

Measuring LHD Responses to Public Health Funding Restrictions

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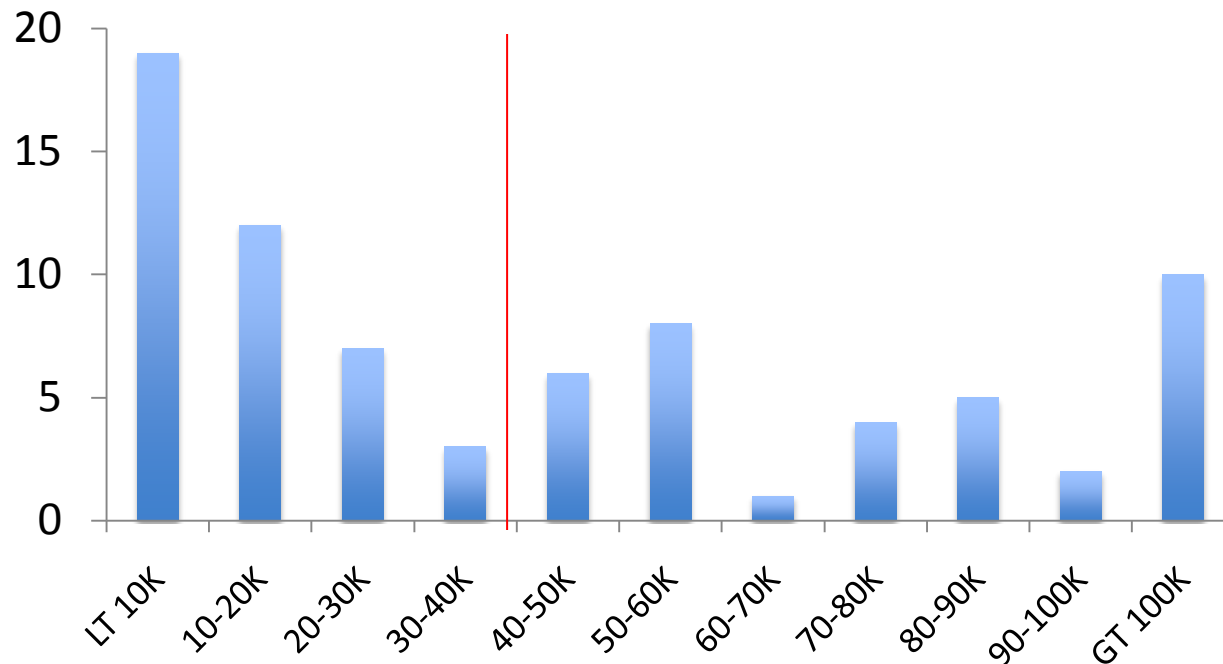
SCSU, ICR

June, 2011

PHSSR: Analysis of a Great Natural Experiment

Nationally, 64% of LHDs (~1,800 of 2,800) serve communities smaller than 50,000 residents (12% of total U.S. pop)

In Connecticut, 57% of LHDs (47 of 77) serve communities with fewer than 50,000 residents (24% of total CT pop)



LHD performance (i.e., delivery to 10 essential services) is determined, in part, by the organization size (50-100K is optimal)

Can “right-sized” regionalization/shared services among LHDs improve their effectiveness and increase efficiencies?

CONNECTICUT LHD

Per Capita Funding History

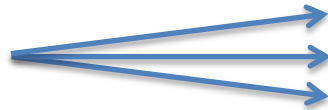
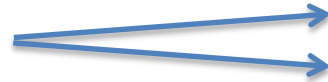
Prior to 2010

\$0.49 PT Departments

\$1.18 FT Departments

\$2.43 Towns <5K pop. in Districts

\$2.08 Towns >5K pop. in Districts



2010

\$0 PT Departments

\$0 FT Departments <50k pop.
\$1.18 FT Departments >50K pop.

\$0 Districts of 2 towns and <50k pop
\$1.85 Districts >50k pop.
\$1.85 Districts of 3+ Towns

CONNECTICUT LHD

Per Capita Funding Cut

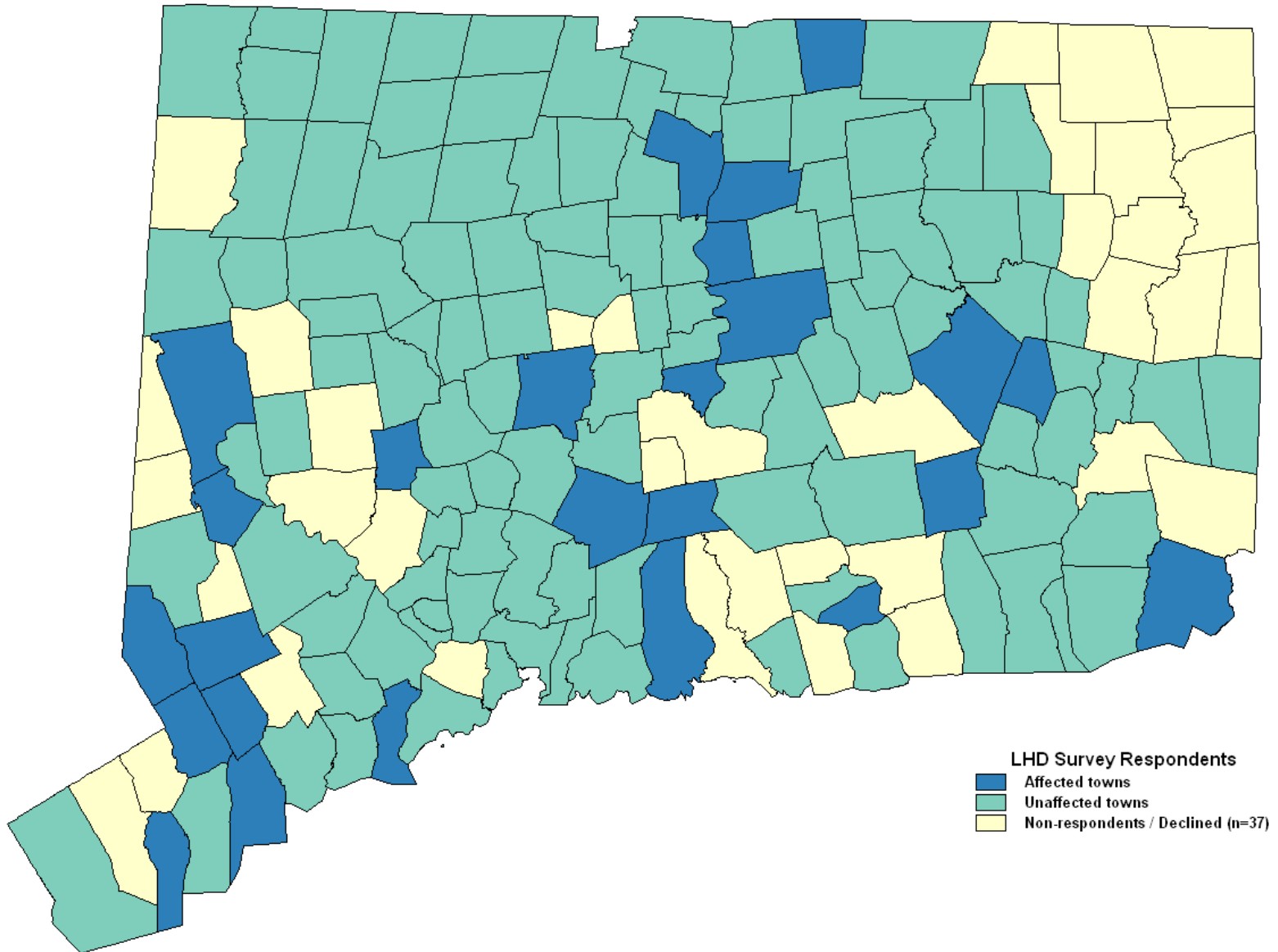
18 of 32 Full-time Departments
(approximately \$600K cut)

25 of 25 Part-time Departments
(approximately \$100k cut)

1 of 20 Districts
(approximately \$74k cut)

Roughly, a 20% reduction in
statewide per capita allocation

Survey Participation by LHDs



PBRN Quick Strike Survey of Connecticut LHDs

Objectives: Implications of State per capita funding cuts on...

- organization, finance and deliver of local public health programs/services
- LHD intentions to consolidate services through regionalization or shared services arrangements

Quick Strike Survey of Connecticut LHDs

Online questionnaire (Survey Gizmo)

revenue and expenditures

workforce

programs & activities

Immediate impact: 2008-10 vs. 2011

Short-term impact: After 2011

Long-term impact: ?

53 of 77 LHDs responses to date (69%)

23 of 44 LHDs affected by per capita cuts (53%)

30 of 33 (Other) LHDs unaffected by per capita cuts (91%)

Impact of State Funding Cuts To **Your** LHDs

In your opinion, to what degree have regulatory, licensing and inspection activities by your dept. been adversely affected by recent state per capita funding cuts?

	Affected LHDs	Other LHDs
None, did not receive funding cuts	3/23 (13%)	10/29 (34%)
None	6 (26%)	1 (3%)
To some extent	6 (26%)	16 (55%)
To a great extent	8 (35%)	2 (7%)

Impact of State Funding Cuts To **Other** LHDs

In your opinion, to what degree have regulatory, licensing and inspection activities by your dept. been adversely affected by recent state per capita funding cuts?

	Affected LHDs	Other LHDs
None	8/22 (36%)	8/29 (28%)
To some extent	5 (23%)	13 (45%)
To a great extent	7 (32%)	7 (24%)

Likely results of effort to regionalize LHDs

(# and % of respondents who Strongly Agree or Agree)

In your opinion, the current effort to regionalize LHDs is likely to....	Affected LHDs
significantly reconfigure/reduce staff	17 (43%)
jeopardize established local networks/relationships	15 (65%)
render LHDs “orphans within certain communities	14 (64%)
insulate budgets from local challenges	14 (64%)
occur only through State mandate	13 (57%)
degrade the quality of available services	11 (48%)
prioritize delivery of services	10 (43%)
undermine relationships across LHDs	10 (43%)
increase the array of services that will be offered	10 (43%)
encourage regionalization/shared services agreements	7 (32%)

Likely results of effort to regionalize LHDs

(# and % of respondents who Strongly Agree or Agree)

In your opinion, the current effort to regionalize LHDs is likely to....

**Other
LHDs**

insulate budgets from local challenges	18 (64%)
prioritize delivery of services	15 (54%)
increase the array of services that will be offered	13 (45%)
be more effective than shared services	12 (43%)
jeopardize established local networks/relationships	12 (43%)
reduce operating costs	12 (43%)
render LHDs “orphans within certain communities	10 (41%)
encourage regionalization/shared services agreements	11 (40%)
occur principally through local, grass roots initiative	11 (39%)
significantly reconfigure/reduce staff	11 (39%)

Current Operating Expenditures

2011 vs. 2008-10

	Affected LHDs	Unaffected LHDs
Decrease	8 (35%)	8 (27%)
Increase	5 (22%)	13 (43%)
No Change	10 (44%)	5 (17%)
No response	0	4 (13%)

Current Revenue Sources

2011 vs. 2008-10

	Decreased		No change		Increased	
	Affected LHDs	Other LHDs	Affected LHDs	Unaffected LHDs	Affected LHDs	Other LHDs

Local	7(32%)	6(21%)	9(41%)	14(48%)	6(27%)	8(28%)
State	16(73%)	12(40%)	2(9%)	9(30%)	1(4%)	8(27%)
Federal	2(10%)	5(17%)	3(14%)	10(33%)	0	5(17%)
NGO's	2(10%)	3(10%)	2(10%)	6(20%)	0	2(7%)
Fees	7(30%)	8(27%)	7(30)	10(33%)	8(35%)	11(37%)
Services	4(19%)	10(36%)	6(29%)	11(39%)	4(19%)	6(21%)

Extent of Revenue Decrease 2011 vs. 2008-10

	Affected LHDs	Other LHDs
0-1 source*	12 (52%)	16 (53%)
2-3 sources	7 (30%)	13 (43%)
3+ sources	4 (17%)	1 (3%)

*Sources: Local, State, Federal, NGO, Fees, Services

Current workforce **capacity**: 2011 vs. 2008-10

(# and % among respondents with personnel in these areas)

	Little/No change		Decreased staffing	
	Affected LHDs	Other LHDs	Affected LHDs	Other LHDs
Administration	15 (68%)	24 (80%)	3 (14%)	4 (13%)
Clerical	16 (73%)	17 (57%)	5 (23%)	10 (33%)
P.H. nurses	6 (30%)	15 (52%)	3 (15%)	5 (17%)
Sanitarians	15(65%)	17 (59%)	6 (26%)	7 (24%)
Epidemiologists	2 (10%)	4 (14%)	1 (5%)	1 (3%)
Health Educators	2 (10%)	15 (50%)	3 (16%)	8 (27%)
Public Information specialist	3 (17%)	6 (21%)	0	0
Emergency preparedness	11 (58%)	20 (67%)	4 (21%)	9 (30%)

Current workforce **reductions**: 2011 vs. 2008-10

(# and % among respondents with personnel in these areas)

	Affected LHDs	Other LHDs
0-1 job titles	17 (73%)	16 (53%)
2-3 job titles	4 (17%)	11 (37%)
3+ job titles	2 (9%)	3 (10%)

Current program **reductions**: 2011 vs. 2008-10

Individual services/activities

(# and % among respondents who deliver programs in these domains)

Domain	Affected LHDs % (Responses)	Other LHDs % (Responses)
Adult immunizations	3/14 (21%)	6/25 (24%)
Child immunizations	3/8 (38%)	4/24 (17%)
Injury prevention	0/1 (0%)	4/17 (24%)
Smoking prevention	0/5 (0%)	4/16 (25%)
Substance abuse prevention	0/4 (0%)	1/9 (11%)
Obesity prevention	2/7 (29%)	9/24 (38%)
HIV/AIDS testing	1/3 (33%)	4/14 (28%)
STD testing	0/2 (0%)	0/16 (0%)
TB testing	2/13 (15%)	0/24 (0%)

Current program **reductions**: 2011 vs. 2008-10

Individual services/activities

(# and % among respondents who deliver programs in these domains)

Domain	Affected LHDs	Other LHDs
Cancer screening	1/2 (50%)	0/12 (0%)
CVD screening	2/6 (33%)	1/17 (6%)
Diabetes screening	1/5 (20%)	4/18 (22%)
Oral health screening	1/2 (50%)	1/11 (9%)
Blood lead screening	2/14(14%)	3/24 (12%)
Behavioral health screening	0/2 (0%)	1/6 (17%)
ETOH/drug screening	0/2 (0%)	2/7 (28%)
Infectious disease surveillance	1/10 (10%)	0/29 (0%)
Environmental surveillance	3/18 (17%)	0/28 (0%)

Current program **reductions**: 2011 vs. 2008-10

Community services/activities

(# and % among respondents who deliver programs in these domains)

Domain	Affected LHDs	Other LHDs
Surface water	0/22	0/28
Ground water	1/22 (4%)	0/28
Public drinking water	0/21	0/28
Private drinking water	0/19	5/28 (18%)
Air quality	0/21	0/28
Housing	0/21	0/21
Radon	0/21	0/28
Hazardous waste control	0/19	0/27
Vector control	2/22 (9%)	1/27 (4%)
Animal control	0/21	1/28 (4%)
Noise abatement	0/20	0/28
Nuisance complaint	0/22	1/29 (3%)

Current program **reductions**: 2011 vs. 2008-10

Community services/activities

(# and % among respondents who deliver programs in these domains)

Domain	Affected LHDs	Other LHDs
Food services	4/23 (17%)	2/29 (7%)
Lead exposure	1/22 (4%)	2/29 (7%)
Solid waste disposal	1/19 (5%)	0/28
Waste hauling	6/21 (28%)	9/28 (32%)
Health care facilities	0/20	0/28
Hotel/motel occupancy	1/20 (5%)	0/29
School/daycare operation	2/21 (10%)	0/29
Barber/hairdresser establishment	2/22 (9%)	0/29
Smoke free ordinance compliance	0/20	1/28 (4%)
Tobacco sales compliance	0/18	1/28 (4%)

Anticipated Revenue-expenditure gap: After 2011

I anticipate revenue will meet expenditures in the coming year	Affected LHDs	Other LHDs
No, they will not	27%	23%
They probably will not	27%	23%
They may	27%	14%
They will	13%	14%
Cannot estimate yet	7%	27%

Revenue source reductions

After 2011

Revenue sources	Affected LHDs	Other LHDs
Local	9%	30%
State	59%	67%
Federal	14%	37%
Foundations, gifts	14%	17%
Regulatory fees	23%	23%
Service fees	18%	30%

Summary

Affected departments recognize some potential benefits of regionalization, but concerned about latent impact
concern about local & regional relationships

General trend to reduce services, but not appreciably more so among affected than other LHDs

Limited short-term impact of State per capita funding cuts
Few at-risk personnel, programs & activities
Reserve and alternative funding
Contemplating/off-line negotiations on shared service/regionalization plans

Despite expected revenue shortfalls, few anticipated reductions in workforce, programs or activities

What's next?

We need to hear more from affected LHDs!

In-depth interviews with 10 departments affected by State per capita budget cuts and 10 other departments

Maintain baseline for intermediate (18-24 months) and longer-term (36+ months) follow-up

Anticipated workforce **reductions** after 2011

(responding “possible” or “likely” by those who conduct activities in these domains)

Personnel	Affected LHDs	Other LHDs
Administration	0/21 (0%)	7/28 (25%)
Clerical	4/20 (20%)	11/29 (38%)
P.H. nurses	2/20 (10%)	6/29 (21%)
Sanitarians	7/23 (30%)	10/29 (34%)
Health Educators	1/17 (6%)	9/30 (30%)
Emergency preparedness	6/20 (30%)	15/28 (54%)