

PUBLIC HEALTH IMPROVEMENT PARTNERSHIP

CHARTING THE FUTURE OF THE PUBLIC HEALTH IMPROVEMENT PARTNERSHIP

Summary for discussion with the Partnership

SEPTEMBER 5, 2013

BACKGROUND

The Public Health Improvement Partnership was established in 1995 by the legislature under RCW 43.70.520 and 580, recognizing the significant and distinct role of public health. The law required the Washington State Department of Health, in consultation with other partners, to develop a public health improvement plan. The law's intent was for the partnership to protect and improve the public's health by providing guidance and funding to improve the public health system. The laws also included budget provisos to be distributed to each local health jurisdiction (Local Capacity Development Funds).

Since 1995, the law has been amended twice—in 2007 (E2SSB 5930) and again in 2011, with additional performance and accountability requirements.

PHIP STATUTORY AUTHORITY

RCW 43.70.520 Public health services improvement plan — Performance measures

- (1) The legislature finds that the public health functions of community assessment, policy development, and assurance of service delivery are essential elements in achieving the objectives of health reform in Washington State. The legislature further finds that the population-based services provided by state and local health departments are cost-effective and are a critical strategy for the long-term containment of health care costs. The legislature further finds that the public health system in the state lacks the capacity to fulfill these functions consistent with the needs of a reformed health care system. The legislature further finds that public health nurses and nursing services are an essential part of our public health system, delivering evidence-based care and providing core services including prevention of illness, injury, or disability; the promotion of health; and maintenance of the health of populations.
- (2) The department of health shall develop, in consultation with local health departments and districts, the state board of health, the health services commission, area Indian health service, and other state agencies, health services providers, and citizens concerned about public health, a public health services improvement plan. The plan shall provide a detailed accounting of deficits in the core functions of assessment, policy development, assurance of the current public health system, how additional public health funding would be used, and describe the benefits expected from expanded expenditures.

(3) The plan shall include:

- (a) Definition of minimum standards for public health protection through assessment, policy development, and assurances:
 - (i) Enumeration of communities not meeting those standards
 - (ii) A budget and staffing plan for bringing all communities up to minimum standards
 - (iii) An analysis of the costs and benefits expected from adopting minimum public health standards for assessment, policy development, and assurances
- (b) Recommended strategies and a schedule for improving public health programs throughout the state, including:
 - (i) Strategies for transferring personal health care services from the public health system, into the uniform benefits package where feasible
 - (ii) Linking funding for public health services to performance measures that relate to achieving improved health outcomes
- (c) A recommended level of dedicated funding for public health services to be expressed in terms of a percentage of total health service expenditures in the state or a set per person amount; such recommendation shall also include methods to ensure that such funding does not supplant existing federal, state, and local funds received by local health departments, and methods of distributing funds among local health departments.

HISTORY

The first Public Health Improvement Plan was written in 1994, as the blueprint for improving health status in Washington through prevention and improved capacity for public health service delivery. Much in this plan is still relevant today—stabilization of health care costs, access to care, public health capacity, and finance/governance. The work of the Partnership has affected every public health agency across the state, has strengthened the public health system and improved our ability to protect the public's health. Major achievements include:

- Periodic review of all local and state agencies to measure performance against **public health standards** for system wide improvement and preparation for national accreditation
- Measurement of **local public health indicators** to inform communities about the health of their communities, and
- A system to identify and **count annually core services** delivered by the public health system state wide



PARTNERSHIP EVOLUTION

Over the years, the Public Health Improvement Partnership has evolved while staying true to its mission and has always operated on principles of shared leadership and governance among the partners. Its workgroups have been co-chaired by representatives from state and local health.

Until 2009, the governing body of the Partnership consisted of broad (40+ members) representation from the following organizations:

- NW Center for Public Health Practice (UW School of Public Health & Community Medicine)
- Washington Health Foundation
- Washington State American Indian Health Commission
- Washington State Association of Local Public Health Officials
- Washington State Board of Health
- Washington State Department of Health
- Washington State Public Health Association

In 2010, the governing body was reorganized to focus on governmental public health (16 members) and representation consisted of the following organizations:

- Washington State Board of Health
- Washington State Department of Health
- Washington State Association of Local Public Health Officials
- Local Public Health Agencies
- Local Boards of Health
- Tribal Nations
- Washington State American Indian Health Commission
- Department of Health and Human Services, Region X

THE PARTNERSHIP NOW

Today, the Partnership focuses on driving change within the public health system to improve health in Washington by implementing the priorities of the *2012 Agenda for Change Action Plan* (adopted as the 2012 Public Health Improvement Plan) to:

- Protect people from **communicable disease and other health threats**
- Prevent illness and injury through **healthy communities and environments**
- Implement health reform by better **partnering with the health care system**
- Define the **foundational public health services** needed in all communities

The Public Health Improvement Plan identified additional areas for system wide improvement, including:

- **Transform business practices**—work to ensure our workforce can meet future challenges and our public health system has necessary performance and accountability measures
- Produce an **annual inventory of public health activities and services** delivered across the public health system
- Publish every two years **local public health indicator** updates to provide a snapshot of health and health behavior at the community level based on 35 indicators
- Measure performance across the system through **public health standards reviews** and identifies opportunities for continuous improvement

The Partnership is influenced by many other forces which impact its ability to affect change. Some of these include:

- Significant reduction in public health resources across the state with every local health agency reducing workforce
- Growing need for public health to be a part of implementing health reform within local communities - this is a rare new opportunity for public health to play a role to improve population health
- Growing need to develop ways to capture our return on investment from prevention activities
- Many others...

QUESTIONS FOR THE PARTNERSHIP

Issues impacting the future direction of the Partnership

- How can the Partnership change to better support our public health system?
- Are we focusing on the right system wide initiatives—activities and services, indicators, standards—to guide implementation of the *Agenda for Change Action Plan*? If so, how are these accomplished with limited resources?
- How could the Partnership membership better reflect the skills/experience needed to guide public health to achieve the *Agenda for Change Action Plan* strategic priorities?
- How can the Partnership set the right course for the State Health Improvement Plan which is the strategic plan for improving health in Washington?
- Should the Partnership be looking more at outcomes in order to drive performance within the system?