

# 21st Century Public Health Transformation

## OHIO

Ohio is in the Midwestern region of the United States and has a population of 11.7 million people. The Ohio Department of Health is an independent agency and has a decentralized relationship with local health departments in the state. Ohio envisions a transformed public health system through unique partnerships and funding streams that advance the health and wellbeing of its population. To do so, the state must address the community conditions and inequities that lead to disparities in health outcomes, and implement data-driven, evidence-based solutions.

### Transformation Approach

The impetus for Ohio's transformation work was the 2012 Public Health Futures Report, which drew attention to the need for increased funding and capacity to provide a system capable of serving Ohioans sustainably. In September 2012, the state legislature established the Legislative Committee on Public Health Futures, resulting in 2013 legislation that required all LHDs to apply for accreditation through PHAB by June 30, 2018, and successfully become accredited by 2020.

Ohio's transformation approach is embodied by the provision of the Foundational Public Health Services (FPHS) and incorporates identifying and implementing innovative approaches to address challenges facing governmental public health. The policy goals of transformation include:

1. The Ohio Department of Health maintains a state-of-the-art data management and reporting system that provides local health districts (LHDs) and state policymakers with timely access to critical data.
2. All Ohioans are served by a LHD with strong capacity to collect, manage, analyze, share, and report critical health data.
3. LHDs are equipped to communicate effectively with the public and community partners.
4. The Ohio Department of Health disseminates actionable and evidence-based emergency response guidance to LHDs in a timely way.
5. LHDs have efficient access to shared resources, expertise, and workforce training.

Transformation partners are the Ohio Department of Health, the Ohio Public Health Partnership (which is comprised of the Association of Ohio Health Commissioners, the Ohio Association of Boards of Health, the Ohio Public Health Association, the Ohio Environmental Health Association, and the Society for Ohio Public Health Educations), the Ohio Association of Community Health Centers (representing Federally Qualified Health Centers), local health departments, state and regional hospital associations, and physician associations.

### Transformation & Equity Activities

To date, Ohio has implemented the following activities to meet policy goals:

- In 2021, \$25 million was proposed in the state budget bill for a data management and reporting system but was unfortunately removed. Work is ongoing to use remaining America Rescue Plan Act funds for this work. The Ohio Department of Health and LHDs are engaging other strategic partners, who will benefit from modernized data systems, to work together to secure an investment in public health data systems.
- The pandemic elevated public health visibility in Ohio, with much interest expressed by the legislature regarding the structure, function, governance, and authority of state and local public health. State leaders are currently working with a sponsor on a bill to revise the make-up and appointment process for local Boards of Health, and another bill that will restore local public health authority to act in emergency situations, with appropriate accountability. Additionally, funds have been appropriated to further strengthen the public health infrastructure of LHDs.

- AOHC has been funded through workforce development dollars to add a dedicated communications staff person, who will develop and implement a communication plan, in coordination with key partners, over the next three years.
- Five regional support positions have been established at the Ohio Department of Health, with hiring currently underway. The essential job functions were developed collaboratively between state and local public health.

The advancement of equity has been a longstanding cornerstone of state and local health assessment and improvement plans. Ohio also mandates accreditation for all LHDs by PHAB, which has always incorporated equity into its standards and measures. Additionally, the Ohio Department of Health hosts an Ohio Equity Institute and provides grants to a small number of LHDs, who are increasingly adding dedicated health equity officers or similar positions. Ohio believes these activities progressively enhance and elevate the focus of equity as a foundational element of public health services.

## Outcomes

The state's FPHS costing work has been instrumental in a number of policy and funding situations, including during COVID response. Using the gap analysis in the costing tool, Ohio has been able to identify overall funding needs, as well as what is needed to fill gaps within specific areas of the foundational capabilities. The state was able to quantify and demonstrate a critical need for infrastructure funding. In the most recent state budget bill, the administration proposed \$25 million for data systems improvements. While the final funding number was \$6 million dollars for infrastructure in general, this additional appropriation marked initial progress toward increasing state support for local public health. During COVID response, the data was used to identify the gap between the existing contact tracing staff levels at the local level compared to the needed number, based on anticipated caseloads, resulting in a \$37 million investment for LHDs to conduct case investigation and contact tracing early in the pandemic. In the policy arena, Ohio's work has resulted in alignment between the state health department, LHDs, and hospitals in the community assessment and planning process. The state is now in discussions with mental health boards across the state to align their planning as well.

## Learnings & Next Steps

A clear transformation vision and committed leadership are critical to garnering legislative and statutory investment for change. A state budget from 2017-2019 allocated \$3.5M to address accreditation fees and coordination, as well as infrastructure costs for mergers. The State's Regents Program allocated \$5 million to both help LHDs become "accreditation ready" and for specific research projects. Statewide adoption of the FPHS framework by the governmental public health system is a mechanism for improving population health outcomes and for ensuring all Ohioans are served well. As a part of the 2022-2023 State Biennial Budget, Ohio will continue its modernization work. The state is hopeful that \$6 million allocated to small city health departments can also be used to support the state's modernization efforts in making critical public health infrastructure improvements.

Ohio's plan is to continue implementation of the FPHS costing tool, as part of LHDs' Annual Financial Report, to collect the necessary data to identify gaps, needed funding, and inform population health planning. Additionally, the state plans to develop a shared process and common metric on Community Health Assessment, Community Health Improvement Plan, and Hospital Community Health Needs Assessment processes. Lastly, public health leaders will enhance capacity to train on shared services, technical assistance, and capabilities and areas to assure alignment of the local public health system.

## Recommendations & Call to Action

Conducting a capacity and cost assessment of FPHS is a key activity for transformation. Ohio believes it is important to remain consistent with the national FPHS framework and to incorporate all state level nuances into the national approach so that a state can compare itself to others, especially now that the updated framework makes equity more visible.

State health departments are key partners with LHDs in this work. Their self-analysis alongside that of the local jurisdictions is key to getting buy-in from the state's administration as well as the state legislature. Working together toward a legislative budgetary request dramatically increases its chance of success.

**“Modernization of our public health system has been a need for decades, and that need has now become an imperative. PHNCI is providing a forum for states to collaborate. Bringing together entities that are structured and funded differently sparks conversation and innovation.”**

*Krista Wasowski, Health Commissioner, Medina County, OH*