State Support for Basic Public Health Services

Contents

What is the purpose of the guidance document?

This document is intended to describe the manner in which the West Virginia Bureau for Public Health works in conjunction with local boards of health to provide basic public health services and:

- Describes the statutory authority of the Bureau for Public Health specific to the provision of basic public health services;
- Defines the method for collecting program plan data from local boards of health; and
- Describes the overall approach to monitoring the operations, administration and coordination of local boards of health.

What is the Bureau's statutory responsibility?

West Virginia has established a legal framework to promote physical and mental health, assist in the provision of Essential Public Health Services and establish a public health system to work in conjunction with and monitor the administration, operation and coordination of local boards of health. The West Virginia Bureau for Public Health Center for Local Health coordinates these functions within the Bureau and works with the Bureau's sixteen Offices and Centers to establish reporting requirements, publish statewide data and deploy training and technical assistance.

Chapter 16. Public Health. Article 1. State Public Health System. Establishes a state public health system to work in conjunction with local boards of health to provide basic public health services that encourage healthy people in healthy communities. Specifically, the Commissioner's duty is to promote the essential public health services, monitor local boards of health and health officers and collect data to foster knowledge on the citizenry's health status, the health system and costs of health care.[1]
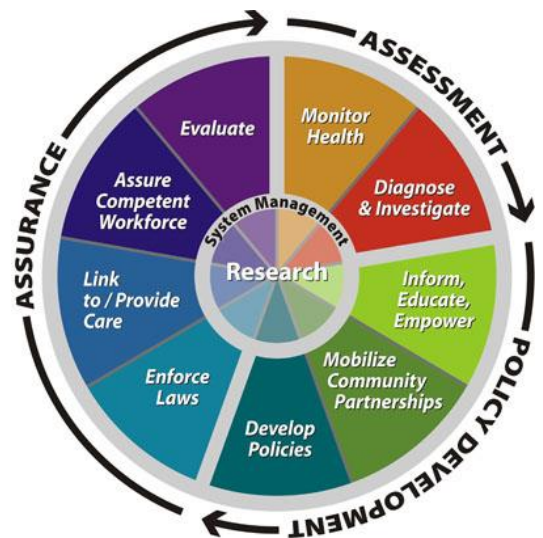
Title 64 CSR 67 Distribution of State Funds for Support of Local Boards of Health. Establishes the formula for the Commissioner to use in distributing State funds to support local boards of health which includes 4.7% maintained by the Bureau for state support programs and allows for up to 2% to be withheld to support local boards of health experiencing unanticipated financial emergencies.

Title 64 CSR 73 Standards for Local Boards of Health.
Establishes standards for the plans of operation, administration, fiscal reporting, quality assurance, and provision of public health services and programs by local boards of health.

What are essential public health services?

Chapter 16, Article 1 defines Essential Public Health Services as core public health activities necessary to promote health and prevent disease, injury and disability for the citizens of the state and includes the services in Figure 1. The Essential Public Health Services are the framework upon which the Public Health Accreditation Board's national public health accreditation program is built.

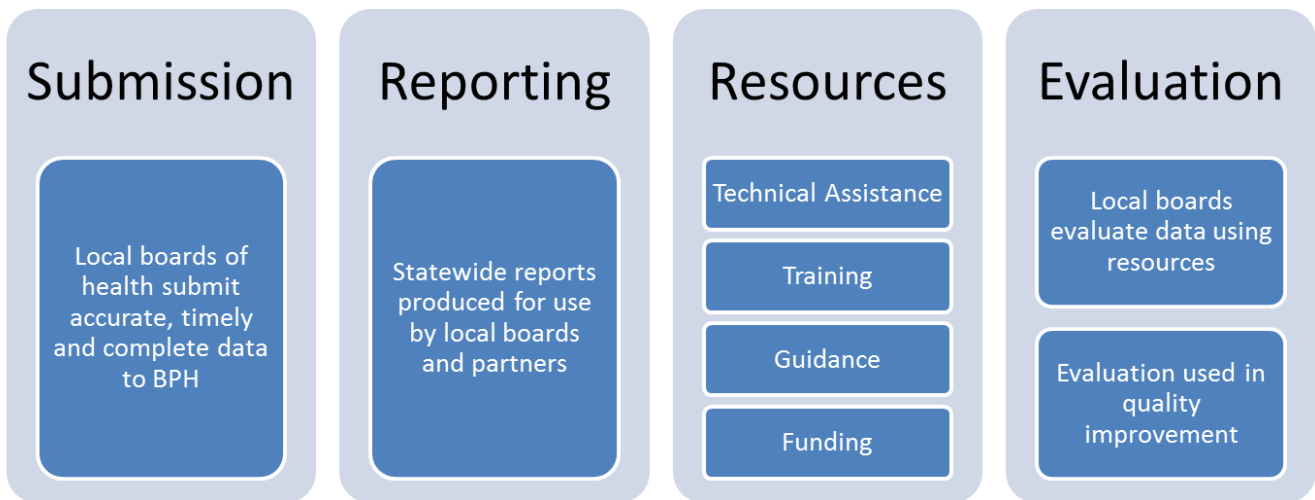[1] *W. Va. Code* § 16-1-6 (d), (e), and (g)

What are basic public health services?

Chapter 16, Article 2 defines the services that must be provided by local boards of health as basic public health services. **"Basic public health services"** means those services that are necessary to protect the health of the public and that a local board of health must provide.[2] The three areas of basic public health services are:

- **Communicable and Reportable Disease Prevention and Control**
  Services include disease surveillance, case investigation and follow-up, outbreak investigation, response to epidemics, and prevention and control of rabies, sexually transmitted diseases, vaccine preventable diseases, HIV/AIDS, tuberculosis and other communicable and reportable diseases;

- **Community Health Promotion**
  Services include assessing and reporting community health needs to improve health status, facilitating community partnerships including identifying the community's priority health needs, mobilization of a community around identified priorities, and monitoring the progress of community health education services;

- **Environmental Health Protection**[3]
  Services include efforts to protect the community from environmental health risks including, inspection of housing, institutions, recreational facilities, sewage and wastewater facilities; inspection and sampling of drinking water facilities; and response to disease outbreaks or disasters.

How does the Bureau for Public Health work in conjunction with and monitor the administration, operations, and coordination of local boards of health?

The Bureau for Public Health and local boards of health interact through four distinct areas, described below, that align with and support the statutory responsibilities of both the Bureau and local public health agencies. This framework also supports state and local public health agencies compliance with funding requirements, efforts toward accreditation and provides opportunities for demonstrating the value of our work to community and funders.

Submission	Reporting	Resources	Evaluation
Local boards of health submit accurate, timely and complete data to BPH	Statewide reports produced for use by local boards and partners	Technical Assistance Training Guidance Funding	Local boards evaluate data using resources Evaluation used in quality improvement

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[2] *W.Va. Code* § 16-2-2(a)

[3] The Environmental Health Protection definition includes services that are no longer required and/or provided by local boards of health. These include inspection of housing, institutions, sewage and wastewater facilities (local boards of health only provide on-site inspections), and inspection and sampling of drinking water facilities.

What are local boards of health required to submit to the Bureau for Public Health?

W. Va. Code §16-2-11 (3) requires local boards of health to submit a general plan of operation (Program Plan) annually to the West Virginia Bureau for Public Health Commissioner for approval. The documentation submitted in the Program Plan should demonstrate the local board of health's compliance with *W. Va. Code R* §64-73 by describing the resources (personnel and funding) being allocated for the provision of all programs and includes required periodic reporting to the West Virginia Bureau for Public Health. The reports and records to be submitted to the Bureau for Public Health for the basic public health service programs can be found in *Appendix A: FY2017 Program Plan Required Reports and Timeline.* The Bureau may also require local boards of health to submit additional reports and records throughout the year as needed to fulfill its duty to monitor the administration, operations and coordination of local boards of health.

Why is monitoring the administration, operations and coordination of local boards of health important?

As the statutory agent for public health program oversight and accountability[4], the State Health Officer and Commissioner of the Bureau for Public Health is responsible for monitoring the operations, administration and coordination of local boards of health and health officers and working in conjunction with local boards of health to provide basic public health services. Each Bureau program that provides funding to local boards of health conducts monitoring through subawardee agreements for state and/or federal funds and through required programmatic and fiscal reports and records submitted throughout the fiscal year. The Center for Local Health coordinates monitoring among Bureau offices and centers and serves as a central point of contact on the local public health system.

Monitoring is a continuous function that uses the systematic collection of data on specific indicators to provide management and key stakeholders with indications of the extent of progress and achievement of objectives and progress in the use of allocated funds.[5] Monitoring occurs throughout the fiscal year and relies on the submission of required reports and records by local boards of health within the timeframe specified by Bureau offices and centers. In the event that the Commissioner determines that a local board of health's program plan is not in compliance, the Commissioner may withhold State aid funds until such time as the board submits an acceptable plan to correct deficiencies in the program plan. See *W.Va. Code R* §64-73.

How is data submitted by local boards of health used?

The Bureau's monitoring includes the release of statewide reports, the identification of areas for improvement and the provision of technical assistance and training in identified improvement areas. The data collected in the Program Plan are made available upon request and through statewide reporting to:

1.) Support quality improvement and agency self-assessment,
2.) Foster knowledge on the citizenry's health status, the health system and costs of health care, and
3.) Ensure accountability for public funds.

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[4] ASTHO Performance Policy Statement, http://www.astho.org/Policy-and-Position-Statements/Policy-Statement-on-Performance/
[5] Glossary of Key Terms in Evaluation and Results Based Management, OECD: 2002, http://www.oecd.org/development/peer-reviews/2754804.pdf

To facilitate positive change in governmental public health agency performance, statewide data is made available to support local agencies in developing goals and objectives as part of required strategic planning, community health assessment and community health improvement planning efforts. Statewide data provides a framework for measuring progress in improving agency operations and health outcomes and supports the identification of goals and targets for improving public health practice systemwide. Additionally, statewide data can help the Bureau and other state level partners support organizational and community health improvement efforts.

What resources are available within the Bureau for Public Health to support local boards of health?

The Bureau for Public Health includes Offices and Centers that provide support to local boards of health by funding the implementation of community based health programs, providing technical assistance through regional staff, developing and making available program guidance, and conducting and releasing site visit reports, developing and implementing trainings and supporting the collection and dissemination of data related to public health services, systems and capacity.

Funding

Approximately 60% of the total annual revenue for local boards of health is provided by the West Virginia Bureau for Public Health through the distribution of State Funds for Support of Local Boards of Health, Public Health Emergency Preparedness Program (PHEP), Immunization Action Plan and other programmatic grant programs. Additionally, an Emergency Fund Program is available July 1st through May 15th to assist local boards of health in need of funds to meet unanticipated financial emergencies.

Technical Assistance

Technical assistance is defined as "the process of providing targeted support to an organization with a development need or problem and is one of the most effective ways to build the capacity of an organization."[6] The Bureau for Public Health provides technical assistance to local health departments in the following ways:

- Regional epidemiologists and district sanitarians are available to provide direct services such as outbreak investigation, facility inspections, training, and coaching.
- Site visits to assess and monitor program implementation, service delivery, compliance with subrecipient grant guidelines.
- Direct and indirect technical assistance upon request for specific and/or targeted areas of program implementation, operations, reporting, etc.

Training

The Bureau for Public Health develops and conducts training for local health department employees throughout the year. The Public Health Sanitation Division conducts an eight week class for newly hired environmental health staff, district environmental health staff conduct in-service trainings, workshops, teleconferences and seminars on a quarterly basis. The Office of Epidemiology and Prevention Services produces and makes available webinars specific to communicable and reportable diseases and conducts regional trainings on specific disease topics. The Center for Local Health conducts quarterly, in-person orientation sessions on preparedness and response programs, roles and responsibilities and provides both virtual and in-person training on the WV REDI volunteer management system and the WV Public Health Alerting system as well as training on medical countermeasures planning and exercises. The Center for Local Health provides virtual and in-person training on the statutory roles and responsibilities of local boards of health as well as training on public health finance and

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[6] Strengthening Nonprofits: A Capacity Builder's Resource Library. Delivering Training and Technical Assistance

administration for local health department leadership. In addition to these training programs, other offices and centers provide virtual and in-person training on topic areas ranging from diabetes prevention to the submission of laboratory samples.

Statewide Reporting

The Bureau for Public Health collects data to foster knowledge on the citizenry's health status, the health system and costs of health care. Local health departments report data into electronic data collection systems supported by the Bureau and described in Appendix B. This data is validated and analyzed by the Bureau and reported through statewide reports including those listed in Appendix C.

Appendix A: FY2017 Program Plan Required Reports and Timeline

W. Va. Code §16-2-11 (3) requires local boards of health to submit a general plan of operation annually to the commissioner for approval. *W. Va. Code R.* 64-73-6 requires the board of health to submit reports and records in a timely manner in compliance with applicable State and federal rules and regulations and departmental policies.

Documentation for the FY2017 Program Plan should be submitted using the timeline below. **Release of first quarter funding is contingent on receipt of documentation due June 15th, 2016**. *Note: SharePoint Instructions are included in a separate document.*

#	Report Name	Description	Submission	System Open	Date Due
1	Basic Public Health Services Checklist	The board of health documents compliance with State code and rule and has submitted an improvement plan for areas of non-compliance.	CLH SharePoint		
2	Community Health Improvement Plan Form	The board of health has partnered with community agencies and has identified priority areas and evidence-based strategies for health improvement.	CLH SharePoint		
3	Local Health Department Demographic Information	Statewide local health department demographic information is available.	CLH SharePoint		
4	Local Board of Health Information	Statewide board of health information is available.	CLH SharePoint		
5	Local Board of Health Personnel Information	Statewide board of health personnel information is available.	CLH SharePoint	Target Date: 5/1/2016	6/15/2016
6	FY2017 Projected Budget	The board of health's sources of revenue and operating expenses needed for each individual program are described.	CLH SharePoint		
7	Basic Public Health Services Affidavit	The board of health demonstrates the intent and commitment to comply with State code and rule.	CLH SharePoint		
8	Agency Organization Chart	The board of health has an organizational structure with clear lines of authority and responsibility.	CLH SharePoint		
9	Community Health Assessment	The board of health is actively engaged in the evaluation of the health needs of the community it serves.	CLH SharePoint		
10	Proposed Sliding Fee Scale	To ensure that there is a mechanism in place to provide services to uninsured individuals.	CLH SharePoint		
11	Fee Schedule	To determine whether fees are compliant with the Fees for Service Rule.	CLH SharePoint		

12	FY2016 Environmental Health End-of-Year Report*	Statewide environmental health activity data is available to evaluate local public health service delivery, demonstrate compliance with state and local laws and ordinances, support quality improvement and demonstrate value and system efficiency.	CLH SharePoint	7/1/2016	7/31/2016
13	FY2016 Agency End-of-Year Financial Report	Statewide complete, timely financial data is available to demonstrate compliance with code and rule, support quality improvement and demonstrate value and system efficiency.	CLH SharePoint		
14	FY2016 Agency End-of-Year Revenue Generated Fees Report	Statewide complete, timely financial data is available to demonstrate compliance with code and rule, support quality improvement and demonstrate value and system efficiency.	CLH SharePoint		
15	Environmental Health First Quarter Report*	See FY2016 Environmental Health End-of-Year Report	CLH SharePoint	9/30/2016	10/31/2016
16	Environmental Health Mid-Year Report*	See FY2016 Environmental Health End-of-Year Report	CLH SharePoint	12/31/2016	1/31/2017
17	Agency Mid-Year Financial Report	See FY2016 End-of-Year Financial Report	CLH SharePoint	12/31/2016	1/31/2017
18	Environmental Health Third Quarter Report*	See FY2016 Environmental Health End-of-Year Report	CLH SharePoint	3/31/2017	4/30/2017
19	Outbreak Report	Statewide complete, timely outbreak reports are available for analysis, public health action to prevent and/or reduce morbidity and mortality, and to support quality improvement.	Outbreak report forms	As per Office of Epidemiology and Prevention Services protocols and the Reportable Disease Rule (64CSR7).	
20	Disease Report	Complete, timely disease reports are available statewide for analysis and public health action to prevent and/or reduce morbidity and mortality.	Submitted through WVEDDS		
21	HIV/STD/Hepatitis Reports	Complete, timely disease reports are available statewide for analysis and public health action to prevent and/or reduce morbidity and mortality.	Report forms		
22	Tuberculosis	Complete, timely disease reports are available statewide for analysis and public health action to prevent and/or reduce morbidity and mortality.	TB Reporting Guidelines		
23	Immunization Report	Complete, timely data on the administration of vaccinations is available statewide for analysis and public health action to prevent and/or reduce morbidity and mortality.	WVSIIS		

* Instructions are forthcoming for local health departments utilizing the Environmental Health Electronic Reporting System.

Appendix B: Public Health Reporting Systems

Local health departments report directly into the systems listed below.

West Virginia Electronic Disease Surveillance System (WVEDSS) **-** A web-based electronic reporting system utilized by local health departments providing online reporting of diseases, serving local and state public health departments and West Virginia hospitals.

West Virginia Immunization Information Systems (WVSIIS) - WVSIIS helps to ensure that all West Virginia children, adolescents and adults have current immunizations utilized by local health departments through a confidential, computerized information system that keeps complete and up-to-date shot records.

Environmental Health Electronic Reporting System (HealthSpace) – A web-based reporting system which includes modules to report activities specific to environmental health regulations for food establishments, land development, recreational water facilities, child care centers, manufactured home communities, body art and general sanitation.

Center for Local Health SharePoint – A web-based reporting system utilized by Local Boards of Health to submit reports as required by West Virginia State Code and Legislative Rule, including an annual plan of operation.

Center for Threat Preparedness SharePoint – A web-based reporting system utilized by local boards of health to submit required reports and documentation for subawardee Public Health Emergency Preparedness (PHEP) agreements.

WV REDI (West Virginia Responder Emergency Deployment Information System) – A web-based system created to facilitate health and medical response through identification, credentialing and deployment of West Virginians willing to serve in an emergency. It provides a mechanism for online volunteer registration, credential verification, volunteer deployment, and tracking.

West Virginia Public Health Alert System – A secure, web-based public health communication system available 24/7/365 for distribution of health alerts and notifications to public health partners.

West Virginia TRAIN – A learning management system primarily for public health. TRAIN is a free service of the Public Health Foundation that allows users to search and register for courses and tracking learning and transcripts.

http://www.dhhr.wv.gov/oeps/disease/WVEDSS/Pages/DiseaseReportingForms.aspx **Disease Outbreak Reports** - Outbreak type and setting, reporting county and region, time of reporting to Local Health Departments and Bureau for Public Health, clinical diagnosis, laboratory information and specific pathogens, mode of transmission, completion of final report and lead investigator. Data is updated as information is received.

Data submitted by local health departments and other partners are submitted to the Centers for Disease Control by the Bureau for Public Health into the systems below.

STD*MIS – Application provided to state and local health departments by the Centers for Disease Control to address the most common data management issues facing an STD program in its efforts to utilize the data that it receives from labs, providers, clinics, disease intervention specialists (DIS), etc for use in patient care and case management decisions. The Bureau for Public Health enters data submitted by local health departments and other providers on the forms referenced in *Appendix A: FY2017 Program Plan Required Reports and Timeline* into the STD*MIS system.

West Virginia Enhanced HIV/AIDS Reporting System (eHARS) - The Enhanced HIV/AID Reporting System (eHARS) is an application for collecting, storing and retrieving the data the Centers for Disease Control and Prevention (CDC) has identified as necessary to monitor the HIV/AIDS epidemic and evaluate HIV prevention policies and programs. The Bureau for Public Health enters data submitted by local health departments and other providers on the forms referenced in *Appendix A: FY2017 Program Plan Required Reports and Timeline* into the eHARS system.

ILINet – Local health departments are responsible for recruiting a sentinel provider for the purpose of reporting influenza-like illnesses in their jurisdiction. The Sentinel providers utilize the ILINet which is a web-based electronic reporting system. This system collects influenza-like illness which is used to maintain situational awareness surrounding influenza in West Virginia. This data is used to report weekly to Centers for Disease Control (CDC) on the influenza activity level in West Virginia.

Appendix C: FY2017 Program Plan Statewide Reports

W. Va. Code §16-2-11 (3) requires local boards of health to submit a general plan of operation annually to the commissioner for approval. *W. Va. Code R.* 64-73-6 requires the board of health to submit reports and records in a timely manner in compliance with applicable State and federal rules and regulations and departmental policies.

Statewide data is critical for both quality improvement and accountability to local and state funders, including the public. Thus statewide data will be posted and available to local health departments and the public throughout the year. The reports listed below have been prioritized for release and are available on the CLH SharePoint site in the shared documents folder.

Report Name	Description
FY 2017 Projected Budget Report	This report includes statewide data on projected expenditures, revenues, expenditures by program and personnel by program.
FY 2016 Agency End-of-Year Financial Report	This report includes statewide data on actual expenditures, revenues, expenditures by program and personnel by program.
FY 2017 Basic Public Health Services Checklist Report	This report includes statewide data on local board of health intent to comply with basic public health services Code and Rule requirements. Includes plans for improvement and agency needs/requests for assistance.
FY 2017 Community Health Improvement Plan Report	This report includes statewide data on local board of health community assessment partners, priority health areas, objectives, activities for health improvement and training and/or technical assistance needs.
FY 2017 Annual Fees for Permits and Services Report	This report includes statewide data on the fees charged by individual local boards of health for environmental health permits and services.
FY 2016 Annual Fees for Permits and Services Report	This report includes statewide data on clinical revenue collected by payer and by program, number of clinical encounters, ability to track clinical encounters, revenue collected from fees for permits and services, number of permits issued, number of required inspections completed, ability to track permits and/or services, other revenue, whether or not board has a certified coder, whether or not the agency uses electronic health records, the type of system used and what insurance companies the agency bills.
FY 2017 Local Board of Health Workforce Report	This report includes statewide data on the local public health workforce.
Surveillance Indicator Evaluation Reports for Select Reportable Diseases 2014	These reports include statewide data, by county, on surveillance indicators by jurisdiction and program area for key diseases.
Monthly and Annual Outbreak Reports	These reports include disease outbreak data by outbreak type, county and region.
FY 2017 Environmental Health Indicator Reports	These reports include environmental health indicators by local board of health.