

Foundational Public Health Services  
A New Vision for Clark County,  
Washington State and the Nation

Clark County Board of Health  
October 26, 2016

# Overview

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- The Problem
- New Vision for Public Health: Foundational Public Health Services
  - Background/State Workgroup
  - FPHS Description
  - Workgroup Recommendations
- Additional Important Services
- Legislative Proposal for 2017
- Discussion – PHAC role in advising BOH

# The Problem: Our Communities are at Risk

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- Our children might be the first generation with shorter lifespans than their parents.
- Many people suffer from illness that public health efforts can help prevent
  - We know what must be done, but we lack the capacity to do it
- Public health funding has eroded
- Spending on PH is <3% of national health spending

# Governmental Public Health is Critical

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## ● Governmental Public Health is Critical

- Since 1900, average life expectancy in the US has increased from 49 years to 80 years, primarily due to public health.
- Clean water for drinking and for recreation.
- A network in place to control communicable disease outbreaks.
- Safe food to eat in restaurants
- Access to information about active living and healthy eating.
- Resources to make making healthy choices easy.
- With community partners, create environments so that children are born healthy and have resilient families who can help them achieve their maximum potential
- Everyone should have the opportunity to make choices that will allow them to live long, healthy lives, regardless of their income, education, racial or ethnic background, or where they live.

# Without Governmental Public Health

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- An individual disease could quickly become an epidemic
  - Public health is our first responder for everyday communicable diseases, like the flu and food borne diseases, and emerging crises that often arise from our global community, like Ebola.
- We would see an even larger discrepancy in health outcomes for mothers and babies according to socioeconomic status.
  - Public health helps ensure a standard of care and equal access to important sources of information at this critical life stage.
- Our community would be more vulnerable to vaccine preventable diseases like measles, mumps, and rubella,
- Food safety and water quality would go unmonitored.
  - Without regular monitoring, the public would not receive early warnings about hazards in our food and water, making foodborne and waterborne disease much more common.

# A New Vision for Public Health

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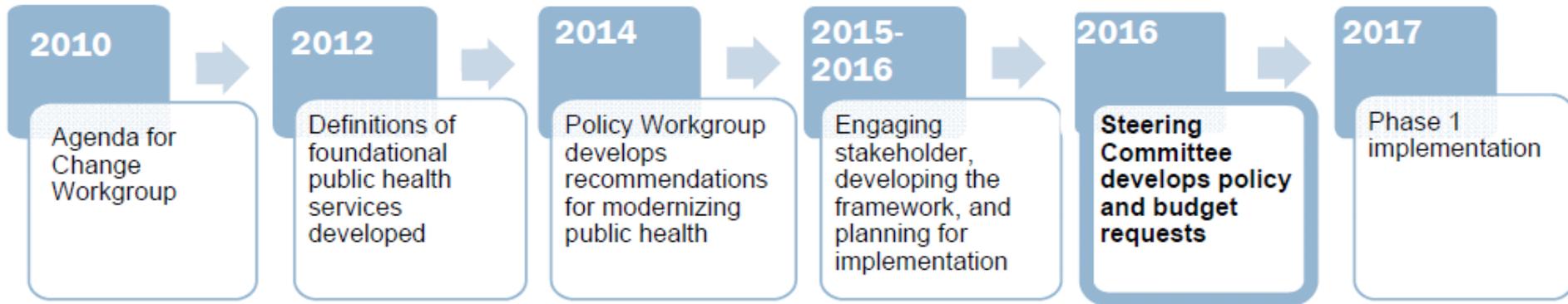
- Foundational Public Health Services (FPHS)
  - Like police, fire, public utilities and other infrastructure such as roads, these services must exist everywhere for services to work anywhere.
  - FPHS is a subset of all public health services.
- FPHS must be available to everyone and meet one or more of the following criteria:
  - Services for which governmental public health is the only or primary provider of the service, statewide
  - Population-based services (versus individual services) that are focused on prevention.
  - Services that are mandated by federal or state laws.
- FPHS provide a strong foundation from which the state and local communities can deliver *Additional Important Services* that respond to and are local community priorities.
- FPHS include Foundational Programs and Capabilities

# Foundational Public Health Services Workgroup

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- Secretary of Health
- Tribal Member
- Elected officials from counties and cities
- State Government: Office of Financial Management, Governor's Office
- State Associations:
  - Public Health Association
  - Association of Local Public Health Officials (WSALPHO)
  - Hospital Association (WSHA)
  - Nursing Association (WSNA)
  - Association of Community and Migrant Health Centers
  - Public Health Roundtable,
  - Medical Association (WSMA)
- Local Public Health and Tribal Health representatives

# Timeline



# Foundational Programs

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## Control of Communicable Disease and Other Notifiable Conditions:

- Promoting immunizations, providing information to the community, and isolating, quarantining, or providing prophylaxis

## Chronic Disease and Injury Prevention

## Environmental Public Health:

- Preventing and reducing exposures to health hazards in food, water, and other potential environmental sources of risk.

## Maternal/ Child/ Family Health:

- Promoting emerging and evidence-based interventions and providing information on maternal child health trends.

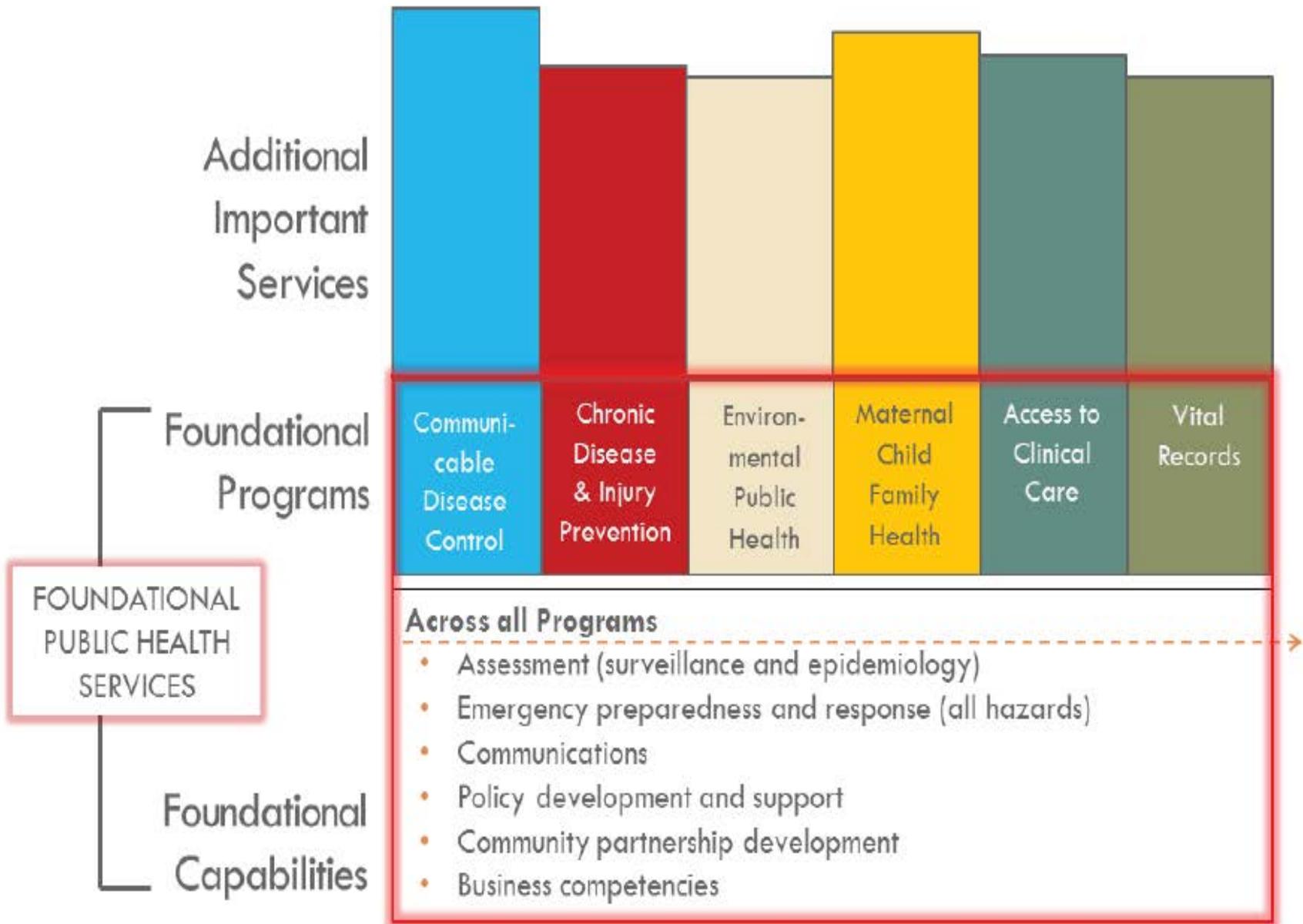
## Access/ Linkage with Medical, Oral, and Behavioral Health Care Services

## Vital Records

# Foundational Capabilities

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- Knowledge, skill, ability, and systems infrastructure necessary to support effective and efficient governmental public health services.
  - **Assessment:** Collect and use statewide data to guide public health planning and decision making at the state and local level.
  - **Emergency Management:** Help communities plan for and respond to disasters or emergencies in accordance with national and state guidelines.
  - **Communication:** Maintain relations with local, statewide, and online social media, and create and implement a strategy to communicate public health risks.
  - **Policy Development and Support:** Develop and advocate for evidence-based public health policy recommendations.
  - **Community Partnership Development:** Create and maintain partnerships with important health-related national, statewide, and community-based organizations.
  - **Business Competencies:** Assure competency in the following core business services: (1) leadership; (2) accountability and quality assurance; (3) quality improvement; (4) information technology; (5) human resources; (6) fiscal management; (7) facilities and operations; and (8) legal services.



# Additional Important Services

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## ● Services Based on Local Needs

- Services which are critical locally and do not necessarily need to be provided by governmental public health for all people throughout Washington.
- Continue to be important to health and deserve continued funding support.
- Meet local public health threats and priorities that can vary significantly from community to community.

## Examples of FPHS & AIS

### Foundational Public Health Services

Governmental public health **promotes immunizations in all communities** to prevent the spread of disease in all communities. This is a Foundational Public Health Service.

Governmental public health **oversees and enforces state on-site septic system regulations** in every jurisdiction because safe waste disposal prevents disease in every community. This is a Foundational Public Health Service.

**WIC services are not Foundational Public Health Services.**

Governmental public health **provides treatments to individuals with active contagious tuberculosis (TB)**, protecting the community from the spread of TB.

### Additional Important Services

**Actually giving immunization shots is not a Foundational Public Health Service.** In a community with many readily accessible immunization providers, governmental public health may not need to provide this service. In a community without providers, it may be important and valuable for public health to provide this Additional Important Service.

Counties with significant shellfish production are concerned about the contribution of failing septic systems to poor water quality, which can cause development of toxins in shellfish. In one of these counties, **efforts to monitor septic system performance more closely than statewide regulations require** could be very important, just as important as any foundational service. But it is not a Foundational Public Health Service because many counties don't have marine shoreline.

In some communities there are several providers of WIC services other than public health, and there is no need for public health to be a WIC provider. But in other communities, there is no other agency providing this cost-effective, evidence-based prevention service, and it is important for public health to do so.

**Providing treatment to individuals with active contagious TB is not an Additional Important Service.**

# Workgroup Recommendations

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1. State funding for public health should ensure that the costs of Foundational Public Health Services are covered in every community.
2. Foundational Public Health Services should be funded with statutorily-directed revenues placed in a dedicated Foundational Public Health Services account.
3. Allocation determinations should be a collaborative process between state and local stakeholders.
4. A robust accountability structure that aligns with the Foundational Public Health Services framework should be collaboratively developed by state and local stakeholders to ensure accountability and return on investment.
5. Tribal public health, with support from the Department of Health, should convene a process to define how the Foundational Public Health Services funding and delivery framework will apply to tribal public health, and how tribal public health, the Department of Health, and local health jurisdictions can work together to serve all people in Washington.
6. Local spending on Additional Important Services should be incentivized.

# 2017 Legislative Proposal

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- Two parts:

- Policy request to incorporate the FPHS framework into state law
- A system-wide (local and state) financial request that we hope to have included in the Governor's 2017-2019 proposed budget that will be released in December 2016.

# Legislative Policy Proposal

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- Focuses on existing law related to local and state collaborative work to design and improve the public health system and provide biennial reports to the legislature.
- Draft bill language adds the concept of FPHS, includes requirements for continued work on the FPHS/Modernization initiative and defines the “governmental public health system.”
- The definition of governmental public health includes the sovereign tribal nations of Washington State.

# 2017 Legislative Budget Request

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- Uses previous FPHS cost estimation work, current status of public health agencies, consultation with partners, and dialogue among the workgroup.
  - \$25 million for the most critical FPHS needs in local public health in the areas of communicable and chronic disease.
  - \$2 million for two service delivery pilot projects in the areas of communicable disease and assessment
  - \$1.7 million for critical FPHS needs at the state health department most of which provide statewide services and support to local public health
  - \$1 million for continued planning and development of the public health modernization implementation plan due December 2018

## Part 1 – Addressing Critical Gaps in Essential Services - \$26.9M/year

Essential Service	LHJ – \$25M/year*	System-wide & DOH – \$1.9M/year
<b>Communicable Disease Investigations &amp; Response</b>	Increase capacity to provide core services: monitoring communicable diseases; investigating outbreaks; identifying causes; preventing cases; and coordinating disease response across agencies.	<ul style="list-style-type: none"> <li>● Expand capacity at state public health laboratory to meet increased demand.</li> <li>● Replace lost federal grant for monitoring incidence of Hepatitis C. Funding to maintain current level of service.</li> <li>● Increase capacity for communicable disease monitoring, outbreak investigation and support to local health jurisdictions.</li> </ul>
<b>Chronic Diseases</b>	Increase capacity to provide core services: monitoring impact and causes of chronic diseases; coordinating disease response across agencies and partners; and implementing evidence based programs to prevent chronic diseases by addressing the major risk factors for illness and death.	
<b>Assessment</b>		<ul style="list-style-type: none"> <li>● Expand capacity to monitor non-infectious diseases and provide technical assistance and surge capacity to support local public health’s response to community problems.</li> </ul>
<b>Other Core Services</b>		<ul style="list-style-type: none"> <li>● Expand capacity to monitor adverse events in health care facilities – follow up on reports, analyze root cause reports and develop corrective action plans.</li> </ul>

# Accountability

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- Accountability Workgroup defined performance measures for any new state funds to local PH for foundational activities in communicable and chronic disease
  - Communicable Disease - ability of the system to respond within the timelines established by state and national guidelines.
    - % of LHJs with a detailed investment plan for the funding received.
    - % of notifiable conditions cases reported to the LHJ where investigation was initiated within the specified time frame.
    - % of notifiable condition cases reported to the LHJ with a completed investigation by public health.
  - Chronic Disease
    - % of LHJs with a detailed FPHS investment plan for the funding received.
    - % of LHJs with community level data to inform priorities.
    - % of FPHS investment plan activities completed.

# Discussion

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