Advancing and Transforming Public Health Practice

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Question for the Viewers

How would you describe your knowledge of current transformation efforts in public health practice?

A. High level
B. Moderate
C. Low level
D. Other (please type in chat)
The Transformation Landscape
Public health has never been as visible, as fundamental, or as misunderstood.
The public broadly believes the activities of public health agencies are important to the health of the United States and supports substantial increases in spending on public health programs but has serious concerns about how the system functions now. The public lacks the high level of trust in key public health institutions necessary to address today’s and future challenges.

— The Public’s Perspective on the United States Public Health System
Harvard T.H. Chan School of Public Health and RWJF, 2021
Current Transformation Landscape

Unprecedented new resources

Need for core public health funding

Multiple co-occurring pandemics
About PHAB

PHAB is building trust in public health and ensuring excellence in scalable innovation

**Mission:**
Advance and transform public health practice by championing performance improvement, strong infrastructure, and innovation

**Vision:**
A high-performing governmental public health system that supports all people living their healthiest lives.

**Values:**
Trust | Respect | Innovation | Collaboration | Growth-mindset

**Principles:**
Excellence | Diversity, Equity, and Inclusion | Transparency | Accountability
The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities.
Seek to **remove systemic and structural barriers** that have resulted in health inequities:

- Poverty
- Racism
- Gender discrimination
- Ableism
- Other forms of oppression
Everyone should have a fair and just opportunity to achieve optimal health and well-being.
National Transformation Initiatives
PHAB Services & Supports for Transformation

Foundational Public Health Services

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

Foundational Areas

Foundational Capabilities

- Assessment & Surveillance
- Community Partnership Development
- Equity
- Organizational Competencies

- Policy Development & Support
- Accountability & Performance Management
- Emergency Preparedness & Response
- Communications

Community-specific Services

- 21C Learning Community
- Assessment & Planning Tools
- National Public Health Accreditation
- Pathways Recognition Program

Source: PHNCI Website, 2021
21C is a **learning community of 19 states** focused on intentional state-wide public health system transformation, including:

- Capacity and costing assessment
- Legislative funding
- System redesign and transformation

Source: PHNCI Website, 2021
Collaboration and Transformation Within 21C States

- State health department
- SACCHOs
- Locally driven
- Public health coalitions or system partners

Initiators
Steps to FPHS Transformation

FPHS Planning Guide

USING FOUNDATIONAL PUBLIC HEALTH SERVICES TO TRANSFORM PUBLIC HEALTH

January 2019

Introduction
New public health issues emerge every day, from an increase in natural disasters to gun violence as a public health issue. Governmental public health departments are responsible for protecting their communities’ health and are evolving to keep up with dynamic community needs. However, they are constrained by an outdated infrastructure and communities or partners that do not understand their role and value. Public health funding for infrastructure and programs has declined while the need for public health services has grown. The result is underfunded governmental health departments, with outdated and crumbling infrastructures, straining to deliver services to communities. Given these challenges, many departments are evaluating options to do their work differently and are being called upon to modernize their systems as they work to improve population health.

One possible avenue to answer the call to modernize is the adoption and implementation of the foundational public health services (FPHS) to inform systems change and transformation. The FPHS are defined as a "minimum package of services" that must be available in health departments everywhere for the health system to work anywhere.

Purpose
The purpose of this guide is to provide interested health departments with the key components to consider before planning the FPHS implementation process. It is based on learnings from four states that have been implementing this work, with support from the Public Health National Center for Innovations (PHNci), over the past several years.

While the FPHS can be implemented by individual health departments, it is highly recommended that multiple departments work together as a system to ensure that a minimum package of services is available across a geographic area. Participants may include the state health department (SHD) and some or all the local health departments (LHDs) in that state or state association of county and city health officials (SACCHO) working with LHDs.

1. Organize the effort
2. Identify core services
3. Identify capacity gaps
4. Estimate costs
5. Develop financing model
6. Make a budget request
7. Develop legislation
8. Implement the model
Examples of Efforts

**Washington**
*State investments*: 147 million in the 2021-2023 biennium and $148 million per year ongoing starting in FY2024

**Missouri**
*COVID-19 response*: Key findings and recommendations for state action

**Minnesota**
*Equity*: Defined core public health, centered equity, beginning costing

**North Carolina**
*Federal funding*: FCs, workforce, and ARPA

**Oregon**
*Partnerships*: Regional infrastructure and Tribal plans

**Ohio**
*Costing*: Developed costing for OH, tying to financial data, connection to PHAB accreditation
Question for the Viewers

Do you know how many staff your health department needs?

A. Yes
B. No
C. Unsure
Local Staffing Estimates

Needed to implement the Foundational Public Health Services

Public Health Workforce Calculator

Will allow health departments to determine the number and type of staff to provide sufficient levels of public health services

*Expected Summer 2022*

Source: PHNCI Website, 2021
Staffing Estimate

- **How many FTEs are needed** in state and local health departments to perform the Foundational Public Health Services (FPHS)
- **Generate totals and ratios** based on the number of staff needed per 100,000 people
- **Recommendations** are intended to provide an infrastructure that you can surge on during a crisis (e.g., a pandemic), but not inclusive of that surge
State and local governmental public health agencies need an **80% increase** in workforce to provide minimum public health services to the nation.

- Local health departments need **54,000** additional FTEs
- State health departments need **26,000** additional FTEs

This estimate does not account for additional workforce needs beyond core infrastructure and programs.
### New FTEs Needed by Population Served

<table>
<thead>
<tr>
<th>Population served or Organization</th>
<th>Current FTEs for core public health services</th>
<th>Total FTEs needed for full implementation</th>
<th>Additional FTEs needed for full implementation</th>
<th>Percentage change needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;25,000</td>
<td>4,000</td>
<td>13,000</td>
<td>9,000</td>
<td>230%</td>
</tr>
<tr>
<td>25,000 – 49,999</td>
<td>5,500</td>
<td>13,000</td>
<td>7,500</td>
<td>140%</td>
</tr>
<tr>
<td>50,000 – 99,999</td>
<td>7,000</td>
<td>15,000</td>
<td>8,000</td>
<td>110%</td>
</tr>
<tr>
<td>100,000 – 199,999</td>
<td>8,500</td>
<td>14,500</td>
<td>6,000</td>
<td>70%</td>
</tr>
<tr>
<td>200,000 – 499,999</td>
<td>14,000</td>
<td>20,000</td>
<td>6,000</td>
<td>40%</td>
</tr>
<tr>
<td>500,000+</td>
<td>33,500</td>
<td>51,000</td>
<td>17,500</td>
<td>50%</td>
</tr>
<tr>
<td>Local Health Departments</td>
<td>72,500</td>
<td>126,500</td>
<td>54,000</td>
<td>70%</td>
</tr>
<tr>
<td>State Health Departments</td>
<td>31,000</td>
<td>57,000</td>
<td>26,000</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>103,500</strong></td>
<td><strong>183,500</strong></td>
<td><strong>80,000</strong></td>
<td><strong>80%</strong></td>
</tr>
</tbody>
</table>

Source: [PHNCI](https://www.phnci.org), 2021
## New FTEs Needed by Category

<table>
<thead>
<tr>
<th>Category</th>
<th>Local</th>
<th>State</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Infrastructure</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment</td>
<td>4,500</td>
<td>4,500</td>
<td>9,000</td>
</tr>
<tr>
<td>All Hazards</td>
<td>3,000</td>
<td>2,000</td>
<td>5,000</td>
</tr>
<tr>
<td>Other Foundational Capabilities</td>
<td>17,500</td>
<td>8,000</td>
<td>25,500</td>
</tr>
<tr>
<td><strong>Foundational Areas</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chronic Disease &amp; Injury</td>
<td>8,000</td>
<td>5,000</td>
<td>13,000</td>
</tr>
<tr>
<td>Communicable Disease</td>
<td>4,500</td>
<td>1,500</td>
<td>6,000</td>
</tr>
<tr>
<td>Environmental Health</td>
<td>7,500</td>
<td>2,000</td>
<td>9,500</td>
</tr>
<tr>
<td>Maternal and Child Health</td>
<td>5,500</td>
<td>1,000</td>
<td>6,500</td>
</tr>
<tr>
<td>Access/Linkage to Care</td>
<td>3,500</td>
<td>1,000</td>
<td>4,500</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>54,000</strong></td>
<td><strong>26,000</strong></td>
<td><strong>80,000</strong></td>
</tr>
</tbody>
</table>

Source: PHNCI, 2021
Health departments can use the public health workforce calculator to **estimate their own workforce needs** to provide the **foundational public health** services within their current context.

- Resource for health departments to plan for the type and number of staff they will need to support their communities, provide the FPHS, and ultimately, work toward accreditation

- Supports advancing equity among health departments so that they have the adequate staff to provide the FPHS
Every system is perfectly designed to get the results that it gets.

— W. Edwards Deming
Value of Accreditation in Crisis Response and Recovery

- Framework for communication of what public health is and does: transparency and accountability
- Focus on partnerships
- Organizational culture built around CQI and performance improvement
Version 2022 PHAB Standards and Measures was adopted on February 11th, 2022

- Initial Accreditation and Reaccreditation
- Effective July 1, 2022
What are the Headlines for Version 2022?

- **Incorporate key lessons from practice**
  - Equity in every domain
  - Alignment on preparedness & response

- **Clarify & simplify**
  - Removed redundancy
  - Reduced required documents

- **Promote accountability**
  - Foundational Capability measures
Examples:

- Addressing factors that contribute to specific populations’ higher health risks and poorer health outcomes.
- Policies and procedures regarding health department operations and inclusion, diversity, equity or anti-racism, reviewed regularly and accessible to staff.
- Disaggregating/analyzing data to understand disproportionate risks.
- Demonstrating cultural humility in communications.
- Engaging with the community.
Opportunities for Practitioners
Pathways is a recognition program for local, Tribal, and territorial public health departments whose purpose is to:

- Support performance improvement efforts, strengthen infrastructure, and facilitate public health system transformation, including state-based improvement efforts.

- Serve as a performance improvement milestone for local, Tribal, and territorial health departments not yet ready for accreditation.

- Facilitate accreditation readiness for those intending to seek accreditation.
Pathways: Two Tracks

Track 1: Services and Partnerships
19 measures
- Assessment/Surveillance
- Preparedness/Response
- Communications
- Policy Development
- Community Partnerships

Track 2: Health Department Systems
15 measures
- Organizational/Administrative
- Accountability
- Performance Management

EQUITY
If we want change, we need to do different things or do things differently.

— NHS Institute for Innovation and Improvement
Transforming and Modernizing Our Public Health System

Source: Public Health Forward Report, Bipartisan Policy Center, 2021
Funding Opportunity

**CDC-RFA-OE22-2203**
Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems (DHHS, CDC, CSELS)

- Estimated Total Program Funding: $3,745,000,000
- Non-categorical
- Intended to support infrastructure and workforce needs (short-term) to lead to longer term improvements
Key Takeaways

- Digest
- Our tools can help
- We are here and we want to hear from you
- Seize the moment
- Keep on keepin’ on
A Chat with Jessica Solomon Fisher

Betty Bekemeier

Jessica Solomon Fisher
QUESTIONS?

To ask a question, please click the icon in the Zoom toolbar to open your Q&A Pod.
Connect with PHAB

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www.phaboard.org
www.phnci.org
21C Learning Community
PHNCI
www.phnci.org/national-frameworks/21c-learning-community

Focus on Equity One Pager
PHAB

Pathways Recognition Program
PHAB
https://phaboard.org/pathways/

Public Health Forward Report
Bipartisan Policy Center
https://bipartisanpolicy.org/report/public-health-forward/

CDC-RFA-OE22-2203 Grant
CDC
https://www.grants.gov/web/grants/view-opportunity.html?oppId=340034