



2019 KALHD Mid-Year Meeting
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Kansas Department of Health and Environment
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How many full-time equivalents (FTEs) does your health department employ?

- TOTAL: 1214.75
- Minimum: 1
- Maximum: 140.95
- Mean: 13.4

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Positions Added and Lost

How many new positions did your health department add between July 1, 2017 and June 30, 2018?

- TOTAL new positions: 19.5
- TOTAL LHDs with new positions: 13

How many positions did you lose between July 1, 2017 and June 30, 2018?

- TOTAL positions lost: 44
- TOTAL LHDs with positions lost: 25

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Staffing at Local Health Departments

- Administrator (98%)
- RN (99%)
- Office professional (94%)
- Preparedness coordinator (76%)
- Prenatal/newborn home visitor (17%) (50% of LHDs had at least partial staffing for a Healthy Start Home Visitor)
- Breastfeeding peer counselor (34%)
- Child care licensing surveyor (33%)
- Health educator (26%)
- Dietician (28%)
- LPN (26%)
- Nurse aide (23%)
- Home health professional (20%)
- APRN (18%)
- Interpreter (18%)
- Public information officer/communications (16%)
- Sanitarian (15%)
- Epidemiologist (13%)
- Social worker (13%)

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Services Provided Directly by Local Health Departments

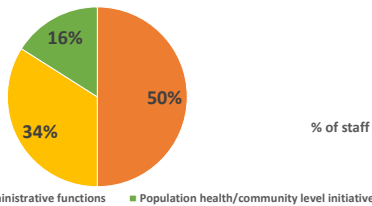
- Immunizations (100%)
- Disease investigation/follow-up (99%)
- Preparedness (98%)
- Health promotion (92%)
- Health education (91%)
- Breastfeeding support (90%)
- Health screening (88%)
- WIC (88%)
- STI testing/counseling (77%)
- KanBeHealthy screening (75%)
- Laboratory services (71%)
- Injury prevention (61%)
- Family planning/women's health (60%)
- Chronic disease prevention (60%)
- Healthy Start Home Visiting (56%)
- Diabetes education (56%)
- Dental education (54%)
- Foot care (55%)
- Senior services (53%)
- Pre/post-natal services (52%)
- School health (52%)
- Car seats (50%)
- Chronic disease management (37%)
- School inspections (37%)
- Environmental (36%)
- Child care licensing (33%)
- Early Detection Works (32%)

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Total Staff Time--Breakdown



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Discussion

- What surprises you the most about the breakdown of services provided?
- As a system, what would you like to see change regarding services provided (if anything)?

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Other Services Offered by Some Local Health Departments

- Case management (27%)
- Dental preventive services (13%)
- Home health (17%)

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Services Contracted Out by Local Health Departments

- Environmental (22%)
- Childcare provider licensing (10%)
- Laboratory services (8%)
- WIC (7%)

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Services Provided by Others in the Community

- Hospice (84%)
- Dental preventive/restorative services (80%)
- Home health (75%)
- Senior services (74%)
- Case management (62%)
- Chronic disease management (59%)
- Diabetes education (58%)
- School health services (58%)
- Navigator (55%)
- Environmental (53%)

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Services Not Available in Communities

- School inspections (39%)
- Navigator (38%)
- Healthy Start Home Visitor (36%)
- Early Detection Works (26%)
- Childcare licensing (25%)
- Dental restorative services (19%)
- Pre/post-natal services (18%)
- Chronic disease management (17%)

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Discussion

- Any surprises related to services being contracted out or not available?

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Type	Use regularly	Use as needed (e.g. emergencies)	Do not use
Print media-newspaper	50%	50%	0%
Print media-flyers or handouts	70%	30%	0%
LHD website	66%	28%	6%
Broadcast media (television/radio)	14%	61%	25%
E-mail	76%	16%	8%
Text messaging	50%	33%	17%
Automated phone calls	16%	19%	65%
Blogs	1%	7%	92%
Podcasts	1%	7%	92%
Online videos	7%	21%	72%
Social media (Facebook, Twitter, etc.)	83%	15%	2%

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Discussion

- Any surprises related to media used regularly, as needed or not used?
- Any opportunities based on the data?

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LHD capacity to currently play key role in community health initiatives

- Strongly agree 22%
- Agree 60%
- Disagree 16%
- Strongly disagree 2%

Skills/resources needed to increase capacity:

- Funding
- Staff time
- Training (including facilitation, public speaking, community engagement, communication)
- Data (access, analytics, etc.)
- Community and Board of Health support
- Technical assistance

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Strategies you are implementing to address ACEs/trauma informed systems of care

Training for community partners	73%
School partnerships	64%
Implementing a TISC policy internally	93%
Assisting community partners with implementation of TISC	92%
Working with partners to implement initiatives	69%
Implementing ACEs screening	78%
Developing community resilience	82%
None at this time	60%

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	Yes, in 2018	Yes, between 2014 & 2017	No	In process	Need technical assistance/ training to complete
Community health assessment	24%	44%	16%	9%	15%
Community health improvement plan	17%	37%	20%	18%	19%
Strategic plan	12%	24%	33%	24%	23%
Workforce development plan	4%	14%	58%	15%	22%
Performance management system	8%	17%	50%	14%	23%
Quality improvement plan	11%	19%	41%	19%	23%
Branding Strategy	4%	13%	57%	11%	24%

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Discussion

- Reasons higher percentages of LHDs haven't completed CHA, CHIP, strategic plan, other plans?
- What strategies could help increase the percentages?

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CHA/CHIP Priorities

56 LHDs responded

- Mental health/behavioral health 25
- Access to health care 20
- Substance abuse (mentioned separately) 17
- Chronic disease 13
- Obesity 8
- Nutrition 6
- Economy/lack of growth 5
- Childcare 5

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Discussion

- Are you surprised mental health/behavioral health/substance abuse are shared across so many communities? Are you surprised mental health is the most common priority?
- How can we assist the communities in moving forward on these priorities?

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Greatest Gaps/Need for Technical Assistance

- Conducting and disseminating assessments: 86%
- Conducting research and using evidence-based practices: 83%
- Workforce development: 81%
- Engaging with Board of Health and other policymakers: 80%
- Enforcing public health laws: 79%
- Investigating health problems and environmental public health hazards: 76%
- Improving access to healthcare: 72%
- Informing and educating about public health: 70%
- Performance management and quality improvement: 67%
- Community engagement: 62%
- Developing public health policies and plans: 56%

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My LHD currently has a culture that focuses on continuous quality improvement

- Strongly agree: 17%
- Agree: 66%
- Disagree: 15%
- Strongly disagree: 1%

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Level of Understanding About the Foundational Public Health Services

- High level of understanding: 19%
- Moderate level of understanding: 55%
- Low level of understanding: 26%

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Level of Support for Adopting the Foundational Public Health Services Model as a Framework

- Strongly support: 29%
- Somewhat support: 37%
- Somewhat oppose: 9%
- Strongly oppose: 4%
- Need additional information: 21%

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Comments/Concerns About Foundational Public Health Services Model

- Most LHDs are already doing this.
- Need financial backing/support from KDHE
- Need to shift from care-based services
- Immunizations will no longer be provided.
- Issues with FPHS assessment
- More for larger LHDs—challenge to adapt for rural and frontier
- Need more information, guidance and assistance
- Lack of staff, time, education to implement
- Need legislative support
- We have formally adopted model.
- Good potential for mutual agreements/regional approach

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Discussion

- How can this information be used to move FPHS implementation forward in Kansas?
- How can concerns be addressed?

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What do you think are the most pressing issues in the Kansas public health system?

- | | |
|---------------------------------------|----|
| • Funding | 22 |
| • Mental health | 16 |
| • Access to care | 15 |
| • Substance abuse (including opioids) | 15 |
| • Immunizations/vaccine hesitancy | 11 |
| • Collaboration | 6 |
| • Smoking/e-cigs | 5 |
| • Medicaid expansion | 5 |

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Discussion

- How can we use this information?
- What do the pressing issues tell us about our system?

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Discussion

- What else do we need to know (ideas for new questions)?
- Based on this data, what should be the workforce development priorities?
- How can we use this data to share information about our system?
- What do we need others to know about us?
- What surprises you most about the data?

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Questions



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Contact Information



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