

StrengtheningPublic HealthServices

Changes recommended for FY 08/09 Proposed Budget

Submitted by House at Board Hearing of 3/4/08

Focusing on Core Functions

Department's goal over last several years has been to reinforce its core functions of preventing communicable disease and improving the health of the community

 First step in that process has been a strengthening of Department's communicable disease investigation and response function
 Next step is to strengthen and improve our capacity to effectively prevent and treat communicable disease

Proposed Redesign

- Integrate communicable disease investigation activities disease clinical services and health education and response functions with communicable
- Focus clinical services on addressing the spread of communicable disease and vaccine preventable diseases

community based information/education and surveillance activities Increase the availability and quality of

Why now?

- Core Responsibility to reduce burden of disease and injury in the population as a whole by attacking the root causes
 - Statistical (first case of MDR TB, STI rates among youth)
 Immunization Rates (Health Status Report)
- Increased availability of FQHC/RHC Primary
 Care Providers better serve patient needs
- **■** Fiscal Constraints
 - □ Nice to do but no longer affordable
 - ☐ Limited availability of health realignment to subsidize

Fiscal Constraints

- Public Health is not in General Fund and must survive on its dedicated funding streams and grants
- Health Realignment is the primary funding stream that supports core mandated public health functions
- Health Realignment revenues available to supplement PH programs have been flat over past 4 years, while:
- Nursing and Medical staff costs have grown between 22.5% and 30% respectively over past 4 years
- □ Costs of supplies and services have grown 6 to 10%
- □ State programs continue to be flat funded
- A87 increased from \$0 in FY 04/05 to \$850K in FY 08/09
- Annual Health Realignment revenues received available to fund program declined from \$3,680,162 in FY 05/06 to the \$3,308,651proposed for FY 08/09.

Bottom line

- Public Health's core functions need to be strengthened
- Service priorities must be established in order to live within annual health realignment revenue stream and continue to protect and promote the community's health
- 50% of annual health realignment for program is projected to be dedicated to support clinic and laboratory services in FY 08/09 if current scope retained

Service Priorities for use of Health Realignment

Priority 1 Communicable Disease Prevention and Treatment

Priority 2 Community Health & Chronic Disease Prevention

Priority 3 Personal Healthcare Services

Clinic/Laboratory:

Prevention and Treatment Service Priority 1 – Communicable Disease

- Testing and treatment of:
- □ Sexually transmitted infections (STI)
- □ Tuberculosis (TB)
- Immunizations for vaccine preventable infectious populations diseases especially for children and vulnerable
- Screening and referral for HIV and Hepatitis C
- Miscellaneous other laboratory testing

Vital Statistics Service Priority 2

Record births and deaths

 Report morbidity/mortality statistics to State

Clinic/Laboratory: Service Priority 3 – Personal Healthcare Services

- Family Planning
- Pregnancy Testing
- Breast Exams & Pap Smears
- Well Child

Service Recommendations

- Retain Priority 1 Level Services:
 - □ Communicable Disease Prevention and Treatment
- Retain Priority 2 Level Services
 - □ Vital Statistics
- Eliminate Priority 3 Level Services:
 - □ Personal Healthcare Services

Projected Staffing Impact in Clinical/Lab/Vital Stats (WS/SLT) Total staff allocation currently – 25.45 FTE

- Eliminate 13.75 FTE allocations
- 2.0 PHNP/PA (filled)1.0 Microbiologist (vacant)
- ☐ 4.5 Medical Office Assistants (filled)
- □ 1.0 Sr. Medical Billing Assistant (filled)
- □ 2.0 Medical Billing Assistants (filled)
- □ 1.0 Health Program Manager (filled)
- □ 1.0 Administrative Technician (vacant)
- □ 1.0 Senior Office Assistant (filled)□ 0.25 Homemaker (vacant)
- activities and redirect 2.5 FTE to other program areas Retain 9.2 FTE staff allocations to focus on Service Priorities 1 & 2

Fiscal Impact

- clinic/laboratory/vital statistics programs is \$1,690,000 FY 08/09 Health Realignment estimated to maintain current
- Proposed redesign and focus on communicable disease is estimated to result in \$600,000 worth of Health Realignment savings in FY 08/09
- Savings is required to maintain and support other current priority Public Health programs and infrastructure
- Long term goal is to continue to improve Department's ability to promote and protect the public's health by focusing on Priorities 1
- Any necessary additional reductions will be accomplished through regular FY 08/09 Budget process

Consequence if not approved:

- Program redesign must happen in FY 08/09 in order stream and continue to provide core functions to live within annual health realignment revenue
- action not taken, primarily: realignment supported programs if recommended Reductions will have to occur in other health
- □ Maternal Child Adolescent Health (MCAH)
- □ Nursing Services
- □ Communicable Disease Surveillance/Investigation
- ☐ Health Promotion
- ☐ Administration/Finance

Opportunities if Redesign Approved

- Provides an opportunity for change and improvement
- Long term ability to provide stronger, better focused public health services
- Improved community health, lower medical costs, better protected against disease

Beilenson Hearing

- with HS Code 1442.5 Need to conduct a noticed public hearing in accordance
- reduction or elimination of public health services Purpose is to receive input regarding the proposed
- County must detail which services will be reduced or conduct a public hearing to obtain public input regarding proposed reductions eliminated, show how the decision was made, and

Next Steps:

- BOS approve proposal in concept
- Proposed Budget submission due on March 31, 2008 Direct Department to include the proposed changes in the FY 08/09
- Authorize Department to review proposal in full with staff, healthcare providers, unions and stakeholders
- Direct Department to return to the BOS on April 1, 2008 to:
- conduct a Beilenson Hearing to review the impact of the proposed change and present the proposed reduction in force, and
- return with a Resolution amending the Authorized Personnel Allocation personnel allocation Resolution deleting positions from the Department's authorized
- Golden Handshakes have been requested Department to make every reasonable effort to place impacted staff-

Questions & Comments

Direction to Staff