



KANSAS  
FOUNDATIONAL  
PUBLIC HEALTH  
SERVICES LOCAL  
IMPLEMENTATION  
TOOLKIT

November 2018

## INTRODUCTION

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### BACKGROUND AND PURPOSE

This toolkit was designed to support local implementation of the Kansas Foundational Public Health Services (FPHS) Model. This resource is intended for local health department officials, who are interested in, or are currently leading, efforts to implement the Kansas Foundational Public Health Services locally. This resource was informed by the Kansas Foundational Public Health Services Local Pilot, which took place in 2017-2018 with representatives from Coffey, Franklin, Osage and Wabaunsee counties and staff from the Center for Public Health Initiatives at Wichita State University, Kansas Association of Local Health Departments (KALHD), and Kansas Health Institute. The same partners contributed to the development of this toolkit.

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### KANSAS LOCAL HEALTH DEPARTMENTS ARE TAKING ACTION TO ENSURE THE SAFETY AND HEALTH OF ALL KANSANS

KALHD represents 94 of the 100 local health departments in Kansas. KALHD's vision is "A system of local health departments committed to helping all Kansans achieve optimal health by providing Foundational Public Health Services." To advance this vision, KALHD members are working to create a more connected network of local health departments that collaborate in new ways to serve all Kansans by providing the right service, at the right time, at the right cost, by qualified staff.

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### THE KANSAS FOUNDATIONAL PUBLIC HEALTH SERVICES MODEL

The Kansas Foundational Public Health Services Model was adopted by KALHD members in 2016 (Kansas FPHS Model Development, 2018). The model outlines the skills, programs and activities that should be available in every community through state or local governmental public health agencies as basic components to keep the public safe and healthy. Foundational Public Health Services are primarily population-based preventive health services that are best addressed by governmental public health.

The model consists of **Foundational Areas** ("substantive areas of expertise or program-specific activities"), and **Foundational Capabilities** ("the crosscutting skills and capacities needed to support the foundational area.") Within each FC and FA, there are Components that further define the abilities or activities necessary to implement that Capability or Area. The model also includes community-specific programming based on local needs, and vary from community to community. Foundational Public Health Services should be provided or *assured* by every health department, directly or through contractual or sharing agreements. To 'assure' means that state or local public health agencies have the primary responsibility to strategically work with community partners to ensure that those who need the service have access to it and that there is a plan in place to provide the service (Kansas FPHS Model Development, 2018).

An image of the Kansas Foundational Public Health Services model can be found in Appendix A.

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## LOCAL IMPLEMENTATION OF THE KANSAS PUBLIC HEALTH SERVICES MODEL

This toolkit is the result of a four-county pilot project, led by KALHD and other public health partners, with funding from the Public Health National Center for Innovations, 21<sup>st</sup> Century Public Health Innovations Program. The goal of the pilot was to demonstrate that it is possible to shift the paradigm in delivery of public health services to an FPHS-model, even in jurisdictions with limited resources. Local implementation, in contrast with statewide implementation, of FPHS is possible because of Kansas’ “decentralized” public health system where most counties fund and staff their own local health department. The Kansas Legislature, by authorizing local boards of health and local health officers, has delegated a significant amount of authority and responsibility to local public health officials. Local officials in Kansas have the power to establish budgets, build a public health workforce, and determine what programs and services to provide.

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## PARTNERSHIP AND COLLABORATION ARE ESSENTIAL FOR IMPLEMENTING FOUNDATIONAL PUBLIC HEALTH SERVICES

It is neither feasible nor practical for Kansas local health departments to provide the Foundational Public Health Services through direct service alone. Kansas local health departments must borrow innovative strategies from other governmental and nongovernmental sectors work across jurisdictional boundaries to provide more and better public health services for people that need them. Cross-jurisdictional sharing is “the deliberate exercise of public health authority to enable collaboration across jurisdictional boundaries to deliver essential public health services” (Center for Sharing Public Health Services, 2018). Cross-jurisdictional sharing is a growing strategy used by state, tribal, local, and territorial agencies and organizations to address opportunities and challenges such as tight budgets, increased burden of disease, and regional planning needs (Centers for Disease Control and Prevention, 2018).

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## TOOLKIT CONTENTS

This toolkit outlines three phases of a local Foundational Public Health Services implementation process: **Prepare for the Implementation Initiative**, **Explore Opportunities to Implement FPHS Locally and Identify Priority Areas for FPHS Implementation and Act**. This resource also includes a number of attached worksheets and templates.

Prepare for the Implementation Initiative	Explore Opportunities to Implement FPHS Locally	Identify Priority Areas for FPHS Implementation and Act
<ul style="list-style-type: none"> <li>• Prepare to manage change</li> <li>• Become a content expert</li> <li>• Build Implementation Team</li> <li>• Determine project scope</li> <li>• Engage commissioners</li> <li>• Engage other partners</li> <li>• Organize the project</li> </ul>	<ul style="list-style-type: none"> <li>• Develop a share vision</li> <li>• Assess current service delivery using the Kansas FPHS Data Collection Tool</li> <li>• Identify possible opportunities for local implementation of Kansas FPHS</li> </ul>	<ul style="list-style-type: none"> <li>• Determine shared priorities</li> <li>• Document details using the Action Planning Display Tool</li> <li>• Vet your ideas with key stakeholders</li> <li>• Finalize action plans, implement and course-correct as needed</li> </ul>

## PREPARE FOR THE IMPLEMENTATION INITIATIVE

A local FPHS implementation initiative should be led by a “Local FPHS Implementation Team” consisting of local health department administrators. The Local Implementation Team should be supported by a project coordinator. Staff from KALHD and other public health partner organizations are available to provide information and resources. All members of your Local FPHS Implementation Team should become familiar with the recommendations in this section.

### RECOMMENDATION 1: PREPARE TO MANAGE CHANGE

Prepare to manage change. One change management model says that organizations change when the product of **DISSATISFACTION** (with the current state), **VISION** (of a preferred future) and **FIRST STEPS** (to achieving the vision) is greater than the **RESISTANCE TO CHANGE** (Wikipedia, 2018). Your Local FPHS Implementation Team is leading a “change process” that will require change management. Key responsibilities will include:

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- Identify where dissatisfaction exists and build the case for change through conversations using stories and data.
- Create a shared vision for the future.
- Clearly define what must happen, by when, and with who, for change to occur.
- Develop and execute a trustworthy change process.

### RECOMMENDATION 2: BECOME A CONTENT EXPERT

Become a content expert about Kansas Foundational Public Health Services.

- Read literature about the Kansas Foundational Public Health Services Model.
- Build your professional network to include those familiar with this type of work.

Become a content expert about public health service delivery in your area.

- Understand common public health program and service delivery models.
- Understand how public health programs and services are delivered in Kansas. The Collaborative Service Delivery Matrix: A Decision Tool to Assist Local Governments is a resource that might be helpful as you explore alternative models for providing public health services locally (Enhanced Partnership of the ICMA, Alliance for Innovation, and Arizona State University’s Center for Urban Innovation, 2018).
- Understand strengths and weaknesses of your local public health workforce by reviewing the Kansas Public Health Workforce Assessment Report (KDHE Local Public Health Program, 2018)
- Understand strengths and gaps related to public health practice in your area. Contact the Local Public Health Program at KDHE for information about the Aid to Local Survey Report or the 2017 FPHS Capacity Assessment Report (Kansas Foundational Public Health Services Capacity Assessment, 2018)

- Review local community health assessments, community health needs assessments or health improvement plans to identify trends and current priorities.
- Understand the current costs for providing public health services in your area. The *Determining and Distributing Costs of Shared Public Health Services* primer is a resource to assist policymakers and public health officials as they determine the cost of sharing services and decide how to distribute cost across or among jurisdictions (*Determining and Distributing Costs of Shared Public Health Services*, 2018).

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### RECOMMENDATION 3: BUILD A LOCAL FPHS IMPLEMENTATION TEAM

Meet with local health department directors in your area to determine their level of interest in local FPHS implementation. All Local FPHS Implementation Team members should be committed to the process before moving forward. Ask these questions and others to determine if there is a current opportunity to work together:

- *What is your level of understanding about the Kansas FPHS Model?*
- *What is your level of interest in exploring new ways to provide important public health services to your residents?*
- *What programs or services are needed in your community that are not available now?*
- *How does your governing entity feel about developing partnerships across county boundaries to provide important public health services?*
- *What is the next thing we need to do to move forward with this change effort?*

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### RECOMMENDATION 4: DETERMINE THE SCOPE AND PRIORITIES FOR YOUR CHANGE EFFORT

- Determine what priorities will drive your change effort.
- Determine the overall scope, or phasing plan, for your change effort:
- Determine the scope of your change effort. For example, will your FPHS Implementation Team explore opportunities to implement all Foundational Public Health Services or are there specific Services, Capabilities or Components of particular interest? Other possible considerations are: The answer to this question will affect the overall complexity and scope of your work.
- It might be helpful to consider phasing for FPHS implementation.

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### RECOMMENDATION 5: ENGAGE COUNTY COMMISSIONERS

Commissioners have significant responsibility for shaping public health. They have the authority to enact policies that influence health of residents, and their support for the local health department shapes what public health looks like in your community.

**Commissioners may develop a better understanding of the role and value of public health in your community by participating in this work. They may even become stronger**

**public health advocates.** Invite your commissioners to participate in Local FPHS Implementation meetings whenever they are available. Also, share relevant materials so that they can learn more about your Local FPHS Implementation work.

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#### RECOMMENDATION 6: ENGAGE OTHER LOCAL PUBLIC HEALTH PARTNERS

Consider what other individuals and organizations might need to be involved in your change effort. Consider partners from all participating counties if you are exploring a multi-county effort.

- Health department administrator, local health officer and/or medical consultant
- Key health department staff
- Local elected officials including county commissioners or city council members
- City and/or county manager
- Other local public health system partners
- KDHE or other state agency partners
- Statewide public health system partners with content knowledge about the Kansas Foundational Public Health Services Model

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#### RECOMMENDATION 7: DEVELOP KEY PROJECT MANAGEMENT ELEMENTS

Develop clear project guidelines to prevent scope-creep and help ensure the project stays on track. A simple project charter is one method to record these details.

A project charter or guidance document might include the following:

- Timeline of key activities for your change effort.
- Project goals
- Local FPHS Implementation Team members
- Local FPHS Implementation Team member roles and responsibilities
- Local Public Health System partners
- Support staff
- Meeting agendas
- Delegation of tasks and accountability
- Meeting location/s
- Support staff
- Funding to support project costs

## EXPLORE OPPORTUNITIES TO IMPLEMENT FPHS LOCALLY

You have laid the groundwork and now it is time to move forward by exploring possible opportunities for local FPHS implementation. This begins with developing a shared vision then exploring, at a deep level, how public health services are delivered now.

### DEVELOP A SHARED VISION

A shared vision can guide your Local FPHS Implementation team’s change effort. Discuss your vision during an open group conversation. Then remind the team of this vision frequently. Make course-corrections as needed. Possible discussion questions to identify the group vision include, *Why is this work important to you? What should happen because of this project? How might we work together differently to ensure the Foundational Services?*

### COMPLETE THE FPHS DATA COLLECTION TOOL

This ten-question tool is designed to collect program and service data at the Component level. The tool should be completed by all jurisdictions for each Component reviewed. For example, if your team is reviewing all of the Foundational Services, the table below will be completed 109 times (once for each Component). The FPHS Data Collection Tools would be completed 13 times (one for each Component) if you are reviewing the Foundational Area of Environmental Health. See Appendix B.

Kansas FPHS Data Collection Tool		
1. Is this Component provided in your jurisdiction now? <b>Select One</b>	Yes	No
2. <b>(CAPACITY)</b> To what extent does your department have the <b>staff, time and funding</b> to provide this Component?	Scale: 0 (none), 1 (minimal), 2 (some), 3 (sufficient), 4 (full)	(Enter Score Here)
3. <b>(CAPABILITY)</b> To what extent does your department have the <b>skills, knowledge and expertise</b> to provide this Component?		(Enter Score Here)
4. Thinking about this Component, describe what <b>ACTIVITIES</b> occur now:		
5. Thinking about this Component, list the <b>STRENGTHS</b> that exist in your community:		
6. Thinking about this Component, list the <b>GAPS</b> that currently exist:		
7. Thinking about this Component, describe how <b>performance</b> is measured:		
8. How is this Component currently provided? <b>Select all that Apply</b>	<input type="checkbox"/> Not provided <input type="checkbox"/> Provided by local health department alone <input type="checkbox"/> Provided through collaboration with other department in my county <input type="checkbox"/> Provided through collaboration with city government within county <input type="checkbox"/> Provided through collaboration with governmental entity outside of county <input type="checkbox"/> Provided through collaboration with private entity	
9. List the agencies or departments that are involved in the delivery of this Component:		
10. List additional comments or questions about this Component:		

#### QUESTION 1: ASSESS CURRENT PUBLIC HEALTH SERVICE DELIVERY

Determine if the Component is provided in your jurisdiction. This is a yes/no question.

#### QUESTIONS 2 & 3: FOUNDATIONAL PUBLIC HEALTH SERVICES CAPACITY ASSESSMENT

Determine your current capacity (**defined as staff, time and funding**) and capability (**defined as skills, knowledge and expertise**) to this Component.

#### QUESTIONS 4 – 7: QUALITY AND PERFORMANCE MEASUREMENT

Consider current activities, strengths, gaps and performance measures for the Component.

#### QUESTION 8: SERVICE DELIVERY MODEL

Determine how the Component is currently provided. There are a number of possible service delivery models including these:

- Not provided
- Provided by local health department alone
- Provided through collaboration with other department in my county
- Provided through collaboration with city government within county
- Provided through collaboration with governmental entity outside of county
- Provided through collaboration with private entity

#### QUESTION 9: SERVICE DELIVERY PARTNERS

List the names of individuals or organizations to provide or share in providing this Component.

#### QUESTION 10: ADDITIONAL NOTES

Be sure to capture key notes about the Component. *What questions arose during community conversations about this Component. What clarifying questions did I have about this Component? Is this Component a priority for sharing with other jurisdictions?*



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## IDENTIFY POSSIBLE OPPORTUNITIES FOR LOCAL FPHS IMPLEMENTATION

Your Local FPHS Implementation Team may have a Foundational Area or Capability in mind where progress needs to be made. You may also find it necessary to walk through the entire set of Foundational Public Health Services. Whatever the case, as you review the Kansas FPHS Data Collection Tool for each partner the team may elect to explore opportunities across the entire Kansas Foundational Public Health Services Model.

### COMPONENT LEVEL QUESTIONS

These **Component level** questions can help the team understand what's happening now and begin to identify the possibilities that might exist.

1. Is this Component available in each community? If not, where do gaps exist?
2. What would it take to address the gap/s?
3. How can we measure performance for this Component?

### SERVICE LEVEL QUESTIONS

These **Service level** questions can help the team identify possible priority components and focus areas. They can also help identify where input from local partners might be needed.

1. What do you care about most from our discussion today? (Purpose: Identify where to focus our attention related to this Foundational Service.)
2. What, if anything, needs our collective attention moving forward? (Purpose: Identify possible priorities for partnership.)
3. What is a major learning, insight or question that needs to be taken back to local (County) partners? (Purpose: Identify actions for Local FPHS Implementation Team to engage commissioners and other local public health system partners in this effort.)
4. What needs our immediate attention? (Note: Be sure to capture the answer to, "Who will do what and by when?"

Throughout these conversations, it is important to capture clear notes and share them afterward with the entire Local FPHS Implementation Team. A discussion questions worksheet can be found in Appendix C.

## IDENTIFY PRIORITY AREAS FOR FPHS IMPLEMENTATION AND ACT

### DETERMINE PRIORITIES

It's time to identify your team's priority Components (*specific Components from the Kansas FPHS Model*) or focus areas (*specific areas of public practice that don't fit neatly into a single Component*) for local FPHS implementation. In other words, **of all the possible opportunities to make progress on local FPHS implementation, which priority areas will you focus on for the short-term?** You might consider developing inclusion criteria to select your priorities. Administrators and staff involved with the four-county Kansas FPHS Local Pilot utilized the following inclusion criteria:

- Is the Component or focus area required by statute?
- Is the Component or focus area identified as a need in a local community action plan or community health improvement plan?
- Would the "fix" for the Component or priority be affordable?
- Is it feasible to address the identified Component or priority area?
- Were gaps identified by the FPHS Capacity Assessment for the identified Component or priority area?

### ACTION PLANNING DISPLAY TOOL

The display tool is intended to collect and share important information about identified priority issues. It is important to clearly describe the proposed priority issues so that all stakeholders can be informed about the proposed change.

Name of Component or Area of Focus		
List the relevant Kansas FPHS Model Components here:		
What is the rationale for focusing on this area?		
What is the preferred service delivery type for this Component (See Data Collection Tool for Options)?	Who needs to be involved with implementation actions?	List anticipated costs for implementation actions (including staff time and other costs).
What should happen next in order to make progress?		

## PRESENT YOUR IDENTIFIED PRIORITIES TO LOCAL PUBLIC HEALTH SYSTEM PARTNERS

Engagement of local public health systems partners throughout your change process is strongly encouraged. It might be particularly useful to get their input and ideas about your identified priorities and possible next-steps before moving forward with action planning. Partner input could reveal unidentified opportunities or barriers. Because county commissioners have a unique role (including specific statutory responsibilities and authorities), you might consider specific outreach to engage county commissioners from the involved counties. Make sure you pay attention to open meeting guidelines.

Notes about possible meeting agenda items for meetings with county commissioners and local public health system partners are found in Appendix D.

## ACTION PLANNING

An action planning process can move your list of priorities from “general ideas” to “specific next steps”. The action-planning process below can facilitate the development of SMART objectives and action steps. The action-planning process should be applied to each priority identified on your Action Planning Display Tool.

Priority Issue or Focus Area:		
SMART Objective/s:		
WHO (CHAMPION)	WILL DO WHAT (ACTION STEPS)	BY WHEN (DUE DATE)

### STEP 1

Review details about the priority issue in the Action Planning Display Tool. Pause for questions, observations or additions to the Action Planning Display Tool.

### STEP 2

Summarize the **Priority Issue or Focus Area** to be addressed.

### STEP 3

Develop 1-3 **SMART objectives** to guide the work.

### STEP 4

Identify **WHO WILL DO WHAT BY WHEN** to address to make progress on the Priority Issue and SMART objectives.

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## ACTION PLAN IMPLEMENTATION, REVIEW AND COURSE CORRECTION

Congratulations, you now have an action plan that outlines what is needed to make progress on implementing the Kansas Foundational Public Health Services Model in your area. You are doing something new and innovative to affect the health of many Kansans. You have invested months of time, and spent political capital to engage partners, but your work is not done yet! A completed action plan was not the reason you started this change process. You are fooling yourself if you think action plan implementation will manage itself. Below are a few tips that will increase your likelihood of a successful change effort.

### **Tip #1: Identify an “it person” to coordinate next steps**

A coordinator must be identified to organize ongoing project activities. This might be the same person who “drove the bus” throughout your exploration and action phases or it might be someone new who can coordinate the effort moving forward.

### **Tip #2: Check in periodically on action plan implementation**

The Local FPHS Implementation Team (those LHD staff and other stakeholders responsible for implementing the action plan) should meet periodically, perhaps every 30 or 60 days, to check in on progress and identify needed course-corrections.

### **Tip #3: Continue to engage community partners**

Check in periodically with community stakeholders, including county commissioners and local public health system partners. They have a stake in your implementation process and should be engaged regularly and provided periodic updates.

### **Tip #4: Talk about your success and challenges to improve public health in Kansas**

Find opportunities to talk about your experience with a variety of audiences. Your work could be adapted or adopted elsewhere across the Sunflower State, but others will not know about your project unless you talk about it. You are working to modernize local public health in Kansas, talk about it!

## CONCLUSION

Additional resources, tools, and examples will be added to future iterations of this toolkit as they become available. Contact the Kansas Association of Local Health Departments for additional information:

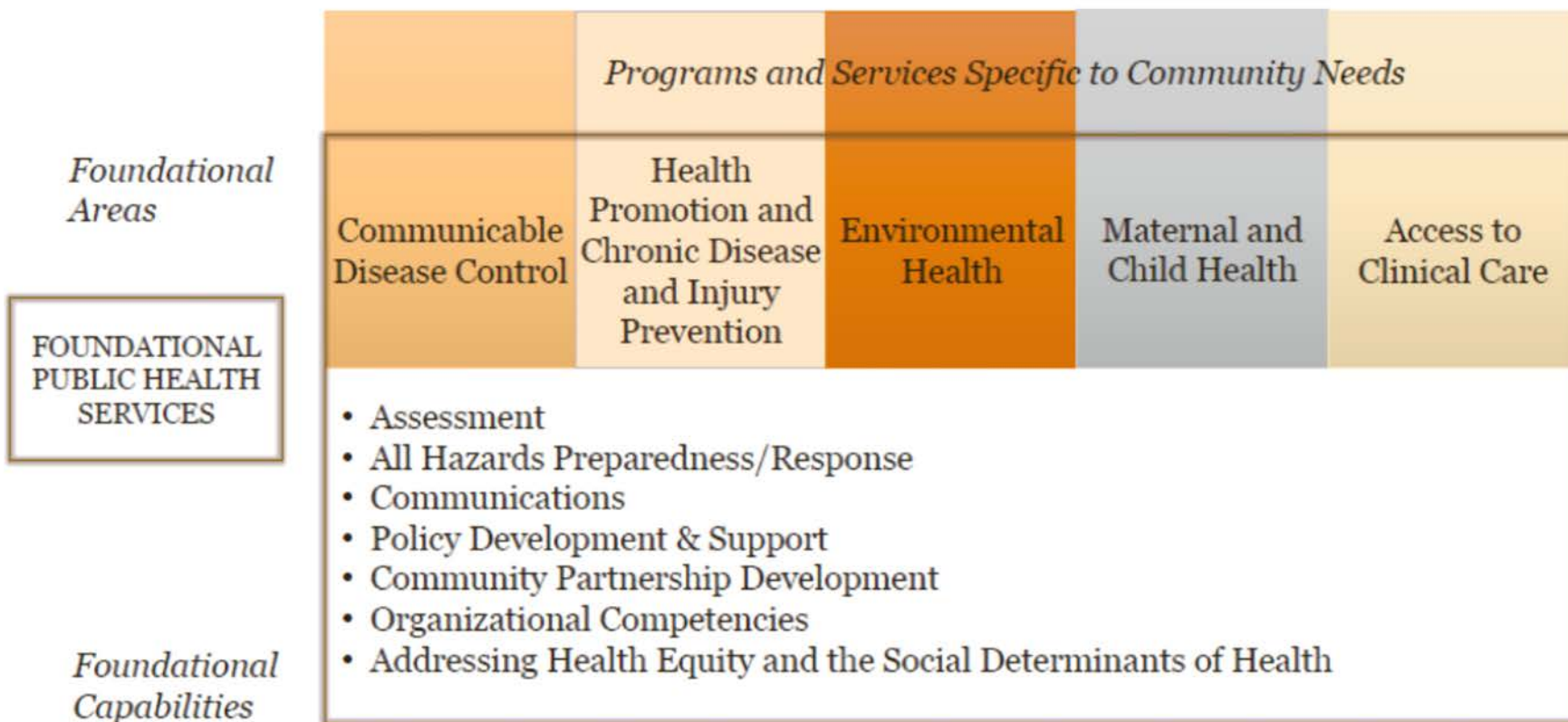
Kansas Association of Local Health Departments  
300 SW 8th Ave  
Suite 300  
Topeka, KS 66603  
Phone 785-271-8391  
Fax 785-272-3585

## REFERENCES

- Center for Sharing Public Health Services. (2018, November 29). *Center for Sharing Public Health Services*. Retrieved from Determining and Distributing Costs of Shared Public Health Services: <https://phsharing.org/wp-content/uploads/2015/04/DeterminingDistributingCostsCJS.pdf>
- Center for Sharing Public Health Services. (2018, October 15). *Phase One / Explore*. Retrieved from Center for Sharing Public Health Services: <https://www.phsharing.org/roadmap>
- Centers for Disease Control and Prevention. (2018, October 15). *Public Health Professionals Gateway*. Retrieved from Centers for Disease Control and Prevention: <https://www.cdc.gov/stltpublichealth/cjs/index.html>
- Enhanced Partnership of the ICMA, Alliance for Innovation, and Arizona State University's Center for Urban Innovation. (2018, November 29). Retrieved from International City/County Management Association: <https://icma.org/documents/collaborative-service-delivery-matrix-decision-tool-assist-local-governments>
- Kansas Foundational Public Health Services Capacity Assessment*. (2018, November 28). Retrieved from Kansas Health Institute: [https://www.khi.org/assets/uploads/news/14773/ks\\_fphs\\_capacity\\_assessment.pdf](https://www.khi.org/assets/uploads/news/14773/ks_fphs_capacity_assessment.pdf)
- Kansas FPHS Model Development*. (2018, November 29). Retrieved from <https://www.khi.org/assets/uploads/news/14778/kansas-fphs-model-development.pdf>
- KDHE Local Public Health Program. (2018, November 28). Retrieved from Workforce Development: [http://www.kdheks.gov/olrh/workforce\\_development.htm](http://www.kdheks.gov/olrh/workforce_development.htm)
- Wikipedia. (2018, November 29). *Formula for Change*. Retrieved from Wikipedia: [https://en.wikipedia.org/wiki/Formula\\_for\\_change](https://en.wikipedia.org/wiki/Formula_for_change)

APPENDIX A – KANSAS FOUNDATIONAL PUBLIC HEALTH SERVICES MODEL

# Kansas Foundational Public Health Services Model



APPENDIX B – FPHS DATA COLLECTION TOOL

<i>Kansas FPHS Data Collection Tool</i>		
1. Is this Component provided in your jurisdiction now? <b>Select One</b>	<b>Yes</b>	<b>No</b>
2. <b>(CAPACITY)</b> To what extent does your department have the <b>staff, time and funding</b> to provide this Component?	Scale: 0 (none), 1 (minimal), 2 (some), 3 (sufficient), 4 (full)	(Enter Score Here)
3. <b>(CAPABILITY)</b> To what extent does your department have the <b>skills, knowledge and expertise</b> to provide this Component?		(Enter Score Here)
4. Thinking about this Component, describe what <b>ACTIVITIES</b> occur now:		
5. Thinking about this Component, list the <b>STRENGTHS</b> that exist in your community:		
6. Thinking about this Component, list the <b>GAPS</b> that currently exist:		
7. Thinking about this Component, describe how <b>performance</b> is measured:		
8. How is this Component currently provided? <b>Select all that Apply</b>	<input type="checkbox"/> Not provided <input type="checkbox"/> Provided by local health department alone <input type="checkbox"/> Provided through collaboration with other department in my county <input type="checkbox"/> Provided through collaboration with city government within county <input type="checkbox"/> Provided through collaboration with governmental entity outside of county <input type="checkbox"/> Provided through collaboration with private entity	
9. List the agencies or departments that are involved in the delivery of this Component:		
10. List additional comments or questions about this Component:		



## APPENDIX C – COMPONENT AND SERVICE LEVEL QUESTIONS

### Component Level Questions

1. Is this component available in each pilot community? If not, where do gaps exist?
2. What would it take to address the gap/s?
3. How can we measure performance for this component?

### Service Level Questions

4. What do you care about most from our discussion today? *Purpose: Identify where to focus our attention related to this foundational service.*
5. What, if anything, needs your collective attention moving forward? *Purpose: Identify priorities for your Foundational Public Health Services Implementation Plan.*
6. What was a major learning, insight or question that you need to take back to your county pilot team? *Purpose: Identify actions to engage your county pilot team in this process.*

APPENDIX D – COMMISSIONER AND COMMUNITY PARTNER MEETING AGENDA TOPICS

Topic	County Commissioners	Local Public Health System Partners
Why you're here	<p><i>We truly value your input.</i></p> <p><b>As County Commissioners, you have a significant amount of responsibility for shaping public health in Kansas. Commissioners have the authority to enact policies that influence the health.</b></p> <p><b>Additionally, commissioner support (or lack of support!) for the local health department shapes what public health looks like in your community. Your budget decisions, for example, shape your LHD workforce, its programs and services and the LHDs role in the community.</b></p>	<p><i>We truly value your input!</i></p> <p><b>Public health is what we do together as a society to ensure the conditions in which everyone can be healthy. Many sectors play a role in building and sustaining healthy communities.</b></p> <p><b>The Kansas FPHS Model outlines the basic public health services that should be available in every Kansas community. Working together, we can make sure our communities have access to the public health services that are needed.</b></p>
Purpose	<p><i>The purpose of today's meeting is to discuss change effort that began (include timeframe) that involves public health stakeholders from (include involve counties) to ensure that residents in our communities have access to basic public health services.</i></p>	<p><i>The purpose of today's meeting is to discuss change effort that began (include timeframe) that involves public health stakeholders from (include involve counties) to ensure that residents in our communities have access to basic public health services.</i></p>
Background	<p><i>What is influencing the health of our community members?</i></p> <p><i>The Kansas Foundational Public Health Services model and efforts to improve the Kansas public health system.</i></p> <p><i>Information about the change effort.</i></p>	<p><i>What is influencing the health of our community members?</i></p> <p><i>The Kansas Foundational Public Health Services model and efforts to improve the Kansas public health system.</i></p> <p><i>Information about the change effort.</i></p>
Review and discussion	<p><i>Review and discuss identified priorities and possible next steps.</i></p> <p><b>Emphasis should be placed on public health authorities, responsibilities, performance and accountability.</b></p>	<p><i>Review and discuss identified priorities and possible next steps.</i></p> <p><b>Emphasis should be placed on relationships, performance, and opportunities for engagement.</b></p>
Next steps	<p><i>How would you like to be updated about next steps?</i></p> <p><i>How would you like to be involved in this effort moving forward?</i></p>	<p><i>How would you like to be updated about next steps?</i></p> <p><i>How would you like to be involved in this effort moving forward?</i></p>

