documents/i5309.pdf>)

### **Confidential Information**

Confidential information is any information about an identifiable person or establishment, when the person or establishment providing the data or described in it has not given consent to make that information public and was assured of confidentiality when the information was provided.

(<http://www.cdc.gov/hiv/topics/surveillance/resources/guidelines/epi-guideline/chapter5.htm>)



**Coordinated Care Organization (CCO)**

A coordinated care organization is a private or non-profit organization whose primary responsibility is the deliberate organization of patient care activities between two or more participants (including the patient) involved in a patient's care to facilitate the appropriate delivery of health care services. Organizing care involves the marshalling of personnel and other resources needed to carry out all required patient care activities and is often managed by the exchange of information among participants responsible for different aspects of care. (Care coordination. In: Shojania, K.G., McDonald, K.M., Wachter, R.M., and D.K. Owens, eds. Closing the quality gap: A critical analysis of quality improvement strategies. Technical Review 9 (Prepared by Stanford-UCSF Evidence-Based Practice Center under contract No. 290-02-0017). Vol 7. Rockville, MD: Agency for Healthcare Research and Quality, June 2007. AHRQ Publication No. 04(07)-0051-7)

**Core Public Health Competencies**

Core public health competencies are a set of skills desirable for the broad practice of public health, reflecting the characteristics that staff of public health organizations may want to possess as they work to protect and promote health in the community (i.e., deliver the Essential Public Health Services). (Council on Linkages between Academia and Public Health Practice. *Core Competencies for Public Health Professionals* [online]. 2010 [cited 2012 Nov 6]. [http://www.phf.org/resourcestools/pages/core\\_public\\_health\\_competencies.aspx](http://www.phf.org/resourcestools/pages/core_public_health_competencies.aspx))

**County Health Rankings**

County Health Rankings is a project administered by the University of Wisconsin Population Health Institute and funded by the Robert Wood Johnson Foundation as an effort to provide a basis for community-level discussions about selected health status indicators. The website provides rankings for selected indicators for counties in each state in the country. They are not designed to be a complete community health assessment; rather, they are provided for discussion starters in a community health improvement process. ([www.countyhealthrankings.org](http://www.countyhealthrankings.org))

**Cultural and Linguistic Competence**

Cultural and linguistic competence refers to a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. "Culture" refers to integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups. "Competence" implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities. (U.S. Department of Health and Human Services, Office of Minority Health. National Standards for Culturally and Linguistically Appropriate Services in Health Care [online]. 2001 [cited 2012 Nov 6]. <http://minorityhealth.hhs.gov/assets/pdf/checked/finalreport.pdf>)

**Customer/Client Satisfaction**

Customer or client satisfaction is the degree of satisfaction provided by a person or group receiving a service, as defined by that person or group. ([www.businessdictionary.com/definition/customer-satisfaction.html](http://www.businessdictionary.com/definition/customer-satisfaction.html))

# D

## **Data**

Data are factual information (such as measurements or statistics) used as a basis for reasoning, discussion, or calculation; information in numerical form that can be digitally transmitted or processed. (<http://www.merriam-webster.com/dictionary/data>)

## **Database**

A database is a usually large collection of data organized especially for rapid search and retrieval (as by a computer). (<http://www.merriam-webster.com/dictionary/database>)

## **Demographics**

Demographics are characteristic related data, such as size, growth, density, distribution, and vital statistics, which are used to study human populations. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

## **Determinants of Health**

Determinants of health are factors that influence the health status of an individual and/or a population. They may be categorized in several groups such as the genetic or biological causes and predisposition of disease, mortality, or disability; the behavioral aspects of disease and illness (choices, lifestyle, etc.); the cultural, political, economic, and social aspects of disease and illness; the environmental aspects of disease and illness; the policy aspects of disease and illness; and the individual and collective response to all of the above. (Institute of Medicine. *The Future of the Public's Health in the 21<sup>st</sup> Century*. Washington, DC: The National Academies Press; 2003)

## **Digital Media**

Digital media is digitized content (text, graphics, audio, and video) that can be transmitted over internet or computer networks. (<http://www.businessdictionary.com/definition/digital-media.html>)

## **Disease Outbreak**

A disease outbreak is the occurrence of cases of disease in excess of what would normally be expected in a defined community, geographical area or season. An outbreak may occur in a restricted geographical area, or may extend over several countries. It may last for a few days or weeks, or for several years. A single case of a communicable disease long absent from a population, or caused by an agent (e.g., bacterium or virus) not previously recognized in that community or area, or the emergence of a previously unknown disease, may also constitute an outbreak and should be reported and investigated. (World Health Organization. [http://www.who.int/topics/disease\\_outbreaks/en/](http://www.who.int/topics/disease_outbreaks/en/))

## **Disease Reporting System internet (DRSi)**

Disease Reporting System internet (DRSi) is the official repository for reportable medical events for the Navy as well as for the Coast Guard, Army and Air Force. (<http://www.med.navy.mil/sites/nmcphc/program-and-policy-support/drsi/Pages/default.aspx>)

## **Domain**

A domain is a sphere of knowledge identified by a name; a field of action, thought, or influence. ([www.merriam-webster.com/dictionary/domain](http://www.merriam-webster.com/dictionary/domain)). For the purposes of national public health department accreditation, domains are groups of standards that pertain to a broad group of public health services. There are 12 domains; the first 10 domains address the Ten Essential Public Health Services. Domain 11 addresses management and administration, and Domain 12 addresses governance. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA: PHAB; May 2011)

# E

## **Eligible Applicant**

An eligible applicant in the Army, for the purposes of national public health department accreditation, will be any Army preventive medicine (PM) department at the installation level that has regulatory responsibility for public health services at the community level. (AR 40–5 *Preventive Medicine*, 25 May 2007; DA PAM 40–11, *Preventive Medicine*, 19 October 2009)

An eligible applicant, for the purposes of national public health department accreditation, is the governmental entity that has the primary statutory or legal responsibility for public health in a Tribe, state, territory, or at the local level. To be eligible, such entities must operate in a manner consistent with applicable Federal, Tribal, state, territorial, and local statutes. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation, Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Emergency**

An emergency is any natural or manmade situation that results in injury, harm, or loss to humans or property. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

## **Emergency Operations Plan (EOP)**

An emergency operations plan is a document that assigns responsibility to organizations and individuals for carrying out specific actions at projected times and places in an emergency that exceeds the capability or routine responsibility of any one agency; sets forth lines of authority and organizational relationships, and shows how all actions will be coordinated; describes how people and property will be protected in emergencies and disasters; identifies personnel, equipment, facilities, supplies, and other resources available—within the jurisdiction or by agreement with other jurisdictions—for use during response and recovery operations; and identifies steps to address mitigation concerns during response and recovery activities. As a public document, an EOP also cites its legal basis, states its objectives, and acknowledges assumptions. (<http://www.fema.gov/pdf/plan/slg101.pdf>)

## **Enforcement**

Enforcement means to carry out effectively. ([www.merriam-webster.com/dictionary/enforcement](http://www.merriam-webster.com/dictionary/enforcement))

## **Environmental Health (EH)**

The programs, activities and subsequent risk determination associated with the anticipation, recognition, evaluation, and potential control of hazards identified within the media of the environment. Environmental Health focuses on the reduction or mitigation of the health hazards identified in the operational and/or garrison environment. (DoDD 4715.1E)

Environmental health is the science and practice of preventing human injury and illness and promoting well-being by anticipating, identifying, evaluating, communicating, and mitigating the risks posed by environmental sources and hazardous agents; and limiting exposures to hazardous physical, chemical, biological and radiological agents in air, water, soil, food, and other environmental media or settings that may adversely affect human health.

([http://www.neha.org/pdf/positions/NEHA\\_Adopted\\_EH\\_Definition\\_July\\_2013.pdf](http://www.neha.org/pdf/positions/NEHA_Adopted_EH_Definition_July_2013.pdf); AR 40–5, DA PAM 40–11)

## **Environmental Health Consultation**

Environmental health consultation is advice and guidance provided by an environmental health professional in response to a specific request for information on a potential hazard or condition that may adversely affect human health or the environment. Consultations are informative and educational and not associated with regulatory or enforcement actions. (Public Health Accreditation Board. *Environmental Public Health Think Tank Report 2010-2011*. Alexandria, VA: PHAB; 2011)

### ***Environmental Health Event***

Environmental health events are occurrences or imminent threats that may impact public health or the environment. Examples include natural events such as earthquakes, floods, wildfires, heat waves and drought; chemical attack or accidental release of chemicals from manufacturing facilities, oil tanker spills or train derailments; radiological or nuclear attack or accident; high-yield explosive detonation; biological incidents, naturally occurring or intentionally introduced, such as disease outbreaks caused by an infection transmitted through person-to-person contact, animal-to-person contact, or from contamination of food and water or other media; and the appearance of a novel, previously controlled, or eradicated infectious agent or biological toxin. (Public Health Accreditation Board. *Environmental Public Health Think Tank Report 2010-2011*. Alexandria, VA: PHAB; 2011. Department of Defense Instruction (DoDI) 6200.03)

### ***Environmental Health Expertise***

Environmental health expertise is the special knowledge, skills and abilities of an environmental health practitioner that allow him or her to anticipate, recognize, and respond to environmental health challenges. Human resources are organized into departments, programs, and agencies to provide expertise on drinking water, food protection, vector control, community environmental health assessment, public health emergency management, and other areas of environmental health. (Public Health Accreditation Board. *Environmental Public Health Think Tank Report 2010-2011*. Alexandria, VA: PHAB; 2011)

### ***Environmental Health Functions***

As an integral part of the public health system, environmental health helps to assure the conditions in which people can be healthy. The core functions of environmental health within the public health sector include the assessment of information on the health and environmental conditions of communities, the development of comprehensive environmental health policy, and assurance that environmental health services are available in all communities. These three core functions of environmental health are defined further, expanded and operationalized in the Ten Essential Services of Environmental Health and the Environmental Public Health Performance Standards. (Public Health Accreditation Board. *Environmental Public Health Think Tank Report*. 2010-2011. Alexandria, VA: PHAB; 2011; [http://www.cdc.gov/nceh/ehs/ephli/core\\_ess.htm](http://www.cdc.gov/nceh/ehs/ephli/core_ess.htm))

### ***Environmental Health Hazards***

Environmental hazards include physical hazards and vector- and arthropod-borne threats, residues, or agents, naturally occurring or resulting from previous activities of U.S. forces or other concerns, such as non-U.S. military forces, enemy forces, local national governments, or local national agricultural, industrial, or commercial activities. (DA PAM 40–11)

Environmental health hazards are situations or materials that pose a threat to human health and safety in the built or natural environment, as well as to the health and safety of other animals and plants, and to the proper functioning of an ecosystem, habitat, or other natural resource. Chemical, biological, radiological, or physical agents in the environment that have the capacity to produce adverse short- or long-term health effects (to include psychological health) or ecological damage are considered hazards. Risk is the probability or likelihood that an adverse outcome will occur in a person, population or environment exposed to a particular concentration or dose of the agent. Risk is a function of exposure and dose. A hazard is the source of a risk. The likelihood of harm from an exposure distinguishes risk from hazard. Risk is created by a hazard. A toxic chemical that is a hazard to human health does not constitute a risk unless humans are exposed to it. Environmental health programs mitigate risks to human health and the environment by anticipating, identifying, and controlling hazards and minimizing exposure to potentially harmful agents or conditions by effectively communicating the risks and preventive measures. (Public Health Accreditation Board. *Environmental Public Health Think Tank Report*. 2010-2011. Alexandria, VA: PHAB; 2011; Department of Defense Joint Publication (JP) 1–02, *Department of Defense Dictionary of Military and Associated Terms*, 8 November 2010; As Amended Through 15 February 2016)

**Epidemic**

The occurrence in a community or region of cases of an illness, specific health-related behavior, or other health related events clearly in excess of normal expectancy. (Porta, M., editor. *Dictionary of Epidemiology*. 5<sup>th</sup> ed. New York: Oxford University Press; 2008)

**Epidemiology**

Epidemiology is the study of the distribution and determinants of health conditions or events among populations and the application of that study to control health problems. (Centers for Disease Control and Prevention. *Principles of Epidemiology in Public Health Practice*, 3<sup>rd</sup> ed. [online] No date [cited 2012 Nov 6] <http://www.cdc.gov/ophss/csels/dsepd/SS1978/>)

**Essential Public Health Services**

The Essential Public Health Services are the 10 services identified in *Public Health in America* developed by representatives from Federal agencies and national organizations to describe what public health seeks to accomplish and how it will carry out its basic responsibilities. The list of 10 services defines the practice of public health. (<http://www.health.gov/phfunctions/public.htm> and [www.cdc.gov/nphpsp](http://www.cdc.gov/nphpsp))

**Ethics**

Ethics are the standards of conduct that direct a group or individual. In particular, it relates to the appropriate use of the power held by a group or individual. (Jonas, W.B, ed. *Mosby's Dictionary of Complementary and Alternative Medicine*. St. Louis MO: Elsevier; 2005.)

**Evidence-based Practice**

Evidenced-based practice involves making decisions on the basis of the best available scientific evidence, using data and information systems systematically, applying program-planning frameworks, engaging the community in decision making, conducting sound evaluation, and disseminating what is learned. (Brownson, R.C., Fielding, J.E., and C.M. Maylahn. Evidence-based public health: a fundamental concept for public health practice. *Annual Review of Public Health*, 2009; 30:175-201)

**Executive Summary (EXSUM)**

Executive summaries (EXSUM) are short reports that provide important information to the Command Group in a timely manner. (U.S. Army Training and Doctrine Command Regulation 1–11, *Staff Procedures*, 26 August 2015)

# F

## ***Family and Morale, Welfare, Recreation (FMWR)***

See: Morale, Welfare, and Recreation (MWR)

# G

## **Garrison**

The basic organizational structure for providing programs, services and management to an installation and its resident community. An Army garrison is a table of distribution and allowances (TDA) organization that commands, controls, and manages Army installations. Garrison command is the execution arm of the Installation Management Agency. It delivers the majority of installation management services to both resident and nonresident organizations. The garrison's mission is linked to the installation's purpose. As the execution arm of the Installation Management Agency, the garrison's mission is to provide installation management programs and services for mission activity commanders, Soldiers, civilians, family members, and retirees. (AR 40–5)

## **Global Assessment Tool (GAT)**

The Army's Global Assessment Tool (GAT) is an online survey that combines objective health data with survey-based questions, providing the individual self-awareness in the five dimensions of strength (as defined by the World Health Organization): emotional, social, spiritual, family and physical. The user is provided scores based on his or her answers to the questions, followed by personalized online self-development recommendations. (<http://csf2.army.mil/faqs.html>)

## **Goals**

Goals are general statements expressing a program's aspirations or intended effect on one or more health problems, often stated without time limits. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

## **Governing Entity**

A governing entity is the individual, board, council, commission or other body with legal authority over the public health functions of a jurisdiction of local government; or region, or district or reservation as established by state, territorial, or tribal constitution or statute, or by local charter, bylaw, or ordinance as authorized by state, territorial, or tribal constitution or statute. (National Public Health Performance Standards Program. Acronyms, Glossary, and Reference Terms, CDC; 2007. [www.cdc.gov/nphpsp/PDF/Glossary.pdf](http://www.cdc.gov/nphpsp/PDF/Glossary.pdf))

In the Army for the purpose of PH accreditation, the Commander to whom the PM Chief reports is the responsible and accountable party for the preventive medicine department and thus is considered the governing entity for the purpose of public health department accreditation. (Army Standards Review Working Group, 2014)

## **Guide to Clinical Preventive Services**

The *Guide to Clinical Preventive Services* contains the U.S. Preventive Services Task Force (USPSTF) recommendations on the use of screening, counseling, and other preventive services that are typically delivered in primary care settings. The USPSTF, an independent panel of experts supported by the Agency for Healthcare Research and Quality (AHRQ), makes recommendations based on systematic reviews of the evidence related to the benefits and potential harms of clinical preventive services. ([www.ahrq.gov/clinic/pocketgd.htm](http://www.ahrq.gov/clinic/pocketgd.htm))

## **Guide to Community Preventive Services**

The *Guide to Community Preventive Services (Community Guide)* is a collection of all the evidence-based findings and recommendations of the Community Preventive Services Task Force. It is a credible resource to help you make decisions by providing information on:

- Community preventive services, programs, and policies that have been shown to work
- How these programs, services, and policies may fit the needs of your community
- Estimated costs and potential return on investment.

([www.thecommunityguide.org](http://www.thecommunityguide.org))



# H

## **Health**

Health is a dynamic state of complete physical, mental, spiritual and social well-being and not merely the absence of disease or infirmity. (World Health Organization. *101<sup>st</sup> Session of the WHO Executive Board. Resolution EB101.R2*. Geneva, Switzerland: WHO; 1998)

## **Health Alert Network (HAN)**

The health alert network is a CDC nationwide program to establish the communications, information, distance-learning, and organizational infrastructure for a new level of defense against health threats, including the possibility of bioterrorism. The HAN links local health departments to one another and to other organizations critical for preparedness and response: community first-responders, hospital and private laboratories, state health departments, the CDC, and other Federal agencies. ([www.bt.cdc.gov/DocumentsApp/HAN/han.asp](http://www.bt.cdc.gov/DocumentsApp/HAN/han.asp))

## **Health Care Provider**

A health care provider is a person or organization that is licensed to give health care. Doctors, nurses, and hospitals are examples of health care providers. (Center for Medicare and Medicaid Services. Glossary [online]. No date [cited 2012 Nov 8]. <http://www.medicare.gov/glossary/h.html>)

## **Health Care Service**

A health care service is a business entity that provides inpatient or outpatient testing or treatment of human disease or dysfunction; dispensing of drugs or medical devices for treating human disease or dysfunction; or provision of procedures performed on a person for diagnosing or treating a disease. (Segen, J.C. *Concise Dictionary of Modern Medicine*. New York NY: McGraw-Hill; 2002.)

## **Health Care System**

A health care system is an organized system of providers and services for health care; may include hospitals, clinics, home care, long-term care facilities, assisted living, physicians, health plans, and other services. (Adapted from: *Medical Dictionary for the Health Professions and Nursing*; © Farlex; 2012)

## **Health Communication**

Health communication is informing, influencing, and motivating individual, institutional, and public audiences about important health or public health issues. Health communication includes disease prevention, health promotion, health care policy, and the business of health care, as well as enhancement of the quality of life and health of individuals within a community. Health communication deals with how information is perceived, combined, and used to make decisions. (Riegelman, R. *Public Health 101*. Sudbury, MA: Jones and Bartlett; 2010)

## **Health Disparities**

Health disparities are differences in population health status (incidence, prevalence, mortality, and burden of adverse health conditions) that can result from environmental, social and/or economic conditions, as well as public policy. These differences exist among specific population groups in the United States and are often preventable. (Adapted from: National Association of County and City Health Officials. *Operational Definition of a Functional Local Health Department* [online]. 2005 [cited 2012 Nov 8]. <http://www.naccho.org/topics/infrastructure/accreditation/OpDef.cfm>; and National Cancer Institute. *Health Disparities Defined* [online]. 2010 [cited 2012 Nov 8]. <http://crchd.cancer.gov/disparities/defined.html>)

## **Health Education**

Health education is any combination of learning opportunities designed to facilitate voluntary adaptations of behavior (in individuals, groups, or communities) conducive to good health. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)



**Health Equity**

Health equity is the attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and healthcare disparities. (<http://minorityhealth.hhs.gov/npa/templates/browse.aspx?lvl=1&lvlid=34>)

**Health in all Policies**

Health in all policies is an approach that rests on the assumption that health is fundamental to every sector of the economy and that every policy—large and small—should take into consideration its effect on health. (Institute of Medicine. *For the Public's Health: Revitalizing Law and Policy to Meet New Challenges*. Washington, DC: The National Academies Press; 2012)

**Health Inequity**

Health inequity refers to differences in population health status and mortality rates that are systemic, patterned, unfair, unjust, and actionable, as opposed to random or caused by those who become ill. (Whitehead, M.M. The Concepts and Principles of Equity and Health. *International Journal of Health Services*; 1992; 22(3):429–445)

**Health Information**

Health information is information regarding medical or health-related subjects that individuals may use to make appropriate health decisions. (U.S. Department of Health and Human Services. *Healthy People 2010*. Washington, DC: DHHS; 2000)

**Health Investigation**

A health investigation is the collection and evaluation of information about the health of community residents. This information is used to describe or count the occurrence of a disease, symptom, or clinical measure and to evaluate the possible association between the occurrence and exposure to hazardous substances. (<http://www.atsdr.cdc.gov/glossary.html#G-G->)

**Health Literacy**

Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. (*American Journal of Health Education*. 2012; 43(2).

**Health Needs**

Health needs in public health are those demands required by a population or community to improve their health status. ([www.nlm.nih.gov](http://www.nlm.nih.gov))

**Health Policy**

Health policy is social policy concerned with the process whereby public health agencies evaluate and determine health needs and the best way to address them, including the identification of appropriate resources and funding mechanisms. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

**Health Promotion**

Any combination of health education and related organizational, social, political, and economic interventions designed to facilitate behavioral and environmental changes conducive to the health and well-being of the Army community. (AR 600–63)

Health promotion is a set of intervention strategies that seek to eliminate or reduce exposures to harmful factors by modifying human behaviors. Any combination of health education and related organizational, political, and economic interventions designed to facilitate behavioral and environmental adaptations that will improve or protect health. This process enables individuals and communities to control and improve their own health. Health promotion approaches provide opportunities for people to identify problems, develop solutions, and work in partnerships that build on existing skills and strengths. Health promotion consists of planned combinations of educational, political, regulatory, and organizational supports for actions and conditions of living conducive to the health of individuals, groups, or communities. Health

promotion activities are any combination of education and organizational, economic, and environmental supports aimed at the stimulation of healthy behavior in individuals, groups, or communities. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

Health Promotion is the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behaviors toward a wide range of social and environmental interventions. ([http://www.who.int/topics/health\\_promotion/en/](http://www.who.int/topics/health_promotion/en/)). Health promotion approaches engage people and organizations in the transformation process, and their engagement in the process constitutes in itself a desired change. (Institute of Medicine. *An Integrated Framework for Assessing the Value of Community-based Prevention*. Washington, DC: The National Academies Press; 2012)

### **Health Status**

Health status is the degree to which a person or defined group can fulfill usually expected roles and functions physically, mentally, emotionally, and socially. (Scutchfield F.D., and C.W. Keck. *Principles of Public Health Practice*. Delmar Cengage Learning; 2009)

### **Healthy Community**

A healthy community is a place where people provide leadership in assessing their own resources and needs, where public health and social infrastructure and policies support health, and where essential public health services, including quality health care, are available. In a healthy community, communication and collaboration among various sectors of the community and the contributions of ethnically, socially, and economically diverse community members are valued. (Institute of Medicine. *The Future of the Public's Health in the 21<sup>st</sup> Century*. Washington, DC: The National Academies Press; 2003)

### **Healthy People 2020**

*Healthy People 2020* is a document that provides science-based, 10-year national objectives for improving the health of all Americans. For three decades, Healthy People has established benchmarks and monitored progress over time in order encourage collaborations across sectors; guide individuals toward making informed health decisions and measure the impact of prevention activities. ([www.healthypeople.gov/2020](http://www.healthypeople.gov/2020))

### **Hot-wash**

A hot-wash is defined as the “after-action” discussions and evaluations of an agency’s (or multiple agencies’) performance following an exercise, training session, or major event. (<http://en.wikipedia.org/wiki/Hotwash>)

### **Human Resources System**

A human resources system is a comprehensive approach to the recruitment, hiring, orientation and training of employees, as well as the activities associated with managing employee benefits, retention, payroll, employment policies and procedures, and retention of employees. ([www.businessdictionary.com/definition/human-resources.html](http://www.businessdictionary.com/definition/human-resources.html))

# I

## **Individual Development Plan**

A “developmental action plan” to help Army civilian personnel improve their skills. It is a systematic approach to employees building on their individual strengths and overcoming their weaknesses with the goal of “improving job performance and pursuing career goals.” The plan should align with the goals and plans of the organization.

(<http://www.hamilton.army.mil/Portals/0/DHR/IMCOM%20INDIVIDUAL%20DEVELOPMENT%20PLAN%20INSTRUCTIONS.pdf>)

## **Industrial Hygiene**

The science and art devoted to anticipation, recognition, evaluation, and control of those environmental factors or stresses arising in or from the workplace that may cause sickness, impaired health and well-being, or significant discomfort and inefficiency among workers. (AR 40–5)

## **Infectious Disease**

An infectious disease is a disease caused by the entrance into the body of organisms (such as bacteria, protozoans, fungi, or viruses) that grow and multiply there; often used synonymously with communicable disease. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

## **Information**

Information is the communication or reception of knowledge or intelligence; knowledge obtained from investigation, study, or instruction: intelligence, news, facts, data.

(<http://www.merriam-webster.com/dictionary/information>)

## **Information System**

An information system is a combination of hardware, software, infrastructure, and trained personnel organized to facilitate planning, control, coordination, and decision-making in an organization.

([www.businessdictionary.com/definition/information-system.html](http://www.businessdictionary.com/definition/information-system.html))

## **Internal Audit**

Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organization's operations. It helps an organization accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes. ([www.theiia.org/internal-audit](http://www.theiia.org/internal-audit))

## **Intervention**

Intervention is a generic term used in public health to describe a program or policy designed to have an impact on a health problem. For example, a mandatory seat belt law is an intervention designed to reduce the incidence of automobile-related fatalities. Five categories of health interventions are (1) health promotion, (2) specific protection, (3) early case finding and prompt treatment, (4) disability limitation, and (5) rehabilitation. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

## **Inventory**

An inventory is an itemized list of current assets, such as (1) a catalog of the property of an individual or estate (2) a list of goods on hand. (<http://www.merriam-webster.com/dictionary/inventory>)

# J

## ***Joint Base***

A joint base (JB) is a base of the United States Military utilized by multiple Services; one Service hosts one or more other Services as tenants on the base. In most cases, joint bases have inter-Service support agreements (ISSAs) to govern how the host provides services to the tenants.

([https://en.wikipedia.org/wiki/Joint\\_base](https://en.wikipedia.org/wiki/Joint_base))

## ***Jurisdiction***

Territory within which a court or government agency may properly exercise its power.

(<https://www.law.cornell.edu/wex/jurisdiction>)

# L

## **Laws**

“Laws” refers to the aggregate of statutes, ordinances, regulations, rules, judicial decisions, and accepted legal principles that the courts of a particular jurisdiction apply in deciding controversies brought before them. The law consists of all legal rights, duties, and obligations that can be enforced by the government (or one of its agencies) and the means and procedures for enforcing them. (Garner, B.A., ed. *Black’s Law Dictionary*. 10<sup>th</sup> ed. Eagan, MN: Thomson West; 2014)

## **Local Health Department**

A local health department is defined, for the purposes of national public health department accreditation, as the governmental body serving a jurisdiction or group of jurisdictions geographically smaller than a state and recognized as having the primary statutory authority to promote and protect the public’s health and prevent disease in humans. This authority is defined by the state’s constitution, statute, or regulations or established by local ordinance or through formal local cooperative agreement or mutual aid. The entity may be a locally governed health department, a local entity of a centralized state health department, or a city, city-county, county, district, or regional health department. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

# M

## **Mandated Public Health Services**

Mandated public health services are required by statute, rule/regulation, ordinance or other similar legally binding process. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Media Advocacy**

Media advocacy is a set of processes by which individuals or groups in the community define, identify, and frame a problem and stimulate media coverage of the problem as a public health issue to help stimulate widespread public concern and action. (Adapted from: Glanz, K., Rimer, B.K., and K. Viswanath. *Health Behavior and Health Education: Theory, Research, and Practice*. San Francisco, CA: Jossey-Bass; 2008)

## **Military Treatment Facility or Medical Treatment Facility (MTF)**

A civilian or uniformed services medical center, hospital, clinic, or other facility that is authorized to provide medical, dental, or veterinary care. (DA PAM 40–11)

## **Medical Treatment Facility Command Team**

The upper echelons of leadership at the MTF that report to the MTF Commander, to include the Deputy Commander for Clinical Services (DCCS), Deputy Commander for Administration (DCA), and Command Sergeant Major (CSM). Additional command team members such as the Deputy Commander for Health Readiness (DCHR), Chief Nursing Officer (CNO), Chief Medical Officer (CMO), etc. may also be present based on the size and structure of a particular MTF. (U.S. Army Medical Command Regulation 10–1, *Organizations and Functions Policy*, 6 May 09; U.S. Army Medical Command Operations Order 16-08, *AMEDD Health Executive Leadership Organization Structure (HELOS) Implementation*, October 2015)

## **Medical Readiness**

An individual Service member's, or larger cohort's, readiness level against established metrics applied to key elements of health and fitness to determine medical deployability in support of contingency operations. (DoDI 6025.19, *Individual Medical Readiness (IMR)*, June 9, 2014)

## **Mid-level Provider**

Mid-level practitioner means an individual practitioner, other than a physician, dentist, veterinarian, or podiatrist, who is licensed, registered, or otherwise permitted by the United States or the jurisdiction in which he/she practices, to dispense a controlled substance in the course of professional practice. Examples of mid-level practitioners typically include, but are not limited to, health care providers such as nurse practitioners, nurse midwives, nurse anesthetists, clinical nurse specialists and physician assistants, but there are other disciplines that states may also recognize in this category. (Department of Justice, Drug Enforcement Administration (US). *Code of Federal Regulations. Title 21 Food and Drug. Department of Justice. Part 1300. Definitions*. Springfield, VA: DOJ;2014.

## **Mission**

The task, together with the purpose, that clearly indicates the action to be taken and the reason therefore. (JP 1–02)

## **Mission Command Teams**

The conduct of military operations through decentralized execution based upon mission-type orders. (JP 1–02)

## **Mission Statement**

A mission statement is a written declaration of an organization's core purpose and focus that normally remains unchanged over time. Properly crafted mission statements (1) serve as filters to separate what is important from what is not, (2) clearly state which markets will be served and how, and (3) communicate a

sense of intended direction to the entire organization. (BusinessDirectory.Com. "Mission Statement" [online]. No date [cited 2012 Nov 8]. <http://www.businessdictionary.com/definition/mission-statement.html>)

**Mitigation**

Mitigation refers to measures taken to reduce the harmful effects of a disaster or emergency by attempting to limit the impact on human health and economic infrastructure. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

**Morale, Welfare, and Recreation (MWR) or Family and Morale, Welfare, Recreation (FMWR)**

A network of support and leisure services designed for use by Soldiers (Active, Reserve, and Guard), their Families, Department of Defense civilian employees, military retirees and other eligible participants. (<http://www.armymwr.com/mwrglossary.aspx>)

# N

## ***National Prevention Strategy***

The National Prevention Strategy includes actions that public and private partners can take to help Americans stay healthy and fit and improve our nation's prosperity. The strategy outlines four strategic directions that are fundamental to improving the nation's health. Those four strategic directions include building healthy and safe community environments, expanding quality preventive services, empowering people to make healthy choices, and eliminating health disparities. ([www.healthcare.gov/center/councils/nphpphc/strategy](http://www.healthcare.gov/center/councils/nphpphc/strategy))

## ***National Public Health Performance Standards (NPHPS)***

The National Public Health Performance Standards (NPHPS, or the Standards) provide a framework to assess capacity and performance of public health systems and public health governing bodies. This framework can help identify areas for system improvement, strengthen state and local partnerships, and ensure that a strong system is in place for addressing public health issues. NPHPS tools are used to:

- Identify partners and community members in the public health system
- Engage those partners in health assessment and health improvement planning
- Promote improvement in agencies, systems, and communities.

The NPHPS materials are available for three different audiences: state public health systems, local public health systems, and public health governing entities. (<http://www.cdc.gov/nphps/>)

## ***Non-commissioned Officer Evaluation Report (NCOER)***

The Non-commissioned Officer Evaluation Report is a report that contributes to Army wide improved performance and professional development through increased emphasis on performance counseling and assures verified communication process throughout the rating period. The report promotes a top-down emphasis on leadership communication, integrating rated NCOs' participation in objective setting, performance counseling, and the evaluation process. An Army NCO refers to enlisted personnel in ranks of Corporal to Command Sergeant Major. (AR 623-3; DA PAM 623-3, *Evaluation Reporting System*, 10 November 2015)

## ***Non-infectious/Non-communicable Disease***

Non-infectious/non-communicable diseases are conditions which affect the health status of populations but which are not transmitted from one individual to another by micro-organisms. Non-communicable diseases represent the major causes of death and disability in most developed countries. (Riegelman, R. *Public Health 101*. Sudbury, MA: Jones and Bartlett; 2010)



# O

## **Objectives**

Objectives are targets for achievement through interventions. Objectives are time limited and measurable in all cases. Various levels of objectives for an intervention include outcome, impact, and process objectives. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

## **Occupational Health (OH)**

Activities directed toward anticipation, recognition, evaluation, and control of potential occupational health hazards; preventing injuries and illness of personnel during operations; and accomplishment of mission at acceptable levels of risk. (DoDD 4715.1E)

The promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations by preventing departures from health, controlling risks and the adaptation of work to people, and people to their jobs. ([www.agius.com/hew/resource/ohsilo.htm](http://www.agius.com/hew/resource/ohsilo.htm))

The identification and control of the risks arising from physical, chemical, and other workplace hazards in order to establish and maintain a safe and healthy working environment. These hazards may include chemical agents and solvents, heavy metals such as lead and mercury, physical agents such as loud noise or vibration, radiation hazards, and physical hazards such as electricity or dangerous machinery. (<http://www.niehs.nih.gov/health/topics/population/occupational/>)

## **Occupational Health Consultation**

The provision of information or knowledge regarding the subjects of occupational health by subject matter experts. (APHC, 2015)

## **Occupational Health Functions**

Include performance of post-offer, pre-placement evaluations (new hires), periodic evaluations for surveillance of workplace hazards and certification of ability to perform required work, termination evaluations at the conclusion of surveillance in order to document status of health, return to duty evaluations after periods of injury or illness, fitness for duty evaluations to “officially” determine ability of worker to safely perform the essential functions of the job (these activities include a host of clinical functions including performance of vision, hearing and lung testing, performance of ECGs, VS and phlebotomy); care of workplace injuries and illnesses; worksite assessments to evaluate causes of injuries or illnesses observed in clinical activities or proactively, to prevent such injuries and illnesses; provision of expert professional opinions to many levels of command and management on matters of occupational medicine, including Americans with Disabilities Act, Family Medical Leave Act, Occupational Safety and Health Act, various environmental protection acts and laws, Federal Motor Carrier Safety Administration (and other Department of Transportation functions), Medical Review Officer functions, Office of Workers’ Compensation Program/Federal Employees Compensation Act, Surety Programs of all types, individual cases of employees with a variety of occupational health issues; and finally, management of the Occupational Health Program and the many daughter programs contained therein (including Vision Conservation, Hearing Conservation, Respiratory Protection, Surety, Individual Reliability and others). (AR 40–5; APHC (Prov), 2015; International Labor Office. *Encyclopaedia of Occupational Health and Safety*. No date [cited 28 August 2015]. <http://www.ilocis.org/en/contilo2.html>)

## **Occupational Health Hazards**

Any chemical, biological, or physical health hazard. This includes a hazard resulting from a person performing an operation or task (e.g., performing vehicle refueling, operating a burn pit) as well as a hazard associated with the general ambient environment (ambient airborne smoke and dust). (DoDI 6055.05, *Occupational and Environmental Health (OEH)*, November 11, 2008)

**Officer Evaluation Report (OER)**

The OER is a report that serves as a guide for the Soldier's performance and development, enhances the accomplishment of the organization's mission, and provides additional information to the rating chain. The report places emphasis on leadership communication, integrating rated officer participation in objective setting, performance counseling, and the evaluation process. Officer refers to both commissioned and warrant officers. (AR 623-3; DA PAM 623-3)

**Operations**

"Operations" refers to the performance of a practical work or of something involving the practical application of principles or processes. ([www.merriam-webster.com/dictionary/operations](http://www.merriam-webster.com/dictionary/operations))

**Organizational Inspection Program (OIP)**

A comprehensive, written plan that addresses all inspections and audits conducted by the command/program/directorate and its subordinate elements as well as those inspections and audits scheduled by outside agencies. The purpose of the OIP is to coordinate inspections and audits into a single, cohesive, well-synchronized program focused on command objectives in order to identify, prevent, and eliminate problem areas. Command Inspection Programs, Staff Inspection Programs, Staff Assistance Visits, Inspector General Inspection Programs, audits, external inspections, and other assessment or evaluation mechanisms are all sub-components that comprise the broader OIP. (AR 1-201, *Army Inspection Policy*, 25 February 2015)

**Orientation**

Orientation is a process of providing training and information about a new job, new situation, or new position to employees. ([www.merriam-webster.com/dictionary/orientation](http://www.merriam-webster.com/dictionary/orientation))

**Outbreak**

See: *Disease Outbreak*

# P

## **Pandemic**

An epidemic occurring worldwide or over a very wide area, crossing international boundaries, and usually affecting a large number of people. (Porta, M., editor. *Dictionary of Epidemiology*. 5<sup>th</sup> ed. New York: Oxford University Press; 2008)

## **Partnership**

A partnership is a relationship among individuals and groups that is characterized by mutual cooperation and responsibilities. (Scutchfield, F.D., and C.W. Keck. *Principles of Public Health Practice*. Clifton Park, NY: Delmar Cengage Learning; 2009)

## **Patient-Centered Medical Home (PCMH) (may also be known as Army Medical Homes)**

The patient-centered medical home is a way of organizing primary care that emphasizes care coordination and communication to transform primary care into “what patients want it to be.” Medical homes can lead to higher quality and lower costs and can improve patients’ and providers’ experience of care. (<http://www.ncqa.org/Programs/Recognition/Practices/PatientCenteredMedicalHomePCMH.aspx>)

PCMH is an interdisciplinary approach to deliver evidence-based, comprehensive primary care—coordinating care delivered outside of the primary care setting and proactively engaging patients as partners in health. (U.S. Army Medical Command. *Army PCMH Operations Manual. Leaders Guide to Army Patient Centered Medical Home Transformation*, 30 January 2014)

## **Performance Management System**

A fully functioning performance management system that is completely integrated into health department daily practice at all levels includes: 1) setting organizational objectives across all levels of the department, 2) identifying indicators to measure progress toward achieving objectives on a regular basis, 3) identifying responsibility for monitoring progress and reporting, and 4) identifying areas where achieving objectives requires focused quality improvement processes. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Periodic**

Periodic is defined as occurring or recurring at regular intervals. ([www.merriam-webster.com/dictionary/periodic](http://www.merriam-webster.com/dictionary/periodic))

## **Policy**

“Policy” is the general principles by which a government entity is guided in its management of public affairs. For a health department, this may encompass external or community-facing policies (e.g., clean air or school physical education guidelines) as well as internal policies affecting staff (e.g., family leave or hiring practices). (Adapted from: Garner, B.A., ed. *Black's Law Dictionary*. 10<sup>th</sup> ed. Eagan, MN: Thomson West; 2014.)

## **Policy Development**

Policy development is the means by which problem identification, technical knowledge of possible solutions, and societal values converge to set a course of action; a process that enables informed decisions to be made concerning issues related to the public’s health. (Adapted from: Institute of Medicine. *The Future of Public Health*. Washington, DC: The National Academies Press; 1988)

## **Population Health**

The overall health status of a specified population, determined by a set of selected qualitative and quantitative health metrics. The aggregate health outcome of the health-adjusted life expectancy (quality and quantity) of a group of individuals, in an economic framework that balances the relative marginal return from the multiple determinants of health. (DA PAM 40–11)

Population health is a cohesive, integrated and comprehensive approach to health considering the distribution of health outcomes within a population, the health determinants that influence the distribution of care, and the policies and interventions that impact and are impacted by the determinants. (Nash, D.B., Reifsnyder, J., Fabius, R.J., and V.P. Pracilio. *Population Health: Creating a Culture of Wellness*. Sudbury, MA: Jones and Bartlett; 2011)

***Population Served (for the purposes of public health department accreditation)***

The population served by the Army preventive medicine department for the purpose of public health department accreditation includes, at a minimum, all beneficiaries enrolled to the installation MTF (e.g., Active Duty personnel, their Families; Retirees, when applicable), the DOD civilian workforce assigned to the installation (for occupational health purposes only), and military units assigned to the installation. The population served by the Army preventive medicine department may include a number of individuals that are served both by a local health department and the Army preventive medicine department, based on whether the individuals live on or off the installation. (APHC, 2015)

***Population-based Approach***

A population-based approach is an approach that targets a population as the subject instead of the individual. (Scutchfield, F.D., and C.W. Keck. *Principles of Public Health Practice*. Clifton Park, NY: Delmar Cengage Learning; 2009)

***Population-based Health***

Population-based health are interventions aimed at disease prevention and health promotion that effect an entire population and extend beyond medical treatment by targeting underlying risks, such as tobacco; drug and alcohol use; diet and sedentary lifestyles; and environmental factors. (Turnock, B.J.H. *Public Health: What It Is and How It Works*. Gaithersburg, MD: Aspen Publishers, Inc.; 1997)

***Prevention***

Primary prevention consists of strategies that seek to prevent the occurrence of disease or injury, generally through reducing exposure or risk factor levels. These strategies can reduce or eliminate causative risk factors (risk reduction). Secondary prevention consists of strategies that seek to identify and control disease processes in their early stages before signs and symptoms develop (screening and treatment). Tertiary prevention consists of strategies that prevent disability by restoring individuals to their optimal level of functioning after a disease or injury is established. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

***Preventive Medicine (PM)***

A broad set of capabilities, ranging from basic field sanitation techniques to comprehensive medical, behavioral health, and occupational and environmental health exposure surveillance systems and procedures. These capabilities are focused on the medical readiness of the force to combat health threats across the full spectrum of military operations in the continental U.S. and outside the continental U.S. (DA PAM 40–11)

***Primary Care***

Primary care is basic or general health care focused on the point at which a patient ideally first seeks assistance from the health care system. (Scutchfield, F.D., and C.W. Keck. *Principles of Public Health Practice*. Clifton Park, NY: Delmar Cengage Learning; 2009)

***Primary Data***

Primary data are data observed or collected from original sources, ranging from more scientifically rigorous approaches such as randomized controlled trials to less rigorous approaches such as case studies. ([www.nlm.nih.gov](http://www.nlm.nih.gov))

***Procedure/Protocol***

A procedure or protocol is a written description of the way in which a particular action or set of actions should be accomplished. ([www.merriam-webster.com/dictionary/procedure](http://www.merriam-webster.com/dictionary/procedure))

**Profile**

A profile is a set of data, often in graphic form, portraying the significant features of something such as a corporation's earnings profile. ([www.merriam-webster.com/dictionary/profile](http://www.merriam-webster.com/dictionary/profile)).

For the purposes of Army PH accreditation, this should not be confused with the physical or medical profile for Army Soldiers who have a temporary or permanent medical condition that may render them medically not ready to deploy.

**Programs, Processes, and Interventions**

Programs, processes, and interventions are the terms used to describe functions or services or activities carried out through the daily work of public health departments. (Public Health Accreditation Board. Unpublished definition. 2010-2011)

**Promising Practice**

Promising practice is defined as a practice with at least preliminary evidence of effectiveness in small-scale interventions or for which there is potential for generating data that will be useful for making decisions about taking the intervention to scale and generalizing the results to diverse populations and settings. (U.S. Department of Health and Human Services. Administration for Children and Families Program Announcement. *Federal Register*, Vol. 68, No. 131, July 2003)

**Proponent**

[A] person who advocates a theory, proposal, or project.

([https://www.google.com/?gws\\_rd=ssl#q=proponent](https://www.google.com/?gws_rd=ssl#q=proponent))

**Public Health (PH)**

The science and art of preventing disease, prolonging life, and promoting physical health and efficiency through organized community efforts. It encompasses preventive medicine, health promotion and wellness, and the public health aspects of veterinary medicine services. (U.S. Army Medical Command Regulation 10-1)

The mission of public health is to fulfill society's desire to create conditions so that people can be healthy. Public health includes the activities that society undertakes to assure the conditions in which people can be healthy. These include organized community efforts to prevent, identify and counter threats to the health of the public. Public health is:

- the science and the art of preventing disease, prolonging life, and promoting physical health and mental health and efficiency through organized community efforts toward a sanitary environment;
- the control of community infections; the education of the individual in principles of personal hygiene;
- the organization of medical and nursing service for the early diagnosis and treatment of disease; and
- the development of the social machinery to ensure to every individual in the community a standard of living adequate for the maintenance of health.

The national public health department accreditation standards address the array of public health functions set forth in the 10 Essential Public Health Services. Public health department accreditation standards address a range of core public health programs and activities including, for example, environmental public health, health education, health promotion, community health, chronic disease prevention and control, communicable disease, injury prevention, maternal and child health, public health emergency preparedness, access to clinical services, public health laboratory services, management/administration, and governance. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett, 2009; Winslow, C.E.A., *Man and Epidemics*. Princeton, NJ: Princeton University Press, 1952; Institute of Medicine. *The Future of Public Health*. Washington, DC: The National Academies Press, 1988; Public Health Accreditation Board. *Standards and Measures Version 1.5*. Alexandria, VA: PHAB, May 2011)

### **Public Health Emergency**

A public health emergency is an occurrence or imminent threat of an illness or health condition caused by bioterrorism, epidemic or pandemic disease, or novel and highly infectious agent or biological toxin, that poses a substantial risk of a significant number of human fatalities or incidents of permanent or long-term disability. Such a health condition includes, but is not limited to, an illness or health condition resulting from a natural disaster. (Gostin, L.O., Sapsin, J.W., Teret, S.P., Burris, S., Mair, J.S., Hodge Jr, J.G. and Vernick, J.S. The Model State Emergency Health Powers Act: Planning for and Response to Bioterrorism and Naturally Occurring Infectious Diseases. *Journal of the American Medical Association*. 2002; 288(5):622.)

### **Public Health Emergency Officer (PHEO)**

The Public Health Emergency Officer (PHEO) provides military commanders with guidance and recommendations on preparing for, declaring, responding to, and recovering from PH emergencies. The PHEO shall be either a uniformed services officer or DOD civilian employee who is a member of a military service medical department appointed by the installation commander as the principal advisor for all matters concerning PH emergencies. (DODi 6200.03 Public Health Emergency management within DoD, October 2013).

### **Public Health Ethics**

Public health ethics are applied to interactions between a public health agency and the population it serves. Common concerns are the interdependence of individuals and the tensions between the rights of individuals and the good of the community. (Scutchfield, F.D., and C.W. Keck. *Principles of Public Health Practice*. Clifton Park, NY: Delmar Cengage Learning; 2009)

As a field of practice, public health ethics is the application of relevant principles and values to public health decision making. In applying an ethics framework, public health ethics inquiry carries out three core functions, namely 1) identifying and clarifying the ethical dilemma posed, 2) analyzing it in terms of alternative courses of action and their consequences, and 3) resolving the dilemma by deciding which course of action best incorporates and balances the guiding principles and values. (<http://www.cdc.gov/od/science/integrity/phethics/>)

### **Public Health Informatics**

Public health informatics is the systematic application of information and computer science and technology to public health practice, research, and learning. Public health informatics—

- Analyzes structure, relationships and behavior of systems that store, process and use information
- Integrates information from diverse sources and into work processes where it can generate value
- Develops methods for effective acquisition and presentation of information
- Manages change among people, processes and technology to enable effective use of information systems.

(<http://www.cdc.gov/learning/archive/informatics.html>)

### **Public Health Infrastructure**

Public health infrastructure denotes the systems, competencies, relationships, and resources that enable performance of public health's core functions and essential services in every community. Categories include human, organizational, informational, and fiscal resources. (Turnock, B.J. *Public Health: What It Is and How It Works*. 4<sup>th</sup> ed. Sudbury, MA: Jones and Bartlett; 2009)

### **Public Health Laboratory**

A public health laboratory is a scientific research facility that, in collaboration with the public health system, provides clinical diagnostic testing, disease surveillance, environmental and radiological testing, emergency response support, applied research, laboratory training and other essential services to the communities they serve. (Adapted from: The Association of Public Health Laboratories (U.S.) [online]. No date [cited 2012 Nov 8]. <http://www.aphl.org/AboutAPHL/aboutphls/Pages/default.aspx>.)



### **Public Health Laws**

Public health laws are defined, for purposes of PHAB accreditation, as ALL types of statutes, regulations, rules, executive orders, ordinances, case law, and codes that are applicable to the jurisdiction of the health department. For state health departments, not all ordinances are applicable, and therefore ordinances may not need to be addressed by state health departments. Similarly, some statutes are not applicable to local health departments, and therefore some statutes may not need to be addressed by local health departments. For Tribal health departments, applicable “laws” will depend on several factors, including governance framework and interaction with external governmental entities (Federal, state, and local). (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA: PHAB, May 2011)

### **Public Health Nursing**

Public health nursing (PHN) practice is population-focused and requires unique knowledge, competencies, and skills. It involves working with the communities and populations as equal partners, and focusing on primary prevention and health promotion. (Kulbok, P.A., Thatcher, E., Park, E., and P.S. Meszaros. Evolving public health nursing roles: focus on community participatory health promotion and prevention. *Online Journal of Issues in Nursing*. 2012; 17(2):1)

### **Public Health Preparedness**

Public health preparedness is the ability of the public health system, community, and individuals to prevent, protect against, quickly respond to, and recover from health emergencies, particularly those in which scale, timing, or unpredictability threatens to overwhelm routine capabilities. Activities focus on protecting and improving the overall health of communities and include:

- Monitoring and investigating health threats (surveillance and disease detection)
- Communicating critical information with public health officials at local, state, and Federal levels
- Building and operating laboratories with capabilities to identify disease agents, toxins, and other health threats
- Operating and maintaining the Strategic National Stockpile of critical medical assets for rapid deployment to states
- Developing, practicing, and improving emergency response plans at state and local public health departments to ensure rapid and effective responses to real health security threats.

(<http://www.cdc.gov/phpr/whatcdcisdoing.htm>)

### **Public Health Program**

A public health program, for accreditation purposes, is defined as a set of activities and interventions aimed at improving the health of a particular segment of the population or of the population as a whole. Examples of public health programs include, but are not limited to, environmental public health, maternal-child health, chronic disease, and emergency preparedness. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA: PHAB; May 2011)

### **Public Health Surveillance**

Public health surveillance is the continuous, systematic collection, analysis, and interpretation of health-related data needed for the planning, implementation, and evaluation of public health practice. (World Health Organization. *Health Topics: Public Health Surveillance* [online] No date [cited 2016 Apr 3]. [www.who.int/topics/public\\_health\\_surveillance](http://www.who.int/topics/public_health_surveillance))

### **Public Health System**

The public health system is the constellation of governmental and nongovernmental organizations that contribute to the performance of essential public health services for a defined community or population. (Scutchfield, F.D., and C.W. Keck. *Principles of Public Health Practice*. Clifton Park, NY: Delmar Cengage Learning; 2009)

### **Public Health Workforce**

The public health workforce, for purpose of accreditation, is defined as those individuals who are employed either full-time or part-time by the governmental public health department for the purpose of

supporting the provision of the services described in the PHAB *Standards and Measures*. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA: PHAB, May 2011)

***Public Health Workforce Development Plan***

A public health workforce development plan sets forth objectives and strategies that are aimed at training or educational programs to bring public health employees within the department up to date on the skills necessary to do their jobs better or to train the next generation of public health workers and leaders. (Rowitz, L. *Public Health Leadership*. 3<sup>rd</sup> ed. Sudbury, MA: Jones and Bartlett; 2014)

***Public Testimony***

Public testimony is accurate information provided by a public official or expert in the course of informing the development of public policy. (Hanson, A. *Defining "Expert" Voices: Giving Testimony in Mental Health Policy Making*. New Orleans, LA: National Communication Association; 2011)



# Q

## **Qualitative Data**

Qualitative data are data concerning information that is difficult to measure, count, or express in numerical terms. (EPA Program Evaluation Glossary. <http://www.epa.gov/evaluate/index.htm>) Methods for gathering qualitative data include document reviews, interviews, focus groups, case studies, and observation. (Academy of Health. Health Services Research Methods Glossary. [www.hsrmethods.org](http://www.hsrmethods.org))

## **Quantitative Data**

Quantitative data are data concerning information that can be expressed in numerical terms, counted, or compared on a scale. (EPA Program Evaluation Glossary. <http://www.epa.gov/evaluate/index.htm>)

## **Quality Improvement (QI)**

Quality improvement in public health is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act, which is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the health of the community. (Riley, W.J., Moran, J.W., Corso, L.C., Beitsch, L.M., Bialek, R., and A. Cofsky. Defining quality improvement in public health. *Journal of Public Health Management and Practice*. 2010;16(1):5–7)

# R

## **Readiness**

The ability of military forces to fight and meet the demands of assigned missions. (JP 1–02)

The ability of U.S. military forces to fight and meet the demands of the National Military Strategy (NMS). Readiness is the synthesis of two distinct but interrelated levels: unit readiness and Joint readiness. Unit readiness is the ability to provide capabilities required by the combatant commanders to execute their assigned missions. This is derived from the ability of each unit to deliver the outputs for which it was designed. Joint readiness is the combatant commander's ability to integrate and synchronize ready combat and support forces to execute their assigned missions (AR 220–1, *Army Unit Status Reporting and Force Registration—Consolidated Policies*, 15 April 2010)

## **Ready and Resilient (R2)**

The Ready and Resilient program integrates and synchronizes multiple efforts and initiatives to improve the readiness and resilience of the Total Army—Soldiers (Active Duty, Reserve, National Guard), Army civilians and Families. Ready and Resilient will build upon mental, physical, emotional, behavioral and spiritual resilience in our Soldiers, Families and DA civilians to enhance their ability to manage the rigors and challenges of a demanding profession. At the heart of this initiative is a focus on building the person as an enabler to achieving enhanced performance, which directly links to the increased readiness of the individual, his/her unit and the Total Army. May also be referred to as the Ready and Resilient Campaign (R2C or R2) or Ready and Resilient Program. (<http://www.army.mil/readyandresilient>)

## **Regular**

For the purposes of national public health department accreditation, “regular” is defined as within a pre-established schedule determined by the health department. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA; PHAB; May 2011)

## **Regulation**

A regulation is a rule or order, having legal force, usually issued by an administrative agency. Also, the act or process of controlling by rule or restriction. (Garner, B.A., ed. *Black's Law Dictionary*. 10<sup>th</sup> ed. Eagan, MN: Thomson West; 2014)

## **Report**

A report is a written or spoken description of a situation, event, etc.; an official document that gives information about a particular subject. (<http://www.merriam-webster.com/dictionary/report>)

## **Reportable Disease**

A reportable disease is a disease that, by law, must be reported to public health authorities upon diagnosis. (Centers for Disease Control and Prevention. *Principles of Epidemiology in Public Health Practice*, 3<sup>rd</sup> ed. [online] No date [cited 2012 Nov 6] [http://www2a.cdc.gov/TCEOnline/registration/detailpage.asp?res\\_id=2965](http://www2a.cdc.gov/TCEOnline/registration/detailpage.asp?res_id=2965))

## **Reportable Medical Event**

A reportable event may represent an inherent, significant threat to public health and military operations. These events have the potential to affect large numbers of people, to be widely transmitted within a population, to have severe/life threatening clinical manifestations, and to disrupt military training and deployment. Timely, accurate reporting of probable, suspected or confirmed cases ensures proper identification, treatment, control, and follow-up of cases. Submitted via the Disease Reporting System internet (DRSi). (Armed Forces Health Surveillance Branch. *Armed Forces Reportable Medical Events Guidelines and Case Definitions*, 17 July 2017 [online] <https://www.health.mil/Reference-Center/Publications/2017/07/17/Armed-Forces-Reportable-Medical-Events-Guidelines>)

## **Reliable**

“Reliable” is defined as being dependable or giving the same result on successive trials. ([www.merriam-webster.com/dictionary/reliable](http://www.merriam-webster.com/dictionary/reliable))

**Research**

Research is a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalized knowledge. (U.S. Department of Health and Human Services. *Code of Federal Regulations. Title 45 Public Welfare. Department of Health and Human Services. Part 46. Protection of Human Subjects.* Washington, DC: DHHS;2009)

**Risk Assessment**

Risk assessment is a process used to formally assess the potential harm due to a hazard taking into account factors such as likelihood, timing, and duration of exposure. (Riegelman, R. *Public Health 101.* Sudbury, MA: Jones and Bartlett; 2010)

**Risk Communication**

Risk communication is the interaction of populations and social institutions such as government agencies, advocacy groups, and the mass media in the formation and management of public opinion and policy making about risk. (Adapted from Glanz, K., Rimer, B.K., and K. Viswanath. *Health Behavior and Health Education: Theory, Research, and Practice.* San Francisco, CA: Jossey-Bass; 2008)

# S

## **Secondary Data**

Secondary data are those data which have been collected in the past, collected by other parties, or result from combining data or information from existing sources. ([www.nlm.nih.gov/nichs](http://www.nlm.nih.gov/nichs))

## **Select Agents**

Select agents are biological agents and toxins that could pose a severe threat to public health and safety. (<http://www.cdc.gov/phpr/dsat.htm>)

## **Staff Assistance Visit (SAV)**

A visit by staff members of a particular staff section designed to assist, teach, and train subordinate staff sections on how to meet the standards required to operate effectively within a particular functional area. (AR 1–201)

## **Site Review Team**

The site review team is the group of two or three public health peers who have been chosen by the public health accreditation agency to perform the review of the documentation for accreditation and conduct the physical site visit to the applicant health department, and provide a report to the Accreditation Committee. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Site Visit**

A site visit, for accreditation purposes, is a two- to three-day physical visit to the health department accreditation applicant by the peer review team. The purpose of the site visit is to validate the findings presented in the documentation that was submitted to the national public health department program, and to ask for additional documentation, at the reviewers' discretion, to supplement what they received prior to the site visit. Health department facilities are also reviewed during the site visit. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Situation Report (SITREP)**

Recurring report which (unlike a periodic report prepared at regular and fixed intervals) records and describes a particular occurrence or event. (<http://www.businessdictionary.com/definition/situation-report-sitrep.html>)

## **Social Capital**

Social capital refers to the institutions, relationships, and norms that shape the quality and quantity of a society's social interactions. Increasing evidence shows that social cohesion is critical for societies to prosper economically and for development to be sustainable. Social capital is not just the sum of the institutions which underpin a society—it is the glue that holds them together. (<http://go.worldbank.org/K4LUMW43B0>)

## **Social Determinants of Health**

Social determinants of health are the conditions in which people are born, grow, live, work and age, including the health system. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities—the unfair and avoidable differences in health status seen within and between countries. (World Health Organization (Switzerland). Health Topics: Social determinants of health [online]. 2012 [cited 2012 Nov 7].[http://www.who.int/social\\_determinants/en/](http://www.who.int/social_determinants/en/))

## **Social Marketing**

Social marketing represents a unique system for understanding who people are, what they desire and then organizing the creation, delivery, and communication of products, services, and messages to meet their desires while at the same time meeting the needs of society and solving serious social problems.

(Smith, W.A., and J. Strand. *Social Marketing Behavior: A Practical Resource for Social Change Professionals*. Washington, DC: Academy of Educational Development; 2008)

### **Socioeconomic Status**

Socioeconomic status is a complex phenomenon often based on indicators of relationships to work (occupational position or ranking), social class or status, and access to power. (Institute of Medicine. *Committee on Assuring the Health of the Public in the 21<sup>st</sup> Century. The Future of the Public's Health in the 21<sup>st</sup> Century*. Washington, DC: The National Academies Press; 2003)

### **Stakeholder**

Stakeholders are all persons, agencies and organizations with an investment or “stake” in the health of the community and the local public health system. This broad definition includes persons and organizations that benefit from and/or participate in the delivery of services that promote the public's health and overall well-being. (National Association of County and City Health Officials. *Mobilizing for Action through Planning and Partnerships (MAPP) Glossary* [online] No date [cited 2016 Apr 3] <http://archived.naccho.org/topics/infrastructure/mapp/framework/clearinghouse/general.cfm>)

### **State Health Department**

For the purposes of national public health department accreditation, a state health department is defined as the governing entity with primary statutory authority to promote and protect the public's health and prevent disease in humans. This authority is defined by state constitution, statutes or regulations, or established by executive order. State health departments may be part of an umbrella organization, super public health agency, or super agency that oversees public health functions as well as other government functions. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

### **Statutory Authority**

A statutory authority is an organization that is required by law to provide public services and receive central or local government funding, for example, health authorities and local authorities. (<http://society.theguardian.com/glossary/page/0,,646462,00.html>)

### **Strategic Plan**

A strategic plan results from a deliberate decision-making process and defines where an organization is going. The plan sets the direction for the organization and, through a common understanding of the mission, vision, goals, and objectives, provides a template for all employees and stakeholders to make decisions that move the organization forward. (Swayne, L.E., Duncan, W.J., and P.M. Ginter. *Strategic Management of Health Care Organizations*. 6<sup>th</sup> ed. San Francisco, CA: Jossey-Bass; 2008)

### **Surge Capacity**

Surge capacity refers to the ability to expand care or service capabilities in response to unanticipated or prolonged demand. (Adapted from: Joint Commission on Accreditation of Healthcare Organizations. *Health Care at the Crossroads: Strategies for Creating and Sustaining Community-wide Emergency Preparedness Strategies*. Washington, DC; Joint Commission; 2003)

### **Surveillance**

Public health surveillance is the continuous, systematic collection, analysis and interpretation of health-related data needed for the planning, implementation, and evaluation of public health practice. Such surveillance can serve as an early warning system for impending public health emergencies; document the impact of an intervention, or track progress towards specified goals; and monitor and clarify the epidemiology of health problems, to allow priorities to be set and to inform public health policy and strategies. ([http://www.who.int/topics/public\\_health\\_surveillance/en/](http://www.who.int/topics/public_health_surveillance/en/))

### **Surveillance Site**

A surveillance site is an organization or entity that reports public health surveillance data. (World Health Organization. *Health Topics: Public Health Surveillance*. [www.who.int/topics/public\\_health\\_surveillance](http://www.who.int/topics/public_health_surveillance))

***System for Health (SfH)***

The System for Health is the partnership among Soldiers, Retirees, Families, DA Civilians, leaders, professionals, and communities to promote readiness, resilience, and overall well-being. It is an integration of programs, policies, and initiatives to advance disease prevention and improve health. ([http://armymedicine.mil/Documents/Army\\_System\\_for\\_Health\\_Leaders\\_Guide.pdf?Mobile=1](http://armymedicine.mil/Documents/Army_System_for_Health_Leaders_Guide.pdf?Mobile=1))

# T

## **Technical Assistance (TA)**

Technical assistance is guidance tailored to meet the specific needs of a site or sites through collaborative communication with a specialist and the site(s). Assistance takes into account site-specific circumstances and culture and can be provided through phone, email, mail, internet, or in person. ([http://www.cdc.gov/dash/program\\_mgt/docs/pdfs/dash\\_definitions.pdf](http://www.cdc.gov/dash/program_mgt/docs/pdfs/dash_definitions.pdf))

## **Territorial Health Department**

For the purposes of national public health department accreditation, a territorial health department is defined as the governing entity with primary statutory authority to promote and protect the public's health and prevent disease in humans. This authority is defined by territorial constitution, statutes or regulations, or established by executive order. Territorial health departments may be a part of an umbrella organization, super public health agency, or super agency that oversees public health functions as well as other government functions. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

## **Training**

Training for the public health workforce includes the provision of information through a variety of formal, regular, planned means for the purpose of supporting the public health workforce in maintaining the skills, competencies, and knowledge needed to successfully perform their duties. (Institute of Medicine. *Who Will Keep the Public Healthy?* Washington, DC: The National Academies Press; 2003)

## **Trend Analysis**

Trend analysis is a study design which focuses on overall patterns of change in an indicator over time, comparing one time period with another time period for that indicator. Trend analysis is not used to determine causation; rather, associations can be drawn. Trend analysis is commonly used in program evaluation, for policy analysis, and for etiologic analysis. (Nash, D.B., Reifsnnyder, J., Fabius, R.J., and V. P. Pracilio. *Population Health: Creating a Culture of Wellness*. Sudbury, MA: Jones and Bartlett; 2011)

## **Tribal Epidemiology Centers**

Tribal epidemiology centers are Indian Health Service, division-funded organizations that serve American Indian/Alaska Native Tribal and urban communities by managing public health information systems, investigating diseases of concern, managing disease prevention and control programs, responding to public health emergencies, and coordinating these activities with other public health authorities. ([www.ihs.gov/Epi/index.cfm?module=epi\\_tec\\_main](http://www.ihs.gov/Epi/index.cfm?module=epi_tec_main))

## **Tribal Health Department**

A Tribal health department is defined, for the purposes of national public health department accreditation, as a Federally recognized Tribal government<sup>1</sup>, Tribal organization or inter-Tribal consortium, as defined in the *Indian Self-Determination and Education Assistance Act*, as amended. Such departments have jurisdictional authority to provide public health services, as evidenced by constitution, resolution, ordinance, executive order or other legal means, intended to promote and protect the Tribe's overall health, wellness and safety; prevent disease; and respond to issues and events. Federally recognized Tribal governments may carry out the above public health functions in a cooperative manner through formal agreement, formal partnership or formal collaboration. (Public Health Accreditation Board. *Guide to National Public Health Department Accreditation Version 1.0*. Alexandria, VA: PHAB; May 2011)

<sup>1</sup>As evidenced by inclusion on the list of recognized Tribes mandated under 25 U.S.C. § 479a-1, Publication of List of Recognized Tribes



# U

## ***Umbrella Agency***

An umbrella agency is an agency that oversees public health and primary care, substance abuse and mental health, the Medicaid program, and other human services programs. (National Governors Association. *Transforming State Health Agencies to Meet Current and Future Challenges*. Washington, DC: NGA; 1996)

## ***Urgent***

[Urgent is] a call for immediate attention. ([www.merriam-webster.com/dictionary/urgent](http://www.merriam-webster.com/dictionary/urgent))

## ***U.S. Army Medical Command (MEDCOM)***

The U.S. Army Medical Command (MEDCOM) is a direct reporting unit of the U.S. Army that provides command and control of the Army's fixed-facility medical, dental, and veterinary treatment facilities, providing preventive care, public health, medical research and development and training institutions. (U.S. Army Medical Command Regulation 10-1)

## ***U.S. Army Medical Department Center and School (AMEDDC&S)***

Located at Fort Sam Houston, Texas, the AMEDDC&S comprises two entities. The Center is responsible for formulating the Army Medical Department's medical organization, tactics, doctrine, and equipment. The School is responsible for educating and training all U.S. Army medical personnel. (Adapted from: [http://www.cs.amedd.army.mil/about\\_amedd.aspx](http://www.cs.amedd.army.mil/about_amedd.aspx))

# V

## **Valid**

[Valid is] well-grounded or justifiable; being at once relevant and meaningful. (www.merriam-webster.com/dictionary/valid)

## **Values**

Values describe how work is done and what beliefs are held in common as a basis for that work. They are fundamental principles that organizations stand for. (Swayne, L.E., Duncan, W.J., and P.M. Ginter. *Strategic Management of Health Care Organizations*. San Francisco, CA: Jossey-Bass; 2008)

## **Vision**

Vision is a compelling and inspiring image of a desired and possible future that a community seeks to achieve. A vision statement expresses goals that are worth striving for and appeals to ideals and values that are shared among stakeholders. (Bezold, C. *On Futures Thinking for Health and Health Care: Trends, Scenarios, Visions, and Strategies*. Alexandria, VA: Institute for Alternative Futures; 1991. The National Civic League; 1995)

## **Vital Records**

Vital records means reports of live birth, death, fetal death, marriage, (divorce, dissolution of marriage, or annulment) and data related thereto which have been accepted for registration and incorporated into the official records of the [Office of Vital Statistics]. (U.S. Department of Health and Human Services. *Model State Vital Statistics Act 7 and 9, Model State Vital Statistics Regulations, 2011 Revision*. Hyattsville, MD: DHHS; 2011)

## **Vital Statistics**

Vital statistics means the aggregated data derived from the records and reports of live birth, death, fetal death, induced termination of pregnancy, marriage, (divorce, dissolution of marriage, or annulment) and supporting documentation and related reports. (U.S. Department of Health and Human Services. *Model State Vital Statistics Act 7 and 9, Model State Vital Statistics Regulations, 2011 Revision*. Hyattsville, MD: DHHS; 2011)

## **Vulnerable Population**

A vulnerable population is a group of people with certain characteristics that cause them to be at greater risk of having poor health outcomes than the general population. These characteristics include, but are not limited to, age, culture, disability, education, ethnicity, health insurance, housing status, income, mental health, and race. (Adapted from: Institute of Medicine. *Performance Measurement: Accelerating Improvement*. Washington, DC: The National Academies Press; 2006)

# W

## **Wellness**

Wellness is the quality or state of being in good health, especially as an actively sought goal. ([www.merriam-webster.com/dictionary/wellness](http://www.merriam-webster.com/dictionary/wellness))

## **Workforce Assessment**

Workforce assessment in public health is the process of determining the personnel, training, skills, and competencies needed to implement initiatives contributing to the provision of the Ten Essential Public Health Services. This assessment includes the use of performance measures for identified competencies, identification of needed professional personnel, and formulation of plans to address workforce gaps. It also includes the planning, implementation and evaluation of life-long learning to equip public health workers to develop new skills as needed. (Institute of Medicine. *Who Will Keep the Public Healthy?* Washington, DC: The National Academies Press; 2003)

## **Workforce Development Plan**

See: ***Public Health Workforce Development Plan***





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