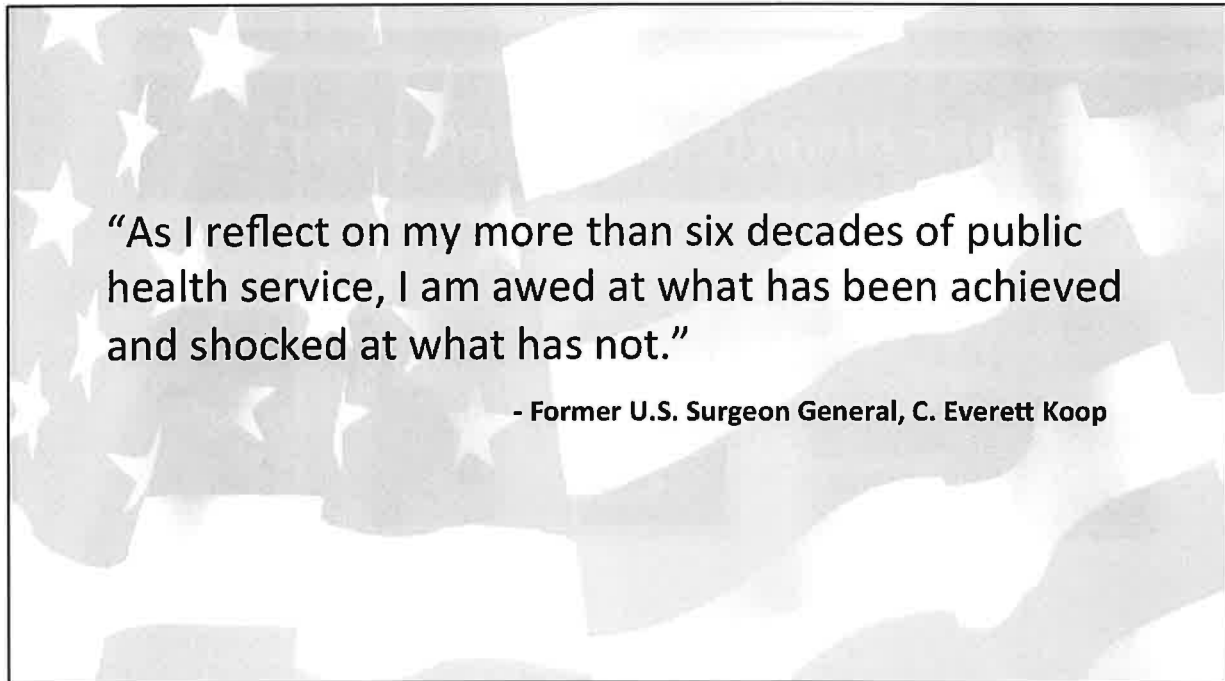


Public Health: A Primer – Part B



Script: The Michigan Public Health Training Center welcomes you to Public Health: A Primer – Part B.



Script: In the previous module, we learned about past achievements in public health. From them, we can understand what former U.S. Surgeon General, C. Everett Koop meant when he wrote in 2006, “As I reflect on my more than 6 decades of public health service, I am awed at what has been achieved and shocked at what has not.”

Module Objectives

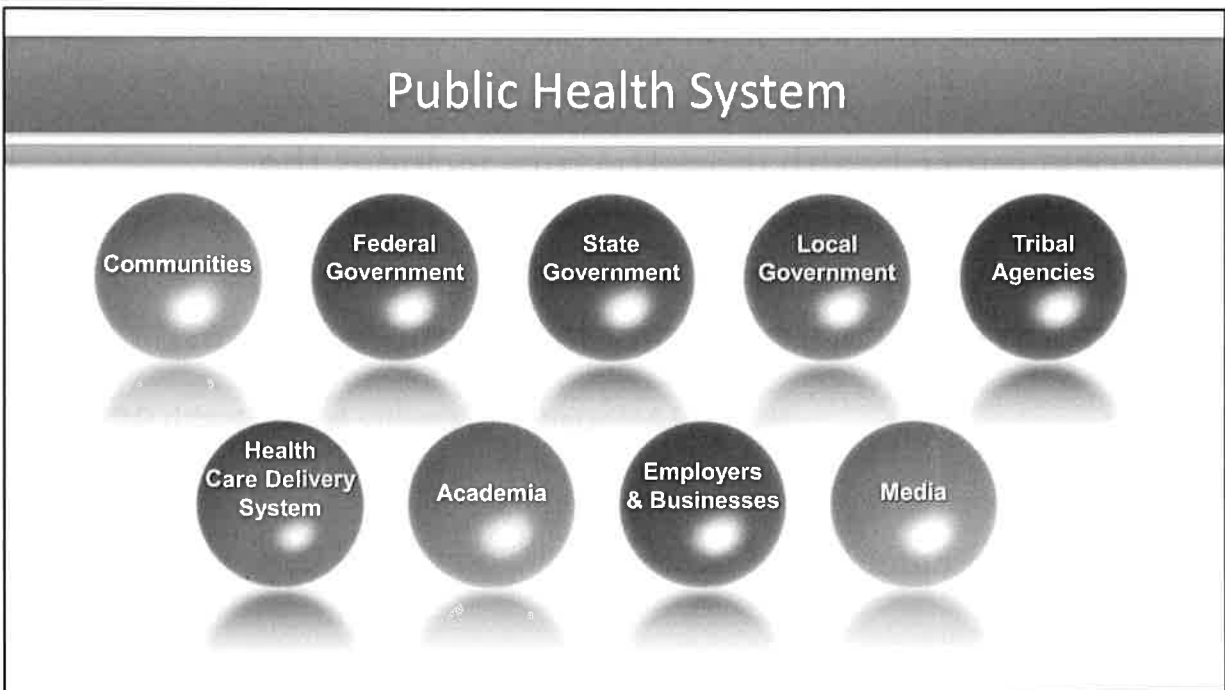
- Identify components of the public health system
- Discuss the structures and functions of local public health, including the local public health workforce

Script: This module continues your introduction to public health by exploring the components of the public health system. Additionally, you will learn about the structures and functions that support local public health, such as the public health workforce. As governing bodies with responsibility for oversight, boards of health help assure that health departments have an efficient and effective infrastructure to carry out their work. As will be discussed further in later modules, boards of health do this in part by encouraging and supporting health departments in the use of strategic partnerships and in using science and data to implement proven practices.

Public Health System



Script: Let's begin by taking a look at the public health system.

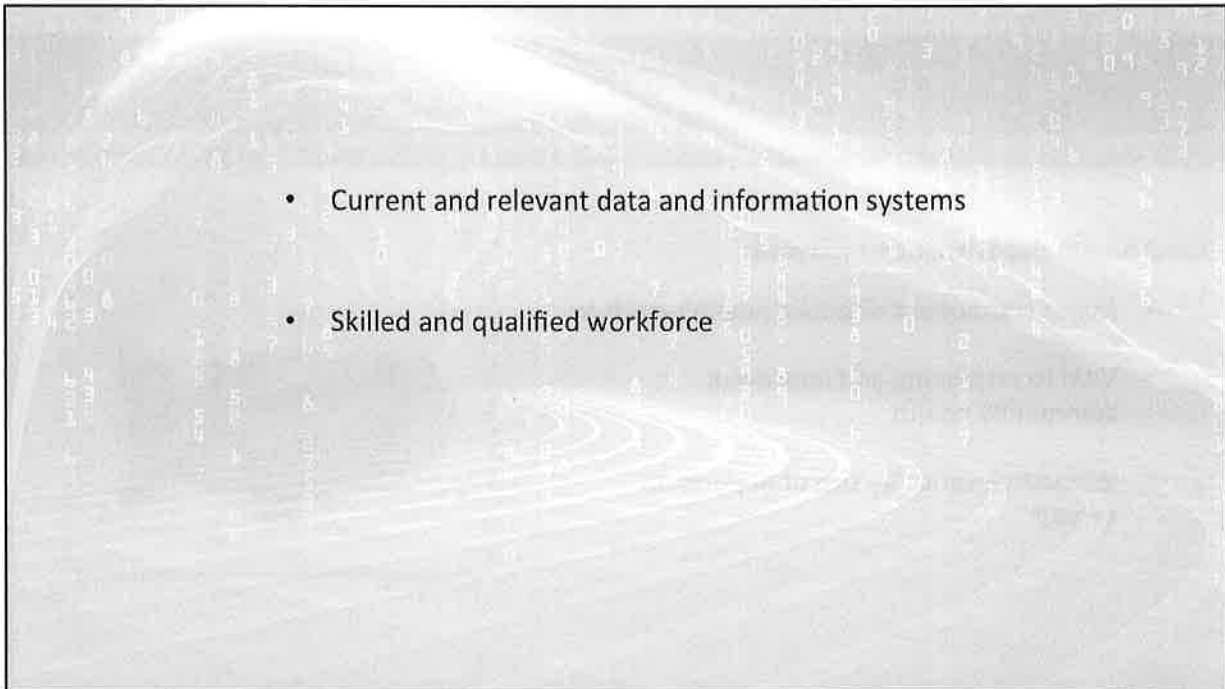


Script: According to the Institute of Medicine, the public health system is made up of entities that can work independently or together. The public health system includes Communities; Federal, State, and Local Governments; Tribal Agencies; the Health Care Delivery System; Academia; Employers & Businesses; and the Media. Some of these entities may surprise you – at first glance, they may not seem to fit with public health, but in reality, they do influence the health and well-being of the community.

“Local public health infrastructure includes the systems, competencies, frameworks, relationships, and resources that enable public health agencies to perform their core functions and essential services.”

- National Association of County & City Health Officials

Script: With that understanding of the variety of entities that can be considered components of the public health system, let’s explore the structures and functions of local public health. The National Association of County & City Health Officials tells us that, “Local public health infrastructure includes the systems, competencies, frameworks, relationships, and resources that enable public health agencies to perform their core functions and essential services.”

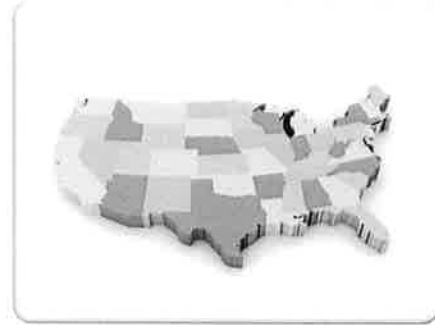


Script: Healthy People 2020, an initiative of the U.S. Department of Health and Human Services, similarly suggests that the public health infrastructure draws upon current and relevant data and information systems and a skilled and qualified workforce to meet the needs of the population.

Public Health Workforce

Local health department employees:

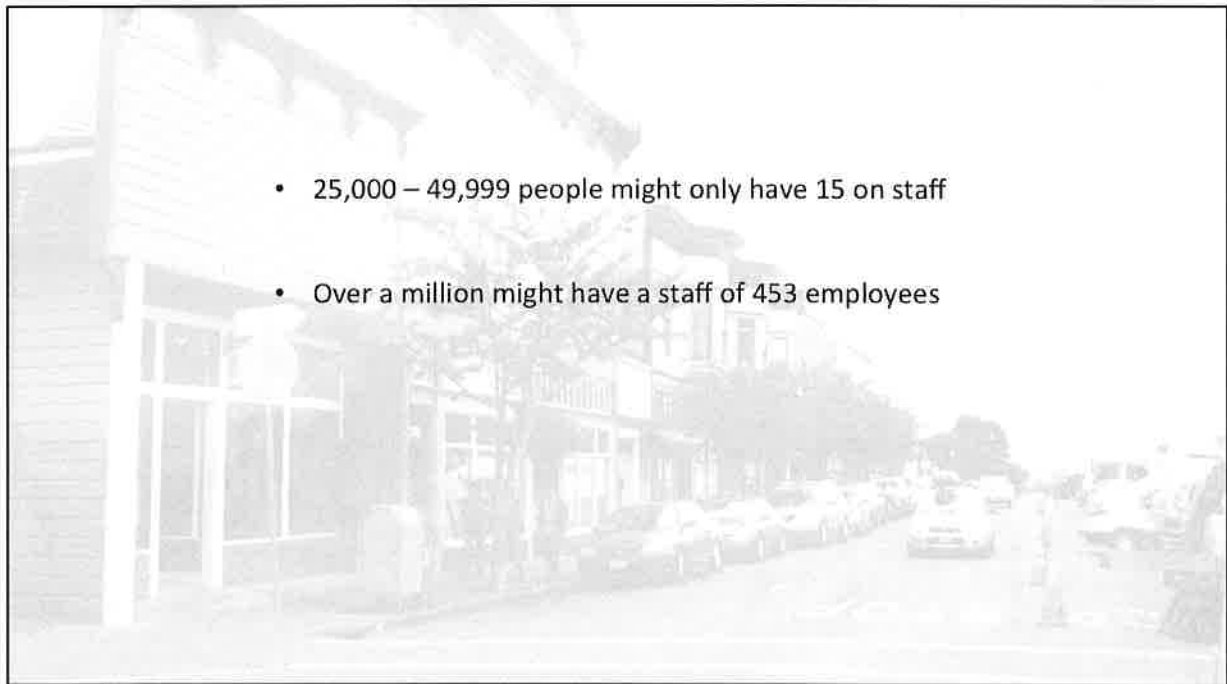
- Major component of public health workforce
- Vital to protecting and improving community health
- Workforce varies by size of population served



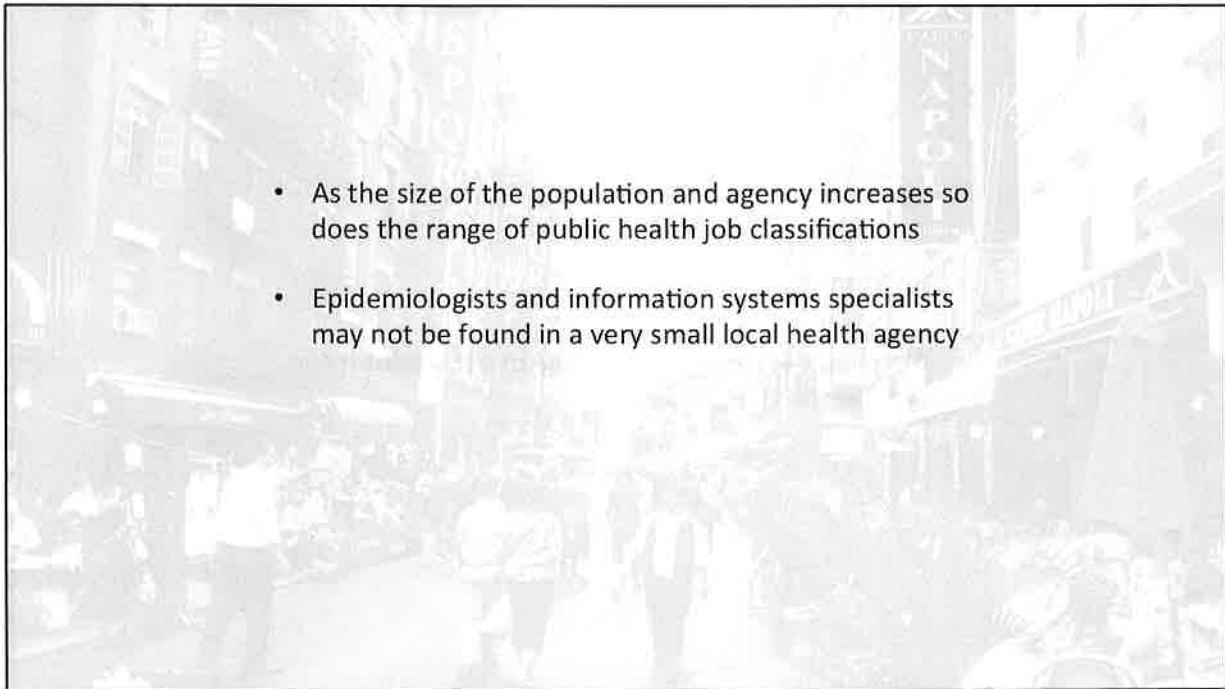
Script: Local health department employees are a major component of the public health workforce. In addition to being essential for accreditation, having a competent and appropriately staffed health department is vital to the protection and improvement of the health of the communities it serves. The actual number of employees, full-time equivalents, and occupations varies by the programs and services provided by the local health department and the size of the population being served.



Script: For example, health departments serving populations of 25,000 – 49,999 people might only have 15 staff on average, whereas a health department serving a population of over a million people might have a staff of 453 employees on average.



Script: For example, health departments serving populations of 25,000 – 49,999 people might only have 15 staff on average, whereas a health department serving a population of over a million people might have a staff of 453 employees on average.



Script: As the size of a population and agency increases, so does the range of public health job classifications that are represented. As an example, you probably wouldn't find an epidemiologist or an information systems specialist in a very small local health agency – these occupations are more typically found in the largest ones.



Script: It should be noted that administrative or clerical personnel, totaling 24 percent, and registered nurses, 19 percent, make up the largest percentage of the workforce in local health departments. A good resource to learn more about the local public health workforce is the *2013 National Profile of Local Health Departments* from the National Association of County & City Health Officials.

Federal Public Health Infrastructure Support

- Policy making
- Financing
- Public health protection
- Collecting & disseminating information
- Capacity building
- Direct service management



Script: Having identified the players in the public health system, it is useful to recognize how federal and state agencies support the work of local public health agencies. In 2003, the Institute of Medicine identified six areas in which the federal government acts with relation to population health. These include policy making, financing, public health protection, collecting and disseminating information, capacity building, and direct service management. Much of this work is conducted under the U.S. Department of Health and Human Services and its numerous agencies such as the Health Resources and Services Administration and the Centers for Disease Control and Prevention. These agencies not only set standards and policies, they also provide grants, program initiatives, and funding opportunities.

State Public Health Infrastructure Support



- State-level public health agency in fifty states and the District of Columbia
- Agency names vary between states
 - Department of Public Health
 - Department of Health and Social Services
 - Department of Health
 - Department of Community Health
- Responsibilities based on ten essential services

Script: State agencies also support the work of local public health agencies. In the U.S., each state and the District of Columbia has a state-level public health agency. The title each state gives their agency varies, but tends to be a variation of one of the following: Department of Public Health, Department of Health and Social Services, Department of Health, or Department of Community Health. In general, state public health responsibilities are based on the ten essential services you learned about in the previous module.



Script: State public health agencies play a part in making sure their states are prepared and able to respond to public health emergencies. Depending on the emergency, agencies may need to conduct wide-spread disease prevention and, if necessary, quarantine and isolation. State agencies are also responsible for collecting health-related data such as birth and death records. Another state public health agency responsibility is population-based primary prevention, which is providing education and disease prevention interventions. State agencies may be responsible for regulating, inspecting, and licensing health care professionals and facilities, which could include food processing facilities and solid waste removal services. Finally, state agencies may be responsible for administering federal public health funding and programs, such as Women, Infants, and Children or WIC.

- Prepare for and respond to public health emergencies
- Conduct disease prevention
- Collect health-related data
- Provide population-based primary prevention
- Regulate, inspect, and license professionals and facilities
- Administer federal public health funding and programs

Script: State public health agencies play a part in making sure their states are prepared and able to respond to public health emergencies. Depending on the emergency, agencies may need to conduct wide-spread disease prevention and, if necessary, quarantine and isolation. State agencies are also responsible for collecting health-related data such as birth and death records. Another state public health agency responsibility is population-based primary prevention, which is providing education and disease prevention interventions. State agencies may be responsible for regulating, inspecting, and licensing health care professionals and facilities, which could include food processing facilities and solid waste removal services. Finally, state agencies may be responsible for administering federal public health funding and programs, such as Women, Infants, and Children or WIC.

Local Public Health Responsibilities

- More than 2,800 local health departments in the U.S.
- Responsibilities and services vary



Script: Now that you know more about how federal and state entities support local public health agencies, let's find out what local public health responsibilities are. There are approximately 2,800 local health departments in the United States. Levels of responsibility and services provided by local health departments vary dramatically, as they are structured differently in each state.


Local Public Health Services

- Surveillance of diseases and environmental health
- Adult and child immunization
- Screen and treat tuberculosis
- Inspect food service establishments
- Food safety education
- Population-based nutrition services
- Inspect schools and daycare centers



Script: In January 2014, the National Association of County & City Health Officials reported that the services most often provided by local health departments across the country are based on the ten essential services you learned about in the previous module. These services include surveillance of communicable or infectious diseases and environmental health, adult and child immunization, tuberculosis screening and treatment, inspecting food service establishments, food safety education, population-based nutrition services, and inspecting schools and daycare centers.

Local Public Health Services

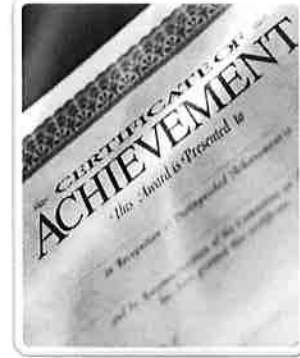


- Food protection
- Private groundwater or public water supply
- On-site sewage disposal management
- Hearing screening
- Vision services
- Sexually transmitted disease control and prevention
- Immunization
- Infectious disease control

Script: The public health code in many states mandates what essential services local public health departments need to provide. For example, the Michigan Public Health Code mandates that local public health departments provide eight essential services in order to receive state funding. These services are: food protection, private groundwater or public water supply, on-site sewage disposal management, hearing screening, vision services, sexually transmitted disease control and prevention, immunization, and infectious disease control.

Local Health Department Accreditation

- State and national accreditation
- National accreditation is voluntary
- State accreditation may be mandatory
- Provides guidance regarding the structures and processes that health departments use to deliver public health services

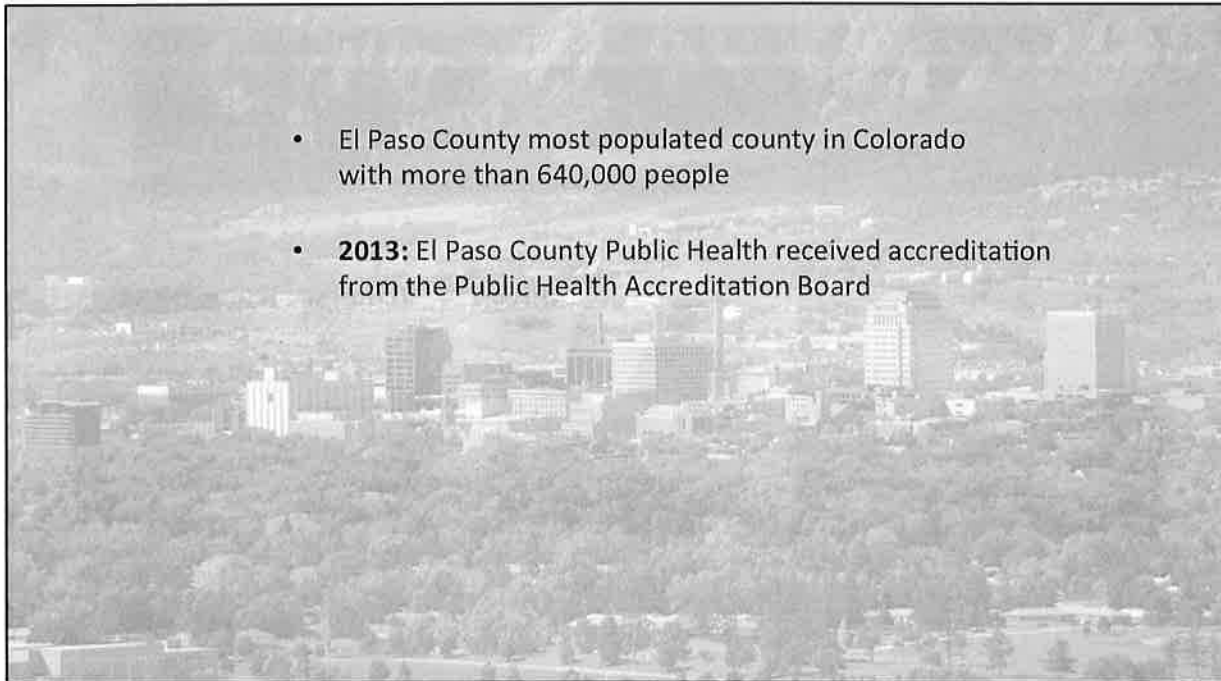


Script: Now that you know more about how federal and state entities support local public health agencies and what local public health responsibilities are, let's explore accreditation. There are both state and national accreditation. The Public Health Accreditation Board, or PHAB, serves as the national accrediting organization for tribal, state, local, and territorial public health departments. National accreditation is voluntary. However, your individual state may also have its own state-level accreditation program. State-level accreditation may be mandatory. Whether state or national, accreditation provides guidance regarding the structures and processes that health departments use to deliver public health services.

Effective Board of Health Example



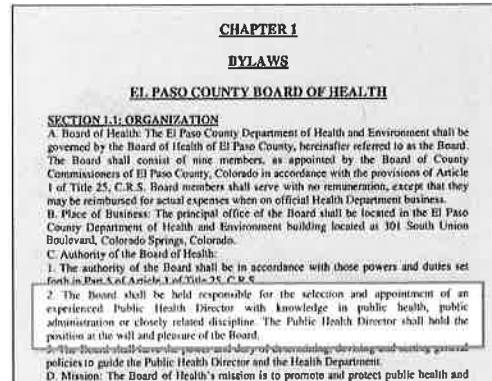
Script: Now that we have explored all of the module objectives, let's look at an example of what an effective board of health can do for its community. As you listen to the example, which is just one of many possible examples from various settings across the country of a board of health success, think about what the board of health is doing to ensure a competent workforce.



Script: El Paso County is the most populated county in Colorado with more than 640,000 people. It is also where Colorado Springs is located along with the United States Air Force Academy. In 2013, El Paso County Public Health was the first public health agency in Colorado to receive accreditation from the Public Health Accreditation Board.

Effective Board of Health Example

- Governed by a nine-member board of health
- Board members are appointed by the El Paso County Board of County Commissioners
- Responsible for selecting and appointing an experienced Public Health Director



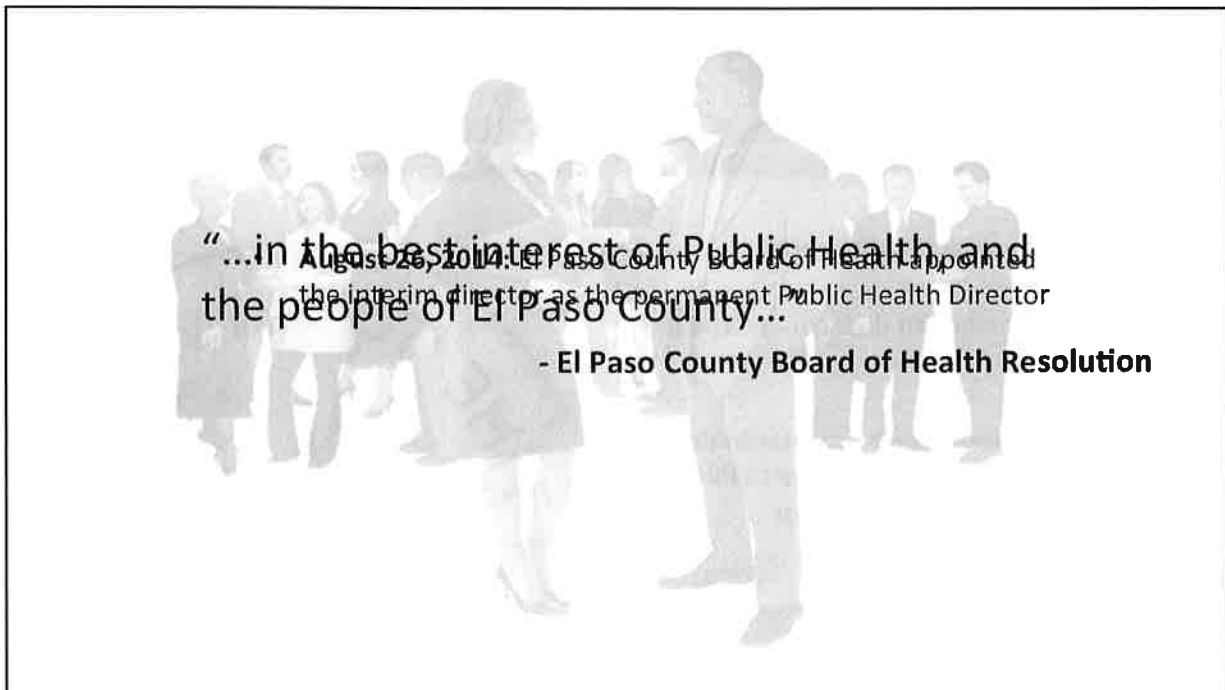
Script: El Paso County Public Health is governed by a nine-member board of health. Board members are appointed by the El Paso County Board of County Commissioners. One of the responsibilities of the board of health, as established in the bylaws, is to select and appoint an experienced Public Health Director.

Effective Board of Health Example



- **July 3, 2014:** Public Health Director would resign
- The board of health passed a resolution appointing an interim director
- **June 30, 2014:** Named the interim director, effective at 12:01 am on July 4, 2014

Script: The El Paso County Board of Health received notification that the current Public Health Director would be resigning effective at midnight on July 3, 2014. In order to ensure that a qualified person would be appointed as the new Public Health Director, the board of health passed a resolution to appoint an interim director. The resolution, effective June 30, 2014, named the interim director and stated the appointment went into effect at 12:01 am on July 4, 2014, until the board was able to find a qualified person to fill the position permanently. At the same time, the board of health also passed a resolution establishing the salary for the interim director.



Script: On August 26, 2014, the El Paso County Board of Health appointed the interim director as the permanent Public Health Director. The board was able to determine that the person appointed as interim director performed the required services in an exemplary manner. The resolution specifically stated that the appointment was "...in the best interest of Public Health, and the people of El Paso County..." The board passed a second resolution at the same time establishing the salary of the new Public Health Director.

Effective Board of Health Example

- Fulfill their governance function
- Oversee the health department and its leadership
- The board made sure the interim director was knowledgeable and able to fill the role as Public Health Director



Script: When the El Paso County Board of Health appointed an interim Public Health Director, they were fulfilling their governance function of overseeing the health department and its leadership. The interim period gave the board time to make sure they had someone who was knowledgeable and able to fill the role as Public Health Director.

Public Health: A Primer – Part B

- Identify components of the public health system
- Discuss the structures and functions of local public health, including the local public health workforce

Script: You have now completed Public Health: A Primer – Part B, in which we explored the key actors in the public health system. Additionally, we looked at the federal, state, and local structures and functions that support public health. Please continue on to the next video in the series.

Training Provided By



HRSA Grant Number: UB6HP20200



Script: This training is provided by the Michigan Public Health Training Center at the University of Michigan School of Public Health, Office of Public Health Practice. Funding for this project was made possible by the Health Resources and Services Administration, Bureau of Health Workforce. This training was developed in collaboration with the Michigan Public Health Institute.

Special Thanks To:

- National Association of Local Boards of Health (NALBOH)
- Phyllis Meadows, PhD, MSN, RN, University of Michigan School of Public Health

Questions about this training? Contact:

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734-615-9439

This Course is in Memory of Marie Fallon

Photo References

- **00:07** – 9301 by CDC/Judy Schmidt (2006) from CDC PHIL

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