



# Public Health Regionalization Initiative

September 19, 2007

# Why Regionalization?

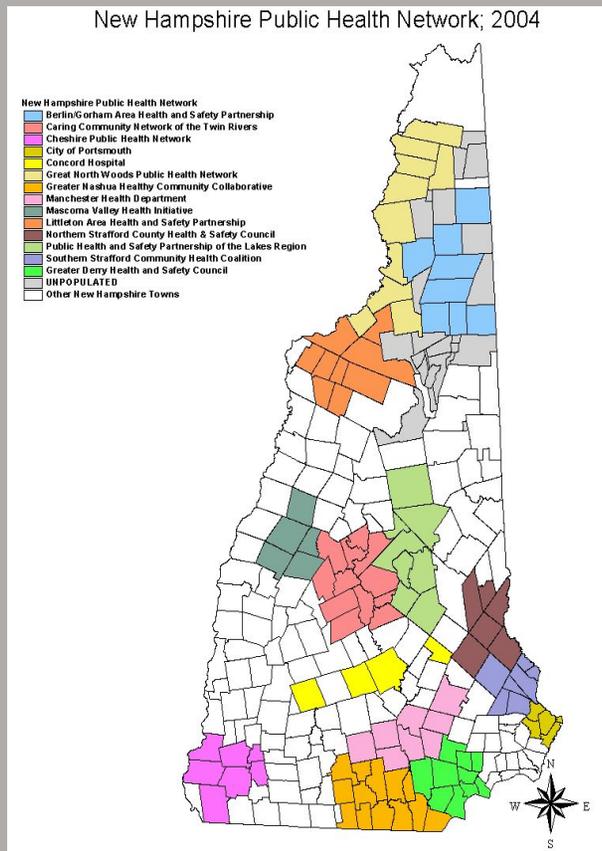
# The Public Health Networks: The NH Context

- Each of New Hampshire's 234 cities and towns are statutorily required to have a health officer
- Only three New Hampshire communities maintain public health departments; no county health departments
- In many New Hampshire communities, non-governmental organizations provide a significant sub-set of essential public health services
- At the State level, DHHS is the lead public health agency. The Department of Environmental Services, Department of Education, and Department of Safety also play key roles in promoting and protecting the public's health.

# There are many maps

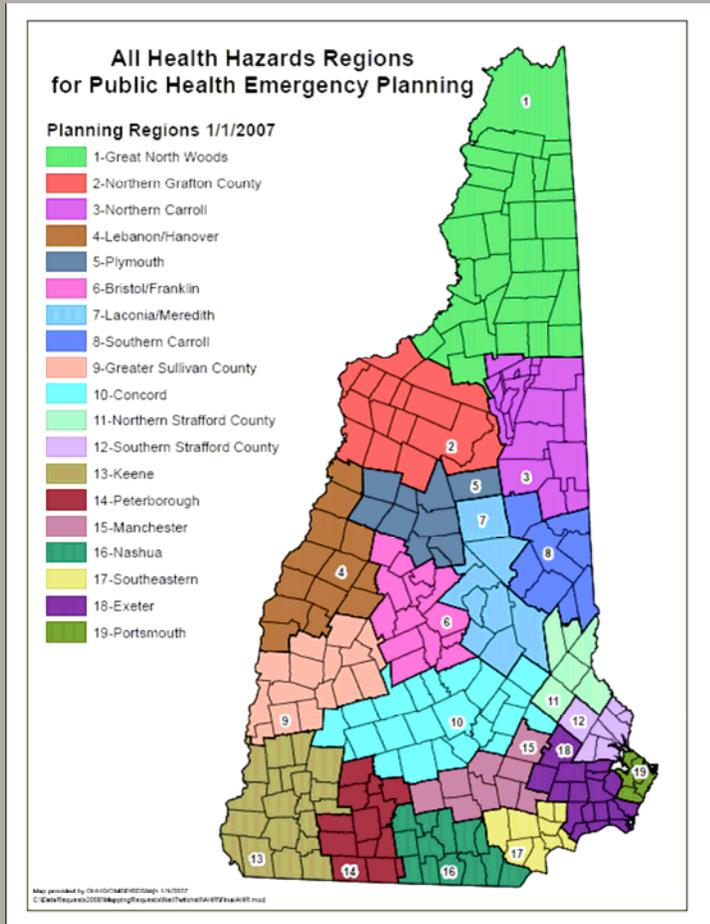
## New Hampshire Public Health Networks

Ensure that local communities have the capacity to assure continued improvement in the health of individuals, families and communities.



- o 14 Coalitions
- o 118 Towns
- o 50% of NH towns
- o 70% of the NH population covered
- o 5-11 communities per coalition

# All Health Hazard Regions



- 19 Regions organized to respond to any public health emergencies statewide

# Regionalization Goal

- **Overall Goal** – A performance-based public health delivery system, which provides all 10 essential public health services throughout New Hampshire

# Approach

A tiered system of public health regionalization that recognizes varying resources, infrastructure and capacity to carry out core public health functions and the 10 essential services at different levels

Regions will be organized in a way that recognizes geographic features, existing health care infrastructure and population

The Division of Public Health Services envisions one public health agency per region that must be or be associated with a governmental agency that coordinates or is responsible for the 10 essential services. The agency may subcontract or create memoranda of understanding for some essential services

# Approach

- § Will be based on standards for agency infrastructure and performance.
- § Will be an evolutionary process – some areas may not meet the first tier from the beginning but may move there in time.
- § May require statutory changes.

# Work to Date

- Review potential framework for a 3 tiered system
- Raised many questions such as – is there a recommendation for public health staffing per capita
- Gathering information to determine the function of a local health agency versus form

# Work to Date

- Attempting to define
  - What is the role of the state at the local level?
  - What is the role of the health officer?

# Next Steps

- Conduct an assessment of some public health networks to compare current functions with those put forth by national groups as definitions of a local public health agency.

# Proposed Framework

DRAFT 9/17/2007

Characteristics	Primary Local Public Health Agency	Advanced Local Public Health Agency	Comprehensive Local Public Health Organization
<b>Population</b>	Any size population or geographic area.	Any size but typically serves a population of _____ - or more	Any size but typically serves a metropolitan area.
<b>Functional Level</b>	<p>Documented capacity, expertise and leadership that assure a fundamental public health presence in a community.</p> <p>Performs some level of each of the 10 essential services</p>	<p>Must meet more performance measures than a primary.</p> <p>Some measures require additional analysis of data to identify specific populations at risk.</p> <p>Collaborates extensively with others in the community to resolve health care access.</p> <p>Involved in public policy development to improve health and exhibits a high level of participation in community health planning.</p>	<p>Must meet more performance measures than an advanced agency.</p> <p>Ensures all aspects of the 10 essential services to its service area.</p> <p>Works with community partners to evaluate the health care system and assure access to health care for all members of the community.</p>
<b>Staffing</b>	<ul style="list-style-type: none"> <li>• Qualified Administrator</li> <li>• Public Health Nurse</li> <li>• Environmental Public Health Specialist</li> <li>• Support Staff</li> </ul> <p>Access to a medical consultant and individuals with expertise in health education, nutrition, computer technology and epidemiology</p>	<ul style="list-style-type: none"> <li>• Qualified Administrator</li> <li>• Public Health Nurse- 2</li> <li>• Environmental Public Health Specialist</li> <li>• Support Staff</li> </ul> <p>Educational qualifications higher for some core staff</p> <p>Access to a medical consultant and individuals with expertise in health education, nutrition, computer technology and epidemiology</p>	<ul style="list-style-type: none"> <li>• Qualified Administrator</li> <li>• Public Health Nurse- 2</li> <li>• Environmental Public Health Specialist</li> <li>• Support Staff- full-time admin assistant</li> <li>• Nursing supervisor</li> <li>• Health educator</li> <li>• Nutritionist</li> <li>• Epidemiologist</li> <li>• Computer specialist</li> <li>• Community planner</li> </ul> <p>Access to a medical consultant Public information officer, and a statistician</p>