

# KENTUCKY PUBLIC HEALTH TRANSFORMATION



**Kentucky Public Health**

Prevent. Promote. Protect.



Kentucky Health Departments Association

**Allison Adams RN, MPA**

**Jeff Howard MD**

**Georgia Heise DrPH**

# KENTUCKY PUBLIC HEALTH TRANSFORMATION

***SIMPLIFY*** ↔ ***FOCUS*** ↔ ***PRIORITIZE***

**Jeff Howard, MD**  
**Commissioner**



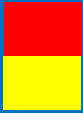
**Kentucky Public Health**  
Prevent. Promote. Protect.

**LOCAL HEALTH DEPARTMENTS**  
**FY20 KERS Impact**  
**Unrestricted Reserves**

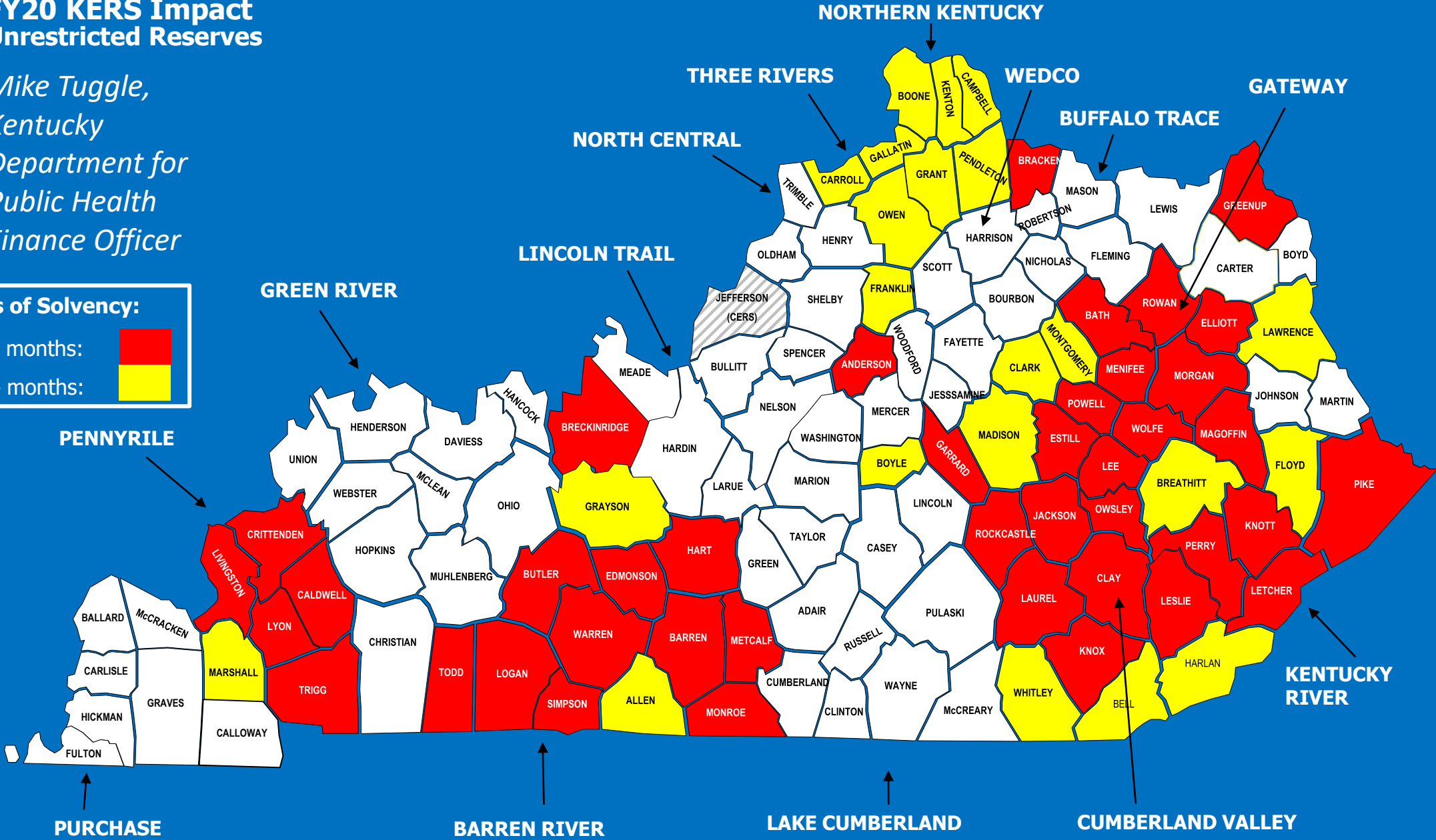
*Mike Tuggle,*  
*Kentucky*  
*Department for*  
*Public Health*  
*Finance Officer*

**Months of Solvency:**

0-12 months:



13-24 months:



# CHALLENGES

## *Fiscal Instability*

- Up 42 Local Health Departments representing 4 Districts are at risk for fiscal default in calendar year 2020.
- Current fiscal analysis shows ~ \$40M deficit in 2020.
- Greatest deficits outside of CORE PH = clinical services.

- Simplify, Focus, Prioritize
- Create economies of scale
- Ensure fees cover cost
- Possible use of contractors

# CHALLENGES

## *Programmatic Services are not Reflective of Community Needs*

- Federal funding structure is a significant driver of this result.
- PH system has not adjusted to post-ACA era PH approaches or programs.
- Bureaucratic layering needs to be removed from the system to achieve operational efficiency and effectiveness.

- **Accountability and transparency at all levels**
- **DPH to seek new partners when necessary**
- **Clearly defined roles throughout the system**

# CHALLENGES

## *Legislative Issues*

- PH laws are disparate and voluminous → needs consolidation to be more functional.
- Current statutes and regulations do not allow for proper operational restructuring.

- Simplified Foundational PH statute
- Creation of a PH Advisory Board with appropriate oversight and authority
- CHA requirements

# CHALLENGES

## *Shared Governance*

- Hybrid structure of Public Health makes change difficult.
- Greater support, structure, and education for LBOHs.
- Lack of accountability at ALL levels.

- Collaboration, transparency, and trust
- Accountability for all levels with appropriate authority
- Increase leadership capacity at all levels
- LBOH support, structure and education

Is **47<sup>th</sup>** in Health Status nationwide *good enough* for **Kentucky?**



Even though we're 15<sup>th</sup> in the nation in spending

Kentucky ranks 47<sup>th</sup> in actual health outcomes of the 50 states.

**NO!**

**“We can do better!”**



Kentucky Health Departments Association

**2015 Strategic Plan**

**“How do we improve?”**

*Be a part of creating a legacy of Health for the Commonwealth!*



measurable outcomes



supportive statutory framework



secure funding





Kentucky Health Departments Association  
Allison Adams RN, MPA  
606.584.5540

## Costing Out Kentucky's Public Health System



Public Health  
Prevent. Promote. Protect.  
Georgia Heise DrPH  
502.330.2670

Traditionally funded Public Health programs are funded from designated sources and are in addition to statutory requirements.



Examples of additional programs based on need:  
cancer screenings, child well visits, adult well visits, family planning

### Minimum Statutory Requirements

A minimum of 3 FTEs per county with an additional FTE for each 5,000 over 15,000 of population

#### Population Health

Partnership Development • Health Equity  
Health in All Policy • Education • Community Health Assessment  
Community Health Improvement Plan

Applicable Kentucky Revised Statutes:  
KRS 212.240, KRS 212.245, KRS 212.370

#### Enforcement of Regulations

Food & Water Safety • Waste Management • Nuisance Investigation

Applicable Kentucky Revised Statutes:  
KRS 212.210, KRS 212.245, KRS 212.370, KRS 212.715

#### Emergency Preparedness & Response

Mitigation of Disease Threat • Mass Vaccination • Disaster Response

Applicable Kentucky Revised Statutes:  
KRS 212.240, KRS 212.370

#### Communicable Disease Control

Sexually Transmitted Disease Control • Tuberculosis Control  
Epidemiology • Adult and Child Vaccinations • Surveillance

Applicable Kentucky Revised Statutes:  
KRS 212.240, KRS 212.245, KRS 212.370

#### Administrative/Organizational Infrastructure

Finance • Governance • IT • Communications • Human Resources  
Performance Management • Quality Improvement

Applicable Kentucky Revised Statutes:  
KRS 212.245, KRS 212.432, KRS 212.436, KRS 212.540, KRS 212.570

#### Understanding the Numbers

978



number of employees needed to perform these duties

\$62,944,395  
(employee salary and benefit package)



\$11,342,477  
(operating expenses)



\$28,619,631  
(unfunded retirement liability)



\$102,906,503  
cost of mandates required by law



### Minimum Number of Employees Required to Perform Statutory Requirements Only

LHD	County	Population	# Emp
Allen	Allen	20,933	5
Anderson	Anderson	22,544	5
Bell	Bell	26,894	6
Bourbon	Bourbon	20,029	5
Boyd	Boyd	47,979	10
Boyle	Boyle	29,924	6
Bracken	Bracken	8,267	3
Breathitt	Breathitt	12,946	3
Breckinridge	Breckinridge	20,111	5
Bullitt	Bullitt	80,246	17
Calloway	Calloway	38,919	8
Carter	Carter	27,144	6
Christian	Christian	70,416	15
Clark	Clark	30,046	7
Estill	Estill	14,277	3
Fayette	Fayette	321,959	65
Fleming	Fleming	14,446	3
Floyd	Floyd	36,271	8
Franklin	Franklin	50,485	11
Garrard	Garrard	17,523	4
Graves	Graves	37,121	8
Grayson	Grayson	26,358	6
Greenup	Greenup	35,518	8
Harlan	Harlan	26,713	6
Hopkins	Hopkins	45,547	10
Jefferson	Jefferson	771,158	155
Jessamine	Jessamine	53,375	11
Johnson	Johnson	22,594	5
Knox	Knox	31,227	7
Laurel	Laurel	60,174	13
Lawrence	Lawrence	15,719	4
Lewis	Lewis	13,339	3
Lincoln	Lincoln	24,456	5
Madison	Madison	91,226	19
Magoffin	Magoffin	12,538	3
Marshall	Marshall	31,382	7
Martin	Martin	11,452	3
Mercer	Mercer	21,521	5
Monroe	Monroe	10,659	3
Montgomery	Montgomery	27,928	6
Muhlenberg	Muhlenberg	30,816	7
Oldham	Oldham	66,415	14
Pike	Pike	58,883	12
Powell	Powell	12,374	3
Todd	Todd	12,243	3
Whitley	Whitley	36,214	8
Woodford	Woodford	26,368	6
Barren River	Barren	43,801	9
	Butler	12,831	3
	Edmonson	12,226	3
	Hart	18,757	4
	Logan	27,060	6
	Metcalfe	10,107	3
	Simpson	18,108	4
	Warren	128,845	26
Buffalo Trace	Mason	17,174	4
	Robertson	2,134	3
Cumberland Valley	Clay	20,366	5
	Jackson	13,431	3
	Rockcastle	16,698	4

LHD	County	Population	# Emp
Gateway	Bath	12,378	3
	Elliot	7,523	3
	Menifee	6,455	3
	Morgan	13,188	3
	Rowan	24,517	5
Green River	Daviess	100,374	21
	Hancock	8,881	3
	Henderson	45,928	10
	McLean	9,201	3
	Ohio	24,182	5
	Union	14,668	3
	Webster	13,018	3
Kentucky River	Knott	15,291	4
	Lee	6,570	3
	Leslie	10,334	3
	Letcher	22,339	5
	Owsley	4,435	3
	Perry	26,553	6
	Wolfe	7,264	3
Lake Cumberland	Adair	19,485	4
	Casey	15,750	4
	Clinton	10,276	3
	Cumberland	6,706	3
	Green	11,065	3
	McCreary	17,465	4
	Pullaski	64,449	13
	Russell	17,775	4
	Taylor	25,472	6
	Wayne	20,716	5
Lincoln Trail	Hardin	108,071	22
	Larue	14,205	3
	Marion	19,395	4
	Meade	28,154	6
	Nelson	45,640	10
	Washington	12,126	3
North Central	Henry	16,006	4
	Shelby	47,421	10
	Spencer	18,507	4
	Trimble	8,561	3
Northern Kentucky	Boone	130,728	27
	Campbell	92,488	19
	Grant	24,984	5
	Kenton	165,399	34
Pennyrite	Caldwell	12,639	3
	Crittenden	9,084	3
	Livingston	9,269	3
	Lyon	8,082	3
	Trigg	14,444	3
Purchase	Ballard	8,039	3
	Carlisle	4,846	3
	Fulton	6,192	3
	Hickman	4,520	3
	McCracken	65,385	14
Three Rivers	Carroll	10,713	3
	Gallatin	8,776	3
	Owen	10,765	3
	Pendleton	14,573	3
Wedco	Harrison	18,781	4
	Nicholas	7,130	3
	Scott	54,873	11

# CORE PUBLIC HEALTH

## FOUNDATIONAL PUBLIC HEALTH

Five focus areas, which includes statutorily and regulatorily defined services:

1. Population Health
2. Enforcement of Regulation
3. Emergency Preparedness & Response
4. Communicable disease control
5. Administrative and organizational infrastructure

Community Health Assessment

WIC

HANDS

HARM REDUCTION  
& SUD

Local Public  
Health Priorities

# Public Health Advisory Board



**KHDA  
President**



**KALBOH  
President**



**KPHA  
President**



**University  
Representative rotated  
on a 2 year cycle  
(UK/UL/EKU/WKU)**

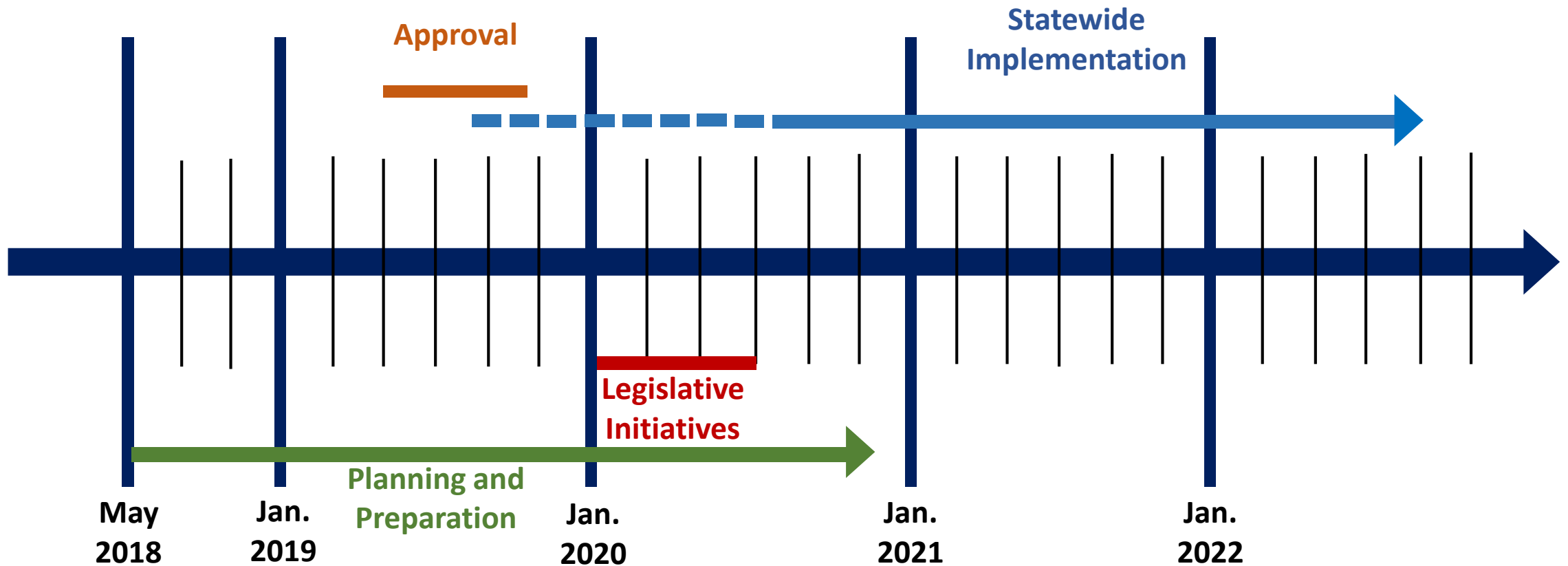


**Commissioner of  
Public Health**

- Data-driven need
- Evidence-based solution (program or service)
- Adequate funding identified
- Performance and quality management plan
- Exit strategy

***Jeff Howard MD, Kentucky Public Health Commissioner***

# TIMELINE



***Jeff Howard MD, Kentucky Public Health Commissioner***

The opposite of  
bravery is not  
cowardice...

...it's conformity