NLC as a Top-Priority Indicator of Public Health Readiness

The series <u>Ready or Not: Protecting the Public's Health from Diseases, Disasters and</u>

<u>Bioterrorism</u> (https://www.tfah.org/report-details/ready-or-not-protecting-the-publics-health-from-diseasesdisasters-and-bioterrorism-2019/), produced by Trust for America's Health (TFAH), has tracked public health emergency preparedness in the United States since 2003. Funded by a grant from the Robert Wood Johnson Foundation, the report lists the top priority indicators of state public health preparedness. The first indicator is state membership in NLC.

	INDICATORS		
1	Incident Management: Adoption of the Nurse Licensure Compact.	6	Water Security: Percentage of the population who used a community water system that failed to meet all applicable health-based standards.
2	Cross-Sector Community Collaboration: Percentage of hospitals participating in healthcare coalitions.	7	Workforce Resiliency and Infection Control: Percentage of employed population with paid time off.
3	Institutional Quality: Accreditation by the Public Health Accreditation Board.	8	Countermeasure Utilization: Percentage of people ages 6 months or older who received a seasonal flu vaccination.
4	Institutional Quality: Accreditation by the Emergency Management Accreditation Program.	9	Patient Safety: Percentage of hospitals with a top-quality ranking (Grade A) on the Leapfrog Hospital Safety Grade.
5	Institutional Quality: Size of the state public health budget, compared with the past year.	10	Health Security Surveillance: The public health laboratory has a plan for a six- to eight-week surge in testing capacity.

The section on NLC is on page 15 of the report.

State adoption of NLC is among the report recommendations found on page 34.