Fixing the Broken Public Health Financing System: A Framework for Ensuring Foundational Public Health Services in All Communities

- Terry Allan, Cuyahoga County Board of Health
- Kaye Bender, Public Health Accreditation Board
- Georgia Heise, Three Rivers District Health Department
- Jennifer Tebaldi, Washington State Department of Health

Abby Dilley, RESOLVE, Moderator
Fixing the Finance System: Key Questions

- What is the work underway to address finance?
  - What are Foundational Public Health Services?
  - What is happening at the local, state and national levels?
- Why is this work happening now?
- How is this work related to other activities and frameworks?
- What is next?
What is the Work Underway?

Foundational Public Health Services

*Foundational* - cross-cutting skills and areas essential to assure the public’s health, and on which other critical services are built.
What is the Work Underway?

- **National activity**
  - Institute of Medicine Reports, *For the Public’s Health*
  - State, Tribal, Local, and Territorial (STLTs) Committee, Centers for Disease Control and Prevention
  - NACCHO policy statement
  - Public Health Leadership Forum and other related activities and initiatives

- **State activity**
  - Washington State
  - Ohio State
  - Others
National reports highlighting difficulties and calling for change - some state and local public health departments moving to address problems

Public health needs sustainable funding

Everyone should have access to basic public health services - funding and service levels vary depending on where you live
April 2012 *For the Public’s Health: Investing in a Healthier Future* recommends a minimum package of PH services

“The committee believes that it is a critical step to develop a detailed description of a *basic set of public health services* that must be made available in all jurisdictions. The basic set must be specifically defined in a manner that allows cost estimation to be used as a basis for an accounting and management framework and compared among revenues, activities, and outcomes. The committee developed the concept of a *minimum package of public health services*, which includes the foundational capabilities and an array of basic programs no health department can be without.”
Why a “New” Framework?

“...built on the well-known and long-established concepts of the Three Core Public Health Functions and the Ten Essential Public Health Services, it is intended to make more specific the services that every community should receive from its state and local health departments and to inform public health funding decisions. ...a framework for program and financial management, including the development of charts of accounts. ...enhance people’s understanding of the critical nature of population-based approaches (what communities get for their investment), and their understanding of the package as an instrument to ensure a standard level of health protection for all communities.”

- IOM For the Public’s Health, April 2012
Adopted December 2012

- ...minimum package of essential public health services and capacities available nationwide from LHDs, with SHAs, or through other partnerships
- ...consist of foundational capabilities and basic programs ...augmented by additional ones important to the community
- ...costs associated with adequately delivering foundational capacities and services... financial, technology infrastructure, and human resources necessary
- ...establish a threshold and a consistent basis for investments
Public Health Leadership Forum

- Funded by the Robert Wood Johnson Foundation
- Ongoing platform to engage a diverse set of public health leaders and stakeholders in dialogue on current challenges to public health and opportunities for transformation in the field.
- Consultation in April 2013 of the PHLF to determine whether there is a need for a national model and a strategy to develop one.
Definition/Constitution WG Members of the Public Health Leadership Forum

- Terry Allan*, Cuyahoga County
- Kaye Bender, PHAB
- Liza Corso, CDC
- David Fleming, Seattle-King County
- Laura Hanen, NACCHO
- Paul Jarris, ASTHO
- Paul Kuehnert, RWJF
- Glen Mays*, University of KY
- Judy Monroe, CDC
- Herminia Palacio, RWJF (now Pamela Russo)
- Jim Pearsol, Consultant (formerly ASTHO)
- Bobby Pestronk, NACCHO
- Jennifer Tebaldi*, WA State

*Denotes member of Cost Estimation WG
Develop a cogent, compelling national case for ensuring provision of FPHS, including securing necessary, sustainable funding to support them.

Build on the IOM report recommendations and the state and local efforts already underway, if possible, to encourage some consistencies in approach and methodologies, while also allowing adaptability and flexibility.

Aspirational and prospective (both in defining and cost estimation) - what is needed to support the foundation, not what is currently being spent.

Agreement on what is foundational critical – to establish a national model and strategy and develop a federal financing strategy.
**Foundational Public Health Services**

**Foundational Capabilities**

- Assessment (Surveillance, Epidemiology, and Laboratory Capacity)
- All Hazards Preparedness/Response
- Policy Development/Support
- Communications
- Community Partnership Development
- Organizational Competencies (*Leadership/Governance; Health Equity, Accountability/Performance Management, QI; IT; HR; Financial Management; Legal*)

**Foundational Areas**

- Communicable Disease Control
- Chronic Disease & Injury Prevention
- Environmental Public Health
- Maternal, Child, & Family Health
- Access to and Linkage w/Clinical Care

**Programs/Activities Specific to an HD and/or Community Needs**

Most of an HD's Work is “Above the Line”
Definitions

- **Foundational Capabilities (FCs):** cross-cutting skills needed in state/local HDs everywhere for health system to work anywhere; essential skills/capacities to support all activities

- **Foundational Areas (FAs):** Substantive areas of expertise or program-specific activities in all state/local HDs necessary to protect the community’s health

- **Programs/Activities Specific to an HD or a Community’s Needs:** Additional, critical significance to a specific community’s health, supported by FAs/FCs; most of an HD’s work

- **Foundational PH Services (FPHS):** Comprised of the FCs and FAs; suite of skills, programs/activities that must be available in state/local HDs system-wide, provided by appropriate entity in the community
Leadership and Governance. Ability to lead internal and external stakeholders to consensus.

Health Equity. Ability to strategically coordinate health equity programming through a high level, strategic vision and/or subject matter expertise which can lead and act as a resource to support such work across the department.

Accountability, Performance Management, and Quality Improvement. Ability to perform according to accepted business standards and to be accountable in accordance ...

Information Technology Services, including Privacy and Security.
Example FC: Org Competencies (2)

- **Human Resources Services.** Ability to develop and maintain a competent workforce, including recruitment, retention, and succession planning; training; and performance review and accountability.

- **Financial Management, Contract, and Procurement Services, including Facilities and Operations.** Ability to establish a budgeting, auditing, billing, and financial system and chart of expense and revenue accounts in compliance with federal, state, and local standards and policies...

- **Legal Services and Analysis.** Ability to access and appropriately use legal services in planning, implementing, and enforcing, public health initiatives, including...
Example FA: Chronic Disease & Injury Prevention

- Provide timely, statewide, and locally relevant and accurate information to the HC system and community on CD and injury prevention/control.

- **Identify statewide and local** CD and injury prevention **community partners** and their capacities, develop and implement a prioritized prevention plan, and seek funding for high priority initiatives.

- Reduce statewide and community rates of tobacco use through a program that conforms to standards set by state or local laws and CDC's OSH, including activities to reduce youth initiation, increase cessation, and reduce secondhand smoke exposure, as well as exposure to harmful substances.

- Work actively with statewide and community partners to increase statewide and community rates of healthy eating and active living through a prioritized approach focusing on best and emerging practices aligned with national, state, and local guidelines for healthy eating and active living.

- **Coordinate and integrate categorically-funded CD and injury prevention programs and services.**
Related Work

- University of Kentucky – Cost Estimation WG
- Accreditation
- Chart of Accounts
- CDC/STLTs
- President’s Budget
- Other
  - Cross-Jurisdictional Sharing
  - PHLF – “High Achieving Health Dept. as Chief Health Strategist”
Cost Estimation Working Group

- Complementary Working Group convened by Glen Mays at University of Kentucky
- Methodology for data collection completed
- Pilot phase completed in Kentucky
  - Electronic survey pilot in Ohio
- Have launched additional data collection over next several months in multiple states/locals health departments (AR, SC, FL, GA, NY, CA, OH)
- Produce a preliminary, first generation estimate of what it would take to prospectively fund based on collected data by end of summer
Alignment between the Public Health Accreditation Board Standards and the Foundational Capabilities

Kaye Bender, RN, PhD, FAAN; Jessica Kronstadt, MPP; Bulbul Bhattacharya, MBBS, MPH; Travis Parker Lee; Emma J. Chapman (PHAB); Christine A. Bevc, PhD, MA (North Carolina Institute for Public Health)

**Background**

The Public Health Accreditation Board (PHAB) is a nonprofit organization dedicated to improving and protecting the health of the public by advancing and ultimately transforming the quality and performance of state, local, tribal and territorial public health departments.

- As of May 2015, 75 health departments have been accredited; 250 additional health departments are in process.
- Health departments are assessed against approximately 100 measures. Measures are organized into 32 Standards and 12 Domains.

In 2014, a Foundational Public Health Services model was released to guide a national model for financing public health. The model includes a set of Foundational Capabilities (FCs) and Areas, which “are cross-cutting skills that need to be present in state and local health departments everywhere for the health system to work anywhere.”

The objective of this study is to identify linkages between the accreditation standards and the FCs and Areas to inform future policy decisions regarding the potential use of the accreditation process to validate the presence of the Foundational Capabilities.

**Methods**

A crosswalk was developed between the Foundational Capabilities and PHAB standards to identify areas of substantial alignment in content, using the following steps:

1. Identify PHAB domains and standards that align with FCs and validate with a working group.
2. Identify PHAB measures that align with FCs and validate with a working group.
3. Create a data visualization to present linkages between the measures and FCs, using a social network analysis approach.
4. Create a data visualization of a subnet to present the linkages between the measures and the components of one of the FCs—Organizational Competencies.

The following were used in the crosswalk:


Additional steps to better understand the relationship between the FCs and the PHAB standards include:

- Identifying linkages between PHAB measures and the Foundational Areas
- Determining the degree of alignment in the full model

**Foundational Capabilities and PHAB Standards**

<table>
<thead>
<tr>
<th>Foundational Capabilities</th>
<th>PHAB Standards</th>
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<tbody>
<tr>
<td>Assessment</td>
<td>11 12 13 14</td>
</tr>
<tr>
<td>Surveillance, Epidemiology, Laboratory Capacity, and Vital Records</td>
<td>21 22 23 24 24 31 32 41 42 51 52 53 54 61 62 63 71 72 81 82 81 91 101 111 121 122 123</td>
</tr>
<tr>
<td>All Hazards Preparedness/Response</td>
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<td>Organizational Competencies</td>
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**Foundational Capabilities and PHAB Measures**

While the majority of the PHAB measures are aligned with Foundational Capabilities, the PHAB measures do include concepts not captured in the Foundational Capabilities:

- Each FC corresponds to at least 6 of the PHAB measures.
- More than 30 measures do not have a corresponding Foundational Capability.

**PHAB Domains**

- Domain 1: Conduct and Disseminate Assessments Focused on Population Health Status and Public Health Issues Facing the Community
- Domain 2: Investigate Health Problems and Environmental Public Health Hazards to Protect the Community
- Domain 3: Inform and Educate about Public Health Issues and Functions
- Domain 4: Engage with the Community to Identify and Address Health Problems
- Domain 5: Develop Public Health Policies and Plans
- Domain 6: Enforce Public Health Laws
- Domain 7: Promote Strategies to Improve Access to Health Care
- Domain 8: Maintain a Competent Public Health Workforce
- Domain 9: Evaluate and Continuously Improve Processes, Programs, and Interventions
- Domain 10: Contribute to and Apply the Evidence Base of Public Health
- Domain 11: Maintain Administrative and Management Capacity
- Domain 12: Maintain Capacity to Engage the Public Health Governing Entity

**Organizational Competencies and PHAB Measures**

PHAB measures align with all seven components of Organizational Competencies.

- 51 of the 108 PHAB measures (47 of 32 standards) are aligned with at least one of the Organizational Competencies.

**Key Findings**

- There is significant alignment between the FCs and PHAB Standards and Measures.
- However, there are a number of concepts that are addressed in the PHAB measures that are not included in the FCs, including strategic planning.
- This study suggests that an accredited health department will have demonstrated conformity with a set of standards that includes the main concepts in the FCs, as well as additional components that were identified by the public health field for inclusion in the PHAB standards.

**Contact Information**

Public Health Accreditation Board
1600 Duke Street, Suite 200
Alexandria, VA 22314
703.778.4549
jkronstadt@phaboard.org www.phaboard.org
Chart of Accounts
### Framework

<table>
<thead>
<tr>
<th>Programs/Activities specific to Local Community Need Cost Centers</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Foundational Public Health Programs “Responsibilities”</td>
<td>Additional Services</td>
</tr>
<tr>
<td><strong>Comm Disease Control</strong></td>
<td><strong>Chronic Disease &amp; Injury Prev</strong></td>
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<td>801, 806, 807, 842, 843, 845</td>
<td>722, 723, 738, 765, 805, 809, 818, 832, 836, 841, 856, 857</td>
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<td><strong>Maternal Child /Family Health</strong></td>
</tr>
<tr>
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<td>760, 766, 767, 768, 803, 804, 808, 816, 833, 848, 852, 853, 854</td>
</tr>
<tr>
<td><strong>Access to and Linkage w/ Clinical Care</strong></td>
<td>712, 741, 770, 800, 802, 811, 883</td>
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### Across all Programs

- Assessment (surveillance and epidemiology) – 844, 890
- Emergency preparedness and response (all hazards) – 746, 747, 749, 757, 759, 763, 771, 815, 821, 822, 823, 824, 825
- Communications
- Policy development and support – 836, 890
- Community partnership development – 735, 736, 740, 756, 761, 837, 893
- Organizational/business competencies (governance, equity, IT, HR, etc.) – 724, 750, 888, 894, 897, 898

**Regardless of Cost Center:** Function Code 170 - Assessment; Function Codes 173, 175 – Policy Development; Function 123 – Chronic Disease and Injury Prevention
“CDC’s FY 2016 request of $8,000,000 will provide support to state and local health departments to strengthen public health practice within the changing environment. This funding will support health departments’ efforts to address gaps in foundational capabilities that align with national accreditation standards and are essential to health departments’ ability to protect and improve health.”
What is Next?

- Local and States

- Nationally
  - President’s Budget (CDC)
  - National Hub/Innovation Center
Thank You!

Cuyahoga County Board of Health, Parma- Ohio
http://www.ccbh.net/
Public Health Accreditation Board
www.phaboard.org
Three Rivers District Health Department
http://www.trdhd.com/mx/hm.asp?id=home
Washington State Department of Health
http://www.doh.wa.gov/
Public Health Leadership Forum FPHS website:
www.resolv.org/site-foundational-ph-services