

FPHS SERVICE DELIVERY: IMPLICATIONS AND TRADE-OFFS

Service Delivery Today

Public Health services are delivered in Washington State through a decentralized public health system characterized by local control and partnerships between LHJs, DOH, and others.

Implications of FPHS Funding Alternative 1:

State is responsible for funding FPHS, except for federally-funded and local fee supported costs

*The more the state is responsible for funding FPHS, the more it will have an interest in ensuring that its funds are used **efficiently** and **effectively**.*

Efficient Use of State Funds
“We’re not spending more than we need to”

The state legislature could decide that they have an interest in managing per capita costs for LHJ delivered FPHS once the state is responsible for funding them. Examples of cost management strategies could include:

- Requiring that smaller jurisdictions provide certain services through shared arrangements with other LHJs
- Having DOH deliver some services currently provided by locals, particularly smaller jurisdictions
- Distribute or allocate state support of FPHS on a per capita basis
- Requiring smaller local jurisdictions to combine to form larger jurisdictions

Effective Use of State Funds
“We’re getting what we expect from our investment”

The Legislature would want to ensure that the funds for FPHS are being spent effectively; ensuring that state funding is spent in a way that achieves the objectives of FPHS.

Examples of effectiveness strategies could include:

- Creating performance measures and reporting requirements to ensure accountability for spending state funds
- Standardizing service delivery processes and technology used in service delivery
- Implementing best practices across all jurisdictions
 - Creating centers of expertise to act as a resource for local service provision