APEXPH, PACE EH, and MAPP: Local Public Health Planning and Assessment at a Glance

This fact sheet provides an overview of the key similarities and differences among three NACCHO and CDC developed tools: APEXPH, PACE EH, and MAPP. This information will help users decide which tool is most appropriate for their needs.

Background
The Essential Public Health Services (EPHS) provides a working definition of public health and a guiding framework for local public health systems. The EPHS identifies planning and assessment as key components of public health practice. In order to support the planning and assessment functions of local public health practitioners, the National Association of County and City Health Officials (NACCHO) and the Centers for Disease Control and Prevention (CDC) have developed several tools for assessing a variety of public health needs and creating plans to address them.

The histories of PACE EH and MAPP are rooted in APEXPH. In 1991 NACCHO, in cooperation with CDC, released the Assessment Protocol for Excellence in Public Health (APEXPH). Although feedback from the practice community highlighted the tool’s usefulness, practitioners noted that APEXPH did not adequately focus on environmental health and strategic planning. To address these needs, NACCHO, with the support from CDC’s National Center for Environmental Health, developed Protocol for Assessing Community Excellence in Environmental Health (PACE EH); and through support from the Office of the Director of Public Health Practice, NACCHO developed Mobilizing for Action through Planning and Partnerships (MAPP). PACE EH provides guidance for undertaking a community environmental health assessment process, whereas MAPP is a strategic approach to community health improvement.

The public health practitioners who developed these three tools recognize that it can be challenging to select the most appropriate tool for addressing particular public health needs. This document outlines the similarities and differences among the three tools and can ultimately assist in deciding which tool to use.

APEXPH
In 1991, NACCHO and CDC released the Assessment Protocol for Excellence in Public Health (APEXPH). APEXPH provides local communities with a means of increasing their organizational capacity and strengthening their leadership role in their communities. Through a three-part process, local health departments (LHD) assess internal capacity, identify priority community health issues, and develop action plans.

The benefits of APEXPH include increased understanding of the community’s actual and perceived health problems; strengthened relationships with government and community partners; and community recognition of the LHD as having a major role in ensuring the public’s health. Even though APEXPH has a notable lack of focus on environmental health and strategic planning, LHD’s familiar or experienced with APEXPH have a strong foundation for undertaking either PACE EH, MAPP, or a combination of the two.

PACE EH
In order to address the importance of environmental health, NACCHO and CDC’s National Center for Environmental Health developed the Protocol for Assessing Community Excellence in Environmental Health (PACE EH). PACE EH is a community-based methodology for evaluating and characterizing local environmental health conditions; identifying populations at risk of environmental exposure; and prioritizing local actions, programs and policies. The PACE EH process involves engaging the public’s involvement; collecting necessary and relevant information pertaining to community environmental health status; ranking environmental health issues; and setting local priorities for action. The benefits of PACE EH include improved public health workforce competencies; new and improved leadership roles for public health in the community; new professional
partnerships; greater credibility for local public health initiatives; and the creation and implementation of collaborative local environmental health improvement plans.

**MAPP**

In order to address the importance of strategic planning, CDC and NACCHO developed the *Mobilizing for Action through Planning and Partnerships* (MAPP) tool, which was launched in 2001. MAPP is a community-wide strategic planning process for improving community health and strengthening local public health systems. Facilitated by public health leadership, MAPP provides a framework that helps communities prioritize public health issues; identify resources for addressing them; and develop and implement community health improvement plans. The result of MAPP is not a strategic plan for the LHD, rather MAPP results in a strategic plan for the entire community whereby local public health system partners, collectively, address priority areas.

The benefits of MAPP include increased visibility of public health within communities; more public health advocacy and prioritization in local governments; better ability to anticipate and manage change; stronger public health infrastructure; stronger public health partnerships; more engaged communities, and stronger leadership roles for LHDs within communities.

**MAPP and PACE EH: A Comparison**

MAPP and PACE EH have similar methodologies. Both tools are strongly grounded in a community-based process. Both were developed from a concern that APEX PH was not comprehensive enough. Both use a broad definition of public health that addresses the root causes of public health conditions. Nevertheless, there are key differences that may help users determine which tool is most relevant to their needs.

1. **PACE EH** looks more specifically at, however broadly defined, environmental health. The **PACE EH** process results in a strategic plan tailored for environmental health.

2. **PACE EH** can be considered an assessment tool whereas MAPP, in its entirety, is not only an assessment process. Although the MAPP assessments are the driving force behind the tool, simply completing the assessments does not result in a fully implemented MAPP process. The MAPP assessments are not unique to MAPP – they are borrowed and modified from public health and business approaches. It is not until assessment data are brought together and priority areas are identified and acted upon, with broad partnership collaboration, that the value and unique approach of MAPP becomes apparent. Although the strength of **PACE EH** is that it provides step-by-step guidance for conducting a community-based environmental health assessment, it does not stop there. Like MAPP, it is also a strategic planning and action-oriented process.

3. The current **PACE EH** instrument does not include the National Public Health Performance Standards (NPHPS) as part of the assessment process. However, a comparable assessment that utilizes the 10 Essential Public Health Services is underdevelopment, though may not be included as part of the **PACE EH** process. The NPHPS assessment within MAPP answers the questions, “What are the components, activities, competencies, and capacities of your Local Public Health System?” and “How are the essential services being provided to our community?” The NPHPS assessment measures the extent to which the local public health system is providing the essential public health services. As a part of any strategic planning process, the NPHPS assessment complements other assessment data by providing a broad service-based context for understanding public needs and strengths in a community. Assessing the entire local public health system also provides a way to determine where system activities can influence grassroots assessment outcomes.

4. Some local public health practitioners feel the differences among **PACE EH**, MAPP, and APEX PH are more fundamental. One user of all three tools believes the MAPP process focuses on strategic issues while APEX PH and **PACE EH** focus on tactical issues. For example, one community identified “to use data to develop programming” as a MAPP strategic issue; “to reduce incidence of lung cancer” as an APEX PH issue; and “to reduce COPD associated with Air Quality” as a **PACE EH** priority area. MAPP helped this community focus on a crosscutting issue that affected the entire local public health system as opposed to the specific diseases and conditions identified using APEX PH and **PACE EH**. How these tools are applied, however, will depend on the context in which they are applied.

5. There are also cosmetic differences between **PACE EH** and MAPP. For instance, **PACE EH** does not provide a pre-identified set of indicators, but requires communities to develop their own, locally relevant indicators. MAPP provides a set of indicators

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1 Chronic obstructive pulmonary disease (COPD)
in 11 categories for the Community Health Status Assessment. Nevertheless, communities are encouraged to adapt those indicators, by either adding or deleting any or all of the indicators, based on what is appropriate for their community. The key to both processes is to avoid predetermining the results and to ensure that the community drives the process.

Other similarities include the challenges communities face in implementing both tools. Both require a significant time investment. In addition, the process should be repeated thus ensuring that community-based assessments and strategic planning become institutionalized within a LHD, and strong partnerships and collaboration define daily business. Further, processes such as PACE EH and MAPP can demonstrate significant change over time only through repeated and consistent applications.

How Do You Choose?
The short answer is: use PACE EH for environmental health strategic planning or if the goal is to conduct a community-based assessment, and use MAPP if the desired goal is a comprehensive public health strategic plan for the community.

However, MAPP would not be an inappropriate choice if the impetus for beginning a strategic planning process is to address environmental health concerns. At the same time, if a community would like to know how environmental health issues correlate with other public health issues in the community, MAPP would be a useful tool; however, by broadly defining environmental health, PACE EH would provide similar results.

Here are a few methods to help you choose:

1) Contact experienced communities for support. Interstate and intrastate peer mentoring has helped communities learn about, select, and apply these tools. Talking to members of other communities with similar geographic and demographic characteristics and experience with one or more of these tools can also help identify which tool will best address particular public health needs. For a listing of communities using the PACE EH and MAPP tools, visit NACCHO’s website at www.naccho.org.

2) Review the steps of each tool and determine which one will work best given a community’s unique dynamic. The value and ease of application of one tool over another will depend on community characteristics. Consider the extent to which guidance is needed, experience with environmental health assessment, and the extent to which environmental challenges are the driving force behind using these instruments.
The figures on the following pages provide a visual understanding of the differences and similarities among APEX PH, MAPP, and PACE EH while describing different scenarios that show how each tool can be used either individually or together.

**Figure 1: MAPP and PACE EH Parallel**
MAPP and PACE EH can be thought of as parallel processes. Figure 1 shows how the MAPP phases are reflected in the PACE EH process. The only exception is the NPHPS. A tool for measuring how well a local public health system is providing essential environmental health services is still in development.
**Figure 2: PACE EH as a MAPP Assessment**

The assessment function of *PACE EH* can be incorporated into a MAPP process. As figure 2 shows, *PACE EH* can be incorporated into the assessment phase of MAPP. This approach is recommended if environmental health issues are the impetus for doing a strategic planning process, and the community wants to focus on other community health indicators—not just environmental health indicators. In this case, the community would select MAPP as its primary tool and incorporate *PACE EH* components.
Figure 3: MAPP Planning through PACE EH

The planning function of PACE EH can also be applied to the MAPP process. In figure 3, environmental health is identified as a strategic issue within the MAPP process. In this instance, communities might want to use the PACE EH process to better understand the environmental health priorities in their community. San Antonio Metropolitan Health District has taken this approach.

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NACCHO is the national organization representing local health departments. NACCHO supports efforts that protect and improve the health of all people and all communities by promoting national policy, developing resources and programs, seeking health equity, and supporting effective local public health practice and systems.

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